

Appendix G – Scope of Services

Scope of Services

1. Readiness Review Phase:

- 1.1. In the event the selected Vendor is not the current Vendor, the selected Vendor shall, in collaboration with the current Contractor, develop a plan to transition operations in a manner that ensures continuity of operations and patient care and minimizes disruptions to staff and patients. Transition shall occur during the Readiness Period (expected Summer or Fall 2024, upon Governor and Council approval – 90 days), as follows:
 - 1.1.1. The selected Vendor must mobilize recruitment activities to hire staff.
 - 1.1.2. The selected Vendor must complete an assessment of all positions and staffing structure within 90 days of Agreement approval to review staffing financial viability and efficient service delivery and must complete the assessment on a yearly basis, during the life of the Agreement
 - 1.1.3. The selected Vendor must develop all orientation and new training requirements including but not limited to technology, health records, care practices, compliance standards, to ensure all staff complete training no later than 180 days from the date of Governor and Council approval.
 - 1.1.4. The selected Vendor must adopt and modify accordingly all HHRTF policies and procedures.
 - 1.1.5. The selected Vendor must adhere to the Readiness Review by the Department, which will consist of ensuring all activities within the Readiness Review Phase is complete.

2. Covered Populations

- 2.1. The selected Vendor must provide services to children, adolescents, and young adults ages five (5) to twenty-five (25) years admitted on either a voluntary or involuntary basis, as well as Psychiatric Residential Treatment Facility (PRTF) services for children and adolescents up to age 21.
- 2.2. For the purposes of this RFP, all references to individuals shall mean individuals receiving services at the HHRTF within the scope of specified services, which includes both inpatient psychiatric services and PRTF services.

3. General Requirements

- 3.1. The selected Vendor must provide the following clinical services at Hampstead Hospital and Residential Treatment Facility (HHRTF) to individuals in need of such services:

Appendix G – Scope of Services

- 3.1.1. Inpatient psychiatric care, including providing clinically managed high intensity residential withdrawal management for individuals withdrawing from alcohol, opioids, and benzodiazepines who are medically stable
- 3.1.2. Partial hospitalization as a structured program of outpatient services for individuals who are stepping down from inpatient treatment, or as standalone treatment for those whose intensive needs can be met outside of a traditional overnight stay.
- 3.2. The selected Vendor must ensure admissions are accepted at the facility 24 hours per day, 7 days per week. The selected Vendor must comply with all applicable accreditation standards as well as federal and state legal and regulatory standards in the provision of services at the PRTF. In the event of a conflict of applicable federal regulations and state laws and state rules, the selected Vendor must follow the most prescriptive laws and rules.
- 3.3. The selected Vendor must act upon all non-urgent medical consult requests ordered by an individual's treatment team within 24 hours of a consult request being made.
- 3.4. The selected Vendor must act upon all urgent and/or emergent medical consult requests within one (1) hour of a consult request being made.
- 3.5. The selected Vendor must complete a history and physical for all individuals within 24 hours of admission, and every 30 days thereafter, for individuals with a length of stay (LOS) greater than 30 days at HHRTF. The selected Vendor must complete a history and physical annually for all patients in the PRTF.
- 3.6. The selected Vendor must ensure provider staff provide on-call, after-hours coverage above the 40-hour week to ensure on-call psychiatric and medical services are available 24 hours per day, 7 days per week.

4. Core Values of the NH Children's System of Care

- 4.1. The selected Vendor must utilize practices and deliver services in alignment with the requirements in NH RSA 135-F by:
 - 4.1.1. Utilizing the Child and Adolescent Needs and Strengths (CANS) assessment tool.
 - 4.1.2. Supporting the Core Values of the NH Children's System of Care, as outlined Table 1:

Table 1 Core Values of the NH Children's System of Care
--

Appendix G – Scope of Services

Family Driven and Youth Driven	Youth and Family driven, with the strengths and needs of the child and family determining the types and mix of services and supports provided. Family and Youth is the core of the work. Youth and Families take a leadership role at the individual service delivery level as well as policy, planning and system levels.
Community Based	Services are provided at the community level with the youth and family in their home and community. Services provided also include, system management, resting within a supportive, adaptive infrastructure of structures, processes, and relationships at the community level.
Culturally and Linguistically Competent	Culturally and linguistically competent, with agencies, programs, and services that reflect the cultural, racial, ethnic, and linguistic differences of the populations they serve to facilitate access to and utilization of appropriate services and supports.
Trauma Informed	Treatment and support services are delivered in a manner that is Trauma-Informed using the 6 core principles of a trauma-informed approach: 1) Safety; 2) Trustworthiness and Transparency; 3) Peer Support; 4) Collaboration and Mutuality; 5) Empowerment, Voice and Choice; and 6) Cultural, Historical, and Gender Issues.

5. Clinical, Medical and Collaborative Care

- 5.1. The selected Vendor must maintain clinical and medical services for all levels of care in accordance with the applicable standard of practice and appropriate accreditation requirements to meet each individual's needs.
- 5.2. The selected Vendor must ensure the incorporation of Functional Behavioral Assessments as clinically appropriate and incorporate behavioral supports into treatment and discharge planning.
- 5.3. The selected Vendor must provide services to the Department's Designated Receiving Facility (DRF) for individuals who are involuntarily admitted and in accordance with NH RSA 135-C:26, NH Administrative Rules, He-M 204, Rights Protection Procedures for Mental Health Services, He-M 305, Personal Safety Emergencies, He-M 311, Rights of Persons in State Mental Health Facilities, and Part He-M 405, Designation of Receiving Facilities.
- 5.4. The selected Vendor must, with the consent of the individual or the individual's guardian, collaborate with each individual's primary care provider; community

Appendix G – Scope of Services

behavioral health provider; and other support agencies, including, but not limited to, the Bureau for Children’s Behavioral Health; the Division for Children, Youth and Families (DCYF); any State-designated Care Management Entities (CME); school and Peer Support providers; and community mental health center to ensure:

- 5.4.1. Continuity of treatment in the community by successfully transferring pertinent treatment information prior to the individual’s discharge; and
- 5.4.2. Appropriate, reasonable, and safe discharge plans for the continued treatment of the individual’s condition as provided on a template approved by the Department.

6. Admissions for Hospital

- 6.1. The selected Vendor must consider all referrals for individuals who have a behavioral health necessity for care, unless otherwise indicated in accordance with Section 7, below.
- 6.2. The selected Vendor must assist families with completing appropriate applications in situations where the individual is uninsured or underinsured.
- 6.3. In the event that a waitlist must be maintained, the selected Vendor must ensure:
 - 6.3.1. Prioritization considers:
 - 6.3.1.1. Eligible New Hampshire individuals;
 - 6.3.1.2. Level of acuity;
 - 6.3.1.3. Date of referral;
 - 6.3.1.4. Individuals who are waiting in an Emergency Department; and
 - 6.3.1.5. Other areas of prioritization, as determined in collaboration with the Department.
 - 6.3.2. Waitlist data is provided to the Department for the purposes of collaboration and reporting, following a process jointly developed between the Department and vendor.
- 6.4. The selected Vendor must make acceptance decisions:
 - 6.4.1. Within seventy-two (72) hours from receiving the referrals for inpatient admission; and
 - 6.4.2. Within seven (7) calendar days from receiving the referral for PRTF admission.
- 6.5. The selected Vendor must collaborate with the Department to develop a Review Team for cases identified by the Department where the selected Vendor believes it cannot meet the behavioral and/or medical needs of an individual

Appendix G – Scope of Services

referred for services. The selected Vendor must participate in the review process as described:

- 6.5.1. The Review Team consists of a minimum of five (5) members, which include but are not limited to:
 - 6.5.1.1. Two (2) Selected Vendor employees with knowledge of the individual, their needs, and the specific reason for the denied admission.
 - 6.5.1.2. Two (2) Department employees from the Bureau for Children’s Behavioral Health and/or the Department as a whole.
 - 6.5.1.3. A designee chosen by the Commissioner of the Department.
- 6.6. The Review Team, in consultation with other individuals with expertise in the case, determine the appropriate next steps for an individual who may need further evaluation due to complex issues.

