Statewide Inpatient Psychiatric Programs (SIPP) Level of Care Guidelines
Residential Placement Using Statewide Inpatient Psychiatric Programs (SIPP)

Description: The primary objective of this level of care is for residential placement for children and youth which can include mental health targeted case management services up to 180 days prior to discharge from residential placement. All SIPP services require prior authorization. In addition, all children and/or youth admitted to residential placement must have a “suitability evaluation” completed prior to admission.

The purpose of the suitability evaluation is to determine appropriateness of residential treatment. The suitability assessment can be achieved in two different ways:

1. The family, guardian, or guardian ad litem can obtain the suitability assessment and letter from a psychologist or psychiatrist, licensed to practice in the State of Florida, recommending the residential care; or
2. The multidisciplinary team can request and refer a family for a suitability assessment at the point that residential treatment level of care has been identified as the appropriate setting to treat the individual’s condition.

As per ss.394.455(2),(24), F.S., the suitability assessment must be completed by a psychiatrist or psychologist licensed to practice in the State of Florida with experience or training in treating children’s disorders.

Admission Criteria

- The child or youth has been examined and assessed for suitability for residential treatment by a psychologist or psychiatrist licensed to practice in the State of Florida.
- The child has an emotional disturbance as defined in ss.394.492(5), F.S. or a serious emotional disturbance as defined in ss.394.492(6), F.S.
  - ss.394.492(5), F.S.: “Child or adolescent who has an emotional disturbance” means a person under 18 years of age who is diagnosed with a mental, emotional, or behavioral disorder of sufficient duration to meet one of the diagnostic categories specified in the most recent edition of the Diagnostic and Statistical Manual of the American Psychiatric Association, but who does not exhibit behaviors that substantially interfere with or limit his or her role or ability to function in the family, school, or community. The emotional disturbance must not be considered to be a temporary response to a stressful situation. The term does not include a child or adolescent who meets the criteria for involuntary placement under s. 394.467(1).”
  - ss.394.492(6), F.S.: “Child or adolescent who has a serious emotional disturbance or mental illness” means a person under 18 years of age who:
    - (a) Is diagnosed as having a mental, emotional, or behavioral disorder that meets one of the diagnostic categories specified in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association; and
    - (b) Exhibits behaviors that substantially interfere with or limit his or her role or ability to function in the family, school, or community, which behaviors are not considered to be a temporary response to a stressful situation.”
- The emotional disturbance or serious emotional disturbance requires treatment in a residential treatment center
- All available treatment that is less restrictive than residential treatment has been considered or is unavailable
- The treatment provided in the residential treatment center is reasonably likely to resolve the child’s presenting problems as identified by the evaluation
- The provider is qualified by staff, program and equipment to give the care and treatment required by the child’s condition, age and cognitive ability.
- The participant is under the age of 18; and
- The nature, purpose, and expected length of treatment have been explained to the child, the child’s parent or guardian, and/or guardian at litem.
In addition, ALL of the following must be met:

1. The participant is NOT at imminent risk of serious harm to self or others;
2. Within 48 hours of admission, the following will occur:
   - A treatment plan is developed, by the psychiatrist, multidisciplinary team, and when possible the child or youth
   - A plan is developed to provide the child or youth with an appropriate educational program
   - Determine the estimated length of stay and develop a preliminary discharge plan
   - The participant’s family / social support will participate in treatment as clinically appropriate and available
   - Visits with the treating psychiatrist occur, at a minimum, twice a week
   - Treatment in a Residential Treatment Center is not for the purpose of providing custodial care. Custodial care in a Residential Treatment Center is defined as clinical or non-clinical services that will not cure, or which are provided during periods when the participant’s mental health condition is not changing, or does not require trained clinical personnel to safely deliver services. Custodial care includes the following:
     a. The participant’s presenting signs and symptoms have been stabilized, resolved, or a baseline level of functioning has been achieved;
     b. The participant is not responding to treatment or otherwise is not improving;
     c. The intensity of active treatment provided in a residential setting is no longer required or services can be safely provided in a less intensive setting.

Exclusions

- The participant is 18 years of age or older;
- A suitability assessment has not been completed;
- The participant does not have an emotional disturbance as defined in ss.394.492(5),F.S. or a serious emotional disturbance as defined in ss.394.492(6),F.S.;
- The emotional disturbance or serious emotional disturbance does NOT require treatment in a residential treatment center;
- All available treatment that is less restrictive than residential treatment has NOT been considered or there is alternative treatment available that will treat the participant’s condition;
- The treatment provided in the residential treatment center is NOT reasonably likely to resolve the child’s presenting problems as identified by the evaluation;
- The provider is NOT qualified by staff, program and equipment to give the care and treatment required by the child’s condition, age and cognitive ability;
- The nature, purpose, and expected length of treatment have NOT been explained to the child, the child’s parent or guardian, and/or guardian at item;
- The residential treatment is being rendered as custodial care

Discharge Criteria

The participant is considered appropriate for discharge when:

- The participant turns 18 years of age;
- The participant’s presenting signs and symptoms have been stabilized, resolved, or a baseline level of functioning has been achieved;
- The participant’s condition is stable to transition to a less restrictive environment;
- The expected length of treatment has been met and further treatment at this level of care is not medically necessary;
- The multidisciplinary team determines that the participant has met stated objectives and treatment goals;
- The attending physician determines that the participant is stable for discharge;
- Continued treatment at this level would be custodial in nature