



STATE OF CONNECTICUT
DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
A Healthcare Service Agency

DANNEL P. MALLOY
GOVERNOR

PATRICIA A. REHMER, MSN
COMMISSIONER

Department of Mental Health and Addiction Services

The policies and procedures regarding the certification of Intermediate Duration Acute Psychiatric Care Beds are as follows:

Sec. 1 Scope

These policies are issued pursuant to Section 17a-485h for the purpose of establishing the requirements for certification of intermediate duration acute psychiatric care beds in general hospitals to provide inpatient services for persons with psychiatric disabilities.

Sec. 2 Definitions

As used in sections 17a-485h-1 to 17a-485h-6 inclusive, of the Regulations of Connecticut State Agencies:

- (1) "Co-Occurring substance use disorder" means a concurrent psychiatric disability and substance use disorder;
- (2) "Commissioner" means the commissioner of the Department of Mental Health and Addiction Services (DMHAS);
- (3) "DMHAS" or "department" means the state of Connecticut Department of Mental Health and Addiction Services;
- (4) "DSM-IV" means the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition;
- (5) "Distinct unit" means a contained area within a general hospital that is designated for the provision of a specific level or type of medical care a specific category of patients;
- (6) "General hospital" means a facility that meets and maintains all applicable licensing and certification requirements of federal and state statutes or regulations for general hospitals;
- (7) "Individualized treatment" means treatment designed to meet a particular individual's needs, guided by a recovery plan that is directly related to a specific assessment of the individual;
- (8) "Intermediate duration acute psychiatric care beds" means beds on a distinct unit of a general hospital that are used for individuals receiving intermediate duration acute psychiatric care;
- (9) "Intermediate duration acute psychiatric care" means an extended period of intensive rehabilitation provided to an individual with a documented DSM IV Axis I or Axis II diagnosis who exhibits acute psychiatric symptoms that

require ongoing treatment/evaluation delivered in a hospital setting by a specialized multi-disciplinary team focused on clinical stabilization, psychiatric rehabilitation, skill development and continuous observation during an average length of stay of 30-45 days;

(10) “Joint commission” means the entity formerly known as the Joint Commission on Accreditation of Healthcare Organizations (JCAHO);

(11) “Local mental health authority” or “LMHA” means an agency that is operated or contracted by DMHAS and that has been designated as the lead oversight agency for the delivery of services for persons with psychiatric disabilities in their immediate geographic area;

(12) “Multidisciplinary team” means the group of varied types of licensed medical professionals and non-licensed medical para-professionals that has been designated to oversee the care of an individual or group of individuals receiving services;

(13) “Psychiatric disability” means a mental impairment that substantially limits or significantly interferes with one or more major life activities;

(14) “Psychiatric rehabilitation” or “rehabilitation” means the restoration of an optimum state of mental health through the use of teaching basic living skills and prolonged coaching for the specific purpose of mitigating the effects of a serious and persistent mental health disorder;

(15) “Recovery” means a process of restoring or developing a positive and meaningful sense of identity apart from one’s psychiatric disability or substance use disorder and then rebuilding one’s life within the limitations imposed by that disability or disorder;

(16) “Skill development” means the acquisition of basic living skills necessary to the management of one’s psychiatric disability and living successfully in a community setting;

(17) “Substance use disorder” means a condition related to one’s misuse or dependence on a legal or illegal psychoactive substance that typically includes significant adverse consequences.

Sec. 3 Application for Certification

(a) A general hospital may submit an application for certification of intermediate duration acute psychiatric care beds. Such application shall be in the form and manner required by DMHAS. The application may be obtained on the DMHAS website at: <http://www.ct.gov/dmhas>

(b) At a minimum, the following information and documentation shall be included in the application:

(1) Name and address of the general hospital;

- (2) Name and telephone number of a contact person;
- (3) Number of proposed intermediate duration acute psychiatric care beds;
- (4) Location of proposed intermediate duration acute psychiatric care beds, including an attached floor plan, demonstrating that the beds are located within a distinct unit;
- (5) Experience in providing intermediate duration acute psychiatric care
- (6) Documentation of staff credentials, licenses, competencies, and languages spoken and qualifications to meet specialized needs of individuals needing intermediate duration acute psychiatric care;
- (7) Proposed staff to client ratio, including a detailed table of organization;
- (8) A copy of the state-required facility license(s);
- (9) Proof of professional liability coverage; and
- (10) Description of how proposed intermediate duration acute psychiatric care beds will impact upon statewide access and distribution of existing services and resources.

(c) A general hospital shall return a completed application to DMHAS. Applications will be accepted by DMHAS on a rolling basis. Such applications shall be mailed to: DMHAS, Chief of Staff, 410 Capitol Avenue, 4th floor, Hartford, CT 06134. It is DMHAS' sole discretion to accept or not to accept the application and may require the hospital to submit another application if the application is deemed incomplete.

