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Chapter 2—Mental Health Services

9 CSR 50-2.010 Admissions to Children’s Supported Community Living

PURPOSE: This rule prescribes admissions criteria, the application process and placement procedures for Children’s Supported Community Living of the Division of Comprehensive Psychiatric Services.

PUBLISHER’S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. Therefore, the material which is so incorporated is on file with the agency who filed this rule, and with the Office of the Secretary of State. Any interested person may view this material at either agency’s headquarters or the same will be made available at the Office of the Secretary of State at a cost not to exceed actual cost of copy reproduction. The entire text of the rule is printed here. This note refers only to the incorporated by reference material.

(1) Terms defined in sections 630.005 and 632.005, RSMo are incorporated by reference in this rule. Unless the placement contract clearly requires otherwise, the following other terms, as used in this chapter, shall mean:

(A) Applicant, a minor for whom placement services have been requested, in writing, including a person seeking readmission to Supported Community Living;

(B) Client, a minor placed under section 630.620, RSMo in any residential facility licensed or certified solely by the department or in conjunction with the Department of Social Services under Chapter 630, RSMo;

(C) DSM IV, Diagnostic and Statistical Manual of Mental Disorders (Fourth Edition) of the American Psychiatric Association;

(D) Supported Community Living, an office which is responsible for the regional placement program and services and is the entry and exit for regional placement services and funding;

(E) Minor, any person under the age of eighteen (18) years; and

(F) Patient, an individual under observation, care, treatment or rehabilitation by any hospital or other mental health facility pursuant to the provisions of Chapter 632, RSMo.

(2) Application for placement shall be made by the applicant’s parents, the applicant’s guardian, a court of competent jurisdiction, or a state or private agency.

(3) An applicant shall meet all of the following admission criteria to be eligible for Children’s Supported Community Living services from the Division of Comprehensive Psychiatric Services:

(A) Be under the age of eighteen (18);

(B) Have received a DSM IV Axis I primary diagnosis of mental disorder or mental illness; may have a secondary diagnosis of alcohol abuse, substance abuse or mental retardation; and

(C) Have, based upon sufficient documentation, a mental disorder or mental illness which constitutes substantial impairment in social role functioning and daily living skills to the extent that the client cannot function successfully outside a mental health facility without services. This substantial impairment may include, but not be limited to, the following behavioral characteristics:
   1. Substantial impairment in impulse control and judgment in daily living skills;
   2. History of aggressive/assaultive behaviors or self-abusive behaviors based on psychological disability;
   3. Dysfunctional in school, home, community or a combination of these as a result of a mental disorder or mental illness to the extent that family and available community resources are not able to meet needs; and
   4. Evidence of failure in less restrictive treatment environments.

(4) Department placement staff shall consider an applicant ineligible for Supported Community Living services from the Division of Comprehensive Psychiatric Services if—

(A) The primary diagnosis is alcohol or substance abuse, or mental retardation;

(B) Medical needs supersede the psychiatric disability and require considerable supervision and ongoing medical treatment;

(C) Impulses to harm self or others are not under control according to clinical judgment;

(D) It has been established that appropriate services are otherwise available through alternative resources;

(E) The application is submitted solely for the purpose of securing residential placement for a school-aged child as defined in Chapter 612, RSMo to receive an appropriate education; or

(F) Child’s symptoms meet acute definition.

(5) Supported Community Living offices or designee shall screen applicants for placement services to determine appropriateness of the referral, eligibility for services and placement need, if any. The Supported Community Living office may request additional information as necessary.

