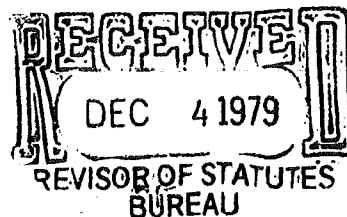


CERTIFICATE



STATE OF WISCONSIN)
) SS
DEPT. OF HEALTH & SOCIAL SERVICES)

TO ALL TO WHOM THESE PRESENTS SHALL COME, GREETINGS:

I, Donald E. Percy, Secretary of the Department of Health and Social Services and custodian of the official records of said department do hereby certify that the annexed rules relating to HSS 61.01, Standards for Community Mental Health, Developmental Disabilities and Alcoholism and Other Drug Abuse Services were duly approved and adopted by this department on December 3, 1979.

I further certify that said copy has been compared by me with the original on file in this department and that the same is a true copy thereof, and of the whole of such original.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the department at the State Office Building, 1 W. Wilson Street, in the City of Madison, this 3RD day of DECEMBER A.D. 1979.

SEAL:

D.E.P.
Donald E. Percy, Secretary
Department of Health & Social Services

ORDER OF THE
DEPARTMENT OF HEALTH AND SOCIAL SERVICES
ADOPTING, AMENDING
OR REPEALING RULES

Relating to rules concerning HSS 61.01, Standards for Community Mental Health, Developmental Disabilities and Alcoholism and Other Drug Abuse Services.

Analysis prepared by the Department of Health and Social Services: HSS 61.01-61.25 establishes minimum general standards for the provision of mental health, developmental disabilities and alcoholism and other drug abuse services by 51.42/.437 Community Boards. The purpose of the rules is to assure every Wisconsin citizen accessibility to the full range of quality professional services necessary to meet their individual disability needs regardless of the geographic location of their residence.

Specific disability group services are designated and boards are required to incorporate plans for those services in the annual coordinated plans and budget. To assure quality professional services, the rules establish requirements for the administrative structure of the boards, sets standards for qualifications of both board and program personnel and requires staff in-service training and educational leaves of absence. Also included are requirements for service eligibility affirming non-discrimination in service accessibility, client rights, client advocacy and continuity of care. The rules also stipulate the departments authority to prescribe a uniform cost reporting system and to set fee schedules.

Pursuant to authority vested in the Department of Health and Social Services by section 227.014(2), Wis. Stats., and sections 51.42(1)(a), 51.42(12), 51.437(16), 51.438(5), 51.45(8)(a), 51.45(9), 51.45(17)(b), the Department of Health and Social Services hereby repeals and adopts rules interpreting sections 51.42, 51.437 and 51.45, Wis. Stats., as follows:

Sections PW-MH 60.10, 60.20 and 60.30 are repealed and recreated as follows: HSS 61.01, to 61.25.

STANDARDS
COMMUNITY MENTAL HEALTH, DEVELOPMENTAL DISABILITIES
AND
ALCOHOLISM AND OTHER DRUG ABUSE SERVICES
GENERAL PROVISIONS

HSS 61.01 INTRODUCTION. These are standards for a minimum level of services. They are intended to establish a basis to assure adequate services provided by 51.42/51.437 boards and services provided by agencies under contract with the boards.

HSS 61.02 DEFINITIONS. The following definitions apply to all standards for community mental health, developmental disabilities, and alcoholism and

other drug abuse services. Note: For ease of reference, the definitions are categorized under general definitions, program element definitions and disability related definitions.

General Definitions

(1) "Board" means a board of directors established under sections 51.42/51.437, or 46.23, Wis. Stats.

(2) "Consultation" means providing assistance to a wide variety of local agencies and individuals. It includes indirect case consultation: the responding to specific requests of consultees to help resolve an individual case management problem or to improve the work function of the consultee. It includes problem related consultation: the providing of assistance to other human service agencies for educational purposes rather than individual case resolution. Consultation includes administrative and program consultation: the providing of assistance to local programs and government agencies in incorporating specific mental health, developmental disabilities and alcohol and other drug abuse principles into their programs.

(3) "Department" means the department of health and social services.

