



# Illinois Crisis Prevention Network


*Building a community of support that enables people with disabilities to flourish*

## A DEEPER DIVE INTO SHORT TERM STABILIZATION

AN OVERVIEW OF SST SERVICES



# CONTENTS

- 
- 01 What is ICPN/SST?
  - 02 Brief History/ Staff and Services Provided
  - 03 How to make a referral
  - 04 Best ways to Collaborate

# WHAT IS SST?

The Support Services Team (SST) is a specialized treatment team that provides assistance and training to people diagnosed with a developmental disability that are currently in a behavioral or medical situation that challenges their ability to thrive successfully in the community.



# OUR MISSION

To bridge the gap between crisis management and crisis prevention by providing support and stability for children and adults experiencing behavioral, mental health, and/or medical challenges, so they may live and flourish in their community



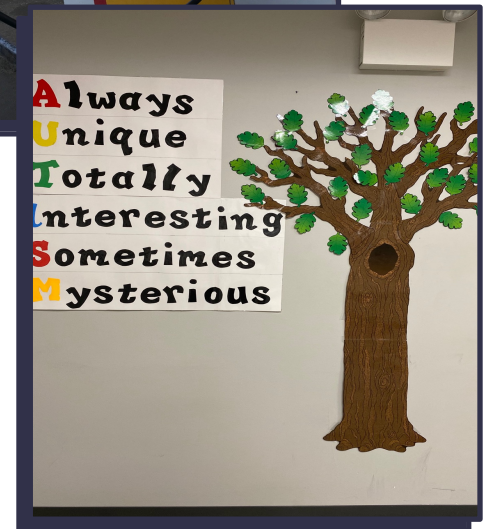
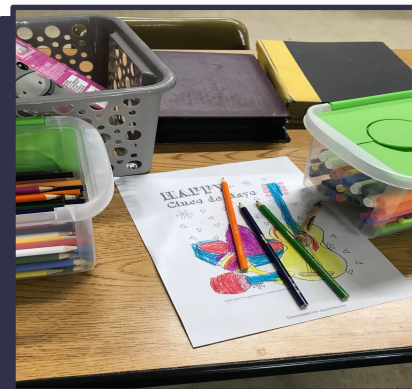


## PARTNERSHIP

ICPN is a collaborative partnership between Trinity Services and Hope, funded by Illinois Department of Human Services – Division of Developmental Disabilities (DHS-DDD). Referrals to ICPN are generated by DHS-DDD. ICPN – SST provides assistance on a statewide basis.

---

ICPN provides community-based services and supports to the children and adults who are referred, as well as their families, provider agencies, schools, places of employment, and community day service programs.



---

Trinity Services and Hope collaborated on an RFP and received funding to provide services for 2/3rds of the state.

---

The SST received their first referral in August 2010.

---

In 2012, ICPN assumed services for the entire state.

---

In 2015 ICPN received BIP funding to increase the weekly referral capacity and expand the training program.

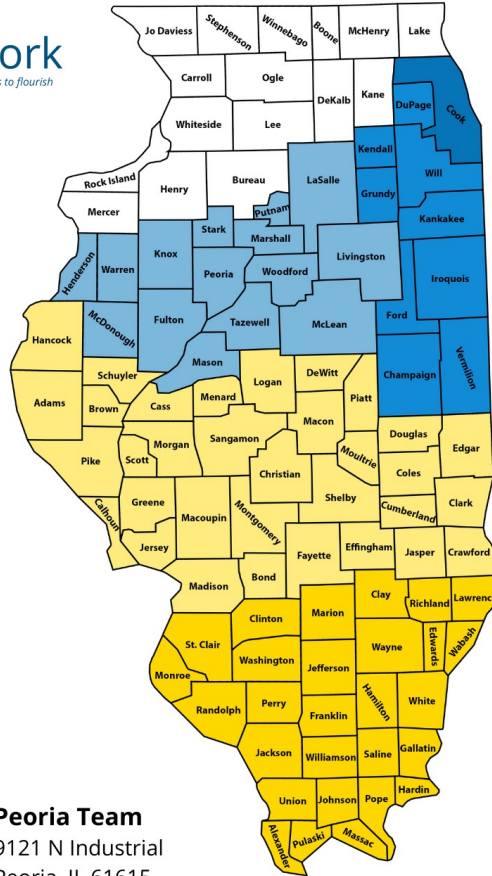
---

Since its inception there have been almost 7,000 referrals.