(6) If the Supported Community Living office makes a preliminary decision to accept a referral, it shall obtain the following referral materials:

(A) A comprehensive multidisciplinary evaluation including a psychosocial history, psychiatric evaluation/diagnosis, psychological evaluation/testing, performed within the past six (6) months; and information about the intellectual cognitive functioning of the youth;

(B) The psychiatric assessment (an evaluation which includes diagnosis shall be done by a psychiatrist or licensed clinical psychologist designated by the department);

(C) Current physical examination performed within the past ninety (90) days, laboratory tests and X-rays as ordered by physician;

(D) Background information which includes the youth’s level of functioning including successes and failures in the school, home and community as well as in other placements;

(E) Any special procedures done in the diagnosis process or any special needs of the client;

(F) Information on medicines, allergies or other medical conditions;

(G) Information on legal status, including copies of guardianship, circuit or civil detention orders, if applicable;

(H) Completed and signed standard means test, 9 CSR 10-31.011;

(I) Achenbach Child Behavior Checklist;

(J) DMH Form 8311, Application for Supported Community Living Services for Minors; and

(K) Other demographic and pertinent information.

(7) Within five (5) working days after receipt of the referral information, the Supported Community Living office shall mail the applicant a report or overview on the status of the application, including a list of the items missing. Within fourteen (14) working days after receipt of the complete referral information, the Supported Community Living office shall indicate the disposition of the referral, in writing, by registered/certified mail, return receipt requested. If the applicant does not meet criteria for acceptance, the department, in the registered/certified letter, shall
notify the agency or person who made application for the applicant of—
(A) The reasons for rejection;
(B) The deadline for appealing the decision;
(C) The name, address and telephone number of the person to whom the appeal should be directed; and
(D) The name, address and telephone number of a Department of Mental Health staff person who is qualified to provide information about the services offered by the Division of Comprehensive Psychiatric Services.

(8) Appeals. If the agency or person making application for the applicant disagrees with the rejection, s/he may appeal, in writing, within thirty (30) days after receipt of the notice to the children’s area director. Within fifteen (15) days of receiving the appeal, the children’s area director shall review the applicant’s referral materials along with a copy of the rejection letter and shall notify the applicant and the agency or person who made application for the applicant, in writing, by registered/certified letter of his/her decision on the appeal. If the agency or person making application disagrees with the decision of the head of the department’s mental health facility, s/he may appeal, in writing, within fifteen (15) days of receipt of the decision to the director of Children and Youth Services. The children and youth director shall review the applicant’s referral materials along with a copy of the rejection letter and notify the applicant and the agency or person making application, in writing by certified/registered letter, of his/her decision on the appeal within fifteen (15) days of its receipt. The decision of the children and youth director shall be final.

(9) If the decision is to accept the applicant into the Supported Community Living Program, Supported Community Living office staff shall follow departmental procedures for client admission.

(10) Before placing any person in the Supported Community Living Program, the department shall consider each of the following:
(A) Best interest of the patient or resident;
(B) Least restrictive environment for care and treatment consistent with needs and conditions of the patient or resident;
(C) Ability to provide necessary care and treatment for the patient or resident which is of comparable quality to existing care and treatment based upon investigation of the alternative facility and its program of care and treatment; and
(D) Relationship of the patient or resident to family, guardian or friends so as to maintain relationships and encourage visits beneficial to the patient or resident.

(11) The Supported Community Living office staff shall notify the agency or person making application, in writing, to schedule a special staffing with applicant and other interested/responsible persons to determine all appropriate placement resources and to designate responsibility for procuring and making the placement.

(12) Supported Community Living/designee staff shall obtain appropriate releases of referral information signed by parent or guardian. The referral information shall include appropriate psychiatric, medical and social information. The referral information shall also include:
(A) Treatment needs, including strengths and weaknesses; and
(B) Legal status.

(13) The proposed Supported Community Living vendor shall indicate acceptance or rejection to the regional placement office, which shall document that response in the client file and inform the agency or person making application of the response.

(14) Consent for Placement.
(A) If the applicant is a minor or has a legal guardian, the department shall obtain consent of the parent or guardian before placement.
(B) If the applicant is an involuntary patient/client under Chapter 211 or 632, RSMo, the department shall notify the court of competent jurisdiction of the proposed placement and allow ten (10) working days for the court to object.
(C) For patients committed under Chapter 552, RSMo, the department shall follow procedures set out in section 552.040, RSMo for obtaining conditional release and subsequent placement.
(D) If a patient in a mental health facility, his/her parent, if s/he is a minor, or his/her legal guardian refuses to consent to the proposed placement, the department shall follow the procedure set out in section 630.635, RSMo.