(4) "Education" means the provision of planned, structured learning experiences about a disability, its prevention, and work skills in the field. Education programs should be specifically designed to increase knowledge and to change attitudes and behavior. It includes public education and continuing education.

(a) Public education is the provision of planned learning experiences for specific lay or consumer groups and the general public. The learning experiences may be characterized by careful organization that includes development of appropriate goals and objectives. Public education may be accomplished through using generally accepted educational methods and materials.

(b) Continuing education is individual or group learning activities designed to meet the unique needs of board members, agency staffs, and providers in the community-based human service system. Learning activities may also be directed towards the educational goals of related care providers such as health care, social service, public school and law enforcement personnel. The purpose may be to develop personal or occupational potential by acquiring new skills and knowledge as well as heightened sensitivity to human service needs.

(5) "Employe or position, full-time," means as defined by the employing board or agency.

(6) "Public information" means information for public consumption provided through the use of mass media methods about services, programs, and the nature of the disability for which the services and programs are provided. It consists of such activities as writing news releases, news letters, brochures, speaking to civic groups or other assemblies, and use of local radio and television programs. Public information programs should be specifically planned and designed to inform.

Program Element Definitions

(7) "Day services, medical and non-medical," means non-residential comprehensive coordinated services to enhance maturation and social development and alleviate a person's problem related to mental illness, developmental disability, alcohol or other drug abuse. Day services provide medical or non-medical service or both on a regular basis for a scheduled portion of a 24 hour day.

(a) Medical day service includes supervised personal care, treatment and psychotherapy in a medically supervised setting.

(b) Non-medical day service includes counseling, training, and recreation in a non-medically supervised setting. This would include 24 hour day camps.

(8) "Emergency care I" means all outpatient emergencies including socio-emotional crises, attempted suicides, family crisis, etc. Included is the provision of examination, in accordance with s.51.45(11)(c), Stats., and if needed, transportation to an emergency room of a general hospital for medical treatment.

(9) "Emergency care II" means 24 hour emergency services provided on a voluntary basis or under detention, protective custody, and confinement. Services include crisis intervention, acute or sub-acute detoxification, and services for mental health emergencies. Clients are to be assessed, monitored, and stabilized until the emergency situation is abated. Included is the provision of examination, in accordance with s.51.42(11)(c), Stats., and transportation, if needed, to an emergency room of a general hospital for medical treatment.

(10) "Extended care" means a treatment oriented living facility service where supervision, training, and personal care are available and access to nursing and medical care is ensured during a 24 hour day. Extended care programs emphasize self care, social skills training, treatment, and recreation for dependent persons with mental disabilities and in need of extended care.

(11) "Inpatient" means a medically oriented residential service which provides continuous medical services on a 24 hour basis to enable an individual with problems related to mental illness, alcohol and other drug abuse to function without 24 hour medical support services.

(a) Children or adolescents shall not be placed in adult inpatient services for extended periods of time. Placement of an individual under 18 years of age in an adult program shall be for evaluation purposes only and shall not exceed 21 total days within a 3 month time span.

(b) Inpatient treatment of individuals under 18 years of age shall be provided in specialized inpatient programs which comply with standards specified in section PW-MH 60.71, Wis. Adm. Code.

(12) "Intervention" means activities designed to identify individuals in need of mental hygiene services, including initial assessment, to judge the presence of problems, such as mental illness, developmental disabilities, alcohol or other drug abuse. Intervention begins with assessment and includes

information and referral services, drop-in service and public information service. Activities which may initiate persons into the service, such as, rendering a judgment about the appropriate source of help, referral and arranging services.

(13) "Outpatient" means a non-residential program for persons with problems relating to mental illness, developmental disabilities, alcohol or other drug abuse to ameliorate or remove a disability and restore more effective functioning and to prevent regression from present level of functioning. Outpatient service may be a single contact or a schedule of visits. Outpatient program may include, but is not limited to, evaluation, diagnosis, medical services, counseling and aftercare.

(14) "Prevention" means activities directed toward the general population, or segments of the population, which is designed to increase the level of knowledge about the nature and causes of disabilities, change attitudes and take medical and environmental steps for the purpose of aiding persons before their problems develop into disabilities needing further services. Prevention activities include education services and consultation services.

