

<b>CHAPTER</b> Service Delivery	<b>CHAPTER</b> 02	<b>SECTION</b> 004	<b>SUBJECT</b> 65
<b>SECTION</b> Clinical and Support Services		<b>DESCRIPTION</b> Children's Services Program	
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**APPLICATION:**

<input checked="" type="checkbox"/> CMH Staff	<input type="checkbox"/> Board Members	<input type="checkbox"/> Provider Network	<input checked="" type="checkbox"/> Employment Services Providers
<input type="checkbox"/> Employment Services Provider Agencies	<input checked="" type="checkbox"/> Independent Contractors	<input type="checkbox"/> Students	<input checked="" type="checkbox"/> Interns
<input type="checkbox"/> Volunteers	<input checked="" type="checkbox"/> Persons Served		

**POLICY:**

Lapeer County Community Mental Health (LCCMH) provides a range of mental health services to improve the quality of life for children and families.

**STANDARDS:**

- A. LCCMH as a Certified Community Behavioral Health Clinic (CCBHC) ensures no prospective individual is denied access to services because of place of residence, homelessness, or lack of permanent residence.
- B. LCCMH's Children Services Program includes the following services:
  - 1. Outpatient child therapy.
  - 2. Supports coordination/case management.
  - 3. Home-based services (see LCCMH Policy 02.004.75 Home-Based Services).

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4. Crisis Intervention/Emergency Services (see LCCMH Policy 02.004.195 Children's Mobile Intensive Crisis Stabilization).
5. Psychiatric diagnostic evaluation with medical services (see Michigan CCBHC Handbook)

C. Children Services Program goals:

1. Advocating for persons served.
2. Linking persons served with community resources and utilizing natural supports.
3. Improving relationships and family functioning.
4. Monitoring the progress of persons served.

D. Persons served with diagnoses of mild or moderate mental health disorder, Severely Emotionally Disturbed (SED), Intellectual Developmental Disability (IDD), or Co-Occurring qualify for the Children's Services Program. The Michigan Child and Adolescent Needs and Strengths (MichiCANS) screener is used to determine medical necessity.

E. For identified children on a waiver, the following assessments are also used based on age:

1. Devereux Early Childhood Assessment (DECA).

F. This program serves children aged birth through 17 years old, or up to 21 years old in some cases (in accordance with the Medicaid Provider Manual).

G. Discharge planning, including discharge summaries and Adverse Benefit Determination (ABD) letters, is the responsibility of the assigned primary case holder. The supervisor verifies the dates on the ABD in accordance with the discharge summary.

H. All clinicians receive supervision with their direct supervisor on a regular basis via individual and/or group clinical case consultation meetings.

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**PROCEDURES:**

Outpatient Services:

A. Entry/Re-entry:

1. Persons served follow intake procedures outlined in LCCMH Intake Procedures Policy 02.003.30.
2. After the intake assessment is completed or the need to transition to a different level of care is identified, the Children's Services Clinical Supervisor reviews and approves the assessment.
3. Children's Services Clinical Supervisor assigns the case to a clinician for follow-up therapeutic involvement.
4. Clinician completes an Individual Plan of Service (IPOS).
5. Children's Services Clinical Supervisor reviews and approves periodic reviews as submitted by the clinician to determine if continued outpatient services are medically necessary.
6. Children's Services Clinical Supervisor provides ongoing administrative and clinical supervision/case consultation with the clinician.

B. Eligibility Criteria:

1. Person served is diagnosed with a mental illness as determined by the presence of mild, moderate, or severe symptoms associated with a DSM-5 diagnosis, and at least one of the following:
  - a. Psychiatric Signs and Symptoms - cognitive, perceptual, affective, and/or somatic disturbances or impaired developmental progression of sufficient intensity to cause subjective distress, disordered behavior, and/or other dysfunctional consequences. The level of distress and/or disordered behavior is not severe enough to endanger the welfare of the person and/or others.

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- b. Impairment of Functioning - person is experiencing disruption of self-care, daily living skills, social/interpersonal functioning, and/or educational/vocational role performance.
2. Person served possesses the cognitive and/or thought process abilities and attention span to potentially benefit from a therapeutic intervention.
3. Emotional, psychological, or behavioral status has been identified as a deficit area.
4. Clinical needs of the person served require the services of a professional with the training of a master-level clinician.
5. Person served is unable to have their needs appropriately addressed and monitored by their primary care physician/qualified health professional, school, or other natural or community support.

C. Discharge/Exit Criteria:

1. Person served requires a less intensive or higher level of care to meet their treatment needs, based on a MichiCANS and/or DECA.
2. Person served is in an extended acute care (EAC).
3. Person served has met all treatment goals.
4. Person served has not been seen for more than 30 days and the parent(s)/guardian(s) do not respond to attempts to schedule further appointments by phone or outreach.
5. Person served ages out of the Children's Services Program and are eligible to transition to adult services.
6. Person served has died.

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Supports Coordination/Case Management:

A. Entry/Re-entry:

1. Persons served follow intake procedures outlined in LCCMH Intake Procedures Policy 02.003.30.
2. After the intake assessment is completed or the need to transition to a different level of care is identified, the Children's Services Clinical Supervisor reviews and approves the assessment.
3. Children's Services Clinical Supervisor assigns the case to supports coordinator/case manager.
4. Supports coordinator/case manager meets with the person served and their family to develop the IPOS.
5. Assigned supports coordinator/case manager maintains the record and is responsible for assessing, planning, linking, coordinating, and monitoring needs of the person served. The supports coordinator/case manager meets with the person served at least monthly, based on the needs identified in the IPOS.
6. Persons served may be in more than one program at LCCMH.

