

PROGRAM POLICY - CRISIS SERVICES

- 1 Primary Purpose
 - 1.1 The Person Centered Individual Service Plan (ISP), which will include a behavioral intervention plan, will serve to:
 - 1.1.1 stabilize the person in crisis
 - 1.1.2 teach advocacy and coping skills
 - 1.1.3 prevent re-occurrences for a minimum of six months
 - 1.1.4 return the person to previous placement or similar community placement within 90-180 days
- 2 Assessment
 - 2.1 Assessment begins prior to a person being admitted to OPTIONS' Crisis Services and during the initial first 3 days of admission.
 - 2.2 Assessment information to be used in the development of the Person Centered Individual Service Plan may include, but not be limited to:
 - 2.2.1 abilities of the person referred/admitted
 - 2.2.2 presenting emotional and behavioral distress
 - 2.2.3 history of previous mental health services including psychiatric contact, pharmacological therapy, hospitalizations and use of community services
 - 2.2.4 medical history and status
 - 2.2.5 diagnosis
 - 2.2.6 pertinent social and developmental history
 - 2.2.7 drug use profile
 - 2.2.8 role of family and significant others
 - 2.2.9 adjustment to their disability
 - 2.3 Consents
 - 2.3.1 Proper consent forms will be obtained prior to the initiation of a behavioral program.
 - 2.3.2 The person receiving services must agree to work on a targeted area before it becomes part of the plan.
- 3 Implementation and Monitoring
 - 3.1 The Crisis Services Manager will be responsible for the implementation of the ISP.
 - 3.2 Community Support Specialists will implement ISP procedures.

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- 3.3 Community Support Specialists will document the person's progress.
- 3.4 ISP's will be formally reviewed by the Clinical Team (ID Team) on a weekly, bi-monthly or monthly basis as determined by the IDT.

POLICY DATE: July 2004
REVISED: January 2008
May 2012
August 2014
September 2016
REVIEWED: October 2017
October 2018
November 2019
November 2020
January 2022