Chapter PW-MH 60

MENTAL HYGIENE

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Note: Sections PW-MH 60.02 through 60.05 were repealed, Register, September, 1979, effective October 1, 1979. Chapter HSS 60 created effective October 1, 1979 replaces the repealed sections.

Note: Sections PW-MH 60.10 through 60.50 were repealed, Register, January, 1980, No. 289, effective February 1, 1980. Chapters HSS 61 created effective February 1, 1980 replaces the repealed sections.

PW-MH 60.10 Minimum standards for community mental health clinics qualifying for state aid. History: Cr. Register, September, 1960, No. 57, eff. 10-1-60; r. Register, January, 1980, No. 289, eff. 2-1-80.

PW-MH 60.20 Community mental health, mental retardation, alcoholism and drug abuse services. History: Emerg. cr. eff. 12-17-71; cr. Register, August, 1972, No. 200, eff. 9-1-72; r. Register, January, 1980, No. 289, eff. 2-1-80.

PW-MH 60.30 Standards, community day services program for mentally handicapped. History; Cr. Register, September, 1972, No. 201, eff. 10-1-72; r. Register, January, 1980, No. 289, eff. 2-1-80.

PW-MH 60.40 State ald for interest expense. History: Cr. Register, October, 1972, No. 202, eff. 11-1-72; r. Register, January, 1980, No. 289, eff. 2-1-80.

PW-MH 60.50 Community developmental disabilities services. History: Cr. Register, July, 1973, No. 211, eff. 8-1-73; r. Register, January, 1980, No. 289, eff. 2-1-80. See ch. HSS 61.

STANDARDS

COMMUNITY MENTAL HEALTH INPATIENT SERVICES

PW-MH 60.61 Introduction and definitions. (1) INTRODUCTION. The following standards have been developed for community inpatient mental health services receiving state aids, whether directly operated by counties or contracted with private providers. The standards are intended to be consistent with those stated in *Standards for Psychiatric Facilities*, published by the American Psychiatric Association, 1969; with the psychiatric footnotes to the Accreditation Manual for Hospitals, published by the Joint Commission on Accreditation of Hospitals, December, 1970; and with recent federal court decisions in Wisconsin and other states. They are intended to insure that each mental health inpatient service will provide appropriate treatment to restore mentally disordered persons to an optimal level of functioning and return them to the community at the earliest possible date. In order to do this the service must:

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(a) Have an ethical, competent staff responsible for carrying out a comprehensive treatment program;

(b) Integrate its services with those provided by other facilities in the county which serve the mentally ill, mentally retarded, and alcoholics and drug abusers;

(c) Preserve the dignity and rights of all its patients; and

(d) Be responsive to the needs of its community.

(2) DEFINITIONS. (a) Community mental health inpatient services (hereafter called services) means a county-operated unit, general hospital psychiatric unit, or private psychiatric hospital whose primary objective is to provide care and intensive treatment for the mentally ill, alcoholics and drug abusers.

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

(c) Patient means anyone receiving care in a community mental health inpatient service.

History: Cr. Register, December, 1973, No. 216, eff. 1-1-74.

PW-MH 60.62 Mental health treatment program. (1) REQUIRED PERSONNEL. (a) *Psychiatry*. Each mental health inpatient service shall have a psychiatrist who has competed an approved residency training program in psychiatry as its director of mental health services. This director shall be responsible for organization and maintenance of an active mental health treatment program and shall assume responsibility for the admission, treatment, discharge planning, and release of patients from the inpatient service. The director of mental health services and additional psychiatrists, as needed, shall be available for daily inpatient visits, in order to carry out an adequate treatment program. Additional provision shall be made for emergency contact between such visits. Each service shall provide for a minimum of .8 hour a week psychiatric treatment time per patient care, utilizing the services of the medical staff for necessary general medical care.

(b) Nursing service. 1. Registered nurses and licensed practical nurses. Each service shall employ sufficient registered nurses and licensed practical nurses to provide full-time nursing service for each shift 7 days a week. All registered nurses and licensed practical nurses employed to provide nursing service must have a current Wisconsin certificate to practice as a RN or LPN, and appropriate experience and/or further education for the responsibility of the position. The following schedule of licensed nursing coverage is minimal, with the added provisions that at least one staff member on the day and evening shift be a registered nurse. In computing the number of licensed personnel needed on each shift, the totals should be rounded up if .5 or more, down if less than .5. There must always be at least one licensed person on duty on each shift, even if the number required is less than .5.

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Day Shift	Evening Shift	Night Shift
.32 hrs/pat/day	.16	.16
or 2.24 hrs/pat/wk	1.12	1.12

2. Aides and other paraprofessionals. Each service shall employ a sufficient number of aides or other paraprofessionals to provide a ratio of 1.25 hours of such time per patient per day. In computing this ratio, dietary, maintenance and housekeeping staff, volunteers or building watchmen shall not be included as aides. There shall be at least one aide or other treatment staff person on duty in each ward when patients are present to insure adequate patient supervision. In determining adequate care the department has the authority to determine what constitutes units of coverage. Paraprofessionals entitled mental health technicians or mental health workers may be employed. They shall be selected on the basis of their personal qualities and aptitude. They must have a period of orientation and inservice training, and work under the supervision designated treatment staff.

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