7. Prioritization for Hospital

- 7.1. The selected Vendor must prioritize admission of individuals based on acuity and current available resources. If resources are not available, the selected Vendor must:
 - 7.1.1. Provide the Department with the reasons for lack of resources; and
 - 7.1.2. Identify a plan on how to rectify the lack of resources.
- 7.2. The selected Vendor must provide appropriate psychiatric treatment to individuals admitted to the facility in accordance with TJC inpatient hospital accreditation standards, behavioral health and human services standards for residential services, and child psychiatric best practices as outlined in the American Academy of Child and Adolescent Psychiatry (AACAP).
- 7.3. The selected Vendor must prioritize its resources to address issues and barriers regarding individuals who are:
 - 7.3.1. Held under a completed Involuntary Emergency Admission certificate; or
 - 7.3.2. Waiting for appropriate and timely discharges from the HHRTF.

8. Discharges for Hospital

- 8.1. The selected Vendor must complete a comprehensive discharge and transition plan prior to discharge, which includes a strong focus on family and caregiver education and involvement in the individual’s aftercare in order to:
 - 8.1.1. Ensure the individual’s successful transition from the HHRTF to home, school, and community is appropriate, reasonable, and safe;

Appendix G – Scope of Services

- 8.1.2. Ensure collaboration with each individual's primary care provider, community behavioral health provider, and other support agencies;
 - 8.1.3. Provide referrals to trauma-informed community-based providers; and
 - 8.1.4. Align all transition planning with the Core Values of the NH Children's System of Care, as outlined in Section 4.
- 8.2. The selected Vendor must work in partnership with the Department's Care Management Entity (CME) contractors and the Comprehensive Assessment for Treatment (CAT) contractors to ensure individuals are referred, admitted, discharged, and transitioned in a timely manner and in alignment with the individual's clinical needs.

9. Psychiatric Residential Treatment Facility (PRTF) for Children's Behavioral Health Overview

- 9.1. The selected Vendor must provide services to the Department's 12 bed Psychiatric Residential Treatment Facility (PRTF) 24 hours a day, seven (7) days a week, located at HHRTF, operated as a distinct separate unit from the psychiatric hospital, ensuring all dedicated beds are utilized only for PRTF level of care.
- 9.2. The selected Vendor must ensure the PRTF is a distinct, standalone entity where services are provided in a residential setting, separate from the portions of the hospital that provides acute psychiatric services, in accordance with 42 CFR Part 441 Subpart D, Inpatient Psychiatric Services for Individuals Under Age 21 in Psychiatric Facilities or Programs.
- 9.3. The selected Vendor must provide PRTF services to individuals in accordance with 42 CFR 441.151, General Requirements, who:
- 9.3.1. Have a medical necessity determined by the CAT; and
 - 9.3.2. Have a certification of need for services by a Doctor of Medicine or a psychiatrist.
- 9.4. The selected Vendor must provide PRTF level-of-care services to all NH-eligible individuals defined in Subsection 6.5.1, prior to accepting out-of-state individuals in need of PRTF level of care services.
- 9.5. The selected Vendor must, in accordance with 42 CFR 441.155, develop an individual plan of care upon admission and ensure the individual plan of care is:
- 9.5.1. Completed within 14 days of admission; and
 - 9.5.2. Updated every three (3) months.
- 9.6. The selected Vendor may accept individuals directly into the PRTF in limited cases without the PRTF level of care determination if:
- 9.6.1. There is an emergency as identified by the Department; and

