

Guidance 7 State Mental Health Treatment Facility Admission and Discharge Processes

I. Authority

Chapter 394, F.S.

Chapter 916, F.S.

Rule 65E-4.014, F.A.C.

Chapter 65E-5, F.A.C.

Children and Families Operating Procedures (CFOP) 155-13, 17, 18, 19, 22, 38, 48

II. Managing Entity Responsibilities

To comply with F.S. 394.4573., the Managing Entity shall subcontract with Network Service Providers to provide case management services for each civil resident of a State Mental Health Treatment Facility (SMHTF) whose home county is within the Managing Entity's geographic service area. These services may be provided by a community case manager, a Florida Assertive Community Treatment (FACT) team member, or another designated community Network Service Provider staff member.

The Managing Entity shall have language in Network Service Provider subcontracts and develop a process to monitor Network Service Providers to ensure the following activities occur for individuals transferring into or out of SMHTFs.

1. Network Service Providers adhere to the requirements described in this Guidance Document, including:
 - a. Maintain an open case for the individual during the time he/she resides in a SMHTF;
 - b. Participate in the development of a SMHTF recovery plan;
 - c. Participate in monthly reviews of the recovery plan;
 - d. Maintain at least monthly contact with SMHTF staff concerning the status of the individual;
 - e. Maintain contact with the individual's family consistent with Chapter 394.9082(5)(r), F.S.;
 - f. Share relevant information with the SMHTF staff;
 - g. Locate housing and services in the community in collaboration with the SMHTF;
 - h. Have a face-to-face contact with the individual in the community within 2 business days of discharge from the SMHTF; and
 - i. Maintain progress notes in the SMHTF medical record reflecting all meetings and communications with SMHTF staff, the resident, the family, or significant others.
2. The Managing Entity will ensure coordination between the Network Service Provider and the Social Security office occurs within five business days of discharge from the SMHTF for individuals who are discharged with benefits in pending status to ensure their benefits are activated.
3. The Managing Entity shall ensure that the following priority individuals are eligible to receive Case Management services or Intensive Care Management services, as clinically indicated and as described in *Rule 65E-4.014, F.A.C.*:
 - a. Individuals who are awaiting admission to a SMHTF;
 - b. Persons who are in a SMHTF regardless of admission date;

- c. Individuals who transfer from one Region to another Region where they had been receiving case management and other services;
- d. Individuals who are at risk of institutionalization or incarceration for mental health reasons;
- e. Individuals discharged from a SMHTF;
- f. Individuals who have had one or more admission to a crisis stabilization unit (CSU), short-term residential facility (SRT), inpatient psychiatric unit; or a mental health residential treatment facility (RTF);
- g. Persons who have resided in a SMHTF for at least 6 months in the last 36 months; and
- h. Persons who reside in the community and have had two or more admissions to a SMHTF in the last 36 months.

CONTINUITY OF CARE

1. Admission to a Civil SMHTF

The Managing Entity shall ensure their Network Service Provider comply with *Rule 65E-5.1301, F.A.C.*;

The Managing Entity shall:

- a. Ensure the case manager, or other assigned community behavioral health staff members are assigned to each resident within 3 business days of admission to the SMHTF and that the contact information is provided to the identified staff at the SMHTF;
- b. Ensure all information required to assist with the individual's treatment is provided by the community case manager to the SMHTF.
- c. Have pre-admission calls with the Civil SMHTF for individuals on the waiting list for the purpose of and information sharing.
- d. Have calls with the Receiving facilities for anyone on the SMHTF waitlist over 60 days to discuss current need for treatment in a SMHTF and possible diversion to a placement in the community.

2. Discharge Planning Process while at SMHTF

Civil

The Managing Entity shall ensure subcontracted Network Service Providers:

- a. Comply with the standards established in CFOP 155-17, Guidelines for Discharge of Residents from a State Civil Mental Health Facility to the Community;
- b. Work in collaboration with the SMHTF social services staff or discharge planner to identify independent living or supportive housing resources or to the identified level of care that best meets the treatment needs of the individual;
- c. Maintain at least monthly contact with the SMHTF social services staff; and
- d. Ensure services recommended by the Community Case Manager and SMHTF Recovery Team are available and accessible after the individual is discharged from a SMHTF.

Forensic

The Managing Entity shall ensure subcontracted Network Service Providers:

- a. Comply with the standards established in 155-22, Leave of Absence and Discharge of Residents Committed to a State Mental Health Treatment Facility Pursuant to Chapter 916, F.S.;
- b. Collaborate with the Forensic SMHTF facility staff to develop a recovery plan and ensure the Forensic Community Case Manager locates housing and services for forensic residents who are actively seeking return to the community on conditional release or with aftercare conditions;
- c. Ensure a sufficient number of Network Service Providers are designated as Forensic Specialists;
- d. Ensure the Forensic Community Case Manager will participate in all reviews of the recovery plan and visit individuals at the SMHTF at least quarterly; shall be actively involved in the discharge process; and shall collaborate with the SMHTF recovery teams in finding a living environment and identifying community services that will support the level of need;
- e. Assist the SMHTF and appropriate court personnel in the development of conditional release plans;
- f. Provide information to the Courts and the attorneys pertaining to the individual's treatment in the SMHTF, as requested; and
- g. Ensure services recommended by the Forensic Case Manager and SMHTF Recovery Team are available and accessible when resident is returned to the community by way of direct discharge from the SMHTF or release from Jail.