

## **FIVE COUNTY MENTAL HEALTH AUTHORITY GUIDELINES FOR OUT OF HOME PLACEMENTS**

**Purpose:** The purpose of the guidelines is to assure a consistent process for the Qualified Professionals of the Clinical Home to follow prior to requesting an out of home placement for a child.

**Practice:** Five County Mental Health Authority (FCMHA) strongly supports the System of Care Philosophy that provides a framework that organizes public and private community services and resources into a comprehensive and interconnected network. This is to assure individuals and families with complex needs have access to the services and supports they need to be successful at home, in school, in work and in the community. It is this framework that unifies efforts and helps create a service system that seamlessly meets the real needs of children and their families in their own neighborhood and community. To this end, out of home placements for children with mental health needs should be a last resort, used only for safety and treatment purposes that cannot be achieved in their home environment. When such placements are required, they must be directly related to measurable outcomes, with concrete plans to bring the child back to a stable/permanent home in their community. Out- of home placement should be planned to be only as long as needed to reach safety and treatment goals and should be delivered in the least restrictive setting. It is imperative that the process of planning for return to the home is initiated with admission. This includes efforts intended on maintaining resources in the community to prepare for the person's return (continued family support and counseling for example). The involvement of the clinical home is imperative during the entire placement to assure that treatment is progressing as planned and movement toward return to the family or a lower level of care.

When out of home placements are needed those placements must be in the least restrictive setting and preferably within 60 miles of the child's home. FCMHA requires evidence that all local resources are exhausted prior to going outside the catchment area. Additionally, all services should be exhausted to keep a child in his own home prior to considering out of home placement. These services would include Intensive In-home Services. When out of home care is required, Therapeutic Foster Care is considered best practice and should be utilized before a higher level of care is pursued.

### **Out of Home Placement Procedures:**

- Any request for out of home placement shall be reviewed by the Hard to Place/Serve Committee of the Community Collaborative.

- Please find attached a flyer about the Committee and Procedures for the Hard to Place/Serve Committee.
- When the child is placed out of home, the clinical home staff is responsible for the placement notification required in 10A NCAC 27G .0506 – Communication Procedures for Out of Home Community Placements.

The Clinical home staff shall make the notification by e-mail, fax or hard copy within three business days after out of home placements occurs. In case of an emergency, notification may be by telephone with written notification occurring the next day. The following entities shall be notified.

- (1) Legal Guardian;
- (2) Other representatives involved in the care and treatment of the child or adolescent;
- (3) Host community provider; and
- (4) Host community representatives (may include the court counselor, County DSS, regional Children's Developmental Services Agencies (CDSA) or the LEA.

Notification shall be completed on a form provided by the Division of MH/DD/SAS.

- (1) Child or adolescent information: name, date of birth, grade, identification number, social security number, date of placement out of community;
- (2) Parent/legal guardian information: name, address, and telephone number
- (3) Home and host DSS information: county; contact person name, address, and telephone number;
- (4) Home and host Local Management Entity (LME): name of program; contact person name, address, telephone number.

**Compliance Verification Protocol for Out-of State Enrollment of Residential Services:**

- Please see Implementation Update #43 dated May 5, 2008 at the following web site for information about this protocol.

<http://www.dhhs.state.nc.us/mhddsas/servicedefinitions/servdefupdates/dmadmh5-5-08update43.pdf>

- **Please note that a Child and Family Representative, the LME Director and the Community Collaborative Chairman must be a part of this planning and decision-making process for such a referral to be made. The LME Director and the Chair of the Community Collaborative must sign the Out of State placement**

**acknowledgement/support statement agreeing with the referral and assuring compliance with all policies and procedures have been followed and all in state resources have been exhausted.**