(15) "Protective services" means services directed toward preventing or remedying neglect, abuse, or exploitation of children and adults who are unable to protect their own interests.

(16) "Research and evaluation" means the studying of causes, treatments and alleviations of problems as well as the formal application of techniques to measure the effectiveness of programs through the use of recognized statistical designs and evaluation procedures.

(17) "Sheltered employment" means non-competitive employment in a workshop, at home, or in a regular work environment for persons with a physical or mental handicap. A handicapped person is defined as any person who, by reason of physical or mental defect or alcohol or drug abuse, is or may be expected to be totally or partially incapacitated for remunerative occupation.

(18) "Special living arrangements" means special services in foster family homes, foster care institutions, halfway houses, respite care, community based residential facilities, and other special living arrangements.

(19) "Systems management" means activities, both internal and external to programs, to effect efficient operation of the service delivery system.

(a) Internal program management includes administration, objective setting, planning, resource acquisition and allocation and monitoring of staff.

(b) External activities include interagency coordination, consultation, and comprehensive planning for the purpose of providing an integrated continuum of services to those needing such a system of services.

(20) "Training" means education activities for staff of program which serve or could potentially serve individuals with problems related to mental illness, developmental disabilities, alcohol and other drug abuse, concerning

the nature, causes, and treatment of these disabilities for the purpose of better serving clients.

Disability Related Definitions

(21) "Alcoholic" means a person who habitually lacks self-control as to the use of alcoholic beverages, or uses such beverages to the extent that health is substantially impaired or endangered or social or economic functioning is substantially disrupted.

(22) "Autism" means a severe disorder of communication and behavior manifested during the early stages of life. The autistic child appears to suffer primarily from a pervasive impairment of cognitive or perceptual functioning, or both, the consequences of which may be manifested by limited ability to understand, communicate, learn, and participate in social relationships.

(23) "Cerebral palsy" means a term applied to a group of permanently disabling symptoms resulting from damage to the developing brain that may occur before, during, or after birth; and that results in loss or impairment of control over voluntary muscles.

(24) "Detoxification receiving center in alcohol and other drug abuse programs" means a short term facility with limited medical supervision but which has written agreements with a hospital to provide emergency medical care.

(25) "Developmental disability" means a disability attributable to mental retardation, cerebral palsy, epilepsy, autism or another neurologic condition closely related to mental retardation or requiring treatment similar to that required for mental retardation, which has continued or can be expected to continue indefinitely and constitutes a substantial handicap to the afflicted individual. Developmental disability does not include senility, which is primarily caused by the process of aging or the infirmities of aging.

(26) "Drug abuser" means a person who uses one or more drugs to the extent that the person's health is substantially impaired or social or economic functioning is substantially disrupted.

(27) "Epilepsy" means a disorder of the brain characterized by a recurring excessive neuronal discharge, manifested by transient episodes of motor, sensory, or psychic dysfunction, with or without unconsciousness or convulsive movements. The seizure is associated with marked changes in recorded electrical brain activity.

(28) "Mental illness" means mental disease to such extent that a person so afflicted requires care and treatment for his or her own welfare, or the welfare of others, or of the community.

(a) Mental illness, for purposes of involuntary commitment, means a substantial disorder of thought, mood, perception, orientation, or memory which grossly impairs judgment, behavior, capacity to recognize reality, or ability to meet the ordinary demands of life, but does not include alcoholism.

(29) "Mental retardation" means subaverage general intellectual functioning which originates during the developmental period and is associated with impairment in adaptive behavior.

(30) "Neurologic conditions" means disease states which require treatment similar to that required for mental retardation.

(31) "Psychotherapy" means psychotherapy as defined in Chapter HSS 2, s.1.03(97) Wis. Adm. Code

(32) "Special education" means any educational assistance required to provide an appropriate education program for a child with exceptional educational needs and any supportive or related service.

(33) "Substantial handicap" means a level of disability of such severity that, alone or in combination with social, legal, or economic constraints, it requires the provision of specialized services over an extended period of time directed toward the individual's emotional, social, personal, physical, or economic habilitation and rehabilitation.

HSS 61.03 ELIGIBILITY.

(1) A program or service authorized under section 51.42/51.437 Wis. Stats. is required to meet these standards in order to be eligible for state grants-in-aid.

(2) A board organized under section 51.42/51./437 or 46.23 Wis. Stats. shall submit an annual coordinated plan and budget in accordance with section 46.03(21), Wis. Stats. The annual coordinated plan and budget shall establish priorities and objectives for the year, intermediate range plans and budgets, and modifications of long range objectives.

(a) The coordinated plan and budget shall include plans for the provision of needed services pertaining to all program elements.

(b) The coordinated plan and budget shall include plans for the provision of all 16 elements of developmental disability services.

(c) The coordinated plan and budget shall include emphasis on special target populations mandated by the department.

(d) The disability group program elements, services and optional related services are as follows:

ADMINISTRATIVE SERVICE CATEGORY

SERVICE	PROGRAM ELEMENT	RELATED SERVICE CATEGORIES
(a) <u>Mental Illness</u>		
1. Inpatient	Inpatient	Counseling, Diagnosis, Evaluation, Health-Related, Medical, Medication, Ongoing Treatment Planning, Basic Health Care, Psychotherapy, Personal Care, Transportation, Treatment, Activities of Social and Daily Living, Recreation, Leisure Time
2. Outpatient	Outpatient	Counseling, Diagnosis, Evaluation, Health-Related, Medical, Medication, Ongoing Treatment Planning, Psychotherapy, Detoxification, Transportation
3. Day Treatment	Day Services	Counseling, Diagnosis, Evaluation, Day Care, Education Training, Health-Related, Leisure Time Activities, Personal Care, Medical Transportation, Medication, Ongoing Treatment, Planning, Social/Daily Living, Recreation, Alternatives Supervision
4. Emergency Care	Emergency Care	Counseling, Diagnosis, Evaluation, Health-Related, Medical, Transportation, Medication, Basic Health Care, Financial Aid
5. Consultation & Education	Systems Management, Prevention, Intervention	Counseling, Diagnosis, Evaluation, Health-Related, Information, Referral Case Management
6. Rehabilitation	Outpatient, Day Services, Sheltered Employment Transitional/Community Living	Diagnosis, Evaluation, Transportation, Counseling, Education, Recreation, Training, Treatment, Personal Care, Health-Related, Medical, Day Care, Leisure Time Activity, Special Living Arrangements
7. Services for Children & Adolescents	All Categories	All Services

(b) Alcoholism and Other Drug Abuse

1.	Emergency and De-toxification	Emergency, Inpatient	Counseling, Diagnosis, Evaluation, Health-Related, Medical, Transportation, Treatment, Personal Care, Detoxification
2.	Inpatient Rehabilitation	Inpatient	Diagnosis, Counseling, Transportation, Treatment, Personal Care, Evaluation, Health-Related, Medical, Medication, Ongoing Treatment Planning, Basic Health Care, Detoxification
3.	Outpatient	Outpatient	Counseling, Diagnosis, Evaluation, Health-Related, Medical, Transportation
4.	Day Care	Day Services	Diagnosis, Education, Transportation Counseling, Recreation, Training, Treatment, Personal Care, Health Related, Leisure Time Activities, Medical, Evaluation
5.	Transitional/Community Living	Transitional/Community Living	Transportation, Counseling, Education, Recreation, Training, Treatment, Sheltered Employment, Personal Care
6.	Prevention & Intervention	Prevention, Intervention	Counseling, Diagnosis, Evaluation, Health-Related, I + R, Intervention, Outreach, Leisure Time Activity, Preventive, Public Information, Public Education

(c) Developmental Disabilities

1.	Evaluation	Outpatient, Day Services, Sheltered Employment	Counseling, Diagnosis, Evaluation, Health-Related, Medical, Day Care, Training, Leisure Time Activities, Transportation
2.	Diagnostic	Inpatient, Out-Patient	Counseling, Diagnosis, Evaluation, Health-Related, Medical, Transportation, Education, Recreation, Training, Treatment
3.	Treatment	Inpatient, Out-patient, Day Services, Extended Care	Treatment, Counseling, Health-Related, Medical, Transportation, Education, Recreation, Training, Leisure Time Activities, Personal Care

