## DFCS 03 - DESIGNATED EVALUATION & STABILIZATION (DES) AND DESIGNATED EVALUATION & TREATMENT (DET) ADMINISTRATIVE GRANT PROGRAM

## I. PROGRAM OBJECTIVES

There is to be a partnership established with hospitals (Designated Evaluation & Stabilization (DES) and Designated Evaluation & Treatment (DET) facilities) and a non-profit organization to help those people that are involuntarily committed and/or are unable to pay for the stay. These grants recognize costs incurred by DES and DET facilities not captured in the rate setting to carry out this work on behalf of the State. The hospital will follow the rules set forth in regulation and as explained in the "State of Alaska Designated Evaluation & Treatment (DET) Program Manual."

A Designated Evaluation and Stabilization Facility may conduct emergency examinations and treatment under AS 47.30.700(a) and 47.30.710, including mental health evaluation; detain patients for no more than 72 hours for evaluation and treatment under AS 47.30.715; and provide crisis stabilization.

A Designated Evaluation and Treatment facility may provide mental health treatment services during the 30-day commitment period under AS 47.30.735 and any additional time allowed under AS 47.30.745(g).

## II. PROGRAM PROCEDURES

These grants are awarded to facilities designated by the department that accept involuntary commitment patients. Designated facilities provide:

The general facility description of services is as follows:

- 1. Staff members receive training to develop appropriate interactions with patients.
- 2. Properly trained and qualified staff handle the protection, security, and observation of patients.
- 3. Children under 18 years of age do not share a room with adults.
- 4. Discharge plans are initiated early in the evaluation or treatment process and the facility provides stabilization, establishes diagnoses, and initiates care with the goal of permitting the patient's early return to the community for follow-up care. Discharge planning at an evaluation facility includes determining whether a patient should be released or transferred to a treatment facility and whether the patient needs mediation.
- 5. Treatment is individualized and as necessary and the administrator shall hire or contract with staff to deliver necessary specialized care.
- 6. Subject to the disclosure restrictions of 42 CFR Part 2, for a patient who is also receiving treatment for alcohol or drug abuse at a facility that receives federal financial assistance as described in 42 CFR Part 2 and the local community mental health center or other aftercare agency is notified within 48 hours if a client from that center or agency, or an unassigned patient, is admitted for care, after obtaining a release for this notification from the patient.
- 7. A determination is made as to whether a patient is a candidate for placement and monitoring in the community's local crisis respite program and, if that is the case, ensure that the patient is placed in that program as soon as possible.

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8. Make reasonable efforts to determine if the patient has preferences or instructions for their care by consulting with the patient, the patient's health care provider, the patient's spouse or parent, a person in the patient's household, or a person designated by the patient (7 AAC 72.085).

## III. COMPLIANCE REQUIREMENTS AND SUGGESTED AUDIT PROCEDURES

- A. Types of Services Allowed and Unallowed -
  - 1. Compliance Requirements: The proposed budget will be fully compliant with the limitations described in the NC-RFP, and those detailed in 7 AAC 78.160 (Costs).

**Suggested Audit Procedures**: Review previous award budgets to determine that funds expended were for purposes specified in the grant. Review the following:

- a) Previously submitted budgets
- b) Budget documents including final revised budget and budget narrative specific to the program
- c) Grant Award, including all conditions
- 2. Compliance Requirement: The applicant must demonstrate the agency's sustainable fiscal and administrative capacity. Executive, administrative, and financial staff must be qualified, as indicated by the resumes of position holders uploaded as an element of the proposal. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

### **Suggested Audit Procedures:**

- a) The applicant must ensure procedures are in place to protect client confidentiality compliant with State and federal standards.
- b) The applicant will ensure its most recent financial audit was submitted to the appropriate state office, and any findings identified have been resolved.

<u>Federal Requirements:</u> Agencies spending \$750,000 or more total Federal Financial Assistance in the agency fiscal year may be required to comply with conditions of the Single Audit Act of 1984, P.L. 98-502, as amended by the Single Audit Act Amendments of 1996, P.L. 104-156, and as defined in 2 CFR 200.

<u>State Requirements:</u> Agencies spending \$750,000 or more total State Financial Assistance in the agency fiscal year are required to comply with the conditions of 2 AAC 45.010-090. The current regulations may be viewed at the State of Alaska, Department of Law website, <u>Document Library</u>, or copies may be obtained from the contact identified on the cover page of the NC-RFP.

### B. ELIGIBILITY -

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**Compliance Requirement**: A state agency, a political subdivision of the state, or a nonprofit organization, including a consortium that is a nonprofit organization, may apply for a grant under this chapter under 7 AAC 78.030.

**Suggested Audit Procedures**: Review articles of incorporation or other appropriate documents, licenses, certifications, and approvals, to determine status of agency.

### C. MATCHING, LEVEL OF EFFORT AND/OR EARMARKING REQUIREMENTS -

1. No match is required

### D. REPORTING REQUIREMENTS -

**1. Compliance Requirement**: The grantee must submit financial and progress reports in accordance with the requirements of the grant agreement

### **Suggested Audit Procedures:**

- a) Confirm if reports have been submitted and are being filed timely
- b) Confirm if reported expenditures agree with agency's general ledger
- c) Confirm expenditures are within the budget limits or grant provisions

### E. SPECIAL TESTS AND PROVISIONS -

Compliance Requirement: None required Suggested Audit Procedures: None required