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000. LEGAL AUTHORITY.
The Idaho Legislature has delegated to the Department of Health and Welfare, as the state mental health authority, the responsibility to ensure that mental health services are available throughout the state of Idaho to individuals who need such care and who meet certain eligibility requirements under the Regional Mental Health Services Act. This chapter is authorized under the Regional Mental Health Services Act, Title 39, Chapter 31, Idaho Code, as well as Sections 56-1003, 56-1004, 56-1004A, 56-1007, and 56-1009, Idaho Code. (7-1-14)

001. TITLE AND SCOPE.
01. Title. The title of these rules is IDAPA 16.07.30, “Behavioral Health Community Crisis Centers.” (7-1-14)
02. Scope. These rules establish the benefit and eligibility process for behavioral health community crisis centers in the state of Idaho. These programs provide behavioral health crisis services to persons residing in Idaho. (7-1-14)

002. WRITTEN INTERPRETATIONS.
In accordance with Section 67-5201(19)(b)(iv), Idaho Code, this agency may have written statements that pertain to the interpretation of the rules of this chapter, or to the documentation of compliance with the rules of this chapter. These materials are available for public inspection and copying at cost in the main office of the Department of Health and Welfare, 450 West State Street, Boise, Idaho, 83702. (7-1-14)

003. ADMINISTRATIVE APPEALS.
Administrative appeals and contested cases are governed by the provisions of IDAPA 16.05.03, “Rules Governing Contested Case Proceedings and Declaratory Rulings.” (7-1-14)

004. INCORPORATION BY REFERENCE.
The following document is incorporated by reference in this chapter of rules: American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-V), Arlington, VA, American Psychiatric Association, 2013, copies of the manual are available from the American Psychiatric Association, 1000 Wilson Blvd., Arlington VA 22209-3901. A copy of the manual is also available for public review at the Department of Health And Welfare, 450 West State Street, Boise, Idaho, 83702. (7-1-14)

005. OFFICE – OFFICE HOURS – MAILING ADDRESS – STREET ADDRESS – TELEPHONE NUMBER – INTERNET WEBSITE.
01. Office Hours. Office hours are 8 a.m. to 5 p.m., Mountain Time, Monday through Friday, except holidays designated by the state of Idaho. (7-1-14)
02. Mailing Address. The mailing address for the business office is Idaho Department of Health and Welfare, P.O. Box 83720, Boise, Idaho 83720-0036. (7-1-14)
03. Street Address. The business office of the Idaho Department of Health and Welfare is located at 450 West State Street, Boise, Idaho 83702. (7-1-14)
04. Telephone. The telephone number for the Idaho Department of Health and Welfare is (208) 334-5500. (7-1-14)
05. Internet Websites. The Department internet website is found at http://www.healthandwelfare.idaho.gov. (7-1-14)
006. CONFIDENTIALITY OF RECORDS AND PUBLIC RECORDS ACT COMPLIANCE AND REQUESTS.

01. Confidentiality of Records. Any disclosure of confidential information used or disclosed in the course of the Department’s business is subject to the restrictions in state or federal law, federal regulation, and IDAPA 16.05.01, “Use and Disclosure of Department Records.” (7-1-14)

02. Public Records Act. The Department will comply with Title, 74, Chapter 1, Idaho Code, when requests for the examination and copying of public records are made. Unless otherwise exempt, all public records in the custody of the Department are subject to disclosure. (7-1-14)

007. -- 008. (RESERVED)

009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

01. Compliance With Department Criminal History and Background Check. All owners, operators, employees, transfers, reinstated former employees, student interns, contractors, and volunteers who provide direct care or services, or whose position requires regular contact with clients, must comply with the provisions in IDAPA 16.05.06, “Criminal History and Background Checks.” (7-1-14)

02. Availability to Work or Provide Service. An individual listed in Subsection 009.01 of these rules is available to work on a provisional basis at the discretion of the employer or agency once the individual has submitted his criminal history and background check application, it has been signed and notarized, reviewed by the employer or agency, and no disqualifying crimes or relevant records are disclosed on the application. An individual must be fingerprinted within twenty-one (21) days of submitting his criminal history and background check application. (7-1-14)

a. An individual is allowed to work or have access to clients only under supervision until the criminal history and background check is completed. (7-1-14)

b. An individual, who does not receive a criminal history and background check clearance, or a waiver granted under the provisions in this chapter, may not provide direct care or services, or serve in a position that requires regular contact with clients in a behavioral health community crisis center. (7-1-14)

03. Waiver of Criminal History and Background Check Denial. A certified or uncertified individual who is seeking to provide Peer Support Specialist, Family Support Partner, or Recovery Coach services that receives an unconditional denial or a denial after an exemption review by the Department’s Criminal History Unit, may apply for a Behavioral Health waiver as described in IDAPA 16.07.15 “Behavioral Health Programs,” Section 009. (7-1-18)

