Crisis Services

Service Name	EMERGENCY PROTECTIVE CUSTODY CRISIS STABILIZATION (REGION 5)
Funding Source	Behavioral Health Services
Setting	Facility Based
Facility License	Mental Health Center, Substance Abuse Treatment Center (optional for dually diagnosed clients)
Basic Definition	Crisis Stabilization [Region 5] is designed to provide custody, screening, emergency mental health evaluation, and crisis intervention to individuals placed in emergency protective custody under the auspices of Nebraska Mental Health Commitment Act by law enforcement. Crisis Stabilization services include immediate, short-term, individualized, crisis-oriented treatment and recovery needed to stabilize acute symptoms of mental illness, alcohol and/or other drug abuse, and/or emotional distress. Individuals in need exhibit a psychiatric and/or substance abuse crisis as defined under the Commitment Act at risk for harm to self/others and need short-term, protected, supervised services. The intent of the service is to treat and support the individual throughout the crisis; provide crisis assessment and interventions; medication management; linkages to needed behavioral health services; and assist in transition back to the individual's typical living situation.
Service Expectations	• Evaluation by a mental health professional as soon as reasonably possible but not later than thirty six hours after admission [per state statute]. • Psychiatric assessment typically completed within a 24-hour period. • Multidisciplinary/bio-psychosocial assessments, including a history and physical • Assessments and treatment must integrate strengths and needs in both MH/SA domain • A crisis stabilization plan, which includes relapse/crisis prevention and discharge plan components (consider community, family and other supports), developed within 24 hours of admission and adjusted daily or as medically indicated • Interdisciplinary treatment team meetings daily or as often as medically necessary including the individual, family, and other supports as appropriate • Psychiatric nursing interventions are available to patients 24/7 • Medication management • Individual, group, and family therapy offered on a case-by-case basis as determined by the treatment team. • Substance abuse evaluation completed by a LADC for persons presenting with co-occurring disorders and additions treatment recommendations integrated into the discharge plan. Intense discharge planning beginning at admission • Face to face consultation with psychologist, psychiatrist, or APRN for evaluation and as needed • Consultation services available for general medical, dental, pharmacology, psychological, dietary, pastoral, emergency

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	medical, recreation therapy, laboratory and other diagnostic services as needed. Facilitate communication amongst health care providers and law enforcement. • Linkages to community-based rehabilitation/social services to assist in transition to community living.
Length of Services	The individual's current crisis is resolved or the individual is committed to Health and Human Services for inpatient treatment.
Staffing	• Medical Director/Supervising Practitioner (Psychiatrist) • Clinical Director: Psychiatrist, Psychologist, or APRN Program Director • LMHP/LADC availability (prefer dual licensure) • RN's with psychiatric experience • Direct Care Worker, holding a bachelor's degree or higher in psychology, sociology or a related human service field are preferred but two years of coursework in a human services field and/or two years experience/training or two years of lived recovery experience with demonstrated skills and competencies in treatment with individuals with a behavioral health diagnoses is acceptable.
Staffing Ratio	RN services are provided in a RN/client ratio sufficient to meet patient care needs Other positions staffed in sufficient numbers to meet patient and program needs
Hours of Operation	24/7
Desired Consumer Outcome	• Symptoms are stabilized and the individual no longer meets clinical guidelines for crisis stabilization • The precipitating condition and relapse potential is stabilized such that individual's condition can be managed without professional external supports and interventions
Rate	1 Unit = 1 Day