



Rules of
Department of Mental Health
Division 30—Certification Standards
Chapter 2—Standards for County-Funded Mental
Health Services

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**Title 9—DEPARTMENT OF
MENTAL HEALTH**

**Division 30—Certification Standards
Chapter 2—Standards for County-Funded
Mental Health Services**

**9 CSR 30-2.010 Designation of Programs to
Receive County Community Mental Health
Funds**

PURPOSE: This rule prescribes the procedures to be used to designate programs eligible to receive county community mental health funds as set out in sections 205.975—205.990, RSMo.

(1) The department shall designate community mental health centers in each mental health service area which may receive funds collected under sections 205.975—205.990, RSMo. The records, operations and services provided by an entity receiving county funding under sections 205.975—205.990, RSMo shall be subject to annual review or inspection by the department.

(2) As set out in section 205.985(4), RSMo, the county board of trustees shall submit information by January 1 of each year to the department about the disbursement of money from the community mental health fund.

(3) Any program designated by the department to provide services with funds from counties under sections 205.975-205.990, RSMo may provide these services within the mental health service area, directly or indirectly, through contract or affiliate agreements with a qualified community mental health center, mental health clinic, or other public facility or not-for-profit corporation for such comprehensive mental health services for the residents of such county, as specified by the county board of trustees.

(4) The county board of trustees shall deem as eligible to receive county community mental health funds, as set out in sections 205.975—205.990, RSMo, those public or nonprofit community mental health centers that submit proof that the following standards have been met:

(A) That the agency shall have a governing body which has full legal authority and responsibility for the overall functioning of the program, with written documentation of the source of authority through charter, constitution, bylaws or license;

(B) That the agency shall have policies and procedures that implement sections 630.110 and 630.115, RSMo to enhance and protect

the human, civil, constitutional and statutory rights of each client;

(C) That each agency prominently post a notice to clients about rights, opinions, recommendations and grievances;

(D) That the agency shall have services accessible to handicapped individuals or have a written plan for how these handicapped individuals can access necessary services (this offsets any concerns about the federal Americans with Disabilities Act (ADA) legislation);

(E) That the agency shall have fiscal management policies and procedures in accordance with generally accepted accounting principles;

(F) That the agency shall have a written fee schedule that shall be available to all staff and to the clients;

(G) That the agency shall have written policies and procedures to insure that an adequate number of qualified staff are available to support the functions of the agency, and the policies include an equal opportunity plan for hiring staff for the agency;

(H) That the agency shall demonstrate the personnel meet any local, state or federal requirements for their profession;

(I) That the agency's policies and procedures shall include policies concerning client neglect and abuse and procedures for investigation of alleged violations;

(J) That each agency shall pay clients for work in the program unrelated to their treatment. Wages paid to clients who work shall be in compliance with applicable local, state or federal requirements;

(K) That the agency shall have a written policy concerning research activities which involve clients of the program, and shall abide by all local, state and federal laws and regulations concerning the conduct of research;

(L) That the agency maintain an organized record system on each client which contains a collection of client information and services provided, and that those records shall be stored in a manner so as to properly safeguard confidentiality yet be readily available to staff;

(M) That the agency shall require an initial clinical assessment based upon the presenting problem; shall further require a treatment plan based on the presenting problems and the initial assessment and shall enter a discharge summary in the record at the time of service termination;

(N) That the agency shall have written policies and procedures that will assist with client referral between the agency's components or between the agency and other service

providers and shall assure continuity of care between referring agencies;

(O) That the agency shall have written policies and procedures on how medications are prescribed, obtained, stored, how medication is to be dispensed or administered, or both, including medication clients bring to the program, and for recording client intake of medication which shall include client name, medication, dose of medication, date and frequency of intake and name of staff who observed the medication intake;

(P) That the agency shall have written policies and procedures defining client eligibility requirements, intake procedures and client assessment; or

(Q) The center or affiliated public or not-for-profit corporation has been certified by the Division of Alcohol or Drug Abuse under the applicable program certification standards set out in 9 CSR 30-3.010, 9 CSR 30-3.020, 9 CSR 30-3.030, 9 CSR 30-3.040, 9 CSR 30-3.050, 9 CSR 30-3.060, 9 CSR 30-3.070, 9 CSR 30-3.080, 9 CSR 30-3.200, 9 CSR 30-3.210, 9 CSR 30-3.220, 9 CSR 30-3.230, 9 CSR 30-3.240, 9 CSR 30-3.250, 9 CSR 30-3.400, 9 CSR 30-3.410, 9 CSR 30-3.420, 9 CSR 30-3.500, 9 CSR 30-3.510, 9 CSR 30-3.600, 9 CSR 30-3.610, 9 CSR 30-3.810, 9 CSR 30-3.820, 9 CSR 30-3.830, 9 CSR 30-3.840, 9 CSR 30-3.850, 9 CSR 30-3.851, 9 CSR 30-3.852, 9 CSR 30-3.853, 9 CSR 30-3.860, 9 CSR 30-3.870, 9 CSR 30-3.880, 9 CSR 30-3.890, 9 CSR 30-3.900, 9 CSR 30-3.910, 9 CSR 30-3.920, 9 CSR 30-3.930, 9 CSR 30-3.940, 9 CSR 30-3.950, 9 CSR 30-3.960 and 9 CSR 30-3.970.

(5) No community mental health center designated by the department or other public or not-for-profit corporation providing comprehensive mental health services through contract or affiliation agreement with a designated community mental health center shall provide any comprehensive mental health service unless the center or affiliated public or not-for-profit corporation has been certified by the department to provide these services under the applicable program certification standards set out in 9 CSR 30-3.010—9 CSR 30-3.630, 9 CSR 30-3.810—9 CSR 30-3.970, or 9 CSR 30-4.030—9 CSR 30-4.047.

(6) Nothing in section (5) of this rule shall be taken to require that any designated community mental health center or affiliated public or not-for-profit corporation shall be prohibited from providing any comprehensive mental health service for which no certification standards exist.



AUTHORITY: section 205.987, RSMo 2000.
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**Original authority 1969, amended 1978.*

**9 CSR 30-2.020 Designation and
Inspection Procedures**
(Rescinded June 25, 1992)

**9 CSR 30-2.030 General Planning and
Policy Requirements**
(Rescinded June 25, 1992)

**9 CSR 30-2.040 Standards for Mandatory
and Optional Services**
(Rescinded June 25, 1992)