010. DEFINITIONS AND ABBREVIATIONS.

For the purposes of these rules, the following terms are used as defined below: (7-1-14)

01. Adolescent. An individual between the ages of fourteen (14) and eighteen (18). (7-1-14)

02. Adult. An individual eighteen (18) years of age or older. (7-1-14)

03. Applicant. An adult individual who is seeking crisis services through a behavioral health community crisis center who has completed, or has had completed on his behalf, an application for services. (7-1-14)

04. Behavioral Health Community Crisis Center. An outpatient facility operated 24 hours a day, 7 days a week, 365 days a year by a hospital or mental health center that provides evaluation, intervention, and referral for individuals experiencing a crisis due to serious mental illness or a serious mental illness with co-occurring substance use disorder. The facility may not provide services to a client for more than twenty-three (23) hours and fifty-nine (59) minutes from the time the client arrives at the facility. The facility must discharge or transfer the client to the appropriate level of care. (7-1-14)
05. **Child.** An individual under the age of fourteen (14) years. (7-1-14)

06. **Client.** A person receiving services through a behavioral health community crisis center. The term “client” is synonymous with the following terms: patient, participant, resident, consumer, or recipient of treatment or services. (7-1-14)

07. **Department.** The Idaho Department of Health and Welfare or its designee. The Department is designated as the state mental health authority under Section 39-3124, Idaho Code. (7-1-14)

08. **Facility.** A behavioral health community crisis center, or a person authorized to act on its behalf. (7-1-14)

09. **Good Cause.** A valid and sufficient reason, as determined by the Department, for not complying with the time frame set for submitting a written request for a waiver by an individual who does not pass a criminal history and background check. (7-1-14)

10. **Individualized Service Plan.** A written action plan based on an intake assessment that identifies the applicant’s needs, strategies for services to meet those needs, treatment goals, and objectives. (7-1-14)

11. **Intake Assessment.** The collection of data, analysis, and review used to screen and determine whether an applicant is eligible for behavioral health community crisis services. (7-1-14)

12. **Outpatient Crisis Services.** An organized non-residential service, delivered in a variety of settings, in which behavioral health treatment personnel provide professionally directed evaluation and treatment for individuals experiencing crisis situations. (7-1-14)

011. -- 099. **(RESERVED)**

**GENERAL PROVISIONS OF BEHAVIORAL HEALTH COMMUNITY CRISIS CENTERS**

**(Sections 100 - 250)**

100. **ACCESSING BEHAVIORAL HEALTH COMMUNITY CRISIS CENTER SERVICES.** Services may be accessed by eligible applicants through an application and request for an initial intake eligibility assessment. (7-1-14)

01. **Application for Services.** An application for services is completed by the applicant upon entry into the facility. The voluntarily completed application serves as consent for further assessment of the applicant. (7-1-14)

02. **Intake Assessment.** The facility will conduct a mental health screening using a Department approved instrument. The facility staff will gather information as needed, in order to complete the screening and intake process. (7-1-14)

101. **INTAKE ASSESSMENT.** The facility must establish admission criteria that assess the individual client’s needs and the appropriateness of the services to meet those needs. (7-1-14)

01. **Eligibility.** At a minimum, admission criteria must require that the client:

   a. Be at least eighteen (18) years of age; 
   
   b. Demonstrate impairment, or symptoms, or both, consistent with a DSM-V diagnosable behavioral health condition; 
   
   c. Be medically stable, as defined by the Medical Director, with the exception of the person’s demonstrated impairment consistent with a DSM-V diagnosable behavioral health condition; and

(7-1-14)
d. Be in need of frequent observation on an ongoing basis. (7-1-14)

02. **The Facility Determines Eligibility and Capacity for Community Crisis Services.** The total number of adults who are eligible for behavioral health community crisis services through the facility will be established by the facility. The facility may, in its sole discretion, limit or prioritize behavioral health services, define eligibility criteria, or establish the number of persons eligible based upon such factors as availability of funding, the degree of financial need, the degree of clinical need, or other factors. (7-1-14)

03. **Ineligibility Conditions.** An adult who does not meet the requirements under Subsection 101.01 of this rule is not eligible for behavioral health community crisis services. An adult with a diagnosis of developmental disorder alone, may be eligible for Department services under IDAPA 16.04.11, “Developmental Disability Agencies,” for developmental disability services. (7-1-14)

102. **ELIGIBILITY DETERMINATION.**

01. **Notification of Eligibility Determination.** The facility will determine the adult’s eligibility for behavioral health community crisis services in accordance with Section 101 of these rules within one (1) hour of completing an intake assessment. The written notice will include:

   a. Client name and identifying information; (7-1-14)

   b. A statement of the decision; (7-1-14)

   c. A concise statement of the reasons for the decision; and (7-1-14)

   d. Referral to other appropriate community resources, when applicable. (7-1-14)

