

**COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF MENTAL HEALTH
CERTIFICATION OF
PROGRAMS OF ASSERTIVE COMMUNITY TREATMENT PROCEDURES
DIVISION OF COMMUNITY LICENSING
BULLETIN #2025-001 PACT
November 10, 2025**

This Bulletin is issued by the Department of Mental Health pursuant to M.G.L. c. 19.

I. PURPOSE

To ensure the quality of services and compliance with evidence-based practices, DMH hereby establishes this certification process for Programs of Assertive Community Treatment (PACT) contracted by the Department of Mental Health (DMH or MassHealth to provide PACT Services (Commonwealth Contracted PACT Program). In accordance with this Bulletin #2025-001 PACT, Commonwealth Contracted PACT Programs shall be required to obtain and maintain certification from DMH to demonstrate the PACT Programs operate in fidelity to the national PACT evidence-based practice standards as outlined by the Substance Abuse and Mental Health Services Administration (SAMHSA) and the National Alliance on Mental Illness (NAMI).

II. SCOPE

The DMH PACT Certification process established by this Bulletin #2025-001 PACT applies to any PACT Program as a condition of becoming and remaining a Commonwealth Contracted PACT Program. The DMH PACT Certification process does not apply to any PACT Program that chooses to operate without becoming a Commonwealth Contracted PACT Program. The certification requirements established by this Bulletin #2025-001 PACT do not otherwise modify any rules or obligations applicable to a PACT Program operating in Massachusetts.

III. DEFINITIONS

The following capitalized terms, unless otherwise stated, shall have the meaning given in this Section III.

Adult: Persons eighteen (18) years of age or older.

Commonwealth Contracted PACT Program: A PACT Program providing PACT services in Massachusetts exclusively to adults pursuant to contracts with DMH pursuant to 104 CMR 28.00 or MassHealth pursuant to 130 CMR 464.00.

DMH: Commonwealth of Massachusetts Department of Mental Health

eTMACT: The electronic version of the TMACT (Tool for Measurement of ACT), developed by the University of North Carolina to assess fidelity of ACT Teams to the ACT Model. The eTMACT is comprised of forty-seven (47) program-specific items each rated on a five-point scale. Scores are averaged to determine an overall program fidelity level ranging from 1 to 5.

Fidelity Review: The process by which a PACT Program staffing, practices, policies, procedures, operating principles, and location are evaluated relative to a formal set of standards using an evidence-based or evidence-informed review tool and resulting in a numerical score indicating the level of adherence to the model.

Individual: A person who has been enrolled into services.

MassHealth: The Massachusetts medical assistance and benefit programs administered by the MassHealth agency pursuant to Title XIX of the Social Security Act (42 U.S.C. 1396a et seq.), Title XXI of the Social Security Act (42 U.S.C. 1397aa et seq.), M.G.L. c. 118E, and other applicable laws and waivers to provide and pay for medical services to eligible members. The MassHealth Agency is the Massachusetts Executive Office of Health and Human Services in accordance with the provisions of M.G.L. c. 118E

PACT Provider: The entity that is primarily responsible for the overall administration, operation, and management of a PACT Program.

Program: A PACT that has a set capacity, service area, a designated treatment team, a Program Director, and enrolled Individuals.

Program of Assertive Community Treatment (PACT): A comprehensive service model for adults with serious mental illness who may benefit from intensive coordinated services and have not responded well to program or office-based interventions. The Program provides services through a multidisciplinary team approach that offers active, ongoing, comprehensive, integrated community-based services to the fifty or eighty Individuals typically served by each PACT team. These services are designed to be responsive to changing needs and are typically long-term. Services include outreach, engagement, rehabilitation, clinical, health-related, and recovery-based interventions and support. The service model is the evidence-based practice referred to by the Substance Abuse and Mental Health Services Administration (SAMHSA) and the National Alliance on Mental Illness (NAMI) as an Assertive Community Treatment (ACT) program and is outlined in the Substance Abuse and Mental Health Services Administration's Assertive Community Treatment manual.

Program Site: The location of the PACT Program headquarters.

