

## Intensive In-Home Behavioral Health Treatment (IIBHT) Practice Standards

Clinical Practice Categories	Description
<b>Engagement</b> <i>A skilled in-home behavioral health therapist (or team):</i>	
<b>1) Engagement</b>	<p><b>1.1</b> <i>Describes IIBHT.</i> Ensures that the process of IIBHT including roles, boundaries, strengths and limitations, particularly as they differ from other treatment settings and modalities, is described clearly to youth and caregivers. Orients, in plain language, the expectations of all team members, including youth and caregivers.</p> <p><b>1.2</b> <i>Explains confidentiality</i> (and its limitations) specific to the IIBHT model, including how and why information may be shared with individuals within the team (e.g., caregivers) and outside the team (e.g., for supervision).</p> <p><b>1.3</b> <i>Engages the youth/family</i> utilizing evidence-based techniques:  A. Promotes youth and caregiver voice and choice.  B. Identifies potential future barriers to participating in treatment and actively brainstorms solutions.  C. Reframes or clarifies youth and caregiver perspectives in a way that avoids criticism or judgement.  D. Utilizes strength-based language and practices.</p> <p><b>1.4</b> <i>Employs motivational enhancement strategies</i> (e.g., open-ended questioning, affirmations, solution-focused questions, and reflections), based on youth and caregiver readiness for change.</p>
<b>2) Cultural competence</b>	<p><b>2.1</b> <i>Actively seeks to understand</i> and demonstrate respect for the unique and diverse backgrounds of youth and caregivers (e.g., roles, values, beliefs, races, ethnicities, sexual orientations, gender expressions, gender identities, languages, traditions, communities, and cultures).</p> <p><b>2.2</b> <i>Uses language that is accessible</i> to youth and caregivers and, where necessary, translates clinical terminology (e.g., diagnoses and acronyms) used by professionals into content that is clear and promotes understanding.</p>
<b>Risk Identification, Safety Planning, &amp; Crisis Response</b> <i>A skilled in-home behavioral health therapist (or team):</i>	
<b>3) Risk identification</b>	<b>3.1</b> <i>Identifies risks.</i> Works with youth and caregivers to identify and address risk and safety concerns at home, in school, and in the community.
<b>4) Safety planning</b>	<p><b>4.1</b> <i>Co-creates safety plan</i> with the youth and caregivers that includes the identification of:  a. safety concerns,  b. crisis escalation patterns and triggers,  c. means reduction and prevention measures,  d. de-escalation strategies that are easily understood and can be implemented by the youth and caregivers, and  e. Youth and caregiver-identified supports.</p> <p><b>4.2</b> <i>Regularly monitors and updates the safety plan</i> in partnership with the youth, caregivers, and other team members.</p>
<b>5) Crisis response and stabilization</b>	<p><b>5.1</b> <i>Serves as lead crisis responder</i>, responds to calls immediately, and is available for on-site stabilization as needed 24/7. IIBHT supervisors provide on-call support and backup to their staff.</p> <p><b>5.2</b> <i>Uses crisis de-escalation skills</i> and demonstrates ability to effectively prevent or stabilize crises. Works with the youth and caregivers to develop their own crisis de-escalation skills.</p>
<b>Assessment, Clinical Conceptualization, &amp; Treatment Planning</b> <i>A skilled in-home behavioral health therapist (or team):</i>	
<b>6) Comprehensive contextual assessment</b>	<p><b>6.1</b> <i>Identifies needs and current functioning.</i> Works with youth and caregivers to identify behavioral health needs and functioning across key life domains (e.g., school, vocation, family, social, and community) comprehensively.</p> <p><b>6.2</b> <i>Identifies functional strengths.</i> Works with the youth and caregivers to identify strengths that can be used as the basis for elements of the treatment plan in the areas of: school, vocational, family, social, and community functioning as well as towards meeting developmental skills/abilities.</p>

