

Survey of
Psychiatric
Residential
Treatment
Facilities
Enrolled in
Montana
Medicaid

September
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**Administered and compiled by the Children's Mental Health Bureau, Developmental Services
Division, Department of Public Health and Human Services, State of Montana**

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EXECUTIVE SUMMARY

In 2010 the Children's Mental Health Bureau (CMHB) partnered with the University of Montana (UM) Graduate Social Work Department to develop a tool for surveying out of state (OOS) psychiatric residential treatment facilities (PRTFs) currently enrolled in Montana Medicaid. Twelve students in the Social Policy Analysis class taught by Dr. Danielle Wozniak tackled the challenge to not only create and implement a survey assessment tool, but also to research the implications of SB 399 passed by the Montana Legislature in 2009. The work done by these students and Dr. Wozniak was impressive.

The CMHB repeated the survey in 2011. Many of the student's suggestions were integrated into the subsequent 2011 survey conducted by the CMHB. In 2011, PRTFs enrolled in Montana Medicaid were required to complete the survey by administrative rule. The results of this survey are available to the public.





The information compiled in this report is based upon self report from each facility. The Children's Mental Health Bureau has not independently verified the information provided by the PRTFs. Facilities frequently change ownership which can impact staffing, treatment approaches, populations served, etc. While this report should be useful in narrowing down the field of PRTFs for a particular placement, it is incumbent upon the placing party to do independent research to determine the most appropriate placement for a youth.









DESCRIPTION OF METHODS

In an effort to standardize as many of the questions as possible, an online survey tool, Survey Monkey, was used. Survey links were sent to the CEO or CFO of each PRTF enrolled in MT Medicaid, prefaced with a letter from the CMHB Bureau Chief, emphasizing that the survey is a requirement. All eleven out-of-state PRTFs completed the survey along with the three in-state PRTFs. The survey consisted of 100 questions which covered the following areas:




- Licensing and accreditation.
- Using DSM IV-TR classification: diagnoses the PRTF specializes in treating and will or will not accept for treatment.
- PRTF characteristics: number of beds, number of units, availability of locked units, average length of stay, staff to client ratios, supervision and continuing education for staff.
- Behaviors/conditions the PRTF specializes in treating, will consider treating, or will not accept for treatment.
- Restraint and seclusion: types of restraint, average length of time of restraint and seclusion, percent of youth in PRTF who experience restraint and seclusion.
- Use of PRN medication as an alternative to restraint or seclusion.
- PRTF programs and services: the use of functional assessments, wraparound training and integration into care, youth and parent/guardian involvement in development of plan of care, choices of care, specific services provided by staff or contracted staff (counseling, chemical dependency assessment and treatment, occupational therapy etc.), and how frequently those services are offered.
- Treatment team meetings: who participates, information flow for master treatment plans reviews, the availability of videoconferencing, family and guardian engagement strategies including assistance with travel costs for visitation, outcome measures and performance indicators.
- Education: credit transfer, how PRTF communicates with the youth's home school.
- The use of evidence based programs and practices.
- Discharge planning: including the development of the plan, appointments for follow up services at home, medication upon discharge.
- Specific strategies/modalities/treatment methods for the following populations:
 - Youth with sex offending behaviors
 - Youth with sexually reactive behaviors
 - Youth with violent or aggressive behaviors
 - Youth with conduct disorder
 - Youth with developmental disabilities/cognitive delays
 - Youth with autism

Eleven out of state psychiatric residential treatment facilities (PRTFs) are enrolled in Montana Medicaid:

-  *Alabama Clinical Schools, Birmingham, Alabama*
-  *Benchmark Behavioral Health System, Woods Cross, Utah*
-  *Cedar Springs Behavioral Health System, Colorado Springs, Colorado*
-  *Coastal Harbor (UHS of Savannah, LLC), Savannah, Georgia*

-  *Copper Hills Youth Center, West Jordan, Utah*
-  *Cottonwood Treatment Center, So. Salt Lake City, Utah*
-  *Hillcrest Behavioral Health Services, Birmingham, Alabama*
-  *Lighthouse Care Center of Augusta, Augusta, Georgia*
-  *Hillcrest Behavioral Health, Birmingham, Alabama*
-  *Mountain Youth Academy , Mountain City, Tennessee*
-  *Provo Canyon School, Orem, Utah*
-  *Youth Villages Inc., Memphis, Tennessee*

Montana has three in-state PRTFs:

-  *Acadia, Butte, MT*
-  *Shodair Children's Hospital, Helena, MT*
-  *Yellowstone Boys and Girls Ranch, Billings, MT*

Each facility has been given the opportunity to verify their facility specific information and make corrections or clarifications. Changes were made either by correcting the chart or by adding it to the appendix, depending on the nature of the information.

The survey is posted on the Montana Children's Mental Health Bureau website:

<http://www.dphhs.mt.gov/mentalhealth/children/>. Limited color copies will be available upon request. Please contact the CMHB Administrative Assistant at (406) 444-4545 for further information.

The CMHB plans to conduct this survey annually.




FOR FURTHER CONSIDERATION.....

1. This report will be shared with all child serving agencies in Montana that make placements in PRTFs.
2. The CMHB may consider interviewing youth and families who have received PRTF services. A different survey instrument developed to mirror some of the questions asked in this survey could serve as additional information about the facility.
3. A unified tracking system for all PRTF placements paid with state or federal funds would be helpful.
4. Further research regarding successful transitions from PRTF to the youth's home school would be useful.
5. Sixty-five percent of all PRTFs reported they offered financial assistance for travel costs for parents/guardians. Additionally, Montana Medicaid will assist with travel costs when the visit is therapeutically indicated. Pre-approval is required. For additional information:
<http://medicaidprovider.hhs.mt.gov/clientpages/clientindex.shtml>
6. Videoconferencing was reported to be available at 29% of PRTFs, 36% provide this upon request to families/guardians, and 57% to the state child placing agencies. This communication method should be used, where available, to strengthen relationships between youth and their families and guardians, especially for youth placed in distant PRTFs.
7. The narrative charts on specialized populations may be useful to parents/guardians placing youth with autism, developmental disabilities/cognitive delays, violent or aggressive behaviors, sexually reactive behaviors, sexually offending behaviors, conduct disorders.
8. Only 71% of the PRTFs reported that education credits earned at their facility transferred to Montana public schools because 4 of 11 out-of-state PRTFs were not certain. This could create a deficit for youth who are placed in PRTFs. Especially for high school age students, the ability to transfer credit should be a consideration in placement. In addition, further information about the transition from the PRTF to the youth's home school would be helpful.

Behaviors/Conditions PRTF is willing to treat




Detailed findings: The following behaviors/conditions impede acceptance into PRTFs over 35% of the time: IQ of 50 or below; primary problem is chemical dependency; sexual offending behaviors; intense, violent behaviors including injury of staff or patients.

	Intense violent behavior including injury of staff/patients	History of aggression without current aggression/violence	Sexually reactive	Sexually offending	Extreme impulsivity	Fire setting behavior	Severe Suicide risk	Flight risk	Chemical dependency	History of PTSD/Trauma
In State										
Acadia Montana	Will not accept	Will consider treating	Specializes	Will consider treating	Will consider treating	Will consider treating	Will consider treating	Will consider treating	Will consider treating	Will consider treating
Shodair Children's Hospital	Will consider treating	Specializes	Will consider treating	Will not accept	Specializes	Specializes	Specializes	Specializes	Will consider treating	Will consider treating
Yellowstone Boys & Girls Ranch	Will not accept	Will consider treating	Will consider treating	Will not accept	Will consider treating	Will consider treating	Will not accept	Will consider treating	Specializes	Specializes
Out of State										
Alabama Clinical Schools	Will consider treating	Specializes	Specializes	Specializes	Will consider treating	Will consider treating	Will consider treating	Will consider treating	Will consider treating	Will consider treating
Benchmark Behavioral	Will consider treating	Specializes	Specializes	Specializes	Specializes	Will consider treating	Will not accept	Will consider treating	Specializes	Specializes
Cedar Springs Hospital	Will not accept	Will consider treating	Will consider treating	Will not accept	Will consider treating	Will consider treating	Will consider treating	Will consider treating	Will consider treating	Will consider treating
Coastal Harbor Treatment Center	Specializes	Specializes	Specializes	Specializes	Specializes	Will consider treating	Will consider treating	Specializes	Will consider treating	Will consider treating
Copper Hills Youth Center	Will consider treating	Will consider treating	Specializes	Specializes	Will consider treating	Will consider treating	Will consider treating	Will consider treating	Will consider treating	Will consider treating
Cottonwood Treatment Center	Will not accept	Will consider treating	Will consider treating	Will not accept	Will consider treating	Will consider treating	Will not accept	Will consider treating	Will consider treating	Will consider treating
Hill Crest Behavioral	Will not accept	Will consider treating	Specializes	Specializes	Specializes	Will consider treating	Will consider treating	Will consider treating	Will consider treating	Will consider treating
Lighthouse Care Center	Will consider treating	Specializes	Specializes	Specializes	Specializes	Will consider treating	Will consider treating	Specializes	Will consider treating	Will consider treating
Mountain Youth Academy	Will consider treating	Will consider treating	Will not accept	Will not accept	Will consider treating	Will consider treating	Will consider treating	Will consider treating	Will consider treating	Will consider treating
Provo Canyon School	Will consider treating	Specializes	Specializes	Will not accept	Will consider treating	Specializes	Will not accept	Will consider treating	Specializes	Specializes
Youth Villages	Will consider treating	Specializes	Specializes	Specializes	Specializes	Specializes	Will consider treating	Specializes	Will consider treating	Specializes

-  Facility **specializes** in treating these conditions/behaviors
-  Facility **will consider treating** these conditions/behaviors
-  Facility **will not accept youth with these conditions/behaviors**

Behaviors/Conditions PRTF is willing to treat (cont'd)





	Cognitive delay: IQ 70 and below	Cognitive delay: IQ 60 and below	Cognitive delay: IQ 50 and below	Multiple placement history w/o response to treatment	Pattern of anti-social behavior w/o response to treatment	Medical condition requiring specialized services	Disregard for limit setting, requiring 1:1 staff 75% of time	Minimal response to psychotropic medication	Specific symptoms/diagnosis that is not responding to treatment	Primary presenting problem is chemical dependency	Fetal alcohol spectrum disorder	Neuro-psychiatric disorder
In State												
Acadia Montana	Specializes	Specializes	Will consider	Will consider	Will not accept	Will not accept	Will not accept	Will consider	Will consider	Will consider	Will consider	Will consider
Shodair Children's Hospital	Will consider	Will consider	Will not accept	Will consider	Will consider	Will consider	Will consider	Specializes	Specializes	Will not accept	Specializes	Will consider
Yellowstone Boys & Girls Ranch	Will consider	Will not accept	Will not accept	Will consider	Will not accept	Will not accept	Will consider	Will consider	Will consider	Will not accept	Will consider	Will consider
Out of State												
Alabama Clinical Schools	Specializes	Specializes	Will consider	Will consider	Will not accept	Will consider	Will not accept	Will consider	Will consider	Will not accept	Will consider	Will not accept
Benchmark Behavioral	Specializes	Specializes	Will not accept	Will consider	Will consider	Will consider	Will consider	Will consider	Will consider	Will consider	Specializes	Will not accept
Cedar Springs Hospital	Will consider	Will not accept	Will not accept	Will consider	Will consider	Will consider	Will not accept	Will consider	Will consider	Will consider	Will consider	Will consider
Coastal Harbor Treatment Center	Will consider	Will consider	Will consider	Specializes	Will consider	Will consider	Will consider	Will consider	Will consider	Will not accept	Will consider	Will consider
Copper Hills Youth Center	Will consider	Will not accept	Will not accept	Specializes	Specializes	Will consider	Will consider	Will consider	Will consider	Will consider	Will consider	Will consider
Cottonwood Treatment Center	Specializes	Specializes	Will not accept	Will consider	Will not accept	Will consider	Will not accept	Will consider	Will consider	Will not accept	Specializes	Will consider
Hill Crest Behavioral	Will consider	Will not accept	Will not accept	Will consider	Will consider	Will not accept	Will not accept	Will consider	Will consider	Will not accept	Will consider	Will consider
Lighthouse Care Center	Specializes	Specializes	Will consider	Will consider	Will consider	Will consider	Will consider	Will consider	Will consider	Will consider	Specializes	Specializes
Mountain Youth Academy	Specializes	Will consider	Will not accept	Specializes	Specializes	Will consider	Will consider	Will consider	Will consider	Will consider	Will consider	Will consider
Provo Canyon School	Specializes	Will consider	Will not accept	Will consider	Will consider	Specializes	Will consider	Specializes	Specializes	Will consider	Will consider	Will consider
Youth Villages	Specializes	Specializes	Will not accept	Will consider	Will consider	Specializes	Specializes	Specializes	Specializes	Will not accept	Specializes	Will consider

-  Facility **specializes** in treating these conditions/behaviors
-  Facility **will consider treating** these conditions/behaviors
-  Facility **will not accept youth with these conditions/behaviors**

Disorders usually first diagnosed in infancy, childhood or adolescence





Diagnosis: PRTF's report specializing in the following diagnoses 50% or more of the time: ADHD; ODD; DD/CD; Learning Disorders; Asperger's Disorder; RAD; Conduct Disorder; Depressive Disorders; Bipolar Disorders; PTSD; GAD; Impulse Control Disorder NOS.

	Developmental disability/cognitive delay	Learning disorders	Motor skills disorders	Communication Disorders	Pervasive Developmental Disorder	Autistic Disorder	Rett's Disorder	Childhood Disintegrative Disorder	Asperger's Disorder	Attention Deficit/Hyperactivity Disorder	Conduct Disorder	Oppositional Defiant Disorder	Tic Disorders	Elimination Disorder/Encopresis	Elimination Disorder/Enuresis	Separation Anxiety Disorder	Reactive Attachment Disorder
IN-STATE																	
Acadia Montana	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will not accept youth with this primary diagnosis	Will not accept youth with this diagnosis	Will consider accepting	Specializes	Will not accept youth with this primary diagnosis	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Shodair Children's Hospital	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will consider accepting	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Yellowstone Boys & Girls Ranch	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will consider accepting	Specializes	Will not accept youth with this primary diagnosis	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
OUT OF STATE																	
Alabama Clinical Schools	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will consider accepting	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Benchmark Behavioral	Specializes	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will consider accepting	Specializes	Will consider accepting	Will consider accepting	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will consider accepting	Will consider accepting
Cedar Springs Hospital	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will consider accepting	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Coastal Harbor Treatment Center	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Copper Hills Youth Center	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Cottonwood Treatment Center	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Hill Crest Behavioral	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Specializes	Will consider accepting	Will consider accepting	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will consider accepting	Will consider accepting	Will consider accepting
Lighthouse Care Center	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will consider accepting	Will consider accepting	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Mountain Youth Academy	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Provo Canyon School	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will not accept youth with this primary diagnosis	Will consider accepting	Will consider accepting	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Youth Villages	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Specializes	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting

-  Facility **specializes** in treating youth with this diagnosis
-  Facility **will consider accepting** youth with this diagnosis
-  Facility **will not accept youth with this primary diagnosis**
-  Facility **will not accept youth with this diagnosis**





Substance Related Disorders

	Alcohol-related disorders	Cannabis-related disorders	Other substance-related disorders
In State			
Acadia Montana			
Shodair Children's Hospital			
Yellowstone Boys & Girls Ranch			
Out of State			
Alabama Clinical Schools			
Benchmark Behavioral			
Cedar Springs Hospital			
Coastal Harbor Treatment Center			
Copper Hills Youth Center			
Cottonwood Treatment Center			
Hill Crest Behavioral			
Lighthouse Care Center			
Mountain Youth Academy			
Provo Canyon School			
Youth Villages			

-  Facility **specializes** in treating youth with this diagnosis
-  Facility **will consider accepting** youth with this diagnosis
-  Facility **will not accept youth with this primary diagnosis**
-  Facility **will not accept youth with this diagnosis**

Schizophrenia and other Psychotic Disorders





	Schizophrenia, childhood onset	Schizophrenia	Schizophreniform Disorder	Schizoaffective Disorder	Delusional Disorder	Psychotic disorders
In State						
Acadia Montana						
Shodair Children's Hospital						
Yellowstone Boys & Girls Ranch						
Out of State						
Alabama Clinical Schools						
Benchmark Behavioral						
Cedar Springs Hospital						
Coastal Harbor Treatment Center						
Copper Hills Youth Center						
Cottonwood Treatment Center						
Hill Crest Behavioral						
Lighthouse Care Center						
Mountain Youth Academy						
Provo Canyon School						
Youth Villages						

-  Facility **specializes** in treating youth with this diagnosis
-  Facility **will consider accepting** youth with this diagnosis
-  Facility **will not accept youth with this primary diagnosis**
-  Facility **will not accept youth with this diagnosis**

Mood Disorders





Dissociative Disorders

	Depressive Disorders	Bipolar Disorders		Dissociative Identity Disorder	Depersonalization Disorder
In State					
Acadia Montana					
Shodair Children's Hospital					
Yellowstone Boys & Girls Ranch					
Out of State					
Alabama Clinical Schools					
Benchmark Behavioral					
Cedar Springs Hospital					
Coastal Harbor Treatment Center					
Copper Hills Youth Center					
Cottonwood Treatment Center					
Hill Crest Behavioral					
Lighthouse Care Center					
Mountain Youth Academy					
Provo Canyon School					
Youth Villages					

-  Facility **specializes** in treating youth with this diagnosis
-  Facility **will consider accepting** youth with this diagnosis
-  Facility **will not accept youth with this primary diagnosis**
-  Facility **will not accept youth with this diagnosis**





Anxiety Disