



Probation Service Definition

SERVICE NAME	Crisis Stabilization Service <input type="checkbox"/> Adult <input checked="" type="checkbox"/> Juvenile
Category	Out-of-Home placement / Non-treatment
Setting	Residential – Shelter Only
Facility License	Residential Child Caring Agency License as approved by DHHS Public Health
Service Description	This service is utilized to achieve stabilization until a youth can transition home or to a necessary placement. Crisis Stabilization may be utilized as an alternative to detention. Youth in this service require crisis intervention, consistent behavior management, supervision and support. Licensed and non-licensed staff provide a safe and nurturing environment through building relationships, teaching strategies and interventions to achieve stabilization.
Service Expectations	<ol style="list-style-type: none"> 1. Develop an individualized crisis stabilization plan with the youth, probation officer, family, and other stakeholders identified, that assists the youth in stabilization and preparing for transition home or necessary placement. The plan must address stabilization goals to include: behavioral, medication compliance, education, transition, and criminogenic domains. 2. Individualization of the plan will be determined based on service referral information, relevant collateral documentation/assessments and family goals. The plan shall include approval, when appropriate, by the probation officer and/or court to allow youth to leave the facility for planned supervised outings, home visits, etc. 3. Clinical intervention staff shall meet with the youth privately a minimum of one (1) to two (2) times weekly with increased individual time as deemed 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. 4. Crisis stabilization service is expected to maintain staff ratio’s to accommodate transportations and activities of the facility. 5. Participation in family team meetings 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.

	<ol style="list-style-type: none"> 6. Based on the plan goals, 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. 7. 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. 8. The provider will ensure that educational needs are being met. School may be in the community or on site. Youth shall attend their home school whenever possible. 9. The provider will ensure 24-hour crisis intervention is available to aid in the stabilization of crisis situations. 10. 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. 11. The provider will aid the probation officer in transition planning to begin upon activation of the crisis stabilization. Criteria for discharge will be individualized, determined by the team, and approved by the court.
Service Frequency	24 hour
Length of Stay	Up to 30 days
Staffing	The provider will comply with all staffing requirements of the Residential Child Care License. Providers registered to provide crisis stabilization will have 24 hour awake staff. Any clinical strategies and interventions delivered within the scope of this service will be delivered by a fully or provisionally licensed Mental Health Practitioner in the State of Nebraska. 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.
Staff to Client Ratio	Staffing ratios will be provided based on DHHS licensing regulations Residential Child Caring Agencies.
Hours of Operation	24 hours/day, 7 days a week.
Service Desired Outcomes	Youth receives services and support which stabilize the youth and prevents placement in a more restrictive environment. While in crisis stabilization, youth maintain continuity with their education. The primary outcome is to enable the youth to stabilize and develop a plan to transition back home or necessary placement as soon as service goals are met.
Unit and Rate	Per day

[Click to direct to Service Interpretive Guideline]