(15) Funding will be approved by the area director, Children’s Services, or designee for an applicant based on the—
(A) Applicant’s acceptance by a proposed Supported Community Living vendor; and
(B) Availability of funds.

(16) Applicants for whom placement is being sought will have their names placed on a list of those eligible for funding. Their status will be reviewed weekly by Supported Community Living office staff. Area directors will determine priorities for funding allocations within their regions.


COMMMUNITY PLACEMENT APPLICATION FORM
FOR MINORS

I. CLIENT IDENTIFYING DATA:

Name __________________________________________
Date of Birth ___________________ Sex ___________
Current residence - address _________________________
City/State _______________________________________
Parent/Guardian/Other - Name _______________ phone ________
Address _______________________________________
City/State _______________________________________
Significant Others ________________________________
Education - Grade Level _________________________
School District _________________________________
Legal Status _____________________________________
Soc. Security No. ________________________________

II. APPLICANT

Name __________________________________________ Title ___________________________
Facility/Agency ________________________________ Phone: _______________________
DMH/CPS Facility ______________________________ Date Admitted _________________
Type of Admission ______________________________ DMH Case No. ____________

III. REASON FOR REFERRAL: (Agency/facility goals and plans)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
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________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

DMH INTERNAL USE ONLY
Date Application rec'd ______
Gen. Screening Date: ______
Placement Decision Date: ______________
Disposition____________________
Date placed on waiting list ______________________
Month Day Year

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DMH 8311
IV. DIAGNOSIS:

Axis I ________________ Code ________________

Axis II ________________ Code ________________

Axis III ________________ Code ________________

Age at onset of mental disorder ______ years.

A. PRESENT SITUATION: (Describe completely the minor's behavior, e.g. leisure time and activities, socialization, behavior problems, most recent display of problem behavior, privileges/passes, interests, hobbies, school problems)

B. Current Medication and any recent changes and why: __________________________

C. Physical Condition: (Describe any physical problems, special dietary needs, developmental problems, etc.) __________________________

D. Family Involvement: (Describe current family interest, home environment, treatment of family members for mental disorders, family needs, assessment of family as a resource both during and following placement, etc.) __________________________
E. Treatment: (Describe type of setting needed, degree of structure and supervision required, treatment approaches needed, special management problems, degree of cooperation, special education needs, etc.)

F. Minor's and parent's attitude toward placement:

G. See Attachment A

VI. FINANCIAL

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Other Resources (check if applicable)
SSI _____
SSA _____
Juv. Court _____
DFS _____
Other (specify) ______

VII. REMARKS/RECOMMENDATIONS: (Describe anything that will be helpful in assessing minor for placement)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
9 CSR 50-2.020 Guidelines for Conditional Release

PURPOSE: This rule sets guidelines for implementation of section 632.385, RSMo and applies to all department facilities and private mental health facilities certified by the Division of Comprehensive Psychiatric Services to provide outpatient treatment.

(1) The head of a mental health facility or designee may conditionally release a client who is involuntarily detained pursuant to Chapter 632, RSMo for twenty-one (21) days, ninety (90) days or one (1) year, for a period not to exceed one (1) year, under written conditions provided by the facility. The facility shall have a continuing responsibility to assist the client in following the written conditions and, as provided in section (6) of this rule, may revoke the client’s conditional release and return the client to the facility for further inpatient treatment.

(2) The head of the facility or designee shall develop written conditions for the client’s release. These conditions may include, but are not limited to, the following:
   (A) Where the client will reside;
   (B) When and where the client will receive required psychotherapy, day treatment, supported community living services or other required care and treatment necessary to continue the client on conditional release;
   (D) Which behaviors the client is expected to exhibit or avoid; and
   (E) Any other conditions necessary for the client to comply with to reasonably assure success.

