

DEPARTMENT OF MENTAL HEALTH

1600 - 9TH STREET
SACRAMENTO, CA 95814

(916) 654-2309



April 28, 1998

DMH LETTER NO.: 98-02

TO: LOCAL MENTAL HEALTH DIRECTORS
LOCAL MENTAL HEALTH PROGRAM CHIEFS
LOCAL MENTAL HEALTH ADMINISTRATORS
COUNTY ADMINISTRATIVE OFFICERS
CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

SUBJECT: STATEWIDE CRITERIA FOR CERTIFICATION OF RATE
CLASSIFICATION LEVEL (RCL) 13 OR 14 GROUP HOMES

REFERENCES: Supersedes DMH Information Notice No. 91-39, dated December 9, 1991;
DMH Letter No. 92-10, dated July 15, 1992; DMH Letter No. 92-11,
dated August 17, 1992; and DMH Letter No. 93-03,
dated February 4, 1993

EXPIRES: Retain until rescinded

The Department, in concert with the California Mental Health Directors Association and provider organizations, previously developed a single statewide certification process with criteria for RCL 13 or 14 group homes. Although this process and criteria have been in effect since July 1, 1992, this DMH Letter is being issued to remind counties and providers of this process and these criteria.

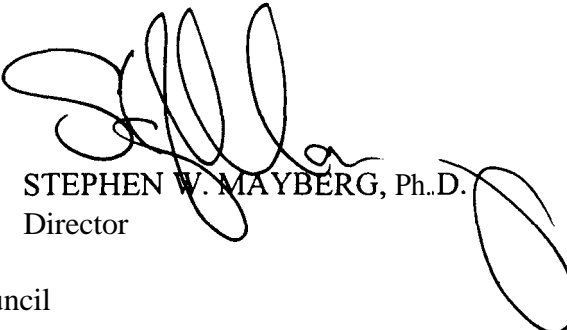
CERTIFICATION PROCESS AND CRITERIA
FOR RCL 13 OR 14 CERTIFICATION

The Department of Mental Health shall consult with the host county mental health agency prior to RCL 13 or 14 certification. To be certified as an RCL 13 or 14, the group home must:

1. Be able to provide individual, group, or family therapy; provide for the prescription, monitoring and assistance in self administration of psychotropic medications; and, provide the structured milieu services appropriate for each child's needs as described in the facility's program statement.
2. Provide 24-hour a day availability of services by a psychiatrist.

3. Provide an assessment by a psychiatrist as a part of the initial assessment.
 - a) Every child on psychotropic medication shall be seen by a psychiatrist at least once every six weeks.
 - b) The course of treatment for all children who are not on medication shall be reviewed in consultation with the treating psychiatrist every 90 days. The result of review shall be documented in each child's record within five working days after the review.
4. Have a specific plan/arrangement for emergency psychiatric hospitalization or have a written agreement with the local mental health agency for emergency psychiatric hospitalization.
5. Have specific behavioral interventions outlined and available to deal with severely acting-out children.
6. Provide culturally competent services including appropriate bilingual capability.
7. Provide one full time equivalent (FTE) licensed, certified, registered or **waivered** mental health professional for every eight (8) children.
8. Have one-to-one staffing capability available, as necessary for the health and safety of the children.
9. Be willing to participate in an interagency review of the children upon request.
10. Provide for, or have, a written agreement with the local education agency for appropriate educational services.
11. Provide a discharge plan including a tentative discharge date for each child within 30 days of the admission date.

If you have any questions, please contact Al Schmid, Ph.D, or Michael Desrys in Licensing and Certification at (9 16) 654-2396.


STEPHEN W. MAYBERG, Ph.D.
Director

cc: California Mental Health Planning Council
Chief, Technical Assistance and Training