

SERVICE CATEGORY: CRISIS/EMERGENCY SERVICES

SERVICE DEFINITION

Service Name	EMERGENCY COMMUNITY SUPPORT
Funding Source	Behavioral Health
Setting	Individual's home or other community-based setting
Facility or Professional License	As required by DHHS Division of Public Health
Basic Definition	<p>Emergency Community Support is designed to assist individuals who can benefit from high levels of support due to an urgent behavioral health need. Often individuals are either at risk of loss of community residence due to behavioral health crisis, are homeless, or are transitioning from a psychiatric hospital into a community setting. Emergency Community Support services offer stabilization during a behavioral health crisis by providing case management, behavioral health referrals, assistance with daily living skills, and coordination between the individual, the formal and informal support system, and behavioral health providers.</p>
Service Expectations	<ul style="list-style-type: none"> • Complete a screening for risk and safety plan within three days of referral or, if individual is hospitalized, within three days of discharge from the hospital • Complete a strengths-based assessment with the individual within 14 days of referral • Development of an initial, brief service plan within five days of admission in partnership with the individual and support system. The finalized service plan should be completed within 14 days • The service plan will include a crisis relapse/prevention plan and discharge plan • Consumer advocacy as needed • Individual assisted in initiating resources such as SSI, housing, SNAP, Medicaid, as needed • Education to individual/family/significant others with the individual's permission as needed • Referrals to appropriate community-based behavioral health services • Collaboration with psychiatric hospital and hospital emergency personnel, and community agencies as needed • Arrange alternatives to psychiatric hospitalization as needed • Clinical consultation on individual's service plan must occur at least once a month • All services must be culturally sensitive and trauma informed • A minimum of 1 hour direct contact is expected. Contact for individuals transitioning from hospitalization is a minimum of six hours (includes direct and indirect) per month and for other individuals the minimum is of 4 hours (includes direct and indirect) per month. Documentation of rationale for not achieving either the 6 hours per month or 4 hours per month should be documented in the individual's record.

Service Name	EMERGENCY COMMUNITY SUPPORT
Length of Services	Service continues until initial emergency is resolved and individual is connected to behavioral health treatment as needed. Typically 90 days.
Staffing	<ul style="list-style-type: none"> • Program Director: A bachelor's degree or higher in psychology, sociology or a related human service field is required. Demonstrated experience, skills, and competencies in behavioral health management. A master's degree in a human service field preferred. • Direct Care staff shall have demonstrated skills and competencies in treatment with individuals with a behavioral health diagnosis, demonstrated by at least one of the following: two years lived experience; two years' direct care experience in a human service field; two years of training in a human service field; or a bachelor's degree or higher in psychology, sociology, or related human service field, which is preferred. • 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. • Staff are trained in trauma informed care, working with individuals experiencing co-occurring disorders, suicide prevention, and resilience and recovery principles.
Staffing Ratio	1:15 caseload
Hours of Operation	Individuals utilizing this service must have 24/7 on call access to Emergency Community Support services.
Individual Desired Outcome	<ul style="list-style-type: none"> • Individual has made progress on service plan goals and objectives and development of a crisis relapse prevention plan. • Initial emergency necessitating care has substantially resolved. • Individual is able to remain psychiatrically stable in a community setting of choice. • Individual has a community-based support system arranged.

UTILIZATION GUIDELINES

EMERGENCY COMMUNITY SUPPORT

I. Admission Guidelines

Consumer must meet all of the following admission guidelines to be admitted to this service.

1. Consumers currently experiencing a behavioral health crisis.
2. At risk of needing a higher level of care if support is not provided.
3. Consumer demonstrates a need for support in coordinating treatment/recovery/rehabilitation options in the community.

II. Continued Stay Guidelines

Consumer must meet all of the following continued stay guidelines to continue receiving this service.

1. Consumer continues to meet Admission Guidelines.