

**Bay-Arenac Behavioral Health Authority
Policies And Procedures Manual
Attachment to C04:S07:T05 Transition, Transfer and Discharge**

Program Specific Discharge Criteria

- 1) General Children's Programs:
 - a) The identified child/youth is placed in long-term residential care outside of the catchment area and is not expected to return to the guardian's home.
 - b) The identified child turns 18 and thus is no longer eligible for Children's Services. A Transfer to adult services would take place as medically necessary.
 - c) The child or adolescent's total current Child Adolescent Functional Assessment Scales (CAFAS) or Preschool Early Childhood Functional Assessment Scales (PECFAS) score is 40 or less without a score of 30 on any of the subscales.
- 2) Specialty criteria for Infant Mental Health:
 - a) The infant's primary caretaker has been judged to be mentally ill and unresponsive to further intervention by the IMH Specialist, dangerous to herself/himself or others, or unable to care for herself/himself or dependent children. In this situation, the case will require additional review with the Program Supervisor who will determine an appropriate disposition that will safeguard the caretaker's welfare and that of the dependent children.
 - b) In the IMH Specialist's judgment, the primary caretaker has not benefited from treatment and the children are not in immediate jeopardy due to neglect or abuse by the parent or any other adult responsible for their care.
 - c) In the IMH Specialist's judgment, the primary caretaker and/or other adults in the home have been found to be non-cooperative, or are found to be disruptive and/or dangerous with respect to the health and safety of the IMH Specialist, or if the situation is deemed to be dangerous toward the children, the IMH Specialist shall also file a report with Children's Protective Services.
 - d) The infant has been removed from the home by the Family/Probate Court and has been placed in foster care without a plan for return to the home within six (6) months.
 - e) The primary caretaker is deceased, is incarcerated for six (6) months or longer, or has had his/her parental rights terminated, and the appointed caregiver is ineligible for services, refuses services, or does not require services.
 - f) The infant is deceased. The family unit may continue to receive services for up to three (3) months to focus on resolution of grief/loss related to death of the child.
- 3) Specialty criteria for children and adults with SMI who are stabilized on medication or removed from medications:
 - a) If the child or adult remains stable after medications have been removed for 3 months, the child or adult will be discharged. If the child or adult's symptoms reappear or he/she is not stable, the child or adult will continue to receive psychiatric services.

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- b) If the child or adult is deemed stable and only in need of maintenance care.
- 4) Specialty criteria for individuals receiving emergency services:
 - a) The crisis has been resolved to the greatest extent possible.
 - b) Referral to other appropriate services has been completed for those instances where additional services of a non-emergent nature are needed or where the situation can be dealt with only by another agency.
 - c) Follow up has been completed to determine the crisis is resolved and the individual has received other necessary services identified during the crisis intervention.
- 5) Specialty criteria for adults receiving case management services or ACT:
 - a) If the individual is non-responsive to treating staff member's contacts via telephone, letter or face to face and the individual is acutely mentally ill, dangerous to self or others, and/or unable to care for themselves, these individuals will not be discharged. The treating staff member will consult with his/her immediate supervisor to determine if a mental health petition and pickup order should be initiated.
 - b) If the individual is non-responsive to treating staff member's contacts via telephone, letter or face to face and the individual is on deferment status or court order, the treating staff member will consult with the treating prescriber and/or immediate supervisor to determine if the deferment or court order should be pulled. In either case, the treating psychiatrist will need to be willing to provide expert witness testimony at the individual's hearing at Probate Court.
- 6) Specialty criteria for individuals receiving services at Saginaw Meadows Crisis Residential Treatment Program. See Policy and Procedure C04-S04-T32: "Saginaw Meadows Crisis Residential Treatment Program- Exit/Discharge and Follow Up"
- 7) Specialty criteria for individuals receiving residential services/care:
 - a) The individual's program needs will be reviewed regularly through the IPOS. If it is determined that an individual's needs could be better met by a setting other than the individual's current placement setting, alternatives will be reviewed and exit arranged.
 - b) If an individual or his/her guardian terminates a residential services program or an individual exits a BABHA sponsored residential facility, follow up will be provided by BABHA staff to assess for any needed case management, ancillary, or support services.
 - c) The individual is declining treatment or not following program or home rules or regulations, despite attempts to address these issues.
 - d) Consent for treatment is withdrawn and it is determined that the individual does not meet criteria for the inpatient level of care for either mental health or substance use services.
 - e) The individual is not making progress towards treatment goals and there is a reasonable expectation of progress.

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- f) The individual no longer meets admission criteria or meets criteria for a more intensive level of care.
 - g) The program requests that the individual be discharged due to his/her ability to function at a level of care, following repeated attempts at remediation.
- 8) Specialty criteria for individuals receiving services at North Bay Center:
- a) The individual has reached the goals established in his/her plan of service.
 - b) The individual or his/her guardian has withdrawn from services as evidenced by:
 - c) Repeated, documented non-attendance of the program for 30 days or longer
 - d) Taking up residence outside of Bay or Arenac counties
 - e) Communication (phone, written or face to face) indicates a desire to withdraw from the program.
 - f) The individual's condition has deteriorated to such an extent that he or she is no longer able/want to participate in the services or activities.