


COBB COUNTY COMMUNITY SERVICES BOARD

Policy # 8081	Behavioral Health Crisis Center/CSU – General Certification Requirements	Service Delivery
Origination Date: July 2, 2015		
Revision Date: January 18, 2019		
Reviewed Date: December 16, 2016		
Approved: 		
Foster Norman, Executive Director		

POLICY:

It is the policy of the Board’s Behavioral Health Crisis Center (BHCC) Crisis Stabilization Unit (CSU) to comply with the general requirements and information pertinent to a CSU seeking certification, as well as the procedure for reporting a planned or unplanned change while currently operating under valid certification or a formerly issued DBHDD license

PROCEDURE:

- A. A certificate is required to operate the BHCC’s CSU. In detail:
 - 1. No person, corporation, or entity offers or provides CSU services unless designated as an emergency receiving and evaluating facility and certified by DBHDD.
 - 2. A certificate must be obtained prior to admissions.
 - 3. No certificate is issued unless the CSU is in compliance with policy.
 - 4. The BHCC’s CSU must display the certificate in a public area that is readily visible to individuals, employees, and visitors.
- B. A BHCC/CSU certificate must not be altered
- C. A BHCC/CSU certificate must not be transferred or re-assigned.
- D. Any changes in bed capacity must be reported and obtain approval from DBHDD in writing including changes in Temporary Observation capacity.
- E. The BHCC/CSU must notify DBHDD using a DBHDD’s Change of Information Form (Attachment A) at least thirty (30) days prior to a planned, or in the event of an unplanned change, within seventy-two (72) hours of any of the following occurrences:
 - 1. Any construction, renovation, or modification of the BHCC or Temporary Observation component
 - 2. Date of cessation of operation
 - 3. Moving to a new location
 - 4. Change in BHCC name or phone number
 - 5. Change in ownership
 - 6. Change in agency CEO, site director, medical director, and/or nurse administrator of the BHCC/CSU.
- F. Certified BHCC/CSUs that have made a change in location or ownership are required to submit an Application for Initial or New BHCC/CSU Certification.

- G. At the determination of DBHDD, an applicant who is in compliance with all applicable polices, DBHDD standards, rules and regulations, and Federal, State and local laws will be issued an initial certification.
1. The initial certificate for a new facility is valid for the first year of operation. The term of the initial certificate does not exceed one (1) year from the date of issuance.
 2. Prior to the expiration of the initial certificate, DBHDD conducts a review of the BHCC/CSU and any other associated BHCC/CSU and/or Temporary Observation component for compliance with DBHDD policy and applicable rules and regulations.
 3. Pursuant to a satisfactory review, DBHDD issues a certificate within will be valid for a period of up to five (5) years.
- H. The CSU must return the certificate to DBHDD immediately after change in location, change in ownership, suspension or revocation of certification occurs. Failure to return the CSU certificate to DBHDD does not mean the CSU is certified. When the CSU receives notice from DBHDD that the certificate is no longer valid, the CSU is no longer certified.
- I. DBHDD may deny an agency a certificate for reason including but not limited to:
- a. The applicant's failure to provide the required application or renewal information.
 - b. Operation of a CSU which was decertified or had its contract canceled under the Medicare or Medicaid program in any state; federal Medicare or state Medicaid sanctions or penalties; federal or state tax liens; unsatisfied final judgments; eviction involving any property or space used as a CSU; unresolved state Medicaid or federal Medicare audit; denial, suspension, or revocation of a hospital license, belonging to the governing body, owner or operator of an applicant, for a license for any health care facility in any state; a court injunction prohibiting ownership or operation of a facility.
 - c. Violation of any DBHDD policy or DBHDD standard, or of any Federal, State, or local law, rule, or regulation.
- J. Non-compliance with review
- a. If as a provider we are found to be non-compliant, we may be required to submit a Corrective Action Plan (CAP) to provide reasonable assurance the deficiencies identified are corrected. CAPs are requested, submitted, and monitored in accordance with Internal and External Reviews and Corrective Action Plans, 13-101.
 - b. DBHDD determines the appropriate course of action following a provider's noncompliance taking into consideration the severity of the noncompliance, frequency of occurrence, and compliance history. For actions taken by DBHDD, see CSU: Sanctions and Penalties, 01-348.