

Limited Mental Health Assisted Living Facilities (LMH-ALF)

- Requirement:** s.394.4574, F.S.
- Frequency:** Monitoring required annually, or more frequently as indicated
- Due Date:** Data report from monitoring due annually with July data submission;
ALF Plan due December 1st annually
- Description:**

Section D. 22 *Special Provisions* of the contract states:

“The Managing Entity will review samples of case management records that will document services to individuals residing in Assisted Living Facilities with Limited Mental Health Licenses. A specific program monitoring tool that has been approved by the Department will be used for these reviews. These reviews for facilities in the circuits listed in **Section B.1.b.** will be done by the Managing Entity during the Subcontractors' annual monitoring onsite visits. The results of these reviews and any applicable corrective actions will be reported to the Department in accordance with the Managing Entity's current monitoring policy and procedures.”

Monitoring of Mental Health providers serving residents of LMH-ALFs

The Managing Entity, as the agent of the Department, is responsible per s. 394.4574, F.S. to assure that its contracted providers complete the following actions:

- A mental health resident as defined in s. 394.4574, F.S., has been assessed by a mental health professional to be appropriate to reside in a limited mental health assisted living facility;
- A cooperative agreement to provide 24/7 emergency access information is developed between the mental health care services provider and the administrator of the ALF-LMH;
- A case manager is assigned for each mental health resident and that person facilitates the completion of the community living support plan and cooperative agreement;
- The community living support plan to identify needs and services has been prepared by a mental health resident and a case manager in consultation with the administrator of the facility; and
- The ALF is provided with documentation that the individual meets the definition of a mental health resident.

To this end, the Department has developed a monitoring tool for the Managing Entity and templates for use by the mental health providers. See ALF Monitoring Tool 2012 (Appendix G); Cooperative Agreement Template (Appendix H); and Community Living Support Plan Template (Appendix I).

A report will be submitted annually (with the July data submission) that rolls up the fiscal year region-wide data captured from the ALF Monitoring Tool. The report will indicate % of mental health provider record compliance with each standard and applicable corrective actions taken.

Annual Plan

Section 394.4574, F.S., requires each Department of Children and Families region to submit an annual plan for ensuring services to residents in LMH-ALFs. This plan will cover each circuit that the Managing Entity is responsible for and is due to the SAMH headquarters, Mental Health Unit, December 1st annually. The plan must include a training plan to comply with section 429.075, F.S which requires the Department to approve or provide mental health training to LMH-ALF staff. The Department has updated training materials (July 2012) and requires that these materials be used. Annual plans must include the following sections:

- I. Public Input for regional ALF-LMH Plan as required per s. 394.4574 (3), F.S.
Attach minutes of public meetings held within the last year related to providing services to individuals residing in LMH-ALFs, this Annual Plan, and other ALF issues, including a copy of the roster of those attending.
- II. Describe how the region will ensure that the standards per s. 394.4574, F.S. are met.
Include frequency of mental health provider monitoring by the Managing Entity, method of monitoring, and sample size. The Managing Entity must first identify individuals living in ALFs and then of those, identify a minimum of 20% sample for each mental health provider.

See Monitoring Tool (Appendix I) for standards.

- III. Describe how the region will address the training requirements per s. 429.075, F.S.
Each region is responsible for mental health training or arranging for training of the LMH-ALF direct service staff within the region. Note that the minimum required training materials are available from the Mental Health office at DCF headquarters. The training is designed to be 8 hours. Training events should be offered at least every 60 days, or as appropriate to the region.

Attach agenda or list any training held within the last year including dates, locations, trainers, and a roster of those attending.

Indicate schedule for trainings for the upcoming year, including proposed dates, locations, and trainers.



Monitoring Tool Mental Health Providers Serving Residents in Limited Mental Health Assisted Living Facilities

Date of Audit: _____

Mental Health Provider: _____ Address: _____

Staff Conducting Audit: _____

CITATION		Record 1 Compliance		Record 2 Compliance		Record 3 Compliance	
		YES	NO	YES	NO	YES	NO
ELIGIBILITY AND ASSESSMENT							
394.4574 (1)	Documentation shows that the individual meets the definition of a mental health resident (the individual receives SSDI; or SSI and Optional State Supplementation (OSS)).						
394.4574(2)(d)	Is the documentation that the resident meets the definition of a mental health resident provided to the ALF administrator within 30 days of admission?						
394.4574(2)(a)	Has an assessment been completed by the resident's Mental Health Provider to document appropriateness for ALF placement?						
394.4574(2)(a)	Was the above assessment conducted by a psychiatrist, clinical psychologist, clinical social worker, or psychiatric nurse (or an individual who is supervised by one of these professionals)?						
394.4574 (2)(e)	Has the provider assigned a case manager to the resident? Note: If the resident refused case management services, there is documented evidence of refusal.						
N/A	Does the case manager visit the resident at least monthly? Note: During visits, the case manager should also meet with ALF administrator/ staff.						
COOPERATIVE AGREEMENT							
394.4574(2)(b)	The provider has a current copy of the Cooperative Agreement signed by the provider and the ALF-LMH administrator (Agreement may cover all residents; verify ALF-LMH licensure)						
394.4574(2)(b)	The Cooperative Agreement specifies directions for accessing emergency and after-hours care for the mental health resident(s).						



Monitoring Tool Mental Health Providers Serving Residents in Limited Mental Health Assisted Living Facilities

CITATION	COMMUNITY LIVING SUPPORT PLAN (CLSP)	Record 1 Compliance		Record 2 Compliance		Record 3 Compliance	
		YES	NO	YES	NO	YES	NO
394.4574(2)(c)	The provider has a copy of the Community Living Support Plan for each mental health resident in ALF-LMH? (The CLSP and the Cooperative Agreement may be in one document)						
394.4574 (2)(c) 58A-5.029 FAC	CLSP was prepared with and signed by: 1. The mental health resident (if refusal, documentation of refusal is found) 2. The mental health case manager 3. The ALF administrator, or the administrator's designee						
394.4574(2)(c) 429.02 (7) 429.075(3) 58A-5.029 FAC	The plan includes information about: 1. The specific needs of the resident 2. Specific services (including frequency and duration) to be provided by mental health provider 3. Other services/activities (including frequency and duration) to be provided by mental health provider 4. Obligations of the ALF to assist/facilitate resident attending appointments 5. Other services provided or arranged by ALF 6. Factors pertinent to the care, safety, and welfare including signs/symptoms that indicate immediate need for mental health services						
394.4574(2)(c) 58A-5.029(2) (c) (3) FAC	Was the CLSP completed and given to the ALF administrator within 30 days of admission, or within 30 days after ALF received the placement assessment (whichever is later)?						
394.4574(2)(e)	Is the CLSP updated annually?						