

Department of Mental Health  
**TRANSMITTAL LETTER**

<b>SUBJECT</b> <b>Designation of "Inactive/Discharge Status" for Adult Consumers who are not in Active Treatment in a Core Services Agency</b>		
<b>POLICY NUMBER</b> <b>DMH Policy 525.2</b>	<b>DATE</b> <b>APR 22 2005</b>	<b>TL#</b> <b>66</b>

**Purpose.** To update the procedures a core services agency (CSA) must follow to obtain Department of Mental Health (DMH) approval to place a DMH enrolled adult consumer in "inactive status" and/or discharge the consumer from a CSA's enrollment when the consumer is not participating in active treatment. Significant changes include:

- Inactive status/discharge requests must be sent to the DMH Division of Care Coordination instead of the Office of Accountability;
- Information has been added to the Discharge Status Section 6b(1) to address required actions when a consumer refuses to be evaluated by a psychiatrist;
- The frequency of visits has changed for consumers previously in active treatment who are not enrolled in ACT in Section 7a(2);
- Additional outreach activities have been added for consumers who are Homeless in Section 7a(3); and
- Changes have been made to the process for Dis-enrollment in eCura in Section 8.

**Applicability.** Applies to all DMH-certified CSAs who serve adults, enrolled adult consumers, and mental health staff providing direct mental health services to enrolled adults. This policy is not applicable to consumers in a committed outpatient status.

**Policy Clearance.** Reviewed by affected responsible staff and cleared through appropriate MHA offices.

**Implementation Plans.** A plan of action to implement or adhere to this policy must be developed by designated responsible staff. If materials and/or training are required to implement this policy, these requirements must be part of the action plan. Specific staff should be designated to carry out the implementation and program managers are responsible for following through to ensure compliance. Action plans and completion dates should be sent to the appropriate authority. Contracting Officer Technical Representatives (COTRs) must also ensure that contractors are informed of this policy if it is applicable or pertinent to their scope of work. *Implementation of all DMH policies shall begin as soon as possible. Full implementation of this policy shall be completed within sixty (60) days after the date of this policy.*

**Policy Dissemination and Filing Instructions.** Managers/supervisors of DMH and DMH contractors must ensure that staff are informed of this policy. Each staff person who maintains policy manuals must ensure that this policy is filed in the **DMH** Policy and Procedures Manual, and contractors must ensure that this policy is maintained in accordance with their internal procedures.

(See Back)

APR 22 2005

\*If any CMHS or DMH policies are referenced in this policy, copies may be obtained from the DMH Policy Support Division by calling (202) 673-7757.

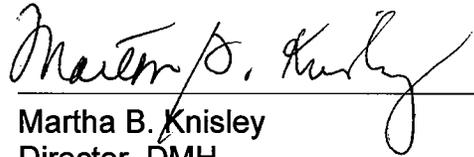
**ACTION**

**REMOVE AND DESTROY**

**DMH Policy 340.2, same title,  
dated March 11, 2004**

**INSERT**

**DMH Policy 525.2**

  
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Martha B. Knisley  
Director, DMH

GOVERNMENT OF THE DISTRICT OF COLUMBIA  <b>DEPARTMENT OF MENTAL HEALTH</b>	<b>Policy No.</b> <b>525.2</b>	<b>Date</b> <b>APR 22 2005</b>	<b>Page 1</b>
	<b><u>Supersedes:</u> DMH Policy 340.2, same title, dated March 11, 2004</b>		
<b>Subject: Designation of "Inactive/Discharge Status" for Adult Consumers who are not in Active Treatment in a Core Services Agency</b>			

1. **Purpose.** It is the policy of the District of Columbia Department of Mental Health (DMH) to ensure that all consumers assigned to a core services agency (CSA) are engaged in active treatment and that the CSA has taken steps to provide that treatment. A CSA may not discharge a consumer from its rolls unless and until it can demonstrate efforts to engage the consumer have failed.

This policy sets forth the procedures a CSA must follow to obtain DMH approval to place a DMH enrolled adult consumer in "inactive status" and/or discharge the consumer from a CSA's enrollment when the consumer is not participating in active treatment.

2. **Applicability.** These procedures are applicable to all DMH-certified CSAs who serve adults, enrolled adult consumers, and mental health staff providing direct mental health services to enrolled adults. This policy is not applicable to consumers in a committed outpatient status.