Substance Abuse and Mental Health Services Administration (SAMHSA): An agency within the U.S. Department of Health and Human Services that leads public health and

service delivery efforts that promote mental health, prevent substance misuse, and provide treatment and supports to foster recovery while ensuring equitable access and better outcomes.

IV. PROGRAMS ELIGIBLE FOR FILING AN APPLICATION FOR CERTIFICATION

A. PACT Program. To be eligible to file an Application for PACT Certification or for recertification, the PACT Program must meet the following requirements:

1. The location of the PACT Program's office space and the services provided by the PACT must be in Massachusetts.
2. The PACT Program must either (1) hold a contract with DMH to provide the PACT Program or (2) be enrolled and actively participating with MassHealth as a billing provider of services delivered by the PACT Program or (3) the Provider must intend to apply to MassHealth within the year of becoming certified to be able to bill for the PACT service provided by the PACT Program.
3. The PACT Program serves only adults 18 years of age or older.

B. PACT Provider. To be eligible to file an application for PACT Certification or recertification of a PACT Program, the PACT Provider must meet the following requirements:

1. The Provider must be able to demonstrate to the satisfaction of DMH that the Provider has sufficient experience and is suitable to operate a Certified PACT Program in Massachusetts. In determining whether an applicant has sufficient experience and is suitable, DMH shall consider all relevant information including, but not limited to, (a) the experience of the Provider's corporate leadership in providing services to adults with serious mental illness, (b) the experience of the proposed PACT Program's leadership in providing services to adults with serious mental illness, and (c) the PACT Provider's and PACT Program's history of prior compliance with state and federal laws governing the provision of publicly funded health care services.
2. The Provider must be authorized to do business in Massachusetts, as is required by law and have the legal capacity to operate the PACT Program, as demonstrated by such documents as articles of incorporation and corporate by-laws.
3. The Provider must maintain general and professional liability insurance, as well as workers' compensation insurance coverage required by M.G.L. 152, § 25C, for the PACT Program.
4. The Provider must have sufficient resources to support the PACT Program as documented in a business plan and proposed budget for the Program.

V. INITIAL APPLICATION AND PROVISIONAL CERTIFICATION

All PACT Programs that do not currently have DMH PACT Certification and for which certification is sought must go through the Initial Application and Provisional Certification process described in Section V. PACT Programs that currently have DMH PACT Certification and which seek to renew their certification must follow the process set forth in Section VIII *Renewals*.

A. Initial Application

1. Providers seeking DMH Certification for a PACT Program must meet the eligibility requirements set forth in Section IV and submit a completed application for PACT Certification to the DMH Division of Community Licensing. An application must be submitted in a manner and on a form prescribed by DMH.
2. An application must be signed by an individual who has signatory authority for the PACT Provider.
3. DMH will first review a submitted application to determine if the requirements for filing an application set forth in Section IV are met. If they are not met the application will be rejected and notice will be given to the PACT Provider in accordance with Section XIII.C. If the requirements for filing an application are met, the application will be reviewed to determine if it is complete. To be complete, all parts of the application must be filled out with enough details to enable DMH to determine if the criteria set forth in Section V.A.4. are met by the Program. If an application is not complete the applicant will be required to submit additional information. DMH will notify the applicant when an application is deemed complete.
4. A completed application will be reviewed to determine if the following criteria are met.
 - a. **Staffing.** Current staffing is sufficient to meet PACT service requirements for the size and number of Individuals currently served by the Program and, if the Program is not at full capacity, the Program has submitted a reasonable staffing plan defining how staff will be increased as the number of Individuals increases until the Program is at full capacity. At a minimum a Program of one or more Individuals requires three Program staff persons to fill the following roles: (1) a Full Time Program Director; (2) a Prescriber; (3) a Nurse, and other functions provided for as reflected in Appendix A needed for PACT services.
 - b. **Policies and Procedures.** The Program has all procedures and policies that are specified in the application. The procedures and policies were either drafted or reviewed by the Provider in the past year. The procedures and policies are maintained in a manner that makes them readily available staff and staff are regularly trained in policies and procedures. The procedures and policies that were submitted with the application reflect the PACT requirements for the topics covered, the team and multidisciplinary service model, and service philosophies.

