


<b>POLICY/PROCEDURE TITLE:</b> Intensive Crisis Stabilization Services for Adults & Children  <b>POLICY #:</b> 406  <b>SECTION:</b> Service Provision  <b>MAINTAINED BY:</b> Chief Operations Officer  <b>SCOPE:</b> <input checked="" type="checkbox"/> OnPoint Staff <input checked="" type="checkbox"/> Contracted Providers <input checked="" type="checkbox"/> Other: _____	<b>Approved By:</b>  (Chief Executive Officer)	
	<b>Approved By:</b> _____ (Medical Director; <i>as applicable</i> )	
	<b>DATES</b>	
	<b>First Effective</b>	07/2008
	<b>Last Revised</b>	04/2025

## POLICY

OnPoint provides intensive crisis stabilization services for both adults and children needing structured treatment and support activities in order to avert a psychiatric admission, shorten a length of stay or maintain a present living arrangement. Services are provided in accordance with funding, regulatory, and best practice standards.

### Intensive Crisis Stabilization Services for Adults

#### Population Served

Intensive crisis stabilization services for adults are a structured treatment intervention for individuals who have been assessed to meet criteria for psychiatric hospital admission but are able to be stabilized in their usual community environments with the assistance of an intensive crisis stabilization team. The services may also be provided to individuals discharging from inpatient psychiatric services if such services will result in a shortened inpatient stay.

#### Services Provided, Including Location and Staff Qualifications

Intensive crisis services for adults are intensive, community-based interventions delivered on a short-term basis by an intensive crisis stabilization team. Examples of service components include intensive individual counseling, any additional assessments needed, family therapy, case management and care coordination as needed. Services may not be provided in jails, inpatient settings, nursing homes or crisis residential settings. The treatment team consists of clinical supervisors, mental health professionals and/or peer support specialists.

#### Individual Plan of Service

Initial adult intensive crisis stabilization services are provided to immediately address a serious behavioral health crisis. Following resolution of the immediate crisis, an intensive crisis stabilization treatment plan will be developed through a person-centered planning process with the individual's treatment team. The IPOS must address immediate goals and measurable objectives for resolving the immediate crisis needs. Any additional resources, including post-stabilization follow-up services, will also be identified in the plan, along with the role of the case manager or other staff, as applicable.

## Intensive Crisis Stabilization Services for Children

### Population Served

Intensive Crisis Stabilization Services for Children (ICSS) are a set of services designed for children or youth ages 0-21 who may have serious emotional disturbances (SED), intellectual/developmental disabilities (I/DD) including autism, or substance use disorder (SUD), or a co-occurring combination diagnoses from two or more of those categories. Services are designed to include parents/caregivers for the individuals, as appropriate. Eligible populations include individuals who live in the area of the program parameters and who are experiencing a crisis, as defined in the Michigan Medicaid Provider Manual Section 9 – Intensive Crisis Stabilization Services.

### Services Provided

The overall goals of ICSS are to rapidly respond to children and youth experiencing disruptive behaviors, emotional symptoms and dynamics impacting their functioning ability, and to provide support to parents and caregivers. The community-based interventions and resource development with families provided by ICSS aim to prevent and reduce the need for care in a more restrictive setting. Components of ICSS include crisis de-escalation, safety planning, intensive individual counseling, family therapy, skill building, psychoeducation and referrals for additional resources, including assessment and psychiatric consultation, as needed.

Services provided in a mobile format require travel to the child/youth in crisis for face-to-face contact within two hours from the time of request (based on rural county status). Staff may request law enforcement support for the in-person response, based on their assessment of the nature and potential risks of the situation. Alternatively, ICSS staff can provide a telephone or telehealth response if the parent/caregiver does not desire face-to-face services.

### Staff Qualifications

The ICSS team consists of a Master's level Child Mental Health Professional or Master's level QIDP. The second team member may be another professional or paraprofessional under appropriate supervision. Clinical managers at the Master's level and trained in crisis services provide 24/7 administrative support, case consultation and safety awareness for staff.

### Individual Plan of Service

If a child or youth is a current recipient of OnPoint services and receives ICSS services, a member of the ICSS team will notify the treatment team of the ICSS service within the next business day. The treatment team will provide appropriate follow-up, including updating the crisis/safety plan and IPOS to ensure access to services needed to address treatment needs.

If a child or youth is not a current recipient but is eligible for OnPoint services, a follow-up plan, including referrals for further assessment and treatment, is required. Next steps for obtaining follow-up services, including timelines and responsible parties, will be part of the follow-up plan of care provided to parents/caregivers. OnPoint will follow-up with the parent/caregiver within seven business days to determine status of the goals in the follow-up plan.