

**CURRENT ACTIVITY CODES AND DESCRIPTIONS
DEPARTMENT OF MENTAL HEALTH
RESPONSES TO QUESTIONS
RFI 2009-8210-CBFS-01
COMMUNITY BASED FLEXIBLE SUPPORT SERVICES
6/27/2008**

REHABILITATIVE TREATMENT IN THE COMMUNITY – Code 3013

A. Definition

Rehabilitative Treatment in the Community (RTC) is a treatment and rehabilitation oriented service that assists DMH clients in restoring, strengthening and maintaining skills in all major life areas, enabling them to live successfully in the community and enjoy improved quality of life.

Treatment and rehabilitation services are based on clinical referrals, client goals and preferences, and supported by:

- a comprehensive assessment of client abilities, preferences and resources;
- a program specific treatment plan including baseline assessments of the need areas addressed, descriptions of interventions, the frequency of delivery of interventions, the individuals responsible for delivering the interventions and objectives stating expected client progress expressed in observable, measurable terms;
- frequent and regular assessments of the client's progress towards meeting treatment plan objectives expressed in observable, measurable terms; impediments to progress and what adjustments will be made to the intervention to remove such impediments.

RTC shall include the following services:

1. Comprehensive needs assessments.
2. Development and implementation of interventions to support clients in utilizing strategies designed to:
 - promote recovery and manage psychiatric symptoms in community settings, e.g., self management plans; cognitive behavioral therapy plans; dialectic behavioral therapy plans;
 - manage symptoms in community settings, e.g., substance abuse management plans;
 - manage psychiatric symptoms in community settings – crisis management plans;
 - restore or maintain the skills needed to secure and maintain housing in the community;
 - restore or maintain the skills needed to maintain a stable home life, e.g. meeting financial obligations related to home expenses; addressing issues with property owners, utility companies and other parties; maintaining adequate supply of items needed to furnish and clean the home;
 - restore or maintain the skills needed to access self-help options in the community;
 - restore or maintain the skills needed to utilize various means of transportation;

- restore or maintain daily living skills, including physical health maintenance (e.g. diet, exercise, receiving regular primary medical and dental care), self-care, purchasing and caring for personal items including clothing, etc.;
 - restore or maintain the skills needed to manage money, provide direct representative payee services; and
 - restore or maintain the skills needed to manage time, including: scheduling appointments; attending appointments and other events in a timely manner; calling when running late for or needing to postpone appointments.
3. Ongoing monitoring of the clients' symptoms and response to treatment.
 4. Informal supportive counseling and problem solving.
 5. Social and recreational skill training to improve communication skills, encourage clients to utilize recreation and leisure resources and facilitate appropriate interpersonal behavior.
 6. Client and family education regarding mental illness, the treatment of mental illness, the effects of mental illness on family members and resources available to family members
 7. Face-to-face crisis intervention to aid the client in managing a crisis, and intensive short-term support to stabilize behavior.
 8. Telephone outreach to: perform a brief assessment of client well being, including extent of presence of symptoms, and to prompt the client to follow treatment regimen, including taking medications and engaging in other therapeutic or rehabilitative activities.
 9. Assistance with medication, that includes:
 - medication education, training and support that focus on the role and effects of medication in treating symptoms of mental illness;
 - assisting client in restoring or maintaining the skills needed to carry out medication regimen, including organizing pillbox or blister packs, creating schedule for self-administration and adhering to the schedule;
 - training client in taking medications as prescribed;
 - providing assistance in taking medications as needed; and
 - monitoring compliance and accuracy.

The following service may also be provided by RTC programs:

- Case coordination, e.g., program specific treatment planning; coordination of care, including coordination over telephone; participate in case conferences; family consultation;
- liaison work with community resources;
- consultative serves to state and community agencies;
- medical records preparation and coordination in preparation for clinical and entitlement review;
- other telephone contacts;

- preparation and testimony related to guardianship hearings, including Rogers type;
- indirect representative payee services;
- efforts to engage clients who have traditionally been difficult to engage - includes outreach to shelters and transitional residential programs;
- Medication services
 - a. delivery of pre-packed medications
 - b. indirect activities related to delivery of Clozaril clinic
 - c. telephone contact and conferencing with pharmacies, primary care clinicians, hospitals, service programs and significant members of a client's social network regarding medication regimes, side effects and desired effects of medication
 - d. preparation of correspondence when medical documentation is needed for collateral services to a client
 - e. medical assessments of vital signs and side effects of medications (non-physician service delivery must be by a licensed health care professional)
- Payment of Contingency expenses:
 - a. funds for incidental expenses, assisting clients in remaining in the community
 - b. funds for one-time rent expense
 - c. provide availability of prescribed medications to clients with no other means of obtaining them

RESPITE CARE SERVICES - Code 3048

(delivers services to both adults, children and adolescents)

Description:

Respite Care provides temporary short-term, community-based living arrangements and/or supportive services that offer assistance with going to or returning to permanent living situations, or which provide a temporary alternative to or relief within a permanent living situation. A number of circumstances may lead individuals to be in a position to benefit from respite services. These include:

- recent discharge from an inpatient facility with the need for a transitional living situation and/or additional support services before returning home;
- need for temporary relief from a living environment that is causing concern for the client, family members, residential program, or others providing support to the client on a regular basis;
- need for a bridge service when moving from one service to another, or from one situation to another, such as homelessness to residential services;
- need for further assessment.

Components:

- temporary housing;
- meals and personal need supplies;
- assessment of needs impeding optimal community living;
- development of service plan in collaboration with clients, and for children and adolescents with parents or guardians;
- supportive services designed to facilitate discharge from the program, successful transition back to permanent living situation, or maintenance within the permanent living situation;
- respite services (i.e., caregiver relief).

