Chapter: Program

Subject: Treatment or Diagnostic Services for MHSUD

Section: 12.7 Page: 1 of 3

OAC: 5101:2-5-08(I); 5101:2-9-42

COA Standard:

Review/Revised: 12/16/20; 1/21/21; 4/23/21; 3/28/22

NRTC has a Multi-Tiered System of Supports for each of its identified programs. Nicholas has implemented an approved trauma-informed treatment model utilizing training approaches from Ohio Mental Health and Addiction Services' Trauma 101 series.

- 1. All youth entering the program will be screened for appropriateness into one of NRTC's programs. Once a youth is accepted, arrangements for an initial medical screening, physical and pharmacological management are made.
- 2. Youth receive a medical screening by a licensed healthcare professional (LPN, RN, etc.) within 24 hours of being admitted into the facility. They also receive a physical by a licensed healthcare professional (MD, NP, etc.) within 5 days, unless one was completed within six months prior to placement and a copy can be obtained for the youth's file.
- 3. Community and/or Court medical providers are also utilized based on the youth's needs and continuity of care.
- 4. Youth will be assigned a licensed therapist and a case manager.
- 5. All youth will receive a SAMSHA approved Adverse Childhood Experiences Questionnaire (ACE-Q) and the SOQIC trauma diagnostic assessment within two business days of the youth's admission to the program.
- 6. Youth are offered yearly flu shots.

Behavioral & Therapeutic Intervention Programming

Risks and needs are addressed through the use of evidence-based cognitive behavioral and trauma-informed care models in treatment planning and case management services. Individual and family therapy, education, and vocation are strong components of the program. Integration back into the community and home is facilitated, when applicable. Mental health needs are addressed through NRTC's partnership with South Community, Inc. Youth receive therapeutic individual, family and group treatment weekly. Treatment frequency will be increased, if necessary, and level of care changes will be addressed on a clinically-managed, case-by-case basis. Progress towards successful completion is based on each youth's individual progress and behavioral compliance.

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Substance Abuse Program

Eligible youth have received a Substance Use Disorder diagnosis and meet criteria for the ASAM 2.5 level of care. Clinically managed through the facility's partnership with South Community, programming is short-term and intensive. Youth shall receive a minimum of 20 hours of substance abuse and co-occurring disorder treatment weekly, with primary focus on The Seven Challenges curriculum. This program is a minimum of 45 days. Youth participating in this program have access to individual, family, and group counseling. In addition to The Seven Challenges groups, youth participate in skills groups that are designed to improve their functioning, manage and reduce symptoms, and assist with their transition to aftercare services.

Treatment Planning

With consideration to the youth's safety and developmental needs, the treatment is family-driven with both the youth and family included in all aspects of care, if in the best interest of the youth. Parents/guardians and siblings are encouraged to participate and support youth who are placed in the program through visitation, home visits, family therapy, writing and phone calls. Youth at NRTC participate in their treatment planning and family engagement with the help of their counselor, probation officer and other persons on their treatment team. NRTC provides outreach, ongoing support and aftercare for the youth and the family. Key components of this family-centered residential treatment are documented in the youth's record.

Treatment team members consist of South Community clinical support staff, probation officers, case managers, education staff, youth specialist supervisors, youth, parent/guardian, program managers and other supports as needed. Probation officers oversee case coordination to schedule treatment team meetings. During the meetings participants review the youth's adjustment to the program, participation, family services, medical needs, education needs, individual service plans and reviews, discharge and permanency planning.

Treatment team meetings are held twice monthly for each youth. The first meeting is held with NRTC team members for case review and all participants are invited to the end of the month family treatment team meetings. Virtual meetings may be used when appropriate to support youth and families and other participants when in-person meetings cannot be attended.

Tiered Services

NRTC actively involves and supports families who have youth placed in the facility and offers tiered services for treatment at all levels of the program. Services are based on individual needs as determined by assessments and ongoing observations throughout the program. All youth receive the following services in addition to the programs outlined above.

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- 1. Individual Counseling: Youth are offered the ability to create an individualized treatment plan with input from their clinician and supports. Youth are offered an hour of individual counseling per week to work on their treatment goals and can increase their time in individual counseling as clinically appropriate.
- 2. Family Counseling: Youth are offered one hour of family counseling per week. Family counseling may take place with the youth's parents/guardians or other identified family supports.
- 3. Skills group: Skills group offers youth an opportunity to learn and practice a wide array of skills to assist in their appropriate communication of thoughts and feelings as well as to assist in improving their behavior.
- 4. Trauma Focused Support/Approach: Staff meet youth where they are when they enter the program. Youth are given the ACE-Q and a medical screening to identify specific areas of needs that can be supported by staff. Trauma psychoeducation groups or individual sessions are also offered for addressing the complex challenges that trauma creates.
- 5. Case Management: Youth participating in programming have access to case management services. Case management assists in communication between service providers that are working with the youth, creating a smooth transition out of programming and into aftercare services, and developing skills that reduce symptoms and enhance the functioning of the youth. Case managers also ensure that all youths' ongoing medical needs and care are met.
- 6. Medication Management: Youth have access to nursing and prescriber services to assist in meeting physical health and medication needs.
- 7. Crisis Management: Youth are provided additional services, as appropriate, if they are in crisis. This includes crisis screening, safety planning, and increased contact time with clinical staff to promote the clients stability.

Tier 2 programming is offered on an as-needed basis and is designed to help youth mitigate specific areas of need. Tier 3 services are individualized and developed with the youth, family, the youth's counselor, probation officer, case manager and other treatment team support staff on an as-needed basis. Available Tier I, II and III services are listed in the NRTC Multi-Tiered System of Supports document.