4.	Day Care	Day Services	Education, Transportation, Counseling, Recreation, Training, Treatment, Personal Care, Health-Related, Leisure Time Activities, Medical, Evaluation
5.	Training	Day Services Sheltered Employment	Diagnosis, Education, Transportation, Counseling, Recreation, Training, Treatment, Personal Care, Day Care, Health-Related, Leisure Time Activities, Medical
6.	Education	Day Services, Sheltered Employment	Diagnosis, Education, Transportation, Counseling, Recreation, Training, Treatment, Personal Care, Day Care, Health-Related, Leisure Time Activities, Medical
7.	Sheltered Employment	Sheltered Employment	Counseling, Evaluation, Transportation, Education, Recreation, Training, Treatment, Personal Care
8.	Information & Referral	Intervention	Counseling, Diagnosis, Evaluation, Health-Related, I + R, Intervention, Outreach, Public Information and Education
9.	Counseling	Outpatient	Counseling, Diagnosis, Evaluation, All Services
10.	Follow Along	Intervention	Counseling, Diagnosis, Evaluation, I + R, Intervention/Outreach, Public Information Education, Case Management, Follow Along, Aftercare
11.	Protective Services	Protective Services	Counseling, Court, Legal, Protection, Protective Payment, Intervention, Case Management, Public Information Education, Diagnosis, Evaluation, Placement, Supervision
12.	Recreation	Day Services	Counseling, Diagnosis, Evaluation, Education, Training, Recreation, Day Care, Leisure Time Activities
13.	Transportation	All Categories	All Services
14.	Personal Care	Inpatient, Extended Care	Counseling, Diagnosis, Evaluation Health-Related, Medical, Personal Care, Transportation, Treatment, Education, Training, Transitional Community Living

15.	Domiciliary Care	Extended Care	Transportation, Counseling, Education, Recreation, Training, Treatment, Personal Care, Diagnosis Evaluation, Health-Related
16.	Special Living Arrangements	Transitional/Community Services	Counseling, Evaluation, Personal Care, Placement, Supervision, Case Management, Special Living Arrangements, Education, Training

OTHER SERVICES:

(d)	Public Information Education	Prevention, Intervention	Leisure Time Activities, Prevention, Public Information Education
(e)	Research	Training and Research	Research, Evaluation
(f)	Program Evaluation	Systems Management	Research, Evaluation

HSS 61.04 ADMINISTRATION. The county board of supervisors of any county or combination of counties shall establish a board of directors in accordance with sections 51.42(4) or 51.437, or 46.23, Wis Stats. The board shall appoint a program director.

HSS 61.05 ADMINISTRATIVE PERSONNEL.

(1) Program director. The board program director is an administrator who has skills and knowledge in budgeting, planning, and program management. Such skills and knowledge are typically acquired during a course of study leading to a master's degree and 5 years of related work experience in a relevant field.

(2) Disability program coordinator. The board disability program coordinator shall have skills and knowledge in psychology, social work, rehabilitation, special education, health administration or a related human service field.

The skills and knowledge required for appointment are typically acquired during a course of study leading to a master's degree in one of the above listed fields and at least 4 years of relevant work experience.

(3) The clinical director of the board program shall be a psychiatrist.

(4) Additional years of experience in a relevant field may be substituted for the above academic qualifications. The department may approve the employment of individuals with lesser qualifications than stated in this subsection, if the program can demonstrate and document the need to do so. Written documentation of administrative personnel qualifications shall be

maintained on file at the board office and available for inspection by the department.

HSS 61.06 PROGRAM PERSONNEL. Personnel in programs provided or contracted for by a board shall meet the following qualifications. Written documentation of such qualifications shall be maintained on file at the board office and available for inspection by the recipient of treatment services and the department.

(1) A physician shall be licensed to practice medicine in the State of Wisconsin and shall have skills in that area in which he or she is practicing (i.e. developmental disabilities, alcoholism, chemical dependency, etc.).

(2) A psychiatrist shall be a physician licensed in the state of Wisconsin and shall have satisfactorily completed 3 years residency training in psychiatry in a program approved by the American Medical Association.

(3) A child psychiatrist shall be a physician licensed in the state of Wisconsin and shall have satisfactorily completed a residency training program in child psychiatry approved by the American Medical Association.

