

Residential Crisis Stabilization Program (RCSP)

Overview

A Residential Crisis Stabilization Program (RCSP) provides twenty-four (24) hour per day, seven (7) days per week intake, treatment and supervision of children and youth in a safe and therapeutic environment. This program is designed to help children and youth experiencing a behavioral health crisis from any area in the state of Washington who require emotional/behavioral support.

The RCSP provides children and youth with a structured setting for a short-term stay of 30 days (not to exceed 90 days). The first 3-7 days are stabilization with a goal of transition to the appropriate needed level of care. The therapeutic program includes recreational activities, therapeutic interventions, and access to medication management for children and youth with behavioral health co-occurring conditions that include mental health (MH), substance use disorder (SUD), and intellectual developmental disorder (I/DD) and (ASD) autism spectrum disorder. A trauma-informed, evidence-based approach is utilized in the milieu. The program emphasizes individualized planning where youth-specific teams will hold a planning meeting within 3 days of admission to the RCSP and to plan for services to be provided post-discharge.

The primary objective of the program is to provide services necessary to stabilize and restore the individual and families functioning to transition home, to the community or to a more long-term setting.

Eligibility requirements

Children and youth served by RCSP will be residents of WA State and in need of immediate, short-term crisis stabilization and behavioral health treatment.


Individuals served in the RCSP will likely be youth that do not meet acute inpatient hospital and free-standing psychiatric hospital admission criteria.

Referrals may be made by state agencies, community providers, youth and families, law enforcement and others.

Services offered:

- A preliminary behavioral health treatment care plan listing initial goals will be created with the family, treatment team, young person as able and participating agencies/providers within seven calendar days. The treatment plan shall identify youth and family goals of care that will facilitate the readiness for supports and services in a community-based settings or other appropriate services. Services include, but are not limited to housing, school, mental health, substance use, applied behavioral analysis, family care, basic needs, etc.
- Case management/coordination services to convene treatment team meetings driven and informed by parent/natural support participation or other adult caregivers and ensure proactive discharge and treatment planning that includes work with multiple agencies who may be involved in each child and youth's care.
- A daily routine of well-supervised therapeutic activities consistent with a trauma-informed approach. Evidenced-based practices will be used to promote wellness and psychological and physical safety to support the development of emotional regulation and daily living skills. Milieu based programming, individual, group, family/natural support





therapy, skilled behavior management, and other treatment supports and services will be offered.

- Safety and crisis management planning with each youth and their family/natural support to identify interventions to develop and demonstrate strengths of the youth and family that are helpful in addressing areas of risk in order to redirect patterns of interaction that lead to escalation of the young person and family/natural supports.
- Opportunities for the individual to engage in age-appropriate structured recreational activities that support activity-based learning and the development of positive social and interpersonal skills.
- Staff support to help children/youth complete assignments provided by the home school. Program staff work with the home school to address the individual's educational needs including the goals and objectives identified in the youth's IEP (if applicable).
- When necessary, ancillary services of temporary 1:1 support are provided to stabilize and prevent crises. These services shall be reimbursed only when provided by agency-hired paraprofessional staff and based on documented clinical justification from the individual's clinical team.
- All discharge best practices as outlined, shall be integrated into all elements of care from admission.

Staffing credentials

Staff to be present, on call, or on contract:

- MD, Psychiatrist, prescriber
- Clinical Director
- Board Certified Behavior Analyst
- Behavior Technicians
- Advanced Registered Nurse Practitioner

- Registered Nurse (psych. Certified)
- Licensed Practical Nurse
- Licensed Mental Health Professional
- Licensed Social Worker
- Bachelor Counselors
- Substance Use Disorder Professional
- Recreation Therapist
- Certified Nurse Assistant
- Family Peer Liaison
- Program Coordinator
- School Based Coordinator

Program physical plant example:

The program will have a minimum of three separate areas (spaces, floors, cottages, etc.) to address the various behavioral health needs of the youth who access the RCSP.

Budget

- FY23: Capital Funding for two sites with this model at \$5,820,000 per site.
- FY24: Funding is assumed for 32 beds, assuming 16 beds on each side of the Cascades and agency administration at the Health Care Authority to create a short-term Residential Crisis Stabilization Program (RCSP) for youth with severe behavioral health diagnoses.
- Operational dollars are allocated in coming years for these facilities, the outlook assumes operating funds for the 32 beds effective July 1, 2024. (General Fund-State; General Fund-Medicaid)

Estimated rates

- Estimated daily rate: \$818.71
- Estimated yearly cost \$ 4,781,274.92
- Estimated startup cost: \$709,177.88



Key partners

- Department of Social Health Services (DSHS)
- Developmental Disability Administration (DDA)
- Department of Child Youth and Families (DCYF)
- Contracted mobile outreach services
- Regional youth behavioral health navigators

Oversight

HCA's Division of Behavioral Health and Recovery (DBHR) administers the RCSPs.

RCSP will be licensed by the state Department of Health (DOH) under licensing requirements for Residential Treatment Facility (RTF) Licensing (RCW 71.12.455 and WAC 246-337).

For more information:

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