(3) The client, the head of the facility or designee and the persons providing services to the client while on conditional release shall agree to the conditions of the release agreement.

(4) The head of the releasing facility or designee may modify the client’s conditions for release when s/he believes that these changes are in the best interest of the client. Suggested modifications to the conditional release agreement may be made to the head of the releasing facility or designee by the client or the persons providing services. Any modifications shall be given to the client in writing and as required in sections (3) and (5) of this rule.

(5) The signed conditional release shall be filed by the head of the facility or designee with the probate division of the circuit court that committed the client. Copies of the conditional release shall be given to—
   (A) The client;
   (B) The facility that conditionally released the client;
   (C) The person(s) providing for the conditions of release;
   (D) The client’s last attorney of record; and
   (E) The prosecuting attorney, county counselor or circuit attorney, as appropriate.

(6) If the client violates one (1) or more conditions of the release, the head of the facility or designee that conditionally released the client shall be notified. After review the head of the facility or designee may revoke the client’s conditional release and return the client to the hospital if there is reason to believe that—
   (A) The client has violated one (1) or more of the conditions of release;
   (B) The client requires resumption of full-time hospitalization; or
   (C) The safety of the client or public may be in jeopardy if the client is not hospitalized.

(7) If a decision to revoke the client’s conditional release is made by the head of the facility or designee, s/he shall notify and give written notice as to the conditions that were violated, how they were violated and reasons for returning the client to inpatient hospitalization within ninety-six (96) hours of the client’s return to the mental health facility to the following:
   (A) The client;
   (B) The person(s) providing services which are called for by the conditions of release;
   (C) The court of jurisdiction;
   (D) The client’s last attorney of record; and
   (E) The prosecuting attorney, county counselor or circuit attorney, as appropriate.

(8) If, after given notice, the client refuses to return to the facility, the head of the facility or designee may take the written notice to the probate division of the circuit court where the conditional release was filed and request that the probate division of the circuit court issue a warrant for the client’s apprehension and return to the facility. The court may consider the request on an ex parte basis. Any court costs related to revocation shall be paid as provided in section 632.415, RSMo.

(9) When the client is returned to the facility, the head of the facility or designee shall give written notification to the client that if the client disagrees with the revocation that the client may ask the court to hold a hearing on the matter. Upon readmission to the facility, the client shall be given notice of his/her commitment rights as if s/he were detained for the initial ninety-six (96) hour period and be given the name and phone number of his/her attorney who represented him/her in the last commitment hearing. The attorney who represented the client on the last commitment hearing shall continue to be the attorney of record unless the client has obtained other legal counsel. If the attorney of record is unable to represent the client, a new attorney shall be designated by the facility from the list of attorneys.

(10) The period of inpatient hospitalization shall not exceed the period of time left on the previous commitment without further hearings for the next appropriate period of commitment. The head of the facility placing the client on conditional release shall keep adequate records to assure that the client is not involuntarily treated as an inpatient for a longer period than necessary while on conditional release.

AUTHORITY: section 630.050, RSMo 2000.*


9 CSR 50-2.510 Admissions to Adult Placement Program

PURPOSE: This rule prescribes admissions criteria, the application process and placement procedures for the adult placement program of the Division of Comprehensive Psychiatric Services.

PUBLISHER’S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. This material as incorporated by reference in this rule shall be maintained by the agency at its headquarters and shall be made available to the public for inspection and copying at no more than the actual cost of reproduction. This note applies only to the reference material. The entire text of the rule is printed here.
(1) Terms defined in sections 630.005 and 632.005, RSMo shall be used in the interpretation and enforcement of this rule. Unless the residential services contract clearly requires otherwise, the following other terms, as used in this chapter, shall mean:

(A) Administrative agents, contracted mental health provider of adult and children’s services by the Division of Comprehensive Psychiatric Services as defined in 9 CSR 25-2.005(2)(F).

