**Section 125.100 Overview**

a) Public accountability of the Department's efforts to assist recipients of mental health, developmental disability, or alcoholism services in accessing appropriate levels of aftercare according to their needs is achieved by documenting the process for discharge planning, linkage and aftercare services. Depending on the types of community agencies/facilities involved, this documentation is accomplished at the present time through an information system which is either automated or manual. The uniform method of reporting to be used by all receiving Department organizational units and grant agencies is the Department's extramural system and its subsystem, the aftercare linkage system (ACL). The description of this system and reporting instructions are found in the Department's extramural systems manual, revised July 1, 1980. This current computer system does not allow for recording of the referral to more than one provider. Therefore, it is necessary to indicate the primary agency/facility to whom the recipient is being referred for aftercare treatment/habilitation services even though the discharge plan calls for multiple service providers. The primary agency/facility for a recipient being placed in a licensed long-term care facility must be that designated agency/facility or Department organizational unit which has responsibility for the mandated follow-up monitoring services.

 AGENCY NOTE: For the purpose of documenting the linkage and mandated follow-up monitoring services provided to recipients being placed in a licensed long-term care facility, the receiving agency to whom the recipient is referred shall be either the designated Department organizational unit or the designated grant agency. The linkage of the recipient to the licensed long-term care facility is documented through noting the home code of the facility in which the recipient is placed, using form DMHDD-1001, "Inpatient Statistical Reporting Form".

b) For referral to non-grant agencies or non-state-operated facilities the method of reporting is similar but the documentation is effected through other reporting mechanisms set forth in this Part.

c) Accurate recording of the discharge/linkage/aftercare status for each person discharged from Department facilities is fundamental to the effective management of the DLA system. The process explained in this Part is absolutely necessary to document the successful linkage and provision of aftercare services to the discharged recipient to be documented within the Department.

d) When the discharge plan has been completed and the recipient is ready for discharge, documentation is necessary to indicate the recipient's agreed upon referral according to the following categories:

1) Referred for aftercare treatment/habilitation services

A) To a Department grant agency;

B) To a Department organizational unit;

C) To a Department purchase care facility;

D) To a non-Department funded agency;

E) To a licensed, registered, or certified private practitioner;

F) To a Veterans Administration (VA) facility;

G) Remanded by the court to another setting; or

H) Transferred to another state.

2) Not referred for aftercare treatment/habilitation services

A) Recipient refused aftercare services;

B) Aftercare, provided within the formal human service system structure, is not required; or

C) Left against staff advice.