Crisis Services

Service Name	EMERGENCY COMMUNITY SUPPORT
Funding Source	Behavioral Health Service
Setting	Consumer's home or other community-based setting including a psychiatric hospital setting.
Facility License	N/A
Basic Definition	Emergency Community Support is designed to assist consumers who can benefit from support due to a behavioral health need and who are either currently residing in a community setting or transitioning from a psychiatric hospital into a community setting. Emergency Community Support services include case management, behavioral health referrals, assistance with daily living skills, and coordination between consumer and/or consumer's support system and behavioral health providers.
Service Expectations	• Complete a screening for risk and safety plan within three days of referral or if consumer is hospitalized within three days of discharge from the hospital. • Complete a strengths-based assessment with the consumer within 14 days of referral. • Development of an initial, brief service plan within five days of admission in partnership with the consumer and support system. The finalized service plan should be completed within fourteen days. • Development of a crisis relapse/prevention plan within fourteen days of admission. • Provide consumer advocacy as needed. • Assist consumer in obtaining benefits such as SSI, housing vouchers, food stamps, Medicaid, etc. • Provide education to consumer/family/significant others with the consumer's permission as needed. • Provide referrals to appropriate community-based behavioral health services. • Provide pre-discharge transition services from psychiatric hospital including teaching daily living skills, scheduling appointments, limited transportation to appointments, and assistance with housing search as needed. • Provide pertinent information to psychiatric hospital and hospital emergency personnel, and community agencies as needed. • Establish collateral relationship with law enforcement and other emergency services. • Arrange alternatives to psychiatric hospitalization as needed. • All services must be culturally sensitive. • Frequency of contacts as needed to address the presenting problem(s).
Length of Services	Service continues until discharge guidelines are met or consumer chooses to decline continuation of service.
Staffing	• Program Director: Demonstrated experience, skills, and competencies in behavioral health management. A master's degree in a human service field preferred. • 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.

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	• Clinical consultation on consumer's service plan must occur at least once a month. • Consultation by appropriately licensed professionals for general medical, psychopharmacology, and psychological issues, as well as overall program design must be available and used as necessary. • Personal recovery experience preferred for all positions.
Staffing Ratio	1:15 caseload
Hours of Operation	Consumers utilizing this service must have 24/7 on call access to Emergency Community Support services.
Consumer Desired Outcome	• Consumer has made progress on his/her individualized service plan goals and objectives and development of a crisis relapse prevention plan. • Consumer is able to remain psychiatrically stable in a community setting of choice. • Consumer has a community-based support system in place.
Rate	Non Fee For Service