Specifications:

- services must be available 24 hours a day, 7 days a week;
- service delivery may vary from a few hours or days to 2-3 weeks, but cannot exceed 30 days, unless reviewed and approved by the DMH Area Director or designee;
- services must be provided in the least restrictive, clinically appropriate setting, using the least intrusive interventions;
- access to services must be assured regardless of physical disability, linguistic ability, or auditory impairment.

ADULT RESIDENTIAL SERVICES – Code 3049

Description:

Residential services provide support, supervision, treatment and rehabilitation to clients living in the community. These programs will provide the opportunity to address all levels of residential services in one contract. The programs will focus on addressing service needs of clients at more than one site, and at the level of service required by those clients. Staffing patterns are established to ensure maximum flexibility to meet the changing needs of residents. There is a recognition that the level of staff support required by any single resident varies over time and the hours of staff availability are responsive to those changing needs.

Components:

- **Support** including, but not limited to, the following types of services:
 - assistance in accessing other services or entitlements, as needed;
 - assistance in maintaining a stable residential setting;
 - assistance with acquiring social or recreation skills;
 - assistance with developing and performing activities of daily living;
 - support to pursue vocational related services or opportunities;
 - support to pursue education related services or opportunities.

- **Supervision** including, but not limited to, the following types of services:
 - provision of a secure environment;
 - assurance of safety within the residence;
 - assistance with self preservation skills;
 - supervision of activities of daily living.

- **Treatment/Rehab** including, but not limited to, the following types of services:
 - symptom management and/or supportive counseling, which may include, but is not limited to:
 - ⇒ ongoing monitoring of the client’s mental illness symptoms and response to treatment;
 - ⇒ interventions designed to help the client manage his or her mental illness symptoms;
 - ⇒ teaching of behavioral symptom management techniques to alleviate and manage symptoms not reduced by medication;
 - ⇒ assisting the individual to develop coping strategies to deal with internal and external stresses;
 - ⇒ face-to-face crisis intervention to aid the client in managing a crisis.

 - medication education, training and support that focuses on educating clients about the role and effects of medication in treating symptoms of mental illness;
 - problem solving related to activities of daily living to assist clients to regain and utilize skills related to personal hygiene, household tasks, transportation utilization and money management;
 - development of community living skills which serve to promote independent utilization of community based services and participation in social and recreational activities towards the goal of reinforcing stability outside an institutional setting;
 - social or recreational skill training to improve communication skills, manage symptoms, and facilitate appropriate interpersonal behavior;
 - pre-vocational related services that are not job specific, that assist clients to regain and utilize the skills necessary to undertake employment;
 - educational support, which may include assessing the effects mental illness has had on this individual’s ability to achieve educational goals within a normal time frame.

Optional Component

Occupancy Adult residential services under this program may be delivered within an individual or group setting for which DMH finances room and board costs, or may be supported within a client’s home (room and board not financed by DMH).

Therefore, financial support of occupancy costs is considered an optional component of residential services.

Specifications:

- emphasis is on maximizing resident choice and stability in community-based residential environments;
- staff training should focus on empowering residents and reducing resident dependence on staff support for maintaining independence in community;
- each program for which DMH licensing requirements are applicable, must meet such licensing requirements.

COMMUNITY REHABILITATIVE SUPPORT – Code 3059

Description:

This service is designed to provide necessary support to increase an individual's capacity to remain in the community by avoiding unnecessary or inappropriate psychiatric hospitalization. This service responds to eligible clients requiring intensive support to live successfully in the community, those who will not use existing mental health services, those who repeatedly use emergency services, and those long-term patients who are ready for discharge but remain in an inpatient facility because of the absence of community placements.

Community Rehabilitative Support provides wrap-around services, based on a unique approach to providing whatever it takes to keep the individual in the community in a safe way, progressing toward integration into the community. A key concept of Community Rehabilitative Support is to develop an ongoing supportive relationship with client. Below is a listing of components that may be delivered within this code, however, this code provides diversity and flexibility for meeting individual needs, therefore, this is not an all-inclusive listing.

This service is available to the most seriously disabled clients who meet DMH eligibility criteria for continuing care services.

Components:

- direct contact with an individual on a regular basis, appropriate to the client's needs;
- assist clients in using community resources including:
 - applying for government or other entitlements;
 - finding appropriate living arrangements;
 - requesting and receiving mental health services;
 - obtaining medical and dental care;
 - accessing information/support for health, lifestyle and alternatives to medication;
 - gaining access to programs to develop social, vocational, and

- community living skills, interests, and leisure activities;
 - obtaining employment; and
 - building and reconstructing personal and community support networks.
- teach clients how to access community resources and alternative non-medical teaching approaches to health maintenance; provide liaison with community resources, including:
 - development of support from and involvement of families, friends, and other associates;
 - involvement of community organizations in assisting the client;
 - collateral case consultation, treatment planning, and case conferences;
 - linkage of clients to existing social networks.
- aggressively reach out to eligible clients who have traditionally had a difficult time engaging in service;
 - assist eligible clients in maintaining a stable living situation in the community by providing necessary support and skill training:
 - community living skills;
 - transportation training;
 - mediation and advocacy.
 - provide or assist in accessing psychopharmacology services;
 - medication management;
 - mobile community treatment;
 - respite.

Optional Components:

- specific medically necessary services;
- pre-authorized counseling.

Specifications:

- primary emphasis is on maximizing client participation in program planning, operation, and evaluation.