

## **Checklist for Completion of Forms**

### **Children & Adolescents Not Admitted to Licensed Inpatient Acute Care or Residential Treatment Facilities**

**Please make sure you can answer YES to all questions:**

- Were you unable to obtain admission for a child or adolescent to acute care for 8 hours? **OR**
- Were you unable to obtain admission for the child or adolescent to residential treatment for 30 days?
- If you wrote in the name of an additional facility:
  - ▶ ▶ Is it licensed by DBHDS?
- Have you checked ALL reasons admission was not obtained and ALL facilities that you contacted?
- If you checked “Bed available, but child not placed”, did you also check AT LEAST ONE reason the child could not be placed under Child-Specific, Funding, or Other Issues?

Please contact Karen Grabowski, Office of Child & Family Services at [k.grabowski@dbhds.virginia.gov](mailto:k.grabowski@dbhds.virginia.gov) if you need additional assistance.

Thank you for providing this information to DBHDS.