

Crisis Stabilization and Assessment Programs for Youth with Intellectual / Developmental Disabilities

CSAP

Service Description

Crisis Stabilization and Assessment Intensity of Service (CSAP IOS) provides 24-hour care in a highly structured, community-based treatment setting with professional competencies and capabilities to stabilize youth with intellectual/developmental disabilities (IDD), ages 6 to 20 years old, (males/females) in crisis and unable to be safely supported in their current living situation.

The primary goal upon stabilization is transitioning the youth to the community with wraparound services and supports, whenever possible. CSAP provides comprehensive diagnostic assessments that result in the identification of appropriate in-home services and supports that can meet the youth's treatment needs upon transition.

This intensity of service supports youth with IDD, living in their own home or residing in a DCP&P resource home, experiencing behavioral crisis(es), defined as situation in which a youth is in need of behavioral health intervention that cannot be safely provided outside of a 24-hour supervised setting, despite reasonable efforts to stabilize the youth in-home.

The youth receiving CSAP services present with challenges involving intellectual skills, communication skills, adaptive and/or motor skills. Their diagnostic profile may include Autism Spectrum Disorder or Intellectual Disability, with or without a co-occurring behavioral health condition. Youth may present with medical or physical limitations, which could potentially include: seizure disorders, Cerebral Palsy, and Diabetes. Youth with specialized medical needs will be considered on an individualized basis. Youth can present with a variety of functional abilities. Some youth could be independent in all areas of basic activities of daily living, whereas other youth may require varying levels of assistance to complete basic self-care tasks, ranging from limited to verbal and/or physical prompts to hand-over-hand assistance and/or total staff care.

Criteria

Admission Criteria

All of the following criteria are necessary for admission:

- A. The youth is between the ages of 6 and 20 ½. Eligibility for services are in place until the young adult's 21st birthday;
- B. The youth has been deemed DD eligible for CSOC Functional or Division or Developmental Disabilities (DDD) services. If youth has not been determined DD eligible, the DD module of the CAT or SNA indicate moderate to high needs and the CABS indicate challenges with regard to adaptive function. The referent describes behaviors and other indicators that demonstrate the youth has functional limitations that require specialized services only available in the IDD

	<p>program setting; in a cyber progress note, prior to contacting Perform Care. A completed CABS may also be required. The DD/DDD application process must be initiated within 10 days of admission;</p> <p>C. The parent/caregiver/guardian (or young adult if age 18 and older without a designated legal guardian) must consent for treatment;</p> <p>D. The youth is a resident of New Jersey. For minors under 18 years of age, the legal residency of the parent or legal guardian shall determine the residence of the minor;</p> <p>E. Mobile Response and Stabilization Services (MRSS) or Care Management Organization (CMO) determines that the youth's presenting behavior challenges prevent them from being safely maintained in his/her current living situation even with services and support and is unable to function in significant life domains (family, social, school), due to his or her intellectual disabilities and possible co-occurring diagnosis; thus, requiring crisis stabilization.</p>
Exclusion Criteria	<p>Any of the following are sufficient for exclusion from this Intensity of Service:</p> <p>A. Youth who are younger than 6 or older than 20 ½ (upon request for admission);</p> <p>B. The parent/caregiver/guardian (or young adult 18 or older without a designated legal guardian) does not voluntarily consent to admission or treatment and/or there is no court order requiring such treatment;</p> <p>C. The youth is not a resident of New Jersey. For minors under 18 years of age, the legal residency of the parent or legal guardian shall determine the residence of the minor;</p> <p>D. Youth is presenting with clinical needs which are indicative of a higher intensity of service or a lower intensity of service;</p> <p>E. The youth's behavioral symptoms are the sole or primary result of a medical condition, which requires direct medical intervention and monitoring;</p> <p>F. The youth has one or more chronic medical conditions that warrant 24-hour onsite nursing care including but not limited to: tracheotomy suctioning, intravenous medication, G tube feeding, dialysis monitoring or catheterization;</p> <p>G. The youth is diagnosed with a substance use disorder and whose substance use needs require specialized treatment intervention;</p> <p>H. The youth presents with high-risk behaviors, which jeopardize the safety of themselves or others;</p>

	<ul style="list-style-type: none"> I. The youth is not in agreement with the Child Family Team's (CFT) plan for out of home treatment. There is evidence of multiple attempts by the CFT to engage the youth in the plan; J. The youth is engaging in a recent pattern of violent behavior that compromises the safety of the youth and others in the out of home program.
Continued Stay Criteria	<p>All of the following criteria are necessary for continuing treatment at this Intensity of Service:</p> <ul style="list-style-type: none"> A. The Child Family Team (CFT) determines that the youth will need to remain at the program for continued assessment and skill building because the youth is not making progress as it pertains to stabilizing the crisis symptoms or impairments; and can be described in objective terms via the JCR process. The CSOC Assessment and other relevant information indicate that the youth continues to require the CSAP Intensity of Service; B. Positive clinical progress is apparent regarding the youth's initially identified treatment goals, yet additional work is needed to address and adjust the specific goals and objectives; C. The youth is actively participating in treatment, is regularly attending treatment team meetings, and is adhering to program rules and guidelines.
Transitional Joint Care Review (TJCR) - Transition Request Criteria	<p>If the Child Family Team (CFT) is requesting transition to a different CSOC out-of-home treatment setting via TJCR, ALL of the additional following criteria must be met:</p> <p>The CSOC Assessment and other relevant information indicate that the youth requires a different clinical treatment focus within a different OOH treatment setting. This documentation must include the following:</p> <ul style="list-style-type: none"> A. Treatment needs that were addressed in current episode of care and any previous episodes of OOH treatment; B. Treatment interventions that were successful and/or unsuccessful in current episode of care and any previous episodes of OOH treatment; C. Behaviors/needs that warrant a different OOH intensity of serviced.) The youth's perspective on the proposed transition plan, applicable based on youth's cognitive abilities; D. Justification as to why another OOH treatment episode is in the youth's and the family's best interest;

	<ul style="list-style-type: none">E. Barriers for the reintegrating the youth to the community at this time;F. Community reintegration plan for youth.
Transition Criteria	<p>Any of the following criteria is sufficient for transition from this Intensity of Service:</p> <ul style="list-style-type: none">A. The symptoms of the crisis have stabilized, and a transition plan has been established to transition the youth back to a community-based treatment setting or an alternative treatment setting;B. Consent for treatment is withdrawn by the parent/caregiver/guardian or young adult if age 18 and older, and there is no court order requiring such placement;C. Support systems, which allow the youth to be maintained in a less restrictive intensity of service, have been secured and established. Follow-up appointments for community-based treatment services have been scheduled within 10 days of transitioning back to the community;D. The youth is engaging in a documented recent pattern of violent behavior that is compromising the safety of the youth and others in the out of home program;E. The child/youth and/or the parent/guardian/caregiver are available but not participating in treatment or noncompliant with the treatment program's rules and regulations. The lack of participation or noncompliance is significant enough to negatively impact the overall treatment course and compromises the child/youth's ability to have a successful, positive response to treatment.