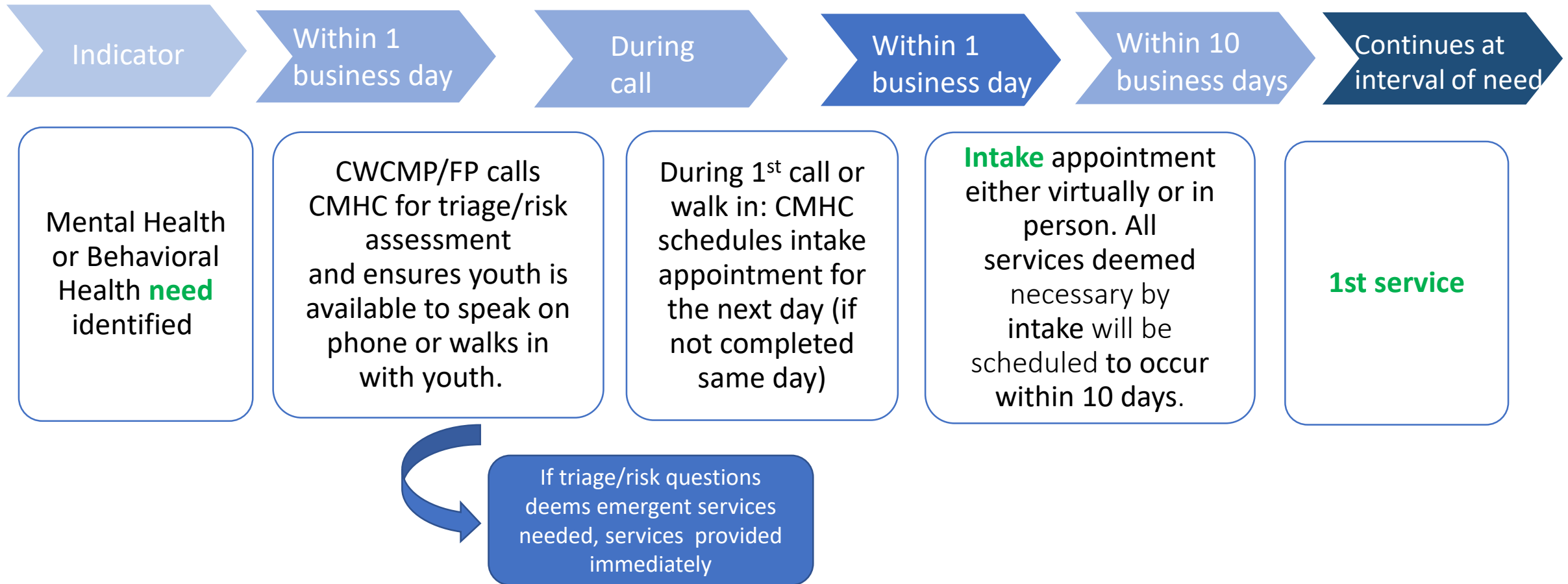


## Workflow as of 7/1/23



\* All youth in the custody of the state are considered **urgent** at point of contact (POC). POC is a call to the CMHC for a triage, risk assessment, or scheduling an intake appointment. All intakes are to be completed within 1 business day of contacting the CMHC. The triage/ risk assessment may be online, in person or telephonically. The intake may be online or in person. All information requested and not completed during intake appointment (such as the universal packet) should be sent to the CMHC CINC email address/ contact. When a youth in custody experiences a placement change the same email/contact should be used to notify the CMHC of the change and whether the youth will continue to receive services virtually or set up services at another CMHC service area.

**Emergent**= immediately, Same day

**Urgent**= 1 business day

**Routine** = within 10 days

FAQ : What phone number do I call to refer or set up mental and behavioral health services from a CMHC? The main number for the CMHC or the dedicated phone/email/contact line?

A: To set up new services the CWCMP or foster parent would call the main number for the CMHC and during the call make sure to identify the youth as in state's custody. All youth in state custody are predetermined to have an urgent risk assessment need and thus should have an intake scheduled within one business day of contacting CMHC.

FAQ: What if a youth has a placement change?

A: The CWCMP would contact the CMHC CINC email/contact to inform them of the placement change and whether service will be initiated at another CMHC or continue at the current location. The decision to stay at the current CMHC via telehealth options or transfer services to CMHC to where youth is residing is the decision of the CWCMP based on the needs of the youth.

FAQ: If CMHC services need to be transferred to a new CMHC due to a placement change how are services initiated and will a new risk assessment/ triage and intake be needed?

