



Probation Service Definition

ADMINISTRATIVE OFFICE OF THE COURTS & PROBATION

SERVICE NAME	Crisis Stabilization <input type="checkbox"/> Adult <input checked="" type="checkbox"/> Juvenile
Category	Out-of-Home placement/Non-treatment
Setting	Residential-Group Home A, Group Home B, Shelter Only
Facility License	As required by the Nebraska Department of Health and Human Services (DHHS)-Division of Public Health
Service Description	Crisis Stabilization is a licensed non-treatment facility providing 24-hour supervision for youth in an age-appropriate, individualized and structured group setting. This service is utilized to achieve stabilization in a therapeutic environment until a youth can transition home, community based or a treatment placement. Crisis Stabilization may be utilized as an alternative to detention. Youth in this service require crisis intervention, consistent behavior management, supervision and therapeutic services.
Service Expectations	<ul style="list-style-type: none"> • Complete an initial diagnostic interview (IDI) if one has not been completed within the preceding 12 months, or if one is not available. This is part of the crisis stabilization service. If an IDI has been completed within the last 12 months a licensed mental health practitioner (onsite) should review and update as necessary via an addendum • The agency with the youth, probation/problems solving court officer and other stakeholders identified will develop a written individualized service plan based on services referral information (criminogenic risk, needs and responsivity) relevant collateral documentation/assessments and youth goals • The plan will focus on preparing for transition home or to a necessary placement. The initial plan will be developed within 72 hours of placement and must address goals to include, behavioral, treatment/evaluation services, medication compliance, education, transition planning, and how criminogenic risk levels relate to negative behaviors • The plan will ensure 24-hour crisis intervention (by a licensed clinician) is available to aid in the stabilization of crises. The written safety plan (crisis) plan will be updated as needed throughout the service. The youth, agency staff, parent/guardian/caregiver must be able to demonstrate they have the knowledge and skills to implement the safety plan • Youth may continue therapeutic services with their current clinician in addition to crisis stabilization services. Crisis stabilization staff will collaborate and be in communication with the youth's current treating clinician outside of crisis stabilization. Note: Financial assistance (outside of the crisis stabilization rate) will not be provided to the current clinician if they are employed or affiliated with the crisis stabilization provider • Clinical staff will work in collaboration with placement staff to assist the youth in achieving stabilization goals

	<ul style="list-style-type: none"> • Participation in family engagement team meetings in person or via teleservices shall occur to provide necessary information on the youth’s behavior and progress in crisis stabilization service as well as assist the family in preparing for the youth’s return home or to a necessary placement • Family engagement shall include regular phone contact and visitation with family members. Family engagement shall be flexible to meet the non-traditional hours needed by families. Phone contact and visits shall not be tied to behavior management levels and shall not be removed as a consequence • Based on the written plan, the youth shall be involved in structured programming to include evidence based crisis intervention strategies, behavior management plan, community support planning, family engagement, teaching/educational interventions, and strategies that aid in individual skill development • The agency will document the progress toward the individualized daily program schedule in their reports. Probation/ problem solving court officer will verify with staff to determine if progress is being made. If progress is not indicated, the staff shall provide a rationale as to what changes will be made to initiate a plan to increase progress • The agency will provide transport as necessary to and from dental and medical appointments, school, court, therapy, home visits and routine day-to-day activities. Transportation costs within a 25-mile radius will be the responsibility of the provider. Transportation beyond that radius will be the responsibility of the parent/guardian • The agency will collaborate and proactively plan with the probation/problem solving court officer for the discharge of youth from service, this will plan will begin upon placement in crisis stabilization. During this process a trauma informed approach will be utilized to prepare the youth for the transition to ensure the most appropriate post-discharge placement is available for the youth prior to discharge. Criteria for discharge will be individualized, determined by the team, and approved by the court • When the youth’s discharge is not planned, the provider will give probation 3 judicial days’ notice in writing. During this time frame, the provider will use a trauma informed approach to prepare the youth for the impending discharge and will work collaboratively with probation to determine the most appropriate post discharge placement for the youth. The plan will include educational needs, clinical needs, living environment etc. A 3 judicial day written notice is not required when the provider and probation mutually agree that it is in the best interest of the youth to move sooner • Probation/Problem Solving Court Staff may make an immediate change in placement without court approval only if the juvenile is in a harmful or dangerous situation (e.g. natural disaster). Approval of the court shall be sought within twenty-four hours after making the change in placement or as soon thereafter as possible. The office shall provide all interested parties with a copy of any report filed with the court by the office pursuant to this subsection. Reference NE Revised Statute 43-297.01. Probation Officers will work collaboratively with facility staff or foster parent(s) to determine if an immediate change in placement is necessary. The team will
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	<p>work collaboratively to execute a plan for the youth’s immediate placement. The youth’s educational, environmental, and emotional needs will all be addressed in this plan</p> <ul style="list-style-type: none"> • If a youth is gone without permission and does not return or cannot be located within 2 hours, the provider/agency will contact the assigned Probation/problem Solving Court Officer or if occurring after hours, the on-call/after hours contact identified for that youth at admission. The foster parent and agency will continue to make efforts to locate and engage with the youth, parent, law enforcement, personnel, and probation until the youth is located and/or discharged. Such efforts should be clearly documented and included in the monthly report to probation including the dates/hours the youth’s whereabouts were unknown and efforts made to locate them
Service Frequency	<p>24 hours/7 days a week</p> <p>Clinical intervention staff shall meet face-to-face with the youth privately a minimum of one (1) to two (2) (1 hour) sessions per week with increased individual time if necessary to achieve and maintain stability. Clinical intervention staff will collaborate and be in communication with the youth’s treating practitioner. Clinical staff will work in collaboration with placement staff to assist the youth in achieving stabilization goals</p>
Length of Service	Up to 30 days
Staffing	<p>Staffing Requirements of crisis stabilization:</p> <ul style="list-style-type: none"> • Staff shall demonstrate skill and competency in the treatment of youth with mental health and substance use disorders prior to the delivery of services • The team shall include, as a minimum, one of the following: <ul style="list-style-type: none"> ○ Therapist: LMHP; LIMHP; PLMHP ○ Direct care staff: must be 21 years of age and have a minimum of two years’ experience working with youth, two years education in the human service field or a combination of work experience and education with one year of education substituting for one year of experience • All staff that have direct contact with youth will have training in evidence-based youth development principles, best practice in juvenile justice and criminogenic risk and needs. • Services must be trauma-informed, culturally and linguistically appropriate, age and developmentally appropriate an incorporate-evidenced based practices when appropriate • Crisis stabilization service is expected to maintain staff ratio to accommodate transportation and activities of the facility
Staff to Client Ratio	Staffing ratios will be as required by the DHHS-Division of Public Health
Hours of Operation	24/7 days a week
Service Desired Outcomes	<ul style="list-style-type: none"> • Youth maintains continuity with their education. • The primary outcome is to enable the youth to stabilize in their environment and move to their home or to the next placement.

	<ul style="list-style-type: none"> • Youth’s behavior will be stabilized. • Youth will maintain placement in the least restrictive environment. • Youth will demonstrate positive skills in communication, social skills, coping/anger management, family functioning, these skills will be based on the probation/problem solving court staff’s referral.
Unit and Rate	See rate sheet