(4) A psychologist shall meet statutory requirements for licensure in the state of Wisconsin. Psychologists who do not meet licensure requirements may be employed to work under the direct supervision of a licensed psychologist.

(5) A social worker shall have such education, training, work or other life experiences which would provide reasonable assurance that the skills and knowledge required to perform the tasks have been acquired. Such skills and knowledge are typically acquired during a course of study leading to a master's degree in social work. Social workers with lesser qualifications may be employed to work under the direct supervision of a qualified social worker.

(6) Registered nurses and licensed practical nurses employed to provide nursing service shall have current Wisconsin licensure and appropriate experience or further education related to the responsibility of the position.

(7) Occupational therapists, recreational therapists, music therapists, art therapists and speech and language therapists shall have skills and knowledge which are typically acquired during a course of study and clinical fieldwork training leading to a bachelor's degree in their respective profession.

(8) A teacher shall be eligible for certification by the department of public instruction for teaching the appropriate mental handicap or shall secure the temporary approval of the department of health and social services.

(9) A rehabilitation counselor shall be certified or eligible for certification by the commission on rehabilitation counselor certification.

(10) A vocational counselor shall possess or be eligible for the provisional school counselor certificate and have the skills and knowledge typically acquired during a course of study leading to a master's degree in counseling and guidance.

(11) Physical therapists shall be licensed by the Wisconsin medical examining board.

(12) The educational services director or designee shall have skills and knowledge in communications, educational methods and community organization which is typically acquired during a course of study leading to a bachelor's degree.

Training or experience is acceptable if the individual is able to design and present educational programs, communicate clearly in writing and verbally, and construct a major program service through planning, organization and leadership.

(13) Clergy staff members shall have skills and knowledge typically acquired during a course of study leading to a college or seminary degree and ordination. The individual shall have pastoral service experience, continuing ecclesiastical endorsement by their own denomination, and at least 1 year of full time clinical pastoral education.

(14) An alcohol and other drug abuse counselor shall be certified by the Wisconsin Alcoholism and Drug Abuse Counselor Certification Board, Inc. (this includes counselors certified as alcoholism counselors, drug counselors, or alcohol and other drug abuse counselors). Non-certified counselors may be employed on the basis of personal aptitude, training and experience if they:

- (a) complete a suitable period of orientation;
- (b) have a counselor certification development plan which is approved by the certification board; and
- (c) are provided with ongoing clinical consultation from a certified alcohol or other drug abuse counselor.

(15) Developmental disabilities or mental health technicians are paraprofessionals who shall be employed on the basis of personal aptitude. They shall have a suitable period of orientation and inservice training and shall work under the direct supervision of a professional staff member.

(16) The department may approve the employment of individuals with lesser qualifications than those stated, if the program can demonstrate and document the need to do so.

HSS 61.07 UNIFORM COST REPORTING. There shall be a uniform cost reporting system used by community programs receiving state funds. Methods of cost accounting will be prescribed by the department.

HSS 61.08 REQUIREMENTS FOR INSERVICE AND EDUCATIONAL LEAVE PROGRAMS FOR PERSONNEL. Personnel policies shall incorporate provisions for inservice training and educational leave programs for program personnel.

HSS 61.09 FEE SCHEDULE. A board shall charge fees according to departmental rules.

HSS 61.10 ELIGIBILITY FOR SERVICE. In accordance with Title VI and Title IX of the Civil Rights Act and the Rehabilitation Act of 1973, services shall be available and accessible and no person shall be denied service or discriminated against on the basis of sex, race, color, creed, handicap, age, location or ability to pay.

HSS 61.11 CLIENT RIGHTS. The client rights mandated by section 51.61 Wis. Stats. shall apply.

HSS 61.12 GRIEVANCE PROCEDURE. The grievance procedure mandated under subsection 51.61(5) Wis. Stats. shall apply.

HSS 61.13 CLIENT ADVOCACY. Clients shall be allowed to have an advocate present to represent their interest during any phase of the staffing, program planning, or other decision making process. This does not obligate the provider to furnish the advocate but to facilitate the advocate's participation if so requested by the client. The provider shall inform the client's advocate that assistance is available from the coordinator of client advocacy in the division of community services.

