



Section	Crisis Systems	Effective:	3/29/16
Sub-section	Crisis Stabilization Unit		
Policy	Aftercare Planning	Last Revised:	New policy
Policy #	1.109		
Director's Approval	_____	Date	_____
	Alice Gleghorn, PhD		
CSU Medical Director's Approval	_____	Date	_____
	Leslie Lundt, MD		
Supersedes:	New Policy	Audit Date:	

1. PURPOSE

- 1.1. To ensure the Santa Barbara County Crisis Stabilization Unit (CSU) staff initiate and complete aftercare planning activities in accordance with state regulatory requirements, ethical standards and best practices.

2. DEFINITIONS

The following terms are limited to the purposes of this policy:

- 2.1. **Aftercare services** – follow-up services provided to clients once he/she leaves the CSU unit to ensure transition and linkage to long-term supports and care.

3. POLICY

- 3.1. The CSU will ensure that aftercare planning services are initiated at intake. The initial aftercare plan (as part of the treatment plan) will address interventions designed to meet specific goals.
- 3.2. An aftercare summary will be completed and a copy provided to the client.

4. INITIATION OF AFTERCARE PLANNING AT INTAKE

- 4.1. The CSU interdisciplinary treatment team will begin developing a client's aftercare plan upon intake. The CSU social worker, the attending psychiatrist and the client will collectively lead the planning process. Efforts should be made to consult and encourage the client to actively participate in this process.

- 4.2. If the client is on conservatorship, the conservator will be consulted. The conservatee's cooperation should be solicited to help encourage successful aftercare planning.
- 4.3. The aftercare plan will be informed by the social, medical and psychological information collected in addition to the client's goals, needs, strengths and supports. The focus of the plan will promote the client's successful transition to long-term, recovery-oriented services following his/her CSU stay.

5. **DISCONTINUATION OF CSU SERVICES**

- 5.1. CSU staff will assess a client's readiness to leave the CSU on a periodic basis. Clients are appropriate to leave the CSU when:
 1. There is resolution or amelioration of presenting crisis signs and symptoms allowing for community tenure;
 2. He/she has received the maximum benefits from the CSU;
 3. A satisfactory living arrangement has been identified; and
 4. He/she can access appropriate aftercare immediately and easily and is able to participate in treatment on an outpatient basis.
- 5.2. In some cases, a client may require a more restrictive level of care or further crisis intervention (e.g. Crisis Residential). CSU social workers will utilize the ADMHS continuum of crisis services to ensure the client's needs are appropriately and adequately met.
- 5.3. If the client exhibits behaviors that indicate that, as a result of a mental disorder, he/she is a danger to self or others or is gravely disabled, CSU staff will initiate a Mobile Crisis 5150 assessment. If the client meets criteria, the CSU will collaborate with Mobile Crisis to transfer the client to a psychiatric inpatient setting.

6. **AFTERCARE PLANNING AND PROCEDURES**

- 6.1. Based on the client's needs, aftercare planning will include referrals and linkage to appropriate community-based resources necessary to enhance or sustain the client's capacity to function in the community. Referrals may cover a range of areas such as housing, vocational/educational needs, social services and substance use issues. A rationale for all referrals will be provided before the client leaves the CSU.
- 6.2. When indicated, an ADMHS Crisis Triage service referral will be initiated by the CSU social worker. A referral is required if the client will need support to successfully transition from the CSU or if the client is not already connected to outpatient and/or wraparound services.
- 6.3. The client will be provided a hard copy of the *Aftercare Plan* (see Attachment A) with the following information:

1. Date, time and location of scheduled appointments.
 2. Living arrangements.
 3. Medication regimen including dosage, times, special instructions and possible side effects.
- 6.4. The assigned nurse will verify that all medication orders and/or prescriptions are complete. If a prescription is written by the psychiatrist or internist, the original is given to the client.
- 6.5. If the client's living arrangements does not include the involvement of natural supports and/or a temporary placement is identified as optimal for the client, the CSU social worker will identify local resources to ensure the client's needs for food, clothing and shelter are provided for.
- 6.6. The team leader and the CSU social worker will collaborate on client's transportation needs.
- 6.7. The assigned nurse will gather the client's property as identified on the Client Property Sheet.
7. **RELEASE OF INFORMATION**
- 7.1. Social Services and Medical Records staff will obtain a Release of Information (ROI) to submit aftercare service providers all pertinent records regarding the client's CSU stay and aftercare instructions.
- 7.2. If the client designates a significant support person to receive his or her aftercare plan, an ROI will be completed and filed in the "Legal" section of the client's chart. A copy of the ROI will be provided to the designated person.
8. **AFTERCARE SUMMARY**
- 8.1. An aftercare summary will be submitted to the receiving outpatient program/facility. Proof of submission (i.e. scanned email, fax) will be included with all aftercare documentation.
- 8.2. Upon request, Medical Records will submit the aftercare summary of a conservatee to the Public Guardian's office.

ASSISTANCE

Leslie Lundt, MD, CSU Medical Director
 Kristin Isaac, RN, CSU Team Supervisor

REFERENCE

Department of Health Care Services – Mental Health Plan
Exhibit A, Attachment 1, Section 4.L.5

California Code of Regulations – Rehabilitative and Developmental Services
Title 9, Section 1810.210

ATTACHMENTS

Attachment A – Aftercare Plan

REVISION RECORD

DATE	VERSION	REVISION DESCRIPTION

Culturally and Linguistically Competent Policies

The Department of Behavioral Wellness is committed to the tenets of cultural competency and understands that culturally and linguistically appropriate services are respectful of and responsive to the health beliefs, practices and needs of diverse individuals. All policies and procedures are intended to reflect the integration of diversity and cultural literacy throughout the Department. To the fullest extent possible, information, services and treatments will be provided (in verbal and/or written form) in the individual’s preferred language or mode of communication (i.e. assistive devices for blind/deaf).

Attachment A

AFTERCARE PLAN FOR _____

Date: _____

Time: _____ a.m. _____ p.m.

Transported by: (Name/Relationship) _____ To: _____

Follow Up Appointment(s):

See Doctor: _____

Date: _____ Time: _____

Address: _____

Phone: _____

Other Follow Up Appointments:

1) _____

Date: _____ Time: _____

Address: _____

Phone: _____

2) _____

Date: _____ Time: _____

Address: _____

Phone: _____

Self-Help Group Referral: _____

Living Arrangements: _____

Address: _____

Phone: _____

Medications received while at CSU:

Medication	Dosage	Times	Special Instructions/Side Effects
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Discussion/Education Provided (identification of symptoms, crisis contact persons, medication education, etc.) _____

Property Returned

Aftercare plan provided to identified support person (with ROI)

Medications Returned

*To obtain Crisis Services, call: 24/7 Access Line: **888-868-1649***

Client Signature: _____

Staff Signature: _____