(B) Affiliate, an organization linked to the department through operation of a certified community psychiatric rehabilitation center (CPRC) and/or a contract with one (1) or more administrative agents.

(C) Applicant, a person for whom placement services have been requested in writing, including a person seeking readmission to the community placement program.

(D) Client, a person placed under section 630.620, RSMo in any residential facility licensed or certified solely by the department or in conjunction with the Department of Social Services under Chapter 630, RSMo.

(E) DSM-IV-TR, Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision, (2000), by the American Psychiatric Association, 1400 K Street NW, Washington, DC 20005, which is incorporated herein by reference. This rule does not incorporate any subsequent amendment or additions.

(F) Forensic client, a person who is a client of the Division of Comprehensive Psychiatric Services pursuant to Chapter 552, RSMo.

(G) Supported Community Living (SCL), offices subject to supervision by the division director or any other entity designated by the division director with responsibility for the regional placement program and services.

(2) All forensic clients shall be eligible for adult placement services from the Division of Comprehensive Psychiatric Services.

(3) All adult persons who are inpatients of facilities operated by the Division of Comprehensive Psychiatric Services and are referred by facility staff receive priority in admission to the adult placement program of the Division of Comprehensive Psychiatric Services.

(4) An applicant who does not meet the criteria of section (2) or (3) shall meet all of the following admission criteria to be eligible for adult placement services from the Division of Comprehensive Psychiatric Services:

(A) Be at least seventeen (17) years and nine (9) months of age;

(B) Have a current diagnosis that qualifies for the Comprehensive Psychiatric Rehabilitation Program under the DSM-IV-TR.

(C) Based upon sufficient documentation, have a mental disorder that constitutes substantial impairment in social role functioning and daily living skills to the extent that, based upon the administrative agent/affiliate’s clinical judgment, the client cannot function successfully outside a mental health facility without placement services. Substantial impairment may include, but not be limited to, the following behavioral characteristics:

1. Substantial need for mental health treatment and social services;

2. History of inability or unwillingness to comply with treatment plans, including taking medications;

3. Inadequate living skills to provide for basic necessities of food, clothing, shelter, safety, personal and health care without assistance;

4. Poor social skills, which may be exhibited in aggressive or withdrawn behavior;

5. Frequent personal crises requiring emergency treatment or support and assistance;

6. Inability to effectively access community services;

7. Lack of a personal support system (for example, family or friends) to assist in accessing services; and

8. Inability to sustain employment.

(5) Administrative agent/affiliates shall consider an applicant ineligible for placement services from the Division of Comprehensive Psychiatric Services if—

(A) The primary diagnosis is alcohol or substance abuse or mental retardation;

(B) Medical needs supersede the psychiatric disability and require considerable supervision and ongoing medical treatment;

(C) Impulses to harm self or others are not under control according to clinical judgment;

(D) The diagnosis is dementia; or

(E) Appropriate services have been established that are otherwise available through alternative resources.

(6) Administrative agents/affiliates shall screen applicants for placement services to determine the following: appropriateness of the referral, eligibility for services and placement need, if any. The referring agency or person shall provide a preliminary screening information summary on a form designated by the regional placement program. The regional placement program may request additional information as necessary. Administrative agents/affiliates shall conduct screenings in appropriate settings.

(7) If the administrative agent/affiliate makes a preliminary decision to accept a referral, it shall obtain the following materials:

(A) Current physical examination, if available, necessary laboratory tests and X-rays as indicated; and

(B) Additional information at necessary to verify eligibility.

(8) Within fourteen (14) working days after receipt of the referral information, the administrative agent/affiliate shall indicate the disposition of the referral in writing.

(A) If the applicant does not meet criteria for acceptance, the administrative agent/affiliate shall notify the referring agency or applicant by certified mail, return receipt requested, of the reasons for rejection, including in the notice information on the deadline for appealing the decision and to whom the appeal is to be sent.