Sec. 4 Certification Process

(a) DMHAS, in its sole discretion, will determine whether a general hospital satisfies the requirements for certification of intermediate duration acute psychiatric care beds and that there is a demonstrated need for such services. Intermediate duration acute psychiatric care beds cannot exceed twenty (20) beds per hospital and forty (40) beds statewide.

(b) To make its determination, DMHAS will review the application and supporting documents, verify the information received, conduct on site visit(s), and evaluate the experience and qualifications of the general hospital. The general hospital shall be required to submit to DMHAS additional information or clarification, if any discrepancies or questions are identified. If a general hospital fails to provide information as requested, DMHAS may reject the application.

(c) The general hospital shall satisfy all certification requirements as specified in these policies. If any of the requirements are not satisfied, DMHAS shall not certify the general hospital. DMHAS shall notify the general hospital in writing of the outcome of the certification process.

(d) If DMHAS determines that a general hospital satisfies the requirements for certification of intermediate duration acute psychiatric care beds DMHAS will issue a letter of certification for a period of one (1) year. If DMHAS determines that a general hospital does not satisfy the requirements for certification. DMHAS will issue a letter of denial of certification.

(e) An applicant that is denied certification may request reconsideration of such denial. Such request shall be submitted in writing to the commissioner of DMHAS not more than ten (10) calendar days following the date of receipt of the letter of denial of certification. DMHAS shall respond in writing not more than ten (10) calendar days following the date of receipt of the letter requesting reconsideration.

Sec. 5 Certification Requirements

A general hospital must satisfy the following requirements for certification of intermediate duration acute psychiatric care beds:

A. General Requirements

1. Submit a completed application for certification
2. Have and maintain all applicable licensing and certification requirements of federal and state statutes or regulations.
3. Except as provided by state law, maintain professional liability insurance coverage of at least three million dollars (\$3,000,000) per occurrence and ten million dollars (\$10,000,000) in aggregate.
4. Maintain Joint Commission accreditation and Centers for Medicaid and Medicare Services (CMS) approval.
5. Demonstrate that there is a need for the proposed intermediate duration acute psychiatric care beds and describe how they will enhance statewide access and complement distribution of existing services and resources. In making its determination, DMHAS shall consider statewide access, availability and utilization of intermediate duration acute psychiatric care beds and other inpatient and outpatient psychiatric services that impact demand for such services.
6. Demonstrate ability to collaborate with multiple LMHAs.
7. Demonstrate ability to provide intermediate duration acute psychiatric care on a distinct unit that is designated for the provision of this specific level of care.
8. Employ or contract with the following specialized staff that hold the required license, certification, or registration issued by the State of Connecticut:

A medical director

A board-certified or board-eligible psychiatrist

A neurologist

A psychologist

Social workers

Rehabilitation workers and Occupational Therapist Registered (OTR)/Certified

Occupational Therapy Assistant (COTA)

A physician on site 24 hours per day, seven (7) days per week

Registered nurses on site 24 hours per day, seven (7) days per week

B. Specific Requirements

1. The ability to provide intermediate duration acute psychiatric care;
2. The ability to conduct an admission 24 hours per day, seven (7) days per week, **giving the Commissioner sole discretion to make adjustments to this requirement if so warranted;**
3. Diagnostic evaluation, including screening for a co-occurring substance use disorder, a bio-psychosocial assessment, a functional assessment and a risk assessment;
4. Receipt of approval from DMHAS for each admission;
5. A medical history and physical examination conducted upon admission;
6. Medication evaluation and monitoring, including the ability to do laboratory testing as needed ;
7. Medical management and monitoring of coexisting medical problems, except that life support systems or a full array of medical services are not required;
8. Appropriate observation and precautions for individuals who may be suicidal;
9. Development of a recovery plan with each individual;
10. Individual and group therapy and, when indicated, family therapy;
11. Rehabilitative social and recreational therapies, with emphasis on psychiatric rehabilitation techniques and training;
12. Continued/on-going discussion and linkage with the liaison from the LMHA area of choice to process the success and difficulties of community living prior to this admission;
13. Specialized policies and procedures, including staff training, for the care and management of individuals with persistent instability;
14. Specialized training procedures for clinical, support, and discharge planning staff that prepares them for the challenges presented by individuals who require intermediate duration acute psychiatric care; and

15. Discharge planning that begins upon admission to an intermediate duration acute psychiatric care bed and includes involvement of the LMHA to ensure the continuation of appropriate treatment and recovery support services or non-clinical services necessary to support stable functioning in the community.

Sec. 6 Re-Certification

Upon expiration of the initial certification period DMHAS, in its sole discretion, may issue a letter of re-certification provided that DMHAS determines that the general hospital continues to satisfy all of the certification requirements.

In making its determination DMHAS shall consider statewide access and distribution of existing services and resources.