3. **Authority.** Mental Health Service Delivery Reform Act of 2001.

4. **Definitions.**

- **Active Adult Consumer** - A consumer who is enrolled with a CSA who is receiving treatment and services in accordance with his/her agreed upon Individual Recovery Plan (IRP) as identified in that active IRP.
- **Inactive Adult Consumer** – An enrolled consumer who is not engaged in active mental health treatment with a CSA as set forth in Section 6a herein.
- **Outreach Services** - For adult consumers, a series of activities undertaken by the CSA to locate a consumer who has not appeared for treatment services consistent with his/her IRP. The CSA performs these outreach services in the community in search of the consumer and makes contact(s) with a variety of programs, individuals, and agencies in order to locate and re-engage the consumer in active treatment. The CSA is required to document all outreach service activities as provided in Section 7b herein, and is required to send that documentation to the DMH Division of Care Coordination for review and approval.
- **CSA Discharge** - Termination of the clinical services provided to a consumer as approved by DMH.
- **Exempt Status** - A designation assigned to an adult consumer who holds a forensic status and has been determined by the St. Elizabeths Hospital forensic division and/or the courts to be inappropriate for community placement.

5. **Guideline.** All DMH adult consumers (including inpatients at St. Elizabeths Hospital) shall be enrolled in a CSA.

6. **Policy.**

6a. **Inactive Status.**

(1) **Adult Consumers Who Reside in the Community:** Consumers who reside in the community who are enrolled in a CSA, except those enrolled in Assertive Community Treatment (ACT)\*, may be placed in "inactive status" when they are:

- No longer engaged in active mental health treatment due to the consumer's failure over a ninety (90) day period of time to participate in their planned and agreed upon IRP and for whom the CSA has exhausted the defined outreach activities set forth in Section 7a below. The ninety (90) day period of time begins from the date of the first missed appointment.
- Incarcerated more than ninety (90) days.

**\*Note: Consumers currently enrolled in ACT may never be placed in an inactive status, but may be discharged under limited circumstances set forth in Section 6b(2) below.**

(2) **Adult Consumers Who are Inpatients at St. Elizabeths Hospital (SEH):** Inpatients at SEH who are enrolled in a CSA may be placed in "inactive status" when they are:

- Forensic consumers in an "exempt status" in John Howard Pavilion.

**Note: Other SEH inpatients currently enrolled in a CSA may not be placed in an inactive status.**

6b. **Discharge Status.**

(1) **DMH may approve a CSA discharge action request when an adult consumer:**

- Has relocated out of state more than ninety (90) days.
- Is deceased.
- Has refused all mental health services from the CSA, the consumer's refusal and the CSA's efforts to explain the benefits of services have been documented in the consumer's clinical record, and a psychiatrist has verified in the record that the consumer is not actively psychotic, mentally incompetent, or an imminent danger to self or others. If the consumer refuses to be evaluated by a psychiatrist, documentation must indicate that at least three (3) attempts were made to engage the consumer, and there is no report of dangerous behavior.
- Is incarcerated more than one (1) year or sentenced for incarceration for more than one (1) year, including post-trial consumers at John Howard Pavilion.
- Does not have a mental health diagnosis as verified in writing by a psychiatrist.
- Has not been located for ninety (90) days following numerous documented outreach efforts to locate the consumer.

(2) An adult consumer assigned to Assertive Community Treatment (ACT) may only be discharged when the consumer:

- Is deceased.
- Has permanently relocated out of the District of Columbia.
- Cannot be located for one-hundred eighty (180) days, and the CSA has documented its efforts to locate the consumer.
- Is incarcerated more than six (6) months.
- Is no longer in need of services as verified in writing by a psychiatrist.

The CSA may submit documentation from the ACT team affiliated with the CSA that provided the services. If the CSA or ACT team serves as the representative payee for the consumer to be discharged, the CSA must include as part of the documentation, its plan to terminate this relationship. The plan must include steps the CSA will take to return all fund balances, if any, to the consumer or where indicated to assist the consumer in obtaining another representative payee. If funds are from the Social Security Administration, those guidelines shall be followed.

(3) The CSA's request to discharge a consumer must be initiated by a qualified practitioner and must be approved in writing by a psychiatrist before being submitted to DMH Division of Care Coordination for DMH approval.