HSS 61.14 AFFIRMATIVE ACTION AND CIVIL RIGHTS COMPLIANCE

(1) The board shall enunciate and annually reaffirm an explicit equal employment opportunity policy prohibiting discrimination in all phases of employment to be disseminated among employes and contracted agencies in order to promote acceptance and support.

(2) The board shall be responsible for the affirmative action program and shall assign to a high level employe the responsibility and authority for the affirmative action program implementation.

(3) An Annual affirmative action plan including goals and time tables shall be developed which includes input from all levels of staff, and submitted to the division of community services.

(4) The practices of employee organizations and contracted agencies should conform to the 51.42/51.437 agency's policy, and any negotiated agreements or contracts shall contain a non-discrimination clause and a statement of conformance and support for the program.

(5) Training in the area of affirmative action for supervisory staff and employes shall be provided by the 51.42/51.437 board.

HSS 61.15 CONTINUITY OF CARE. (1) A program organized under section 51.42/51.437 or 46.23, Wis. Stats. shall provide services in a comprehensive coordinated manner.

(a) Written procedures for cooperative working relationships between service provider agencies shall be established and there shall be evidence that such collaborative services are being carried out.

(b) Providers of services shall cooperate in activities such as pre-screening, referral, follow up, and aftercare, as required, to assure continuity of care and to avoid duplication of services.

(c) There may be joint use of professional and other staff by the services organized under the boards.

(d) Access to treatment records shall be according to section 51.03 and 51.30, Wis. Stats.

(e) Each 51.42/51.437 or 46.23 board shall organize and maintain a central records system which provides for retrieval of information about persons receiving treatment.

HSS 61.16 VOLUNTEER SERVICES. The use of volunteers is encouraged. They shall be supervised by professional staff and there shall be written procedures for the selection process, orientation, and inservice training of volunteers.

HSS 61.17 RELIGIOUS SERVICES.

(1) Religious services should be available to all inpatient and residential programs to assure every person, who wishes, the right to pursue the religious activities of his or her choice.

(2) Each inpatient service may provide regularly scheduled visits by clergy.

HSS 61.18 RESEARCH. Section 51.61(4) Wis. Stats. shall apply to research activity.

HSS 61.19 PROGRAM EVALUATION. Each board shall develop and use a plan for evaluation of the effectiveness of its programs which will be made available to the department upon request.

HSS 61.20 ENFORCEMENT.

(1) Compliance required for state funding. All board operated or board contracted programs provided by a 51.42/51.437 board shall meet standards and be provided in a non-discriminatory manner as prescribed in sections 61.10 and 61.14. The department may discontinue state funding of a program when it does not meet standards as established by departmental administrative rules and after the board has had reasonable notice and opportunity for hearing by the department as provided in chapter 227, Wis. Stats.

(2) Provisional approval. When a program does not comply with standards, the department may allow a compliance period of 6 months. After 6 months, the board's program shall comply with standards or the board shall have demonstrated and documented significant attempts toward compliance. Additional provisional approvals for 3 month periods may be granted.

(3) Waiver.

(a) If a board believes its program should not have to comply with a standard, it may request a waiver. The request shall be in writing to the department. It shall identify the standard and explain why noncompliance would not diminish the effectiveness of its program.

(b) If the program holds current accreditation issued by the joint commission on accreditation of hospitals, the requirement to meet these standards may be waived by the department. The accreditation by JCAH must be for an appropriate category such as adult psychiatric inpatient, children and adolescents inpatient, alcoholism and drug abuse, developmental disabilities, or community mental health standards.

(c) The department may grant exceptions to any of the rules for community mental health, developmental disabilities and alcohol and other drug abuse standards. This may be done only when the department is assured that granting the exceptions maintains equal or higher quality of services provided.

(4) Interpretation. If a board disagrees with the department's interpretation of a standard, it may appeal in writing to the department. The appeal shall identify the standard, describe the department's interpretation, describe the board's interpretation, and define the problem caused by the different interpretations.

(5) Decertification or Termination.

(a) All proceedings set out herein shall comply with chapter 227 Wis. Stats.

