

APPENDIX C
Incorporated Document 7
Forensic and Civil Treatment Facility Admission and Discharge Processes
(Effective March 1, 2016)

Requirement: *Chapter 394, F.S.*
Chapter 916, F.S.
Chapter 65E-4.014, F.S.
Chapter 65E-4.016, F.A.C.
Chapter 65E-5, F.A.C.
Chapter 65E-12, F.A.C.
Children and Families Operating Procedures (CFOP) 155-13, 17, 18, 19, 22, 38, 48

Frequency: Ongoing

Due Date: N/A

Discussion:

CIVIL ADMISSION AND DISCHARGE

Section 394.4573, F.S., requires the Department to implement a continuity of care management system to provide mental health care for individuals referred from State Mental Health Treatment Facility (SMHTF) to the community. To comply with *Section 394.4573, F.S.* the Managing Entity will contract with Network Service Providers to provide case management services for each civil resident of a SMHTF whose home county is within the Managing Entity geographic service area. These services may be provided by a community case manager, a Florida Assertive Community Treatment (FACT) team member, or other designated community Network Service Provider staff. The Managing Entity shall ensure the following activities are performed for individuals transferring into or out of state mental health treatment facilities:

1. An individual's case will remain open during the time the individual resides at a SMHTF
2. The case manager, or other assigned community behavioral health staff member, shall:
 - a. Participate in the development of a SMHTF treatment plan.
 - b. Maintain at least monthly contact with SMHTF staff concerning the status of the individual.
 - c. Maintain contact with the individual's family consistent with *Chapter 394, F.S.*
 - d. Share relevant information with the SMHTF staff.
 - e. Participate in the discharge planning meeting and assist in the development of a service plan which addresses the individual's needs in the community.
 - f. Actively carry out linkage and brokerage activities in the community prior to the individual's discharge in order to implement the service plan.
 - g. Have a face-to-face contact with the individual in the community within 2 working days of discharge from the SMHTF; and

- h. Maintain progress notes in the client record reflecting all meetings and communications with SMHTF staff, the client, the family or significant others.

PRIORITY INDIVIDUALS

1. Case Management Services

The Managing Entity shall ensure that the following Priority individuals are eligible to receive, and are offered Case Management Services as described in 65E-4.014, F.A.C:

- a. Persons who are being admitted to a SMHTF or are awaiting admission to a SMHTF;
- b. Persons who are in a SMHTF regardless of admission date;
- c. Persons who have moved into a Region from another Region where they had been receiving case management;
- d. Persons who are at risk of institutionalization or incarceration for mental health reasons;
- e. Persons who have been discharged from a SMHTF;
- f. Persons who have had one or more admissions to a crisis stabilization unit (CSU), short-term residential facility (SRT), or inpatient psychiatric unit;
- g. Persons who reside or have been discharged from a mental health residential treatment facility (RTF);
- h. Persons who are experiencing long-term or serious acute episodes of mental impairment that may put them at risk of requiring more intensive services.

2. Intensive Case Management Services

The Managing Entity shall ensure that the following Priority individuals are eligible to receive, and are offered Intensive Case Management Services, within existing resources, as described in 65E-4.014, F.A.C.

- a. Persons who have resided in a SMHTF for at least 6 months in the last 36 months;
- b. Persons who reside in the community and have had two or more admissions to a SMHTF in the last 36 months;
- c. Persons who reside in the community and have had three or more admissions to a crisis stabilization unit (CSU), short-term residential facility (SRT) or inpatient psychiatric unit within the last 12 months;
- d. Persons who reside in the community and, due to a mental illness, exhibits or would exhibit behavior or symptomatology which could result in long-term hospitalization if frequent interventions for an extended period of time were not provided.

CONTINUITY OF CARE

1. Admission to a SMHTF.

Chapter 65E-5.1301, F.A.C., requires that a community mental health provider evaluate each person seeking voluntary admission to a SMHTF and each person for whom involuntary placement in a SMHTF is sought, to determine and document:

- a. Whether the person meets the statutory criteria for admission to a state treatment facility; and
- b. Whether there are appropriate more integrated and less restrictive mental health treatment resources available to meet the person's needs.

2. Discharge from SMHTF

It is the responsibility of the community case manager, or other assigned community behavioral health staff member, for residents committed pursuant to *Chapter 394, F.S.*, to participate in the development of the discharge plan and identify services and supports needed for the resident's discharge. The Managing Entity shall ensure that the contracted Network Service Providers that provide community case management services:

- a. Secure community placement and services in cooperation with SMHTF social worker or discharge planner,
- b. Maintain contact with the facility case manager and Social Worker, and
- c. Ensure recommended services are received after the individual's discharge.

Each SMHTF maintains a Seeking Placement List (SPL) of all civil residents who no longer meet criteria for civil commitment and who are actively seeking placement in the community. The Managing Entity shall work with the Department facility staff to develop discharge plans for those on the SPL awaiting community placement.

FORENSIC

Chapter 916, F.S., requires the Department to establish and maintain separate and secure forensic facilities and programs for the treatment or training of defendants who have been charged with a felony and who have been found to be incompetent to proceed (ITP) due to their mental illness or who have been acquitted of a felony by reason of insanity (NGI).

Forensic Discharge

The Managing Entity shall include the following requirements in subcontracts with Network Service Providers:

1. That *CFOP 155-18* is complied with and all required documentation listed within *CFOP 155-18* is submitted on a monthly basis. This operating procedure includes mandatory requirements including, but not limited to, quarterly visits to the resident while they are in the SMHTF and ongoing monitoring according to the requirements of the court order for individuals on conditional release.
2. That there are sufficient and specific Network Service Providers designated as Forensic Specialists.
3. All available information required to assist with the individual's treatment is provided to the SMHTF.
4. The ME or Network Service Providers work consistently with the SMHTF staff to ensure an individual with forensic involvement is placed in the least restrictive environment in a timely manner.
5. Network Service Provider quarterly meetings with individuals at the SMHTF, or civil step-down treatment facility(s), are held. This shall include assistance with discharge planning. Representatives from the ME/Network Service Providers shall be actively involved in the discharge process and shall assist with finding a living environment and identify community services that will support the level of need.
6. Locate appropriate community placements in a timely manner, and arrange for needed aftercare services for individuals determined appropriate for discharge.
7. Assist the treatment facilities and appropriate court personnel in the development of conditional release plans.
8. Provide or ensure the provision of information to the Courts and the attorneys pertaining to the individual's treatment in the state treatment facility(s) as requested.