



CHILD Functional Family Therapy

PROGRAM DESCRIPTION

Functional Family Therapy (FFT) seeks to prevent or decrease behaviors such as delinquency, violence, disruptive behavior, and substance use. The goal is to improve family communication and supportiveness, while decreasing negativity and hopelessness. FFT serves families with children between the ages of 10 and 19. Length of treatment is 14 weeks, with 1 hour of direct contact per week.

Family members can choose to receive other treatment services as necessary, with the exception of the identified patient who cannot simultaneously receive Mobile Therapy. If a child is admitted to RTF, the family may not continue in FFT.

MEDICAL NECESSITY CRITERIA (OMHSAS-approved)

Admission Criteria

Member must meet all of the following criteria:

1. The individual has a diagnosis of a mental disorder according to the most recent version of the Diagnostic and Statistical Manual of Mental Disorders characterized by externalizing behaviors such as Conduct Disorder, Intermittent Explosive Disorder, ADHD, and Oppositional Defiant Disorder. Other mental health disorders may be appropriate in conjunction with externalizing behaviors mentioned above which require and can reasonably be expected to respond to therapeutic intervention. Intellectual Disability or Substance Use Disorders cannot stand alone. In addition the individual is between the ages of 10-18 but children or adolescents falling outside this age range may be assessed on an individualized basis for appropriateness of treatment.
2. The individual has an emotional or behavioral problem of such severity that functioning in his/her home or community requires specialized intervention.
3. The individual is able to remain in his/her home and has at least one caregiver willing to participate. The individual's caregiver is not able to adequately manage the individual's behavioral problems and needs to learn new behavioral management techniques.

Member must also meet one of more of the following criteria:

1. The individual is adjudicated and on probation, or returning home from out-of-home care.
2. The individual is at risk for out-of-home placement.
3. There is a history of problematic substance use by the individual and/or family members.

4. There is a documented history of previous unsuccessful interventions.
5. The individual has been a chronic or violent juvenile offender.
6. The individual has experienced a recent crisis or high family conflict.
7. There has been, or is currently, multiple system involvement (e.g., school, behavioral health treatment, substance use treatment, JJS, DHS, etc.)

Continued Stay Criteria

Member must meet all of the following criteria

1. The individual's condition continues to meet admission criteria at this level of care.
2. The individual's treatment does not require a more intensive level of care, and no less intensive level of care would be appropriate.
3. The treatment plan includes the individual's and family's goals and utilizes identified strengths and preferences. The treatment plan has been developed, implemented and updated, based on the consumer's clinical condition and response to treatment. Treatment planning should include active family or other support systems involvement, as appropriate and/or feasible, and comprehensive assessment of family functioning.
4. An individualized discharge plan has been developed which includes specific realistic, objective and measurable discharge criteria and plans for timely, appropriate follow-up care.
5. Progress through the phases of treatment in relation to specific symptoms or impairments is clearly evident and can be described in objective terms, but goals of treatment have not yet been achieved, **or** adjustments in the treatment plan to address lack of progress are evident, **or**, if goals have largely been achieved, a period of stability is needed to ensure sustainability of gains.
6. The individual is actively involved in treatment, or there are active, persistent efforts being made that can reasonably be expected to lead to the consumer's engagement in treatment
7. There is a documented active attempt at coordination of care with relevant providers and multisystem partners when appropriate.

Discharge Criteria

Member must have an individualized discharge plan with appropriate and promptly available follow up care

AND

Member must meet any of the following criteria:

1. The individual's/family's documented treatment plan goals and objectives have been substantially met.

2. The individual/family no longer meets admission criteria, or meets criteria for a less or more intensive level of care.
3. The individual and/or family have not benefited from FFT despite documented efforts to engage the individual and/or family and there is no reasonable expectation of progress at this level of care despite treatment planning changes.