7. **Procedures.** The following actions must be taken in order for a CSA to obtain DMH approval to place a consumer in "inactive status" or to obtain DMH approval to discharge a consumer:

7a. **Outreach Activities.** The CSA shall undertake outreach activities for ninety (90) days for consumers who reside in the community as set forth below. The ninety (90) day period of time begins from the date of the 1<sup>st</sup> missed appointment.

(1) For new consumers who have never been seen by the CSA.

- Telephone call after the first missed appointment.
- Home visit if unable to locate with a telephone call or rescheduled appointment is missed.
- Letter if no contact is made.
- Certified letter, return receipt requested.

(2) For consumers previously in active treatment not enrolled in ACT.

- Telephone call or home visit within seventy-two (72) hours after the first missed appointment.
- Visits to home or any known day treatment program every two (2) weeks for sixty (60) days.
- 61-89 days - Letter.
- At 90 days - Certified letter, return receipt requested.

(3) For consumers who are Homeless.

- Attempt to locate a consumer within seventy-two (72) hours after the first missed appointment (e.g., visit shelters or frequented locations, and/or contact or call relatives/acquaintances).
- Thereafter, make monthly attempts to locate the consumer for ninety (90) days by contacting the consumer's family, known acquaintances, CPEP, and other local agencies such as shelters, jails, hospitals, and the city morgue.

7b. Documentation/Notification.

(1) For adult consumers who Reside in the Community, the CSA shall document the following in the clinical record, and provide a copy of the documentation to the DMH Division of Care Coordination when seeking approval to discharge or place the consumer in inactive status:

- Date of last appointment, if applicable.
- Date, time, and summary results of outreach efforts, to include persons contacted.
- If the consumer is located and refuses treatment, the reasons given and the CSA's response to engage the consumer.
- All required MHRS documentation including a summary progress note and discharge summary.

(2) For Inpatients at St. Elizabeths Hospital (SEH).

- The SEH forensic division director shall determine which forensic consumers meet exempt status.
- The CSA shall include all required MHRS documentation in the consumer's CSA clinical record, including a summary progress note and discharge summary and any required internal CSA documentation; and provide a copy of the documentation to the DMH Division of Care Coordination.

7c. The DMH Division of Care Coordination Access Help Line (AHL) shall review the CSA documentation and may request the CSA to submit additional information to support its inactive status/discharge request.

7d. The DMH Division of Care Coordination shall notify the CSA in writing of approval/denial within ten (10) business days after receipt of required documentation.

**8. Designation of Inactive or Discharge (Dis-enrollment) in eCura:**

8a. If Access Help line (AHL) approves the inactive status/discharge request, AHL will complete the dis-enrollment event screen in eCura.

8b. The AHL will remove the consumer's name from the CSA's assignment in eCura, and set the end date of the MHRS insurance span to the date of dis-enrollment.

9. **Return to Active Status.** A forensic inpatient who was placed in an inactive status may be returned to active status when the SEH forensic division notifies the CSA in writing that it has been clinically determined that the consumer may be potentially discharged from SEH within two (2) months. Upon notification, the CSA shall reactivate the consumer with the CSA in Provider Connect.

10. **Failure to Follow this Policy.** If DMH determines that a CSA has discharged a consumer without DMH approval or has not followed the procedures outlined in this policy, DMH shall require the CSA to engage in the outreach activities set forth herein, and shall impose any and all other remedial action it deems necessary.

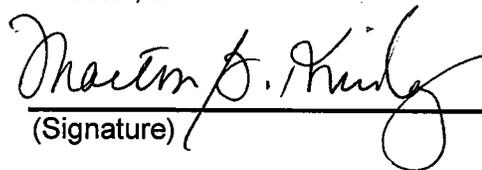
11. **Inquiries.** Any questions regarding this policy may be addressed to the Director, Division of Provider Relations at (202) 671-3155 or the Director, Division of Care Coordination at (202) 671-3070.

12. **Related References.**

DMH Policy 525.1, Designation of "Inactive/Discharge Status" for Child/Youth Consumers who are not in Active Treatment in a Core Services Agency.

Approved By:

Martha B. Knisley  
Director, DMH

 4/22/08  
(Signature) (Date)