

Department of Behavioral Health
TRANSMITTAL LETTER

SUBJECT

Maintaining Children and Youth in their Homes with the Support of Behavioral Health Services in Natural Settings

POLICY NUMBER
340.5

DATE MAR 27 2015

TL#277

Purpose. This policy was converted from a Department of Mental Health (DMH) policy to a Department of Behavioral Health (DBH) policy, and was expanded to include Adolescent Substance Abuse Treatment Expansion Program (ASTEP) providers.

Applicability. Applies to all DBH certified providers who provide behavioral health services to children and youth and the Behavioral Health Authority.


Policy Clearance. Reviewed by affected responsible staff and cleared through appropriate Behavioral Health Authority offices.

Effective Date. This policy is effective immediately.

Superseded Policies. This policy replaces DMH Policy 340.5A, Maintaining Children and Youth in their Homes, dated August 1, 2011, and DMH Policy 340.4, Services to Children and Youth in Natural Settings, dated April 22, 2005.

Distribution. This policy will be posted on the DBH web site at www.dbh.dc.gov under Policies and Rules. Applicable entities are required to ensure that affected staff is familiar with the contents of this policy.


Barbara J. Bazron, Ph.D.
Interim Director, DBH

<p>GOVERNMENT OF THE DISTRICT OF COLUMBIA</p>  <p>DEPARTMENT OF BEHAVIORAL HEALTH</p>	<p>Policy No. 340.5</p>	<p>Date MAR 27 2015</p>	<p>Page 1</p>
<p>Supersedes: DMH Policy 340.5A, Maintaining Children and Youth in their Homes, dated 8/1/2011; and DMH Policy 340.4, Services to Children and Youth in Natural Settings, dated 4/22/05</p>			
<p>Subject: Maintaining Children and Youth in their Homes with the Support of Behavioral Health Services in Natural Settings</p>			

1. **Purpose.** To require that children and youth are assisted as much as possible to remain in their own home (or surrogate home), prevent the need for out of home placement for behavioral health services, and ensure behavioral health services are provided in natural settings whenever possible.
2. **Applicability.** Applies to all DBH certified providers who provide behavioral health services to children and youth and the Behavioral Health Authority.
3. **Authority.** Department of Behavioral Health Establishment Act of 2013.
4. **Definitions.** For purposes of this policy:
 - 4a. **Own home.** Residing independently or with parent(s), stepparent, or legal guardian.
 - 4b. **Surrogate home.** A home other than with one's own natural or adopted parents (i.e., foster home, therapeutic foster home, or home of a family member other than the parents), or other family based home setting.
 - 4c. **Out of Home Placement.** Any living situation other than a child or youth's own home or surrogate home.
 - 4d. **Psychiatric Residential Treatment Facility (PRTF).** A psychiatric facility that is not a hospital and is accredited by the Joint Commission on Accreditation of Healthcare Organizations, the Commission on Accreditation of Rehabilitation Facilities, the Council on Accreditation of Services for Families and Children, or by any other accrediting organization with comparable standards that is recognized by the state in which it is located and provides inpatient psychiatric services for individuals under the age of twenty-two and meets the requirements set forth in §§ 441.151 through 441.182 of Title 42 of the Code of Federal Regulations, and is certified by the District of Columbia to participate in the Medicaid Program.
 - 4e. **Natural Settings.** The consumer's residence, workplace, or other locations in the community that the consumer frequents, such as the consumer's home, school, workplace, community centers, homeless shelters, street locations, or other public facilities. Natural settings do not include inpatient hospitals or residential treatment facilities.
 - 4f. **Residential Treatment Facility for Substance Use Disorders (SUDs)** – A licensed facility that provides services with multiple components for evaluating, diagnosing, and treating a person's symptoms and/or disabilities associated with a SUD.

5. **Background.** Consumers are best served in their home community, and services should be provided in natural settings, whenever possible to support and promote recovery. DBH has established a community-based system of care, with a sufficient array, quantity and quality of community based services to support children, youth and their families in the community to reduce the need for out of home placements.

6. **Policy.**

6a. All children/youth enrolled with a DBH-certified provider and engaged in active treatment shall have direct services provided in their home or natural setting to the fullest extent possible.

6b. Community-based alternatives to out of home placement must be explored through a family-driven team based process to determine what community supports and services would meet the needs of the child/youth, and to ensure that all diversion opportunities occur prior to referring a child or youth for out of home placement. Also see DBH Policy 340.11, on Child/Youth and Family Teaming and DBH Policy 340.10, on High Fidelity Wraparound Care Planning Process.

6c. Children and youth who are at risk for out of home placement will have the opportunity to engage in a child and family teaming process that results in an individualized in-home and community-based plan of care to match the level of the child/youth's clinical need with the level of teaming intensity.

7. **Responsibilities.**

7a. All DBH certified providers who provide behavioral health services to children and youth shall:

(1) Be sufficiently knowledgeable of the array of services and supports available to children and youth in the community and how to access them to ensure the child or youth and family are given the opportunity to utilize needed services.

(2) Participate in a child and family teaming process for service and support planning for children and youth at risk of out of home placement by engaging family members and natural supports to provide a variety of strategies and interventions that could help maintain the child/youth in the home.

(3) Adhere to the principle of least restrictive environment while considering the risks and benefits of staying in the home versus being removed from home.

(4) Participate in discharge planning meetings from acute, sub-acute, and psychiatric and SUD residential care in order to facilitate the return of a child/youth to their home.

7b. Core Services Agencies (CSAs)/Community Based Intervention (CBI) Providers, Wraparound Providers, and Adolescent Substance Abuse Treatment Expansion Program (ASTEP) Providers shall:

(1) Coordinate and facilitate a child and family teaming process for service and support planning for children and youth at risk of out of home placement by engaging family

members and natural supports to provide a variety of strategies and interventions that could help maintain the child/youth in the home.

(2) Assess each child/youth with the DBH authorized evaluation tools to determine level of care.

(3) Make timely referrals to any needed services that could prevent the need for out of home placement for mental health or SUD treatment.

7c. The Behavioral Health Authority shall:

(1) Provide all needed supports for the child and family treatment team to perform its responsibilities.

(2) Provide timely authorizations for referrals to community based services for children and youth at risk for out of home placement.

(3) Ensure all fee-for-service admissions, continuing stays, and discharges from Psychiatric Residential Treatment Facilities (PRTFs), SUD residential treatment facilities, and acute hospitalizations are monitored to, among other issues, ensure proper utilization of services.

(4) Provide ongoing information to all providers on all in-home and community-based services available to children/youth.

8. **Inquiries.** Any questions regarding this policy may be addressed to the Director, Child and Youth Services Division in the BHA Office of Programs and Policy at (202) 671-2900.

9. **Related References.**

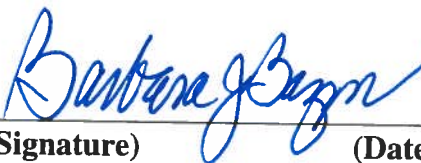
DBH Policy 340.10, High Fidelity Wraparound Care Planning Process

DBH Policy 340.11, Child/Youth and Family Teaming

DBH Policy 300.2, Functional Assessment for Children and Youth

Approved By:

Barbara J. Bazron, Ph.D.
Interim Director, DBH

 3/27/15
(Signature) (Date)