



ADMINISTRATIVE RULES OF MONTANA



37.106.1853 SPECIALTY MENTAL HEALTH FACILITY: TREATMENT PROGRAM

- (1) Each patient must have an individual comprehensive treatment plan that must be based on an inventory of the patient's strengths and disabilities or mental impairment as defined by the mental health professionals on the multi-disciplinary treatment team and approved by the evaluating or staff psychiatrist.
- (2) An initial treatment plan for each patient must be formulated, written and interpreted to the staff by the staff psychiatrist as a part of the admission process.
- (3) A comprehensive treatment plan for each patient must be formulated no later than three full working days after admission by a multi-disciplined treatment team and the staff psychiatrist, and placed in the patient's records immediately following approval by the evaluating or staff psychiatrist. The staff psychiatrist and multi-disciplinary professional staff must also participate in the preparation of any major revisions of the comprehensive plan.
- (4) The comprehensive treatment plan must:
 - (a) be based on the patient's psychiatric evaluation;
 - (b) include clinical consideration of the patient's physical, developmental, psychological, age appropriate, family, educational, social, and recreational needs;
 - (c) specify the reason for admission and specific treatment goals, stated in measurable terms, including a projected timeframe for completed treatment; treatment modalities to be used; staff who are responsible for coordinating and carrying out the treatment; and expected length of stay and appropriate aftercare planning.
- (5) The facility must supply, to each individual being admitted and his or her family, significant other, or referral source, a description, in writing or publication form, of the treatment modalities it provides, including content, methods, equipment, and personnel involved. Each treatment program must conform to the stated purpose and objectives of the facility.
- (6) A multi-disciplinary treatment team must provide:
 - (a) daily clinical services to each patient to assess and treat the person's individual needs, services including appropriate medical, psychological, and health education services; and
 - (b) individual, family and group psychological counseling; and
 - (c) access to family members or spouses as part of the treatment plan of each patient when such involvement can be beneficial.
- (7) Upon admission of each patient, implementation of a discharge planning program must begin which will ensure that:

- (a) discharge planning is documented in the individual treatment plan for each patient; and
- (b) each patient, along with the necessary medical and other treatment information, is transferred or referred to appropriate facilities, agencies, or outpatient services, as needed, for continued, follow up, or ancillary care.

Authorizing statute(s): Sec. 50-5-103, MCA

Implementing statute(s): Sec. 50-5-103, MCA

History: NEW, 1991 MAR p. 2454, Eff. 12/13/91; TRANS, from DHES, 2002 MAR p. 185.