02. **Right to Accept or Reject Services.** If the facility determines that an applicant is eligible for services through the facility, an individual has the right to accept or reject services offered by the facility. (7-1-14)

03. **Reapplication for Community Crisis Services.** If the facility determines that an applicant is not eligible for services through the facility, the applicant may reapply after twenty-four (24) hours, or at any time upon a showing of a substantial, material change in circumstances. (7-1-14)

04. **Information that Must be Provided to the Participant.** Upon admission, or as soon as possible if not clinically appropriate upon admission, the facility must provide each client with the following: (7-1-14)

   a. A written statement of client rights which, at a minimum, includes the applicable patient rights; (7-1-14)

   b. A copy of the crisis response facility grievance procedure; and (7-1-14)

   c. The written rules of conduct, including the consequences for violating the rules. (7-1-14)

103. **EMERGENCY SERVICES.**

01. **Identification of Emergency Services Needed.** If emergency services are clinically necessary, as determined by facility staff, the facility will identify the emergency services that are consistent with the applicant’s level of need and a preliminary finding from the intake assessment. (7-1-14)

02. **Immediate Intervention.** The facility must ensure inpatient care is accessible through a transfer agreement for clients in need of a higher level of care. (7-1-14)

03. **Client Management.** Use of de-escalation techniques including physical and nonphysical methods, by trained staff is permissible in accordance with center policy. (7-1-14)

104. -- 199. (RESERVED)
200. INDIVIDUALIZED SERVICE PLAN.

01. Individualized Service Plan. A service plan will be developed by the facility in collaboration with the client, and may include service providers. This plan will be specific, measurable, and realistic in identification of the goal(s) for crisis stabilization, relevant areas of concern, and desired results as outlined in the Idaho Behavioral Health Standards. (7-1-14)

02. Referrals. The facility must make referrals for services that would help prevent or diminish future crises at the time of the client’s discharge. Referrals may include additional treatment, training, or community-based services, such as assistance securing housing. (7-1-14)

201. -- 205. (RESERVED)

206. OUTCOMES FOR COMMUNITY CRISIS CENTERS.
Outcomes for behavioral health community crisis centers are measured through the administration of a satisfaction survey and a standardized assessment tool. (7-1-14)

207. USE OF PUBLIC FUNDS AND BENEFITS.
Public funds and benefits will be used to provide services for eligible adults under Section 102 of these rules. Services are planned and implemented to maximize community integration and the individual’s ability to provide adequate safety and well-being in his community. Services are individually planned to meet the unique needs of each participant. (7-1-14)

208. -- 210. (RESERVED)

211. CLINICAL RECORDS.
Every behavioral health community crisis center must maintain, control, and supervise client records and is responsible for maintaining their quality in accordance with the requirements set forth in these rules. (7-1-14)

01. Active Client Records Kept at the Facility Site. The active client’s records must be kept at the facility site where the client is being treated. (7-1-14)

02. Compilation, Storage, Dissemination, and Accessibility of Client Records. The facility must have written policies and procedures governing the compilation, storage, dissemination, and accessibility of client records. (7-1-14)

03. Electronic Storage of Client Data. When a facility stores client data in electronic or other types of automated information systems, they must have security measures to prevent inadvertent or unauthorized access to such data. (7-1-14)

04. Length of Maintenance of Client Records. Client records must be maintained for a minimum of five (5) years from the date they are officially closed. (7-1-14)

212. CONTENTS OF CLIENT RECORDS.

01. Intake Assessment. As defined in Section 101 of these rules. (7-1-14)

02. Eligibility Determination. As defined in Section 102 of these rules. (7-1-14)

03. Service Plan. As defined in Section 200 of these rules. (7-1-14)

04. Progress Notes.

a. The facility must maintain progress notes for each client. (7-1-14)

b. The progress notes must be completed following the intake assessment and eligibility
determination and updated by the end of each shift into the client’s clinical record. (7-1-14)
c. The progress notes must describe at minimum the following:
i. Client’s physical condition;
ii. Mental status;
iii. Involvement in treatment services; and
iv. Contain a signature and date of staff member completing the note. (7-1-14)

05. Discharge Summary. A discharge summary must be entered into the client record and will contain:
a. Client status at discharge;
b. Treatment progress;
c. Summary of services provided; and
d. Referral for further treatment. (7-1-14)

213. -- 249. (RESERVED)

250. FINANCIAL RESPONSIBILITY FOR COMMUNITY CRISIS CENTER SERVICES.
Individuals receiving behavioral health community crisis services through the Department are responsible for paying for the services provided. Individuals must complete a “Fee Determination Form” prior to the delivery of behavioral health community crisis services. The financial responsibility for each service will be in accordance with the individual’s ability to pay as determined under Sections 300 and 400 of IDAPA 16.07.01, “Behavioral Health Sliding Fee Schedules.” (7-1-14)

251. -- 999. (RESERVED)
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