

2015 Program Report Card: Crisis Stabilization

Quality of Life Result: *Connecticut's children grow up in stable environments, safe, healthy and ready to lead successful lives.*

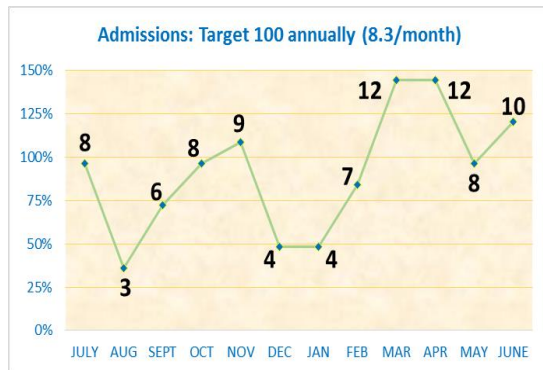
Contribution to the Result: This service provides short term, residential treatment for children with a rapidly deteriorating psychiatric condition, in order to reduce the risk of harm to self or others and divert children from admission into residential or inpatient care.

Program Expenditures	State Funding	Federal Funding	Other Funding	Total Funding
Actual SFY '15	2,792,732	0	0	2,792,732
Estimated SFY '16	8,570,197	0	0	8,570,197

Partners: Families, DCF, Hospitals, EMPS, the Behavioral Health Partnership, community-based service providers..

How Much Did We Do?

Admissions SFY '15



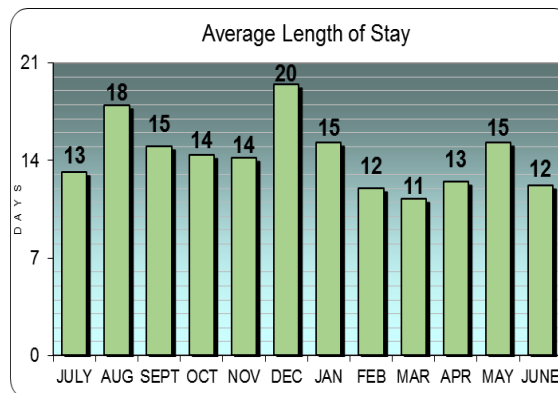
Story behind the baseline:

The number of referrals have increased as the Crisis Stabilization programs (CSP) become better known, however, in SFY '15 there were 91 admissions compared to 106 in SFY '14 (CCOH only). Providers reported that the slight drop in admissions was due to an increased need to ensure safety and stability due to the clinical needs of individual youth. The CSPs maintained a lower census while servicing these youth.

Trend: ▼

How Well Did We Do It?

Members in care <15 days



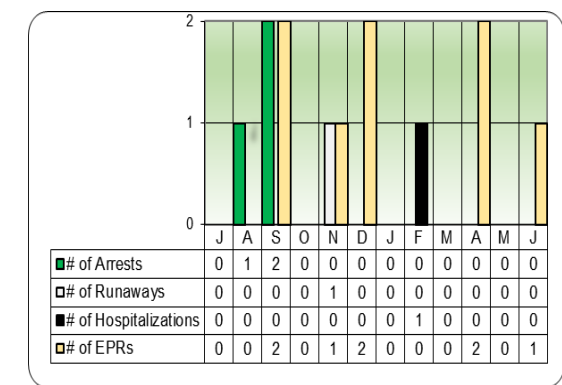
Story behind the baseline:

In SFY '15 the majority of children were serviced for less than the target 15 days. To meet this goal referral sources were educated at time of referral that the programs focus on a 2-week length of stay. Variations in discharge days reflect the individualized needs of families and/or youth. Youth referred by DCF/Probation tend to stay longer due to aftercare needs. The average length of stay was 14.3 days.

Trend: ◀▶

How Well Did We Do It?

Stabilize Functioning



Story behind the baseline:

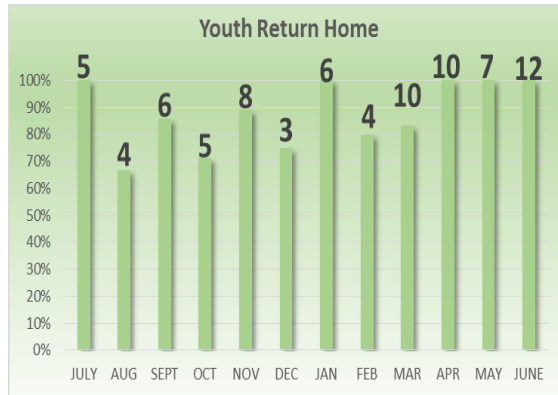
To provide a safe, stable and normative environment CSPs assist youth with daily living activities including hygiene, meals, homework and evening recreational activities are planned with the children. Staff to client ratio is maintained at 3:8. Staff work to validate each child's experience to stabilize at-risk behaviors and to increase communication. Individual attention is offered to help meet the needs of each client. In total there were 3 arrests, 1 runaway, 1 youth was hospitalized and 8 emergency physical restraints in SFY '15.

Trend: ▼

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Is Anyone Better Off?

Youth return home at discharge



Story behind the baseline:

During SFY '15 there were a total of 90 discharges from CSPs. Of those 90, 85 youth (94%) were discharged back home. CSPs helped the youth return back home by offering both individual and family therapy as well as therapeutic clinical support. A specific treatment goal for youth was determined in partnership with the youth and their families at the time of admission. Additionally the youth received on-going therapeutic support throughout their time in CS. That support can be helping the families find community resources as well as transporting youth to outside providers so there is not a disruption in treatment. Helping youth stay connected to their communities is a key component of successful discharge home.

Trend: ▼

Is Anyone Better Off?

Youth remain in community 30-days after discharge



Story behind the baseline:

Parent surveys indicate that parents learned how to manage conflicts with their child. Of those who were contacted 30 days after discharge, 97% of the 85 youth remained in the community.

Trend: ◀▶

Proposed Actions to Turn the Curve:

1. Reach out to schools as well as outside treatment providers, including EMPS and inform them of the community-based support Crisis Stabilization can offer. Because schools hold the immunization records and the physicals for youth, a secondary gain of marketing to the school would possibly decrease the admission wait time.
2. To ensure a 2-week length of stay as part of the admission process, the family will be provided a document with the anticipated discharge date. The programs will create opportunities to meet with DCF and Probation to discuss the program and how CSP works to maintain the youth in the community with family.
3. In an effort to avoid police interventions and restraints, CS will work with program therapist and director to validate each client's experience and provide individualized coping skills.
4. Telephonic family sessions will be offered to increase family therapy or avoid missed family sessions.

Data Development Agenda:

1. DCF is partnering with the Office for Research and Evaluation and Value Options to collect better outcome data on youth served in Crisis Stabilization so that we have a better understanding of the intervention's effectiveness.
2. The CSPs will follow up with families after 30 days to ask which skills they use most often.
3. CSPs will send reminders to staff to ensure surveys are completed in a timely manner.