(b) Approval of programs may be denied or suspended with prior notice of denial and a summary of the basis for denial or suspension without prior hearing whenever the department determines that:

1. Any of the programs' licenses or required local, state or federal approvals have been revoked, suspended or have expired; or

2. The health or safety of a recipient is in imminent danger because of the knowing failure of the program to comply with those rules or any other applicable local, state or federal law or regulation.

(c) Within 5 days, excluding weekends and legal holidays, after receipt of notice of suspension (under (2) above), any program may demand and shall be entitled to receive a hearing, unless waived in writing, within 14 days of the demand in writing, and be given a decision on suspension.

(d) A program's certification may be terminated, with notice of proposed termination, and a summary of the basis of the proposed termination, and with notice of an opportunity for a hearing to respond to the findings contained in the summary within 10 days and before termination shall become effective. Failure to demand such hearings in writing within 20 days of the time of the required notice, correctly addressed, is placed in the United States mail, shall constitute waiver of the right to such hearing. Termination of certification shall be based on the following grounds:

1. Any of the program's licenses or required local, state or federal approvals have been revoked, suspended, or have expired.

2. The program or its agents has or have been convicted of federal or state criminal statute violations for conduct performed under the Medical Assistance Program.

3. The program submitted or caused to be submitted false statements, for purposes of obtaining certification under these rules, which it knew, or should have known, to be false.

4. The program failed to maintain compliance to standards for which it was certified.

5. The program has failed to abide by the Federal Civil Rights Act of 1964 in providing services.

(e) Programs which allow certification to expire and do not initiate an application for renewal prior to the date of expiration will be terminated on the date of expiration without right to a hearing, thereafter, a new application must be submitted.

HSS 61.21 REPORTS REQUIRED BY THE DEPARTMENT. Statistical and other reports required by the department shall be reported on the appropriate form, and at the times required by the department.

HSS 61.22 REVISION OF STANDARDS. The department shall periodically review and revise these standards, not less frequently than every 5 years. Experiences in the application of the standards shall be incorporated into the review and revision process.

HSS 61.23 CONFIDENTIALITY OF RECORDS. Records shall be kept on each recipient of services. Confidentiality of records shall be safeguarded. Files shall be locked when not in active use and kept in a secure place.

HSS 61.24 EDUCATION/INFORMATION. Each community services board shall develop a structured plan for a comprehensive program of public education, continuing education, and public information. In addition, education and preventive practices and procedures shall be a recognizable and an integral part of every disability program.

HSS 61.25 PRIVATE OUTPATIENT FACILITY. Program staff shall meet qualifications as specified in section 61.06 for approval as an outpatient clinic under s. 632.89 Wis. Stats. In lieu of the requirements in PW-MH 60.65(1), Wis. Adm. Code, a minimum of 4 hours each of psychiatry and psychology shall be provided weekly. An outpatient facility shall have demonstrated procedures for ensuring continuity of care for the client through either the facility itself or other appropriate program.

The rules and repeals contained in this order shall take effect on the date as provided in section 227.026(1), Wis. Stats.

Dated:

WISCONSIN DEPARTMENT OF HEALTH
AND SOCIAL SERVICES

Seal:

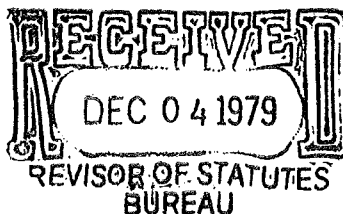

DONALD E. PERCY
SECRETARY



State of Wisconsin \ DEPARTMENT OF HEALTH & SOCIAL SERVICES

OFFICE OF THE SECRETARY
1 WEST WILSON STREET
MADISON, WISCONSIN 53702

December 3, 1979



Mr. Orlan Prestegard
Revisor of Statutes
411 West, State Capitol
Madison, WI 53702

Dear Mr. Prestegard:

As provided in section 227.023, Wis. Stats., there is hereby submitted a certified copy of HSS 61.01, Standards for Community Mental Health, Developmental Disabilities and Alcoholism and Other Drug Abuse Services, as adopted by this department on December 3, 1979.

Sincerely,

A handwritten signature in black ink, appearing to read "D.E. Percy". The signature is stylized and written in a cursive-like font.

Donald E. Percy
SECRETARY

Enclosure