B. Eligibility Criteria:

1. Person served is diagnosed with a mental health disorder, a behavioral or emotional disorder, or an IDD resulting in functional impairment substantially interfering with or limiting the role or functioning in family, school, legal system, or community.
2. Person served has had multiple admissions to a psychiatric inpatient unit or demonstrates clear and consistent psychosis which requires ongoing treatment in order to maintain level of functioning and avoid hospitalization.

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3. Person served and/or their parent/guardian agrees to service and signs an Informed Consent for Treatment.

C. Exit Criteria:

1. Person served requires a less intensive or higher level of care to meet their treatment needs, based on a MichiCANS and/or DECA.
2. Person served has met all treatment goals.
3. Person served has not been seen for more than 30 days and the parent(s)/guardian(s) do not respond to attempts to schedule further appointments by phone or outreach.
4. Person served no longer demonstrates chronic psychosis and/or debilitating mental illness and no longer requires treatment or medication.
5. Person served ages out of the Children's Services Program and are eligible to transition to adult services.
6. Person served has died.

Home-Based Services:

See LCCMH Children's Home Based Services policy #02.004.75.

Crisis Intervention/Emergency Services:

- A. Clinical therapeutic intervention is provided 24/7 through triage service.
- B. During business hours, individuals in need of crisis assistance or brief clinical therapeutic intervention can contact the agency and/or walk in to be seen on an immediate basis.
- C. See LCCMH's Children's Mobile Intensive Crisis Stabilization Policy 02.004.195 for more information.

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### Psychiatric Diagnostic Evaluation with Medical Services

#### A. Entry/Re-entry:

1. New persons served follow intake procedures outlined in LCCMH Intake Procedures Policy 02.003.30.
2. After the intake assessment is completed or the need to transition to a different level of care is identified, the Children's Services Clinical Supervisor reviews and approves the assessment.
3. Children's Services Clinical Supervisor assigns the case to a supports coordinator/case manager in Medication Management program.
4. Supports coordinator/case manager meets with the person served and their family to develop the IPOS.
5. Assigned supports coordinator/case manager maintain the record and is responsible for assessing and monitoring needs of the person served. The supports coordinator/case manager meets with the person served at least quarterly, based on the needs identified in the IPOS.
6. Persons served may be in more than one program at LCCMH.

#### B. Eligibility Criteria:

1. Person served is diagnosed with a mental health disorder, a behavioral or emotional disorder, or an IDD and would benefit from the use of psychiatric medications.
2. Person served is unable to use community supports or outside prescribers to manage their psychiatric needs/medication.
3. Person served and/or their parent/guardian agrees to service and signs an Informed Consent for Treatment.

#### C. Exit Criteria:

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1. Person served requires a less intensive or higher level of care to meet their treatment needs, based on a MichiCANS and/or DECA.
2. Person served has met all treatment goals.
3. Person served has not been seen for more than 90 days and the parent(s)/guardian(s) do not respond to attempts to schedule further appointments by phone or outreach.
4. Person served no longer demonstrates the need for treatment or medication.
5. Person served ages out of the Children's Services Program and is eligible to transition to adult services.
6. Person served has died.

Procedure for Discharge/Transition:

- A. Primary case holder ensures an exit MichiCANS and/or exit DECA is completed.
- B. If transitioning to a different level of service within the Children's Services Program, the primary case holder and Children's Program Clinical Supervisor consult on transition.
- C. If transitioning to adult services, LCCMH Referral Form #374 is completed by the primary case holder, signed by the supervisor, and reviewed by the receiving department's supervisor. The case is presented to the Clinical Case Review Committee to support a smooth transition of care.
- D. An Adverse Benefit Determination Notice for decrease in service is sent if applicable, if the transfer is not noted in a Periodic Review, Amendment, or IPOS.
- E. If being discharged, person served is provided a Notice of Adverse Benefit Determination Letter and a Discharge Summary.



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- F. Any decision on discharge can be appealed through the agency grievance and appeal process or the Region 10 Grievance and Appeals Process Policy 07.02.01 (Medicaid and non-Medicaid Beneficiaries) as applicable.

**DEFINITIONS:**

**Devereux Early Childhood Assessment (DECA):** used for the assessment of infants and young children, 1 month to 47 months, with suspected serious emotional disturbance.

**Extended Acute Care:** level of medical care designed for persons who have complex, long-term, or serious medical conditions that require intensive care and monitoring for a longer duration than what is typically provided in a traditional acute care setting such as a hospital.

**Michigan Child and Adolescent Needs and Strengths (MichiCANS):** a collaborative tool crafted to explore and communicate the needs and strengths of the child/youth and family. It is made up of domains focusing on important areas of the child's/youth's life and ratings that help the provider, child/youth, and family understand where intensive or immediate action is most needed and where a child/youth has strengths to become a major part of the treatment or service plan.

**REFERENCES:**

- LCCMH Home-Based Services Policy 02.004.75
- LCCMH Intake Procedures Policy 02.003.30
- LCCMH Children's Home Based Services policy #02.004.75
- LCCMH's Children's Mobile Intensive Crisis Stabilization Policy 02.004.195
- LCCMH Referral Form #374
- Michigan CCBHC Handbook
- Region 10 Grievance and Appeals Process Policy 07.02.01

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This policy supersedes  
#10/08052 dated 10/21/2008.  
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