1. If the applicant disagrees with the rejection, s/he may appeal in writing within thirty (30) days after receipt of the notice and may request to meet with the head of the mental health facility to present his/her case in person as well as in writing.

2. If the referring agency disagrees with the rejection, it may appeal in writing within thirty (30) days after receipt of the notice.

3. Appeals shall be addressed to the head of the department’s mental health facility.

4. Within thirty (30) days of receiving the appeal, the head of the facility shall notify the applicant and the referring agency or person in writing of his/her decision on the appeal.

5. If the referring agency or applicant disagrees with the decision of the head of the department’s mental health facility, s/he may appeal in writing within fifteen (15) days of receipt of the decision to the director of the Division of Comprehensive Psychiatric Services.

6. The division director shall notify the applicant and the referring agency or person in writing of his/her decision on the appeal within thirty (30) days of its receipt. The decision of the division director shall be final.

(B) If the applicant meets criteria for placement services, based upon the clinical judgement of the administrative agent/affiliate, the administrative agent/affiliate shall notify the referring agency or applicant of tentative placement plans.
(9) If the decision is to accept the applicant into the placement program, administrative agent/affiliate staff shall follow department procedures for client admission.

(10) Before placing any person in a residential facility or program, the administrative agent/affiliate shall consider each of the following:
   (A) The choices and requests of the client;
   (B) Least restrictive environment for care and treatment consistent with needs and conditions of the client;
   (C) Ability of the facility or program to provide necessary care and treatment for the client; and
   (D) Relationship of the client to family, guardian or friends so as to maintain relationships and encourage visits beneficial to the client.

(11) The administrative agent/affiliate staff shall consider a variety of placement options consistent with an individual client’s clinical needs. When a proposed residential facility or program is determined appropriate, the administrative agent/affiliate shall provide to the following persons written reasons that the proposed placement is appropriate under section 630.615, RSMo:
   (A) The client;
   (B) A parent, if the client is a minor;
   (C) The legal guardian; and
   (D) The client’s next of kin if applicable and with appropriate release of information.

(12) The administrative agent/affiliate staff shall obtain appropriate releases of referral information signed by the client, his/her parent, if a minor, or guardian. The administrative agent/affiliate staff shall submit the referral information to the proposed residential facility or program. The referral information shall include appropriate psychiatric, medical and social information. The referral information shall also include:
   (A) Preliminary screening information summary;
   (B) Level of functioning;
   (C) Treatment needs, including strengths and weaknesses; and
   (D) Legal status.

(13) The proposed residential facility or program shall indicate acceptance or rejection to the administrative agent/affiliate which shall document that response in the client file and inform the referring party of the response. If the client is competent to give informed consent, the administrative agent/affiliate shall allow ten (10) working days to obtain his/her consent before making a placement. If the client is a minor or has a legal guardian, the administrative agent/affiliate shall obtain consent of the parent or guardian before placement. If the client is an involuntary client under Chapter 211 or 632, RSMo, the administrative agent/affiliate shall notify the court of competent jurisdiction of the proposed placement and allow ten (10) working days for the court to object. For clients committed under Chapter 552, RSMo, the department shall follow procedures set out in section 552.040, RSMo for obtaining conditional release and subsequent placement. If a client in a mental health facility, his/her parent, if s/he is a minor, or his/her legal guardian refuses to consent to the proposed placement, the administrative agent/affiliate shall follow the procedure set out in section 630.635, RSMo.

(14) At the time of placement, the administrative agent/affiliate shall include the following information in the residential facility placement packet, which shall accompany the client:
   (A) Social history and assessment, if available; and
   (B) Medical evaluation, if available, including current physical examination, diet, medication and special problems or needs.

(15) At the time of placement the administrative agent/affiliate shall provide a fourteen (14)-day supply of the client’s prescription medication, unless less is requested by the placement facility, or the written prescription(s).

(16) The administrative agent/affiliate shall notify the supported community living office of the placement date.

AUTHORITY: section 630.050, RSMo 2000. *