

Big Bend Community Based Care Policy & Procedure

Series: 200: Placement Services

Policy Name: Therapeutic Group Care

Policy Number: 204

Origination Date: 03/09/2009

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Regulation: 39.407, F.S.
409.1671, F.S.
65C-28.015, F.A.C.
65E-9, F.A.C.
Specialized Therapeutic Services Coverage and Limitations Handbook

Referenced Document:

200-204 x 1, Amendment to the Florida Rule of Juvenile Procedure 8.350

Policy

It is the policy of Big Bend Community Based Care, Inc. (BBCBC), to appropriately utilize Therapeutic Group Care for children who require this level of care to achieve safety, permanency, and well-being, assuring that children are placed in the least restrictive, most appropriate placement in which they can be successful.

Procedure

A. General Information.

1. Therapeutic group care services are community-based psychiatric residential treatment services for children with moderate to severe emotional disturbances.
2. The Therapeutic group care (TGC) setting provides services to children persistent and severe social, behavioral, emotional, and psychiatric disorders but with the capacity to function in a community setting with specialized supports.
3. TGC provides 24-hour services to children who require more intensive services and supervision than what is available in traditional or therapeutic foster care. These services are also appropriate for children who are ready transition to a more restrictive residential treatment program.
4. Dependent children are required to have a Suitability Assessment recommending that level of care completed by the AHCA subcontracted vendor approved Qualified Evaluator and a court order for residential treatment.
5. The TGC staff providing therapeutic services have been specifically trained to care for children with mental health or substance abuse diagnoses.
6. Services include provision of psychiatric, psychological, behavioral and psychosocial services.
7. The child will attend school in the community while in the TGC program.

B. Placement Process.

Big Bend Community Based Care Policy & Procedure

1. When it is determined that a child may be in need of therapeutic group care, a multidisciplinary team MDT meeting is scheduled and the Dependency Case Manager (DCM) submits a completed staffing form to the Utilization Management Specialist (Behavioral Health Coordinator) or designee. Please refer to *BBCBC OP 300-309, Multi-Disciplinary Team and Integrated Care Team Meetings*, for the Multi-Disciplinary Team (MDT) process.
2. The DCM is also responsible for submitting a completed request for Suitability Assessment with all required documentation to the Behavioral Health Coordinator. The results of the Assessment may drive the need for an MDT or the MDT may request the Assessment.
 - a. The Utilization Management Specialist (Behavioral Health Coordinator) submits the referral to ACHA's Subcontracted Vendor and coordinates notification of the appointment.
 - b. The Utilization Management Specialist (Behavioral Health Coordinator) provides the assessor with a copy of the complete referral packet.
3. BBCBC will work to identify an available provider within our area. If there is no identified provider, the CBCIH Regional Coordinator will assist in locating a provider within network by requesting a statewide search.
4. Upon locating a provider:
 - a. When necessary BBCBC will discuss placement with the potential receiving CBC to ensure that relevant mental health case information is shared and ascertain if there are any concerns about the provider; the placement will not disrupt a local pending CBC's placement.
 - b. BBCBC will ensure that necessary court orders are obtained and provided to the accepting provider, that the accepting provider has relevant mental health case information and clarify funding for non-plan services.
 - c. BBCBC is responsible for the MDT, managing all service authorizations, requests for 90-day Suitability Assessment Reviews and necessary court orders required during a child's placement. BBCBC is responsible for having the bill county code changed to the county code of the geographic location of the child's placement.
5. In order to receive TGC services, a child must be authorized by an MDT as meeting the following criteria:
 - a. Must be under the age of 21 years.
 - b. Diagnosed as having a mental, emotional, or behavioral disorder that meets one of the diagnostic categories specified in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association.
 - c. Functional and behavioral problems may not be primarily related to cognitive or developmental disabilities.
 - d. Must require intensive, structured mental health interventions and must have reached maximum benefit from a more restrictive setting or a less restrictive treatment option may have been tried or considered and found not sufficient to safely meet the child's treatment needs.
 - e. Must be determined appropriate for service by a qualified evaluator.
 - f. The DCM will work with Children's Legal Services to follow the steps necessary to notify all parties and obtain the necessary court order for residential placement as outlined in the Florida Rule of Juvenile Procedure 8.350.

Big Bend Community Based Care Policy & Procedure

C. Continued Stay Criteria. Stays will be reviewed during the Suitability Assessment and by MDT at least every six (6) months but in accordance with the authorization period given by child's MMA plan. The following information is reviewed:

1. The child's condition continues to require the TGC level of care as evidenced by medical necessity criteria.
2. There is progress toward the child's treatment goals or there is an expectation of progress.
 - a. There is documented active discharge planning.
 - b. The recommendations of the 90-day Suitability Assessment.

D. Discharge Criteria.

1. Treatment goals have been substantially achieved and the child is able to function at a lower level of care.
2. A Suitability Assessment, completed by a Qualified Evaluator, recommends the child either be transitioned out of therapeutic group care or transitioned into residential psychiatric care.