Appendix G – Scope of Services

- 9.6.2. The individual's needs have been identified by a recently conducted CANS or other assessments.
- 9.6.3. A CAT assessment is immediately requested upon admission.
- 9.6.4. If after the emergency admission is made it is determined that the individual's level of care is different from the PRTF level of care, then the Selected Vendor must work with the individual's team to support a transition to a more appropriate level of care that aligns with the needs of the individual.
- 9.7. The selected Vendor must work with the individual's community behavioral health providers, DCYF (if applicable), CME, peer support providers, family, caregivers, the next treatment providers, educational providers, and any other relevant service providers to prepare for discharge from the PRTF.
- 9.8. The selected Vendor must hold a bed and not eject or discharge an individual in the event of a temporary psychiatric hospitalization or some other event that would require the individual to be away from the program for no more than seven (7) calendar days. The selected Vendor:
 - 9.8.1. Must accept the individual back into the program within seven (7) calendar days to resume their course of treatment; and
 - 9.8.2. May hold the bed longer than seven (7) calendar days; or
 - 9.8.3. May discharge the individual from the program after seven (7) bed hold days.
- 9.9. The selected Vendor must work with the Department and other key partners to develop discharge policies and procedures to ensure no individual is discharged unless the individual is deemed clinically appropriate for discharge and an appropriate location for discharge has been identified, unless otherwise ordered by the court.

10. Education Services

- 10.1. The selected Vendor must work with the Department on a plan to ensure Education Services are available to all individuals, if applicable. Through this plan, the facility must:
 - 10.1.1. Provide Education Services to individuals who are, at the time of admission, enrolled in any primary school grade ranging from Kindergarten through Grade 12, unless otherwise indicated. The selected Vendor must:
 - 10.1.1.1. Provide Education Services to individuals after individuals are admitted for 14 continuous days.
 - 10.1.1.2. Ensure individuals are provided with time to complete any schoolwork that families bring to the HHRTF for the

Appendix G – Scope of Services

- individuals admitted for any amount of time up to the 14 continuous days of admission.
- 10.1.1.3. Provide Education Services on the first day of admission for all individuals who have an approved diagnosis.
 - 10.1.1.4. For the PRTF, initiate educational services to individuals beginning upon admission, with education plan determined by their multidisciplinary team and sending school district. The selected Vendor must ensure on-site availability of:
 - 10.1.1.4.1. A nonpublic special educational program approved by the State of New Hampshire Department of Education; and/or
 - 10.1.1.4.2. A tutoring program, administered by a special education certified professional, depending on the acuity of the population and the length of stay; and/or
 - 10.1.1.4.3. An approved online educational curriculum.
 - 10.1.2. When Education Services are provided, the selected Vendor must ensure Education Services align with Individualized Education Programs (IEPs) and 504 Plans. The Selected Vendor must ensure individuals attend their school within their communities, when possible and clinically appropriate
 - 10.2. The selected Vendor must retain client student records in accordance with applicable federal and state laws and regulations.
 - 10.3. The selected Vendor must provide copies of the individual's records of education and progress to the individual's sending school, upon client discharge from the PRTF.

11. Transportation

- 11.1. The selected Vendor must provide a plan to coordinate transportation for individuals to travel to and from all services and appointments.

12. Pharmaceutical Services

- 12.1. The selected Vendor must work with the Department for developing a plan for providing Pharmaceutical Services that meet the medication needs of individuals receiving services at the HHRTF in a safe and secure manner, in accordance with all State and federal standards and requirements.
- 12.2. This plan must include provisions to ensure:

Appendix G – Scope of Services

- 12.2.1. Pharmacy supplies are available on premises, or by delivery as appropriate.
 - 12.2.2. Pharmaceutical Services meet individual medication needs in a timely manner and in accordance with federal and state laws and regulations.
 - 12.2.3. A NH licensed pharmacist is available 24 hours per day, 365 days per year to the HHRTF to receive and approve orders for prescription medications; and Respond to requests for telephone consultations within one (1) hour of placing the request for consult only.
 - 12.2.4. Management of on-site automated pharmacy dispensing machines. in accordance with NH Board of Pharmacy and DEA standards, guidelines, and regulations.
13. **Escalated Behaviors and Safety/Security**
- 13.1. The selected Vendor must develop and implement a staffing and programmatic plan to prevent and manage escalated behaviors in a manner that is evidence based and trauma informed. This includes policies and protocols for how and when to engage outside first responders, such as police and fire/EMS, in the cases when it is required.
 - 13.2. The selected Vendor must comply with NH RSA 126-U, Limiting the Use of Child Restraint Practices in Schools and Treatment Facilities and develop policies and methods to eliminate the use of restraint and seclusion