- c. Organizational Charts.** The submitted organizational charts demonstrate reasonable clinical and medical oversight and consultation, and sufficient IT, billing, legal, administrative, and quality improvement services (a) for the PACT Program, and (b) within the PACT Program.

If the criteria are met, DMH will conduct a site feasibility assessment of the Program Site pursuant to Section V.B. If the criteria are not met, the application for certification will be denied and notice will be given to the applicant pursuant to Section XIII.C.

B. Site Feasibility Assessment

1. If a Program meets the criteria set forth in V.A.4. above, DMH will schedule and conduct a site feasibility assessment of the Program Site. The site will be evaluated on the criteria set forth in Appendix B.
2. If the Program Site is determined to meet the criteria set forth in Appendix B, the Program will be granted Provisional Certification as described in Section V.C. If the Program Site is determined not to meet the criteria the application will be denied. Notice will be given to the applicant as set forth in Section XIII.C

C. Provisional Certification

1. **Required Monthly Reports.** During the period a Program holds a Provisional Certification, the PACT Provider must submit to the DMH Division of Community Licensing the following information monthly. This information is in addition to any information it is to submit in accordance with Section XIV.B:
 - a. staff vacancies,
 - b. the Program census, and
 - c. other such information determined necessary by DMH to evaluate the Provider's readiness for a Fidelity Review.

This information shall be provided on a form and in the manner prescribed by DMH.

2. **Fidelity Review Required.** A PACT Program with Provisional Certification will be subject to a Fidelity Review when the Program meets the following requirements:
 - a. It has an active census of at least 30 Individuals.
 - b. It has been in operation for at least a year.
 - c. The PACT Provider must either (1) hold a contract with DMH to provide the PACT Program or (2) be enrolled in and actively participating with MassHealth as a billing provider of services delivered by the PACT Program or (3) have applied to MassHealth to be able to bill for the PACT service provided by the PACT Program and the application is still pending.

When a Program with a Provisional Certificate meets the criteria for a Fidelity Review, DMH will work with the PACT Program to schedule a review including when the Program must begin and provide any documentation necessary for the review to occur.

- 3. Duration.** Provisional Certification will be valid for up to one year from the date of issuance, unless (a) it is terminated earlier in accordance with Section XIII.A or (b) the PACT Program during the one year period qualifies for a Fidelity Review in accordance with Section VIC.2 and the Fidelity Review is completed; in such situation the Provisional Certification shall terminate upon one of the actions described in Section VII.A. being taken by DMH.

If the PACT Program during the one-year period of its Provisional Certification is determined by DMH to meet the requirements for a PACT Fidelity Review and one is scheduled by DMH during that one year period but is not completed within that one year period, the Provisional Certification shall continue to be in effect until the Fidelity Review is completed or one of the actions described in Section VII.A. is taken by DMH.

VI. FIDELITY REVIEWS

DMH may add, modify, or remove criteria for certification and Fidelity Reviews as it deems appropriate.

- A. eTMACT.** DMH will utilize an evidence-based or evidence-informed tool to review and evaluate ACT Team fidelity. DMH has identified the electronic version of the Tool for Measurement of ACT (eTMACT) for this purpose. DMH may change Fidelity Review tools at its discretion.
- B. Review Teams.** DMH review teams will be comprised of 2-4 DMH staff and/or an agent of DMH and will conduct reviews over approximately two days. DMH fidelity review team activity will include (1) record review, (2) observation, (3) interviews of staff, Individuals, guardians and/or family members, and (4) other activities as determined necessary to assess Program fidelity.
- C. Review Schedule.** Prior to the review, DMH will establish a review schedule with the PACT Provider and establish a portal or other method for Provider provision of required documentation prior to the established review date.
- D. Report.** Upon the completion of the review, DMH will issue a draft report for review and comment. The PACT Provider shall attend a debriefing to review the report and provide additional information, as necessary, prior to DMH's issuing a final report and fidelity score.
- E. Fidelity Score.** DMH will assign the final, aggregate fidelity score based on the scoring provided through the Fidelity Review process as adjusted by DMH as a result of the additional information provided.

VII. CERTIFICATION ACTIONS FOLLOWING A FIDELITY REVIEW

A. Actions to be taken upon the Completion of a Fidelity Review.

1. DMH will award a Provider with a score indicating full/high fidelity (3.7 or higher) with a two-year Certification.
2. DMH will award a Provider with a score indicating low-to-moderate fidelity (3.0 to 3.6) with a one-year Provisional Certification.
3. DMH may decertify a Provider with a score indicating poor fidelity (under 3.0) or award the Provider a Provisional Certification subject to implementation by the Provider of a corrective action plan approved by DMH. To be issued a Provisional Certification Subject to a Corrective Action, the following requirements must be met;
 - (a) The Provider must demonstrate to DMH's satisfaction a good faith intent to meet all the requirements;
 - (b) DMH finds the service offered protects or will protect the health, safety, and well-being of the persons served; and
 - (c) DMH finds that the Provider evidences the potential to achieve a minimal Fidelity Score of 3.0 or higher within six months or less.

A Provisional Certification Subject to a Corrective Action Plan will be valid for the period specified in the Certification, not to exceed six months and may be renewed once for no more than six months. A Provider with a Provisional Certification Subject to a Corrective Action Plan must provide monthly reports to DMH in accordance with Section VII C. 2. If within the specified duration of Provisional Certification Subject to a Corrective Action Plan or the renewal of such DMH determines that the corrective action plan has been met, it may award Provisional Certification to the Provider. The Provisional Certification will be valid for one year from the date it is issued and may be renewed as set forth in Section VIII. Failure to implement the corrective action plan in accordance with its terms may result in suspension or termination of the Provisional Certification Subject to a Corrective Action Plan as specified in Section XIII.

B. Certification. Certification will be valid for two years from date of issuance, unless it is terminated earlier in accordance with Section XIII.

C. Provisional Certification. The provisions in this Section VII C. apply to Provisional Certification not Subject to a Corrective Action Plan unless otherwise stated in Section VII. A.

1. PACT Providers awarded a Provisional Certification will be provided with a copy of their Fidelity Review report highlighting areas needing improvement. A Provider must provide the DMH Division of Community Licensing with a plan for addressing the areas needing improvement and a timeline for implementing the full plan.

2. Monthly Report. PACT Providers with Provisional Certification issued following a Fidelity Review must during the one-year certification period submit to the DMH Division of Community Licensing the following information monthly:

- a. Staff vacancies,
- b. The Program census, and
- c. A description of all actions taken during the previous month addressing deficiencies as identified through the Fidelity Review process by DMH.

This information shall be provided on a form and in the manner prescribed by DMH.

3. Duration of Provisional Certification. The Provisional Certificate will be valid for one year from date of issuance unless terminated earlier pursuant to Section XIII.

VIII. RENEWALS

A. Provisional Certification Resulting from an Initial Application. Upon the expiration of a Provisional Certification resulting from an Initial Application due to the Program not meeting the eligibility requirements for a Fidelity Review, if the PACT Provider wants to obtain certification for the same PACT Program it will need to follow the process set forth in Section V and file a new initial application. There is no option to renew the Provisional Certification.

B. Certification and Provisional Certification Resulting from a Fidelity Review. If a Program currently has Certification or Provisional Certification as a result of a Fidelity Review or the completion of a corrective action under a Provisional Certification Subject to a Corrective Action Plan, it may seek renewal of the Certification by filing at least ninety days prior to the expiration of their current certification a renewal application with the DMH Division of Community Licensing. A renewal application must be submitted in a manner and on a form prescribed by DMH.

DMH will review the application for completeness and to determine if the PACT Program still meets the requirements for a Fidelity Review as set forth in Section V.C.2. If the application is not complete, the applicant will be asked to submit more information. If the Program does not meet the requirements for a Fidelity Review, the PACT Provider will need to file an initial application for certification as set forth in Section V to pursue certification for the Program.

If the application is complete and the requirements for Fidelity Review are met, DMH will schedule a Fidelity Review. DMH will work with the PACT Provider to schedule a Fidelity Review as described in Section VI. and upon the completion of the Review DMH will take the appropriate action described in Section VII. DMH has the option of extending the current Certification until such time as the Fidelity Review is completed, if necessary.

IX. APPLICANTS, PACT PROVIDER AND PROGRAM RESPONSIBILITIES DURING THE CERTIFICATION PROCESS

Applicants, PACT Providers and Programs must cooperate and participate in all aspects of the certification process, including inspection of the service site; providing all required information in the format specified by DMH; providing access to records; having staff participate in staff interviews and post review debriefings; and providing such additional information or access as DMH deems necessary to complete and monitor the certification process.

X. ADMINISTRATIVE RECONSIDERATION OF CERTIFICATION DECISIONS

- A. Request for Administrative Review.** Any Provider subject to an adverse decision made by DMH pursuant to this Bulletin may submit a written request for administrative reconsideration to the DMH Director of Program Evaluation and Community Licensing within fourteen calendar days of receipt of notice of such adverse action. The request must fully state and support the reasons for reconsideration.
- B. Administrative Review.** DMH shall conduct an administrative review, based solely on the evidence presented within the written request and DMH records; provided, however, that DMH may, in its sole discretion, request additional documents and information from the Provider
- C. Waiver.** The failure to file a request for administrative review within fourteen calendar days of receipt of the adverse notice constitutes a waiver of the right to request reconsideration.

XI. CHANGE OF PROGRAM LOCATION OR CHANGE IN OWNERSHIP TRANSFERABILITY

A. Change In Program Location.

A PACT Provider may not move a PACT Program to another address or location without receiving prior express written approval from DMH. Approval will be subject to the DMH doing a site feasibility assessment as described in Subsection V.A. of the new Program Site. DMH also reserves the right to require a new Fidelity Review if there is an indication that the move will impact more than the site location.

If the move is approved, a new Certificate will be issued for the new address.

If a move is made without DMH approval, DMH may revoke the PACT Program's Certification.

B. Change in PACT Provider Ownership.

1. At least 30 calendar days in advance of any transfer of ownership of a PACT Provider, the potential new owner, if they want to acquire a DMH Certificate for the PACT Program, shall submit a Notice of Intent to Acquire Ownership to DMH on a form supplied by DMH. DMH shall notify the potential new owner in writing of the date on

which the form is deemed completed. Within 30 calendar days of such date, DMH shall determine if the potential new owner meets the requirements set forth in Section IV. Upon a finding by DMH that the requirements have been met, the potential new owner shall file an application for Certification in accordance with Section V within two business days of the Transfer of Ownership.

2. The application filed as a result of a Transfer of Ownership, if timely filed, shall have the effect of a Conditional Certification from the date of the Transfer of Ownership until such time as DMH takes action on the application. If the application is not filed on time, the application will not have such effect, and the existing certification of the PACT Program shall lapse.

XII. COMPLIANCE WITH PACT STANDARDS AND ENFORCEMENT

A. Departmental Inspection

1. Any employee or agent of DMH, including a consultant providing services for DMH, who are authorized by the DMH Division of Community Licensing may visit and inspect a PACT Program Site to determine whether such site is in compliance with applicable laws and PACT standards.
2. **Deficiency Identification and Correction.**
 - a. Whenever DMH finds that a Service Site or service is not in compliance with any applicable law or regulation, DMH shall, if it deems the deficiency remediable, issue a corrective action order.
 - b. A correction order shall be in writing and shall include a statement of the deficiencies found, the period within which the deficiency must be corrected, and the provision of law and regulation relied upon.
 - c. Within seven days of receipt of the correction order, the Provider may submit a written request to the Director of Program Evaluation and Community Licensing for administrative reconsideration of the findings or any portion thereof, which shall be granted forthwith.
 - d. If the Provider fails to correct any deficiency within the period prescribed for correction, DMH may require the Certified Program to undergo another Fidelity Review and upon the completion of such review take one of the actions set forth in Section VI.

XIII. SUSPENSION, REVOCATION AND DENIAL OF CERTIFICATION

- A. DMH may revoke, suspend or deny issuance or renewal of Certification if one or more of the following applies:
 1. The PACT Program or the PACT Provider no longer meets the Eligibility Requirements for filing an application for certification as set forth in Section IV.

2. The PACT Program refused to admit at any time any person authorized by DMH to inspect the Service Site.
3. The PACT Provider made misleading or false statements in the certification process or failed to furnish information or reports required under these procedures.
4. The PACT Program failure to meet applicable fidelity standards is putting staff or Individuals at risk of harm.
5. The PACT Program fails to meet the requirements for filing an application or for Certification as set forth in Sections IV.A., V., or VII.
6. The PACT Provider's MassHealth status regarding billing for PACT services or the DMH PACT contract for the Service Site has been terminated.

B. Suspension in Emergencies

1. DMH may refuse to issue or renew or may suspend any Certificate without providing the opportunity for prior hearing if the failure of the Provider to comply with any applicable PACT standards appears to have resulted in an emergency situation which endangers the life, health or safety of an Individual or staff.
2. DMH shall hold a conference with the Provider and, if it has not done so before, provide a written statement as to its reasons for its action within three days of suspension or refusal to issue or renew a certificate.

C. Notification

1. When DMH determines to deny, suspend, or revoke certification, it shall provide written notice to the applicant if applicable or to the PACT Provider, notifying it of the intended action, of the grounds therefore, and of the applicant or holder's right to request an administrative review pursuant to M.G.L. c. 30A as more fully described in Section X.
2. Notice will also be given to the applicable DMH Area Directors and to MassHealth.
3. Nothing in this Procedures prevent DMH or MassHealth from taking action pursuant to their respective contract or provider agreement.

XIV. Duties of Providers with Certified PACT Programs

A. Nondiscrimination

1. No Certified PACT Program shall discriminate in the provision of services against any person on the basis of race, color, ethnicity, religious creed, national origin, sex, sexual

orientation, gender identity, age, disability, genetic information, ancestry or status as a veteran.

2. No Certified PACT Program shall discriminate against any Medicaid recipient.

B. Providing Information to DMH

1. **Management Information.** Upon request, a Certified PACT Program shall timely submit management information data in a manner prescribed by DMH including, but not limited to, enrollments, discharges, persons demographics, services and outcomes, and staff patterns and characteristics. It shall also submit to DMH such data, statistics, schedules, or information as DMH may require for the purposes of certification and/or monitoring and evaluating a service as well as data required to meet federal reporting requirements including, but not limited to, outcome data.
2. **Organizational Chart.** A Certified PACT Program shall maintain and make available to DMH, any employee, or a person, an organizational chart and written policy that describes the organizational structure including lines or authority, responsibility, communication and staff assignment.
3. **Legal Proceedings.** A Certified PACT Program shall report to DMH in a manner prescribed by DMH any civil action or criminal charge that is initiated against the PACT Provider, Program or any person employed or contracted by the Provider or Program that relates to the delivery of the service or may affect the continued operation of the Program. The report shall be provided no later than one business day after the initiation of any legal action.
4. **Closure.** When a Certified PACT Program plans to cease operation, the Provider shall notify DMH immediately.
5. **Emergency Evacuation.** Upon the evacuation of a Program Site due to an emergency situation, the Provider shall notify DMH as soon as it is practical to do so.
6. **Interruption or Suspension of Service.** If a Certified PACT Program determines that the health, safety or well-being of persons is in imminent danger as a result of conditions existing within the service, the Certified Provider shall notify DMH immediately upon becoming aware of the danger to persons.
7. **Change of Program Director.** A Certified PACT Program shall notify DMH at least 14 calendar days before a planned change of Program Director. If the change is made unexpectedly, the Certified Provider shall notify DMH on the next business day of the change of director in a manner prescribed by DMH.
8. **Death, Serious Incident, Accident or Fire.** A Certified PACT Program shall notify DMH, in a manner prescribed by DMH, immediately upon any of the following occurring with the PACT Program:

- a.** learning of the death of any person currently admitted to the Program, regardless of where the death occurs;
 - b.** full or partial evacuation of the site for any reason;
 - c.** fire;
 - d.** suicide;
 - e.** criminal acts alleged to have been committed by persons, staff or contractors;
 - f.** alleged abuse or neglect, or physical or sexual assault, or prohibited interaction which occurs between or among persons currently or previously treated by the service, or which occurs between or among such persons and current or former staff regardless of location, including any incident which is reported to another agency or law enforcement;
 - g.** alleged abuse or neglect at the Program which includes the following:
 - (1) any reports of child abuse or neglect made under M.G.L. c. 119, § 51A;
 - (2) any reports of elder abuse or neglect made under M.G.L. c. 19A, § 15; and
 - (3) any reports of abuse of a disabled person made under M.G.L. c. 19C.
- 9.** A Certified PACT Program shall report to DMH any other serious incident related to the delivery of services that seriously affects the health, safety, or well-being of a person(s) or that causes serious physical injury to a patient(s) within two business days of the date of occurrence of the event.

APPENDIX A: PACT STAFFING TABLE

STAFF	PACT – 50 Individuals Served	PACT – 80 Individuals Served
Program Director/Team Leader <ul style="list-style-type: none"> • Must have an independent license in nursing, social work, psychiatric rehabilitation, psychology, marriage and family therapy or mental health counseling or a psychiatrist who meets licensing requirements • At least 2 years of direct experience treating persons with serious mental illness • At least 1 year of program management or supervisory experience in a mental health setting One year 	One full-time Program Director/Team Leader	One full-time Program Director/Team Leader
Team Psychiatrist Psychiatrist. Licensed by the MA Board of Registration in Medicine	At least 16 hours each week for 50 Individuals, or equivalent if fewer Individuals	Minimum of 16 hours of psychiatry time for 51 Individuals, with an additional 2 hours for every 6 Individuals added to the team
Therapeutic Staff including Mental health professionals and paraprofessionals (master-level social workers, occupational therapists, rehabilitation counselors, psychologists) <ul style="list-style-type: none"> • Psychologist • Independent clinical social worker • A licensed mental health counselor 	Program staff must include at least 2 full-time therapeutic staff.	Program staff must include at least 4 full-time therapeutic staff.

<ul style="list-style-type: none"> • A marriage and family therapist • Other master and bachelor's level clinicians 		
Registered Nurse	2.0 FTE Nurses who are RNs or APRNs with at least one RN with a minimum of 1 year of experience working with adults with serious mental illness and working knowledge of psychiatric medications.	3.0 FTE Nurses who are RN or APRNs with at least one RN with a minimum 1 year of experience working with adults with serious mental illness and working knowledge of psychiatric medications. The remaining 1.0 nurse can be an RN or LPN.
Certified Peer Specialists	1.0 FTE	1.0 FTE
Substance Use Disorder Specialist	1.0 FTE MA level clinician with at least 1 Year of specialized substance abuse training or supervised experience	1.0 FTE MA level clinician with at least 1 Year of specialized substance abuse training or supervised experience
Employment Specialist	1.0 FTE	1.0 FTE
Dedicated Office-Based Program assistant	1.0 FTE	1.0 FTE
Optional staff <ul style="list-style-type: none"> • Recovery support staff • Other Licensed Mental and Substance Use Disorder Practitioners • Mental health workers • Housing Specialist 		

APPENDIX B: Components of a DMH Community Licensing PACT Program Site Feasibility Assessment

- EXTERIOR
 - Neighborhood

- Building Exterior
- Parking that is sufficient for PACT staff, Individuals and Families
- Easy and Direct Access for Individuals and Families
- Access for Persons that have physical handicaps
- INTERIOR
 - Common workspace to facilitate communication among staff
 - Three or four rooms which can also serve as office space or as interview rooms or quiet workspace for all staff to use
 - Space for temporary storage of Individuals' possessions
 - Room for secure medication storage
 - Space for secure storage of the records of Individuals
 - Space for office machines (copy machine, fax machine) and storage of office supplies
 - Smoke/Heat/Fire Alarm System/Carbon Monoxide Detector
 - Fire Extinguishers on site
 - Means of Egress