A: In addition to alerting the current CMHC that services will be transferred, the CWCMP or placement provider will need to call the new CMHC main number to initiate new services. A new triage, risk assessment, and intake will be needed. The CWCMP can coordinate with the CINC CMHC contacts to coordinate what UP information should be updated.

FAQ: What if the foster parent or placement provider is unable to attend the intake appointment the next business day? May they schedule it for another day?

A: No, the intake must occur within 1 business day. The CWCMP and placement provider should collaborate to ensure the intake occurs online or in person within 1 business day.

FAQ: Can the CWCMP still send the universal packet (UP) to set up services?

A: No. The UP is still required intake information needed by the CMHC. Sending the UP no longer initiates service. Services are initiated by calling the CHMC with the youth present for a triage/ risk assessment to be completed.

FAQ: Does the UP still need to be filled out?

A: Yes, the UP is still required intake information needed by the CMHC. It may be filled out and sent ahead of intake appointment or filled out and provided at intake appointment or the information may be given verbally during intake appointment.

FAQ: Sometimes not all the UP information is known. Will the intake/first service still be provided if all information is not yet available?

A: Yes, service provision and intake will be provided based on need not on complete paperwork. Please be sure to indicate on the UP what information is coming and what is unavailable. This allows the CMHC to determine if the information requested was mistakenly omitted, unknown, or not yet available. Additional information needed is to be sent to CINC CMHC contact/email as soon as possible.

FAQ: Does the UP have to be completed by the intake appointment?

A: No. The information may be given verbally at the appointment. Any information not provided during the intake appointment should be provided as soon as possible and sent to CMHC CINC contact.

FAQ: What if the youth has mental and behavioral health services in place yet needs an additional service like medication assessment or SED waiver application?

A: The same procedure applies.

FAQ: Does medication monitoring have a different timeframe?

A: Medication appointments and follow-up are considered a routine service and if identified at intake as a need will be scheduled and provided within 10 days and thereafter by youth need.

FAQ: Is the same procedure used to set up mental health in schools? A: The Mental Health Intervention Team (MHIT) utilizes a school liaison to refer and coordinate mental health services for the youth and their family. The CWCMP can reach out to the designated CINC CMP contact to determine if the MHIT collaborative program is available. The CWCMP or placement provider should initiate CMHC services through the same procedure beginning with calling the CMHC for a triage and risk assessment.

**FAQ: Are placement providers legally allowed to sign consent for treatment and release of information for mental and behavioral health services?** A: Yes, per PPM 5244 placement providers can legally sign these components of the UP.

**FAQ: Per PPM 5244 what is the due diligence expectation for getting parental consent?** A: Per PPM 5244, the CWCMP should reach out to the parent to share the mental health needs or concerns and seek consensus regarding mental health services, DCF suggests discussions regarding mental health services occur early in the case before the need for mental health services may even have arisen, starting with the 24-hour meeting with the parents. CWCMPs should document these conversation and can consider multiple means of communication with the parent such as email or text or other electronic messaging, depending on parent preference and individual CWCMP policies and procedures. If the parent has not responded within the 24 hours, the CWCMP/placement is expected to maintain the workflow timeline and present the youth for a risk assessment, and intake appointment. The CWCMP is expected to continue to reach out to the parent after the risk assessment and intake to provide updates to the parents and seek consensus regarding ongoing services.

**FAQ: What if the workflow described is not working well or individuals are unaware of component?**

A: Please reach out to your supervisor and follow your internal policy. Placement providers should alert the youth's CWCMP.

FAQ: What if the youth needing services is young, developmentally delayed, or nonverbal; can I still do a phone call to the CMHC to initiate services or must I walk in?

A: You may still utilize a phone call to initiate services. A risk assessment and triage will be completed based on the information you provide. The youth will need to be online or in person for the intake appointment.

Does the nonverbal youth need to be present during the phone call?

A: Yes, the phone call may be converted to an online platform so the assessor can visually observe the youth and any indicators you are reporting.

FAQ: What if a youth is experiencing night to night placements?

A: The CMHC the youth is currently receiving services from will continue to provide services virtually/in person as able. The CWCMP is to contact the CMHC CINC contact through the dedicated CINC email or phone line to alert the CHMC of the need for services to continue online due to placement move.

FAQ: What if a youth is experiencing night to night placements and needs services set up?

A: The CMHC service area where the youth came into custody is where services would be set up and provided in person/virtually as needed until placement stability is achieved. The CMHC should still be contacted within 1 business day of the identified need. The CMHC will provide services based on need and not location.