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# Division of Behavioral Health (DBH)/ Developmental Disabilities (DD) Residential Transition Protocol

# Objectives

- 👤 Rationale for Updated Process
- 👤 Changes to the Process
- 👤 Overview of the Process

# Why is this process Necessary?

- 👤 The goal is to eliminate pain points that existed in previous processes
- 👤 To ensure consistent process across the state
- 👤 To form a more collaborative experience between state operated facilities and community providers
- 👤 To streamline the discharge process for state operated facilities

# Why the process is important from a DBH perspective

- 👤 To ensure clients are in their least restrictive setting and most appropriate treatment setting
- 👤 To open bed space and resources for clients on the Incompetent to Stand Trial (IST) wait list

# What Changed?

- 👤 State Support Coordination where available
- 👤 12 different variations of the same process
- 👤 E-mail template to intake

# Overview

Division of Behavioral Health  
and  
Division of Developmental Disabilities  
Residential Transition Process

# Step 1: Send Referral

- 👤 DBH send e-mail template or call intake
- 👤 DBH to send any collateral documentation
- 👤 RO intake contacts guardian or consumer to initiate intake process
- 👤 DD Intake then determines eligibility

# Preferred E-Mail Template

- 👤 Sent to your local Intake & Assessment at the Regional Office
- 👤 <https://dmh.mo.gov/dev-disabilities/regional-offices>



When making the referral to Intake and Assessment the following must be provided via email:

First Name		Middle Name		Last Name	
Former Last Name (Maiden name)					
DOB		SS #		DMH#	
Phone #				Email:	
Street Address					
City		Zip Code		County:	

Legal Guardian(s):		County:	
Relationship:			
Address		City, State Zip:	
Phone:		E-Mail:	

Primary Language:		Is an interpreter needed?	
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What type of Intellectual or Developmental Disability	
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I received Education Services in the following school district:

Name of School District:					
Street Address					
City		Zip Code		County:	

Doctors or Clinics that can document qualifying medical diagnosis (cerebral palsy, seizure disorder, head injury, autism spectrum disorder, etc.) prior to age 22

Doctor's Name					
Street Address					
City		Zip Code		County:	

Doctor's Name					
Street Address					
City		Zip Code		County:	

Referring Party (Social Worker)	
Email Address:	
Phone number:	

Referring Party Supervisor	
Email Address:	
Phone number:	

I have been in contact with the guardian/responsible party regarding this referral and they are in agreement to pursue services from DMH-DD. They understand that DMH-DD staff will be contacting them in the near future.

## Step 2: Eligibility

- 👤 Intake Department will send for collateral after receipt of valid intake packet
- 👤 Intake department will schedule appointment for assessment to determine functional limitations after receipt of collateral to determine the presence of an ID/DD diagnosis

# Step 3: ISP Development

- 👤 Consumer is assigned to a Service Coordinator
- 👤 Within 30 days an ISP meeting is completed
- 👤 Within 60 days ISP is submitted for review and approval
- 👤 ISP must be completed before they can go on the Consumer Referral Database (CRD)

# Step 4: Utilization Review Packet

- 👤 Assessment
- 👤 LOC entered
- 👤 Addendum/ ISP
- 👤 Comp Waiver requested
- 👤 Additional forms as needed

## Step 5: Consumer Referral Database

- 👤 Utilization Review (U.R.) confirms eligibility for placement on the CRD
- 👤 Consumer is placed on the CRD
- 👤 Consumer remains on the database until a provider is identified
- 👤 RPC will monitor the CRD and inform SC of any providers accepting

# Step 6: Locate DD Provider

- 👤 Meet and greet is scheduled between provider and consumer/family
- 👤 Housemates are Compatible
- 👤 Discussion of Services

# Anticipating Behavioral Risks

- 👤 A Behavior Support Plan (BSP) needs to be in place if there is not one already
- 👤 If there is not a BSP then the SC leads the team to complete a Safety Crisis Plan
- 👤 A Functional Behavioral Assessment (FBA) will be requested when the transition amendment is completed

# Step 7: DBH Discharge Process

- 👤 Our clients have lengthy hospitalizations / commitments to our facilities where they receive specialized treatment for their mental health needs
- 👤 We have an internal discharge process which requires administrative review and approval
- 👤 Discharges may require a risk assessment or other official reports

# Discharge Process Continued

- 👤 Discharges may also require approval from court or court notification
- 👤 NGRI discharges require Forensic Review Committee (FRC) approval, DBH Central Office and court approval for discharge
- 👤 PIST Discharges may require FRC approval as well as notification of discharge to the court

# Step 8: DD Transition Process

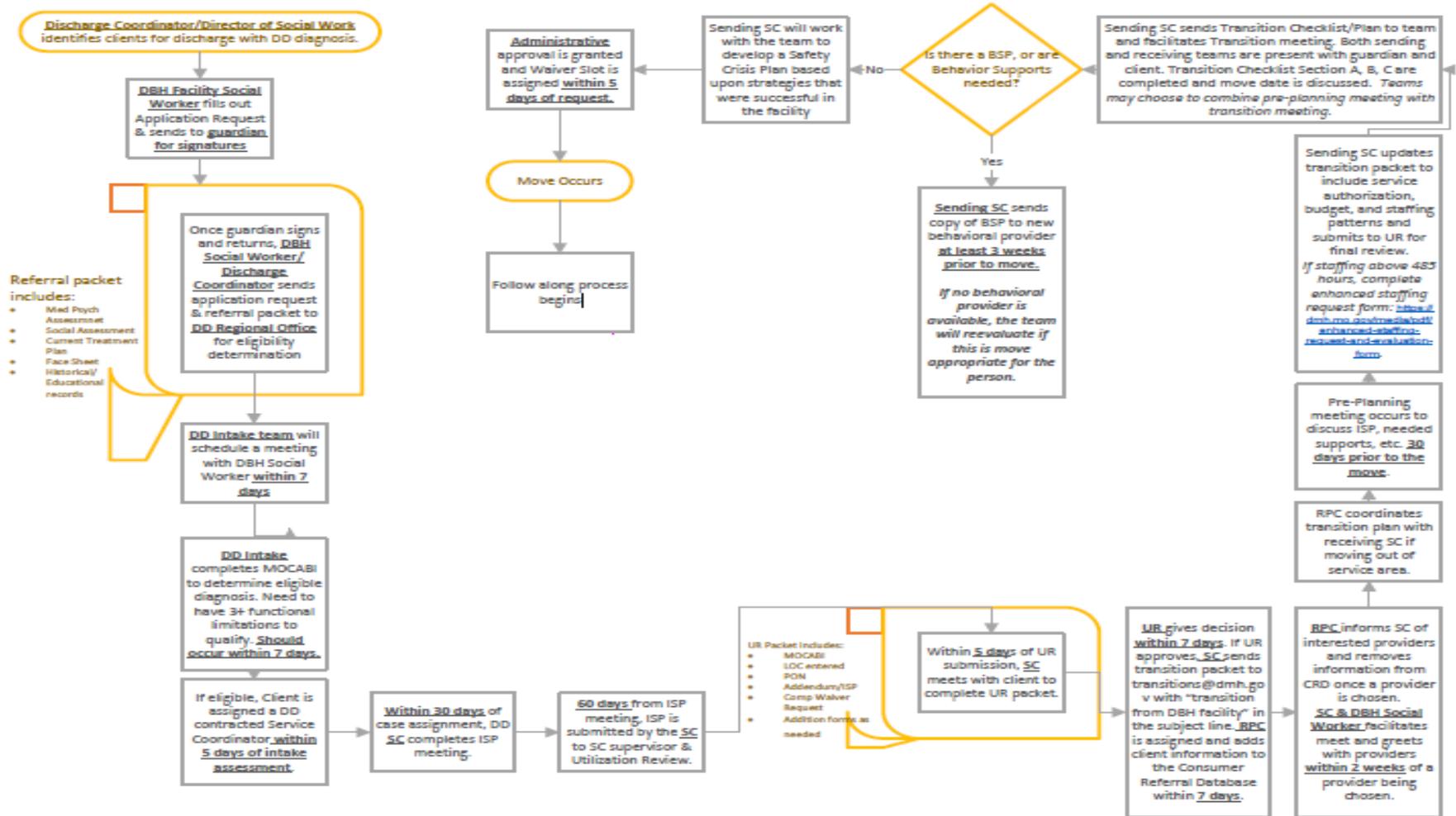
- 👤 The transition process, in its totality, is followed and executed
- 👤 This includes pre and post transition calls

# Important notes

- 👤 The sending SC is responsible for the approval of plans, budgets, and sharing other documents
- 👤 Receiving SC will report any issues to the sending SC
- 👤 Sending RO/SC will complete a health inventory within 7 days of the move

# Important Notes Continued

- 👤 A 30 day post move call will be held (transfer can be accepted at this point)
- 👤 60 day and 90 day calls can be held if needed
- 👤 It is up to the team to decide whether or not is appropriate



# Where to find Additional information

## Tier 2 Webpage

 <https://dmh.mo.gov/dev-disabilities/tiered-supports/tier-2>

## Community Transitions Webpage

 <https://dmh.mo.gov/dev-disabilities/community-transitions>

# Questions and further discussion

- 👤 Please feel free to ask any questions you may have after the presentation.





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