## HISTORY OF THE SST

## Coverage Map

-  Rockford Team
-  Chicago Team
-  New Lenox Team
-  Peoria Team
-  Springfield Team
-  Carbondale Team



**Rockford Team**  
 1639 N Alpine Rd, Garden Suite  
 Rockford, IL 61107

**Chicago Team**  
 4415 Harrison St, Suite 500  
 Hillside, IL 60162

**New Lenox Team**  
 301 Veterans Pkwy  
 New Lenox, IL 60451

**Peoria Team**  
 9121 N Industrial  
 Peoria, IL 61615

**Springfield Team**  
 5220 S 6th St, Suite 2600  
 Springfield, IL 62703

**Carbondale Team**  
 353 S Lewis  
 Carbondale, IL 62901

# Meet the Teams

The Support Service Teams work out of six separate office that are strategically placed geographically to provide coverage for the entire state of Illinois. Each office has a unique number of professionals and receives a unique number of referrals each week. Based on the county that the referral resides in, the referral is sent to the corresponding office.



# WHO MAKES UP THE SST?



Each team is comprised of staff from a variety of professional disciplines: psychologists, board certified behavior analysts, licensed clinical therapists, qualified intellectual disability professionals, registered nurses and social workers.

Consulting pharmacist and medical doctor with extensive experience in the field of developmental disabilities.

Team size varies as well as the composition of the professionals working in each team.

Not every professional discipline is needed for each referral.

Teams are diverse, comprised of staff with various backgrounds and skills.

# WHO IS ELIGIBLE FOR SST SERVICES?

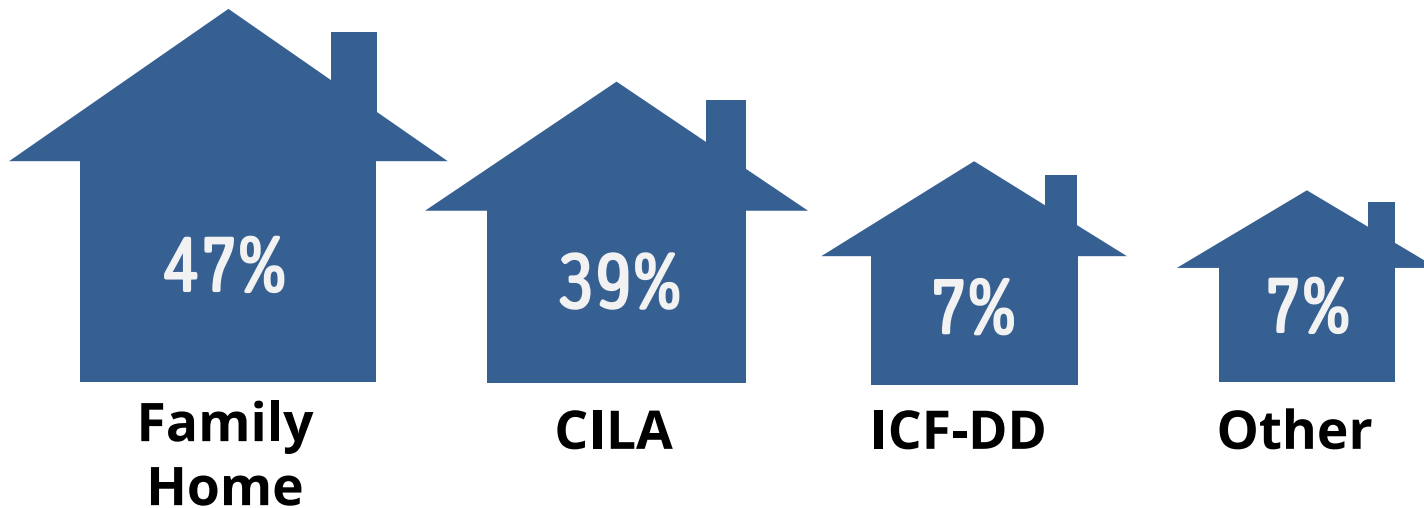
- The SSTs serve all adults with a developmental disability living in a community setting experiencing challenges with an urgent, chronic or cyclical medical or behavioral concern that has not responded to interventions, who are receiving Medicaid services, Waiver services, or currently on the PUN's List, as capacity allows.
- Adults residing at home, in a DDD-funded community setting or an Intermediate Care Facility for persons with a Developmental Disability (ICFDD) may be referred.
- The SSTs serve children and adolescents diagnosed with a developmental disability who are receiving Division of Developmental Disability services, or currently on the PUN's List, as capacity allows.
- The person with a developmental disability, his or her family, direct support staff at the day and residential services, as well as agency leadership, will be the customers and collaborators.

# REFERRAL DEMOGRAPHICS

	FY18	FY19	FY20	FY21	FY22	FY23
# of Referrals	611	657	581	564	603	533
Males	67%	69%	70%	69%	68%	70%
Females	33%	31%	30%	31%	32%	30%
Adults	84%	87%	89%	87%	87%	83%
Children	16%	13%	11%	13%	13%	17%
% with a Dual Dx	87%	87%	89%	88%	88%	86%

# WHO WE SERVED IN FY23

## Living Arrangement at Time of Referral



# SERVICES PROVIDED



---

Behavior Supports

---

Short Term Individual Therapy

---

Training

---

Medical Consultation

---

Pharmacy Consultation

---

Advocacy and Support

# MEDICAL/ PHARMACY CONSULTATION



## Medical Physician

Reviews medical information, medications, and behavioral description

Provides thorough medical recommendations to guide further treatment



## Pharmacist

Reviews current medication, medication history, behavior description, and labs

Provides medication interactions and makes recommendations for continued treatment

# TRAINING

The SST regularly creates trainings specific to the people that they are supporting.

Common trainings include:

- Basic Behavioral Principles
- Validation Techniques
- Therapeutic Relationships
- Understanding Dual Diagnosis
- Verbal De-escalation
- Safety Care for Families

6,909 community members participated in 26 virtual workshops

## Trending Topics

- Trauma Informed Supports
- Acceptance and Commitment Therapy
- Basic Behavioral Principles
- Dementia
- Autism Spectrum Disorders
- Mindfulness

Check out [www.ICPN.org](http://www.ICPN.org) for information about upcoming workshops

ICPN COMMUNITY TRAININGS



ICPN offered their first Annual Conference in 2016 and continues to provide one each year.

The next annual conference will be held in person on March 5<sup>th</sup> and 6<sup>th</sup> in Springfield and Naperville. Registration is currently open for March of 2024. Please visit [www.ICPN.org](http://www.ICPN.org) for more information.

ICPN ANNUAL CONFERENCE

---

The SST's do not take the place of service coordination agencies.

---

The SST do not assist people in acquiring additional funding for 1:1 staff, fences, in-home day programs, etc.

---

The SST's are not an emergency response team.

---

The SST's do not determine discharge from day programs or residential agencies.

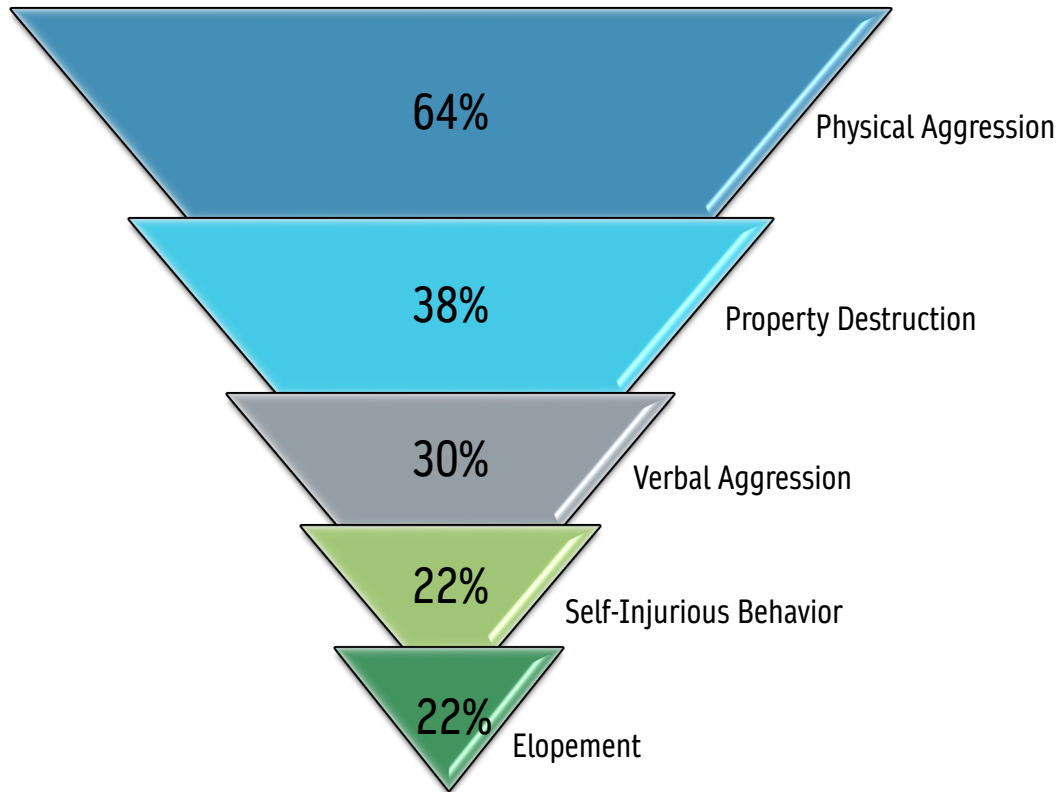
---

The SST's do not replace the Department of Human Services Division of Developmental Disabilities

---

**WHAT THE SST'S ARE NOT**

# REASONS FOR REFERRAL



## Other reasons for Referral

- Eating Non-Food Items
- Negative Community Contacts
- Over-Utilization of Emergency Services
- Medical Non-Compliance
- Inappropriate Sexual Behavior
- Other Behaviors of Concerns
- Recurrent Psychiatric Hospitalizations
- Unexplained Physical Deterioration
- Other Medical Concerns

## OUTCOMES

---

ICPN supports are based on the unique circumstances of each person referred

---

The needs of the person, family, and staff determine case closure

---

Positive vs. neutral case closure is designated at time of closure

---

If supports need to be reinitiated after closure, a person can be re-referred at any point

# HOW TO GENERATE A REFERRAL TO SST

---

Referrals are submitted by the service coordination agencies

---

Information needed includes a description of the problem behavior

---

Once a referral is approved by DHS, SST will schedule an intake meeting

---

Additional documentation needed could include ICAP, Behavior Plan, Data, Psychological Evaluation, Psychiatric Evaluation, Medical Documents, Medication List, Individual Service Plan.

# WHEN TO MAKE A REFERRAL TO SST



- Ideally a referral would be generated before the person is in crisis.
- Increase in targeted behavior
- Looking for another set of “eyes” on a situation
- Need additional training for staff
- Unexplained change in medical condition
- The role of SST is to wrap around supports that are currently in place, not take the place of current supports.



The SST receives referral from DHS at the beginning of each week



The SST has 24 hours to make phone contact



The SST has 72 hours to be on-site



The initial phase involves observation/ rapport building and assessment



The second phase involves training and the implementation of strategies that will assist in decreasing the frequency and severity of target behaviors



The third phase involves monitoring for treatment integrity and continued skills building



The final phase is case closure

# REFERRAL PROCESS

# HOW TO WORK COLLABORATIVELY WITH SST

- SST will ask for additional documentation that could include ICAP, Behavior Plan, Data, Psychological Evaluation, Psychiatric Evaluation, Medical Documents, Medication List, Individual Service Plan.
- Initially we will bring the entire team together to learn from everyone.
- There will be ongoing checks to gather updated information
- If you have specific goals, share them!
- There is room at the table for all of us.





# THINGS WE HAVE LEARNED ALONG THE WAY THAT SUPPORT COLLABORATION

- Nothing good comes from a power struggle
  - Think opportunity vs. negativity
- Data is for everyone
  - Does not have to focus on the negative
  - Only collect data that you can get mostly right
- One size approach does not fit everyone
  - Use the biopsychosocial model to conceptualize and make sure treatment plans are considering all three domains



# KEYS TO COLLABORATION

- Meet people where they are at, not where you want them to be
  - Physically, socially, emotionally, etc.
- If at first you don't succeed, try again.
  - This field is hard, but we can make positive and lasting changes with the people we serve



# COLLABORATION



- Consistency is hard, but not impossible.
  - Work proactively to create environments that are consistent and predictable (as we can).
- Importance of an accurate diagnosis
  - Helps with appropriate medication regimes, clinical staff to provide accurate treatment plans, and staff training
- You must be flexible
  - There is always more than one way to do things

# SELF CARE IS IMPORTANT

Put on your oxygen mask first before helping others.





# Our Values

## Service

We use our skill set to enhance the well-being of others



## Practice with Kindness and Grace

Giving people more without the need for something in return



## Balance

Improve and maintain our overall health and well-being



## A Pinch of FUN

Don't take ourselves too seriously



## Embrace and Drive Change

Change is not an adversity but rather an opportunity to provide a better service and try new things



## Adaptability and Creativity

Solve problems with openness and innovation



THANK YOU!

The background of the quote is a reproduction of Vincent Van Gogh's painting 'The Starry Night'. It features a swirling, turbulent sky with bright, glowing stars and a crescent moon. Below the sky, a small village with a prominent church spire is visible, nestled in a valley. The overall style is characteristic of Van Gogh's expressive, textured brushwork.

Great things are  
done by a series  
of small things  
brought together.

~Vincent Van Gogh

- **Amie Burke**  
**aburke@hope.us**

- **Kim Shontz**  
**kshontz@trinityservices.org**