	<b>6.3</b> <i>Assesses for trauma.</i> Assesses for the presence and impact of trauma (e.g., personal, intergenerational, community, and historical) in youth and caregivers.
<b>7) Clinical conceptualization process</b>	<b>7.1</b> <i>Prioritizes needs.</i> Works with youth and caregivers to prioritize the most critical behavioral health needs and concerns that will be the focus of treatment planning and delivery. If youth and caregivers are engaged in external care planning/coordination, such as team-based wraparound or other care coordination models, prioritization of needs will occur in collaboration with these other team members. <b>7.2</b> <i>Conducts functional analysis.</i> Works with the youth and caregivers to conduct a functional analysis of antecedents and consequences of the youth's behavior to yield a functional understanding of behavior. Ideally, an external expert (supervisor, coach, or model consultant) reviews and provides feedback on these factors and their applicability to treatment planning.
<b>8) Collaborative Treatment Planning</b>	<b>8.1</b> <i>Develops treatment plan.</i> Works with youth and caregivers to develop a treatment plan with a manageable number (e.g. 1-4) of priority needs and goals, and strategies for addressing each need or goal, based on the underlying factors identified in 7.2 above. <b>8.2</b> <i>Develops indicators of progress.</i> Works with youth and caregivers to develop individualized indicators of progress that are concrete and measurable for each priority treatment goal/need in the plan of care.
<b>Comprehensive Treatment</b> <b>A skilled in-home behavioral health therapist (or team):</b>	
<b>9) Psychoeducation</b>	<b>9.1</b> <i>Provides psychoeducation.</i> Engages youth and caregivers in initial and continued psychoeducation related to the youth's diagnoses and/or behavioral health needs, as well as applicable intervention strategies.
<b>10) Measuring and monitoring treatment progress</b>	<b>10.1</b> <i>Conducts standardized assessment.</i> Collaborates with youth and caregivers to use BOTH standardized forms of assessment and indicators that are individualized to the youth/caregivers to measure progress from baseline to regular follow-up intervals. Such assessment is also used near treatment plan completion to determine youth and caregiver readiness for discharge.
<b>11) Skill building - Youth:</b> Functional competencies and coping strategy development	<b>11.1</b> <i>Builds youth skills.</i> Works with youth and caregivers to develop adaptive and emotional coping skills across settings, such as emotional regulation, problem solving, communication, conflict management, and decision-making.
<b>12) Skill building – Parent:</b> Behavior Management and Positive Parent-Child Relationships	<b>12.1</b> <i>Builds caregiver skills.</i> Works with caregivers to help them acquire and use behavior management skills as indicated by the treatment plan. Examples include consistency and follow through, use of meaningful rewards and consequences, problem solving, praise and positive communication, conflict resolution, and the development of child supervision and monitoring plans. <b>12.2</b> <i>Promotes positive relationships.</i> Works with caregivers to develop supportive and nurturing relationships with the youth that promote resiliency and wellness.
<b>13) Cognitive behavioral interventions - Youth</b>	<b>13.1</b> <i>Uses cognitive-behavioral strategies.</i> Demonstrates competency in cognitive behavioral interventions, including assisting youth and caregivers in identifying underlying emotions and emotional triggers, and in developing cognitive flexibility, emotional regulation, and/or adaptive thinking patterns.
<b>14) Family and systemic interventions:</b> Structural, solution focused, strategic	<b>14.1</b> <i>Promotes positive family interactions.</i> Works with youth and caregivers to identify non-adaptive interactional patterns, and is able to develop and implement family system interventions that increase youth and caregiver adaptive responses and functioning.
<b>Cross-System Collaboration, Care Coordination, and Advocacy</b> <b>A skilled in-home behavioral health therapist (or team):</b>	
<b>15) Collaborative planning and care coordination</b>	<b>15.1</b> <i>Ensures collaboration.</i> In situations where there is no external care coordination program or provider, IIBHT provider takes the lead role in cross-system collaboration and service coordination, including cross-system collaboration meetings (minimally, at the beginning and near the end of IIBHT). <b>15.2</b> <i>Assesses for substance abuse treatment needs.</i> Works with youth and caregivers to assess for substance use treatment needs and, if appropriate, integrates treatment into the plan of care (unless assessment indicates a need for a different level of care or setting). <b>15.3</b> <i>Assesses for social service needs.</i> Works with youth and caregivers to assess for the need of social services (e.g., food subsidies, housing and utilities assistance, and job training) and, if appropriate, links youth and caregivers to services.
<b>16) Contextual Interventions</b>	<b>16.1</b> <i>Promotes positive relations with systems.</i> Supports and empowers youth and caregivers to develop positive working relationships with other systems and providers with whom they are engaged. <b>16.2</b> <i>Arranges for supports from systems.</i> Works with youth and caregivers to consult with other system providers to develop and implement relational supports and accommodations (e.g., support developing an IEP or 504 plan in school) based on youth and caregiver abilities and challenges.

17) Strategic advocacy	17.1 <i>Provides system navigation.</i> Works with youth and caregivers to understand each of the systems they are involved with, and shares and models how they can effectively navigate those systems. When youth and caregiver are engaged in external care coordination provider and/or family/youth peer support, IIBHT coordinates efforts with those providers and shares responsibility for system understanding and navigation.
<b>Developmental Asset and Resilience Promotion, and Functional Supports</b> <b><i>A skilled in-home behavioral health therapist (or team):</i></b>	
18) Resilience/developmental asset/wellness promotion	18.1 <i>Builds community assets.</i> Works with youth and caregivers in linking youth with pro-social activities and peers. 18.2 <i>Builds a future orientation.</i> Works with youth and caregivers to build a future orientation (e.g., optimism and goals).
19) Resource and support building: identification and linkage	19.1 <i>Identifies current family resources and supports.</i> Works with youth and caregivers to identify their current support network (informal and formal) across areas such as instrumental (e.g. childcare, transportation, etc.), informational, and emotional supports, as well as the availability of the supports, and the size and stability of the support network. 19.2 <i>Builds family resources and supports.</i> Works with youth and caregivers to determine if additional supports are needed. When appropriate, IIBHT practitioner facilitates the development and linkage of a safety net of supports for the youth and caregivers.
<b>Transitioning from IIBHT</b> <b><i>A skilled in-home behavioral health therapist (or team):</i></b>	
20) Transition planning	20.1 <i>Establishes transition criteria.</i> Works with youth and caregivers, early in the intervention, to develop a plan for transition from IIBHT by establishing criteria for successful transition/discharge. 20.2 <i>Develops post-IIBHT crisis plan.</i> Works with youth and caregivers to develop a crisis management plan they will use once IIBHT ends that includes prevention strategies, action steps, specific responsibilities, and communication protocols. 20.3 <i>Develops skills maintenance plan.</i> Works with youth and caregivers to develop a plan for ongoing maintenance of skills and progress. 20.4 Works with youth and caregivers to develop linkages with post-IIBHT resources and supports (informal and formal), as appropriate. 20.5 Discusses with youth and caregivers how they can access future IIBHT services, if needed.
21) Closing Session	21.1 Schedules a closing session to review progress towards meeting needs/goals, celebrate successes, and discuss youth and caregivers' experiences of the treatment process.