

Effective Date: 2/16/2021

Review Date: 2/16/2021

Revised Date: 02/16/2021

North Sound Behavioral Health Administrative Services Organization, LLC

Section 1500 – Clinical: Monitoring of Conditional Release (CR)/Less Restrictive (LRO)/
Assisted Outpatient Treatment (AOT) Order

Authorizing Source: HCA Contract

Approved by: Executive Director Date: 02/16/2021

Signature:

POLICY # 1562.00

SUBJECT: MONITORING OF CONDITINAL RELEASE (CR)/LESS RESTRICTIVE (LRO)/ASSISTED OUTPATIENT TREATMENT (AOT) ORDER

PURPOSE

The purpose of this policy is to ensure consistent monitoring activity for non-Medicaid individuals on a court order for outpatient behavioral health treatment.

DEFINITIONS

Assisted Outpatient Treatment (AOT) is an order for Less Restrictive Alternative (LRA) Treatment, for up to 90 days, from the date of judgement. AOT shall not order inpatient treatment.

Care Coordinator means a clinical practitioner who coordinates the activities of less restrictive alternative treatment. The care coordinator coordinates activities with the designated crisis responders (DCRs) that are necessary for enforcement and continuation of less restrictive alternative orders and is responsible for coordinating service activities with other agencies and establishing and maintaining a therapeutic relationship with the individual on a continuing basis.

Conditional Release (CR) is a revocable modification of a commitment, which may be revoked upon violation of any of its terms. (A commitment means the determination by a court that a person should be detained for a period of either evaluation or treatment, or both, in an inpatient or a less restrictive setting). This document specifies what the person needs to do to remain in the community.

Less Restrictive Order/Less Restrictive Alternative (LRO/LRA) means a program of individualized treatment in a less restrictive setting than inpatient treatment that includes the services described in RCW 71.05.585.

POLICY

In order to ensure the provision of services to individuals on a CR/LRO/AOT, BHAs must be certified for outpatient psychiatric and medical components of community support services and involuntary treatment services. Less restrictive court order treatment must be administered by a BHA that is licensed to provide and coordinate the full scope of services required under the court order, agrees to assume this responsibility.

Court Order Outpatient Treatment - Notification

For individuals involuntarily committed under Revised Code of Washington (RCW) 71.05 or 71.34, inpatient psychiatric facilities are required to provide notice of discharge and a copy of any court order outpatient treatment to the Designated Crisis Responder (DCR) office responsible for the initial detention and the DCR office in the county where the individual is expected to reside or receive treatment. Notification to the appropriate DCR office is required to occur as soon as possible and no later than one (1) business day after the

individual's discharge from the inpatient psychiatric facility. The DCR office located in the county where the individual is expected to contact the responsible BHA as soon as they are made aware of the court order.

The discharging inpatient facility is expected to contact the receiving BHA prior to the individual's discharge to assume responsibility of the court order.

PROCEDURES

1. The inpatient psychiatric facility must first contact the BHA to request the BHA assume responsibility of the State only funded CR/LRO/AOT. This contact must be a written request and is expected to occur prior to the individual's discharge from the inpatient facility.
2. BHAs shall ensure monthly evaluation of each committed individual for release from or continuation of the court order by documenting the individual's adherence to the conditions of the order. Treatment monitoring will include compliance violations over the last 30 days, in addition to, the next steps and plan. The monthly treatment monitoring shall be provided to the responsible DCR office.
3. The BHA Care Coordinator assigned to an individual ordered to LRA treatment shall submit an individualized plan for the individual's treatment services to the court that entered the order. An initial plan must be submitted as soon as possible following the intake evaluation and a revised plan must be submitted upon any subsequent modification in which a type of service is removed from or added to the treatment plan.
4. BHAs shall document each violation of the conditions of the court order and include an evaluation of the need to pursue revocation.
5. The BHA is responsible for providing follow up services with the individual as follows:
 - a. The BHA Care Coordinator will coordinate appropriate follow up needs with his/her supervisor.
 - b. The BHA Care Coordinator will notify the DCR office in writing if the individual does not attend the assessment appointment and documentation must include what attempts are going to be made to engage the individual.
 - c. The BHA and DCR offices may need to coordinate on further follow up needs as appropriate. This could include outreach, crisis alerts, affidavits, etc.
 - d. All BHA Care Coordinators will document their attempts to contact and engage the individual.
 - e. Any and all DCR involvement will be documented by the BHA.
6. BHAs providing less restrictive court order treatment for non-Medicaid individuals shall coordinate with North Sound BH-ASO for continuing stay needs and discharge planning.
7. In order to monitor individuals on court order outpatient treatment, BHA Care Coordinators shall prioritize the following:
 - a. The court order for outpatient behavioral health treatment is a tool to assist the individual in their recovery and to maintain stability and safety in the community;
 - b. An individual's participation in treatment;
 - c. Provide DCRs with information needed to support petitions.
8. DCRs shall maintain a system which tracks CRs/LROs/AOTs, as well as, ensuring BHAs are informed of the process for extending a CR/LRO/AOT.
9. Petitioning to extend the court order shall occur whenever the individual continues to meet the criteria for further commitment and when further less restrictive treatment will support the individual's recovery. Care coordinators are encouraged to consider information from all-natural supports and

other treatment providers. In this circumstance, the BHA Care Coordinator shall request an extension from the DCR office three to four (3 to 4) weeks prior to the expiration of the CR/LRO/AOT.

10. BHA Care Coordinators shall be fully educated and aware of the ability to continue or extend a court order outpatient treatment, even when the individual's circumstances do not warrant hospitalization or meet acute care criteria. The individual's past history of decompensation without continued involuntary outpatient treatment is important to consider when determining if the criteria for grave disability can be met.
11. A BHA assigned to monitor individuals may not discharge the individual from services during the duration of the court order.

Enforcement, modification or revocation of less restrictive court orders can be referenced in North Sound *Policy 1561.00 Revocation of Less restrictive/Conditional Release (LR/CR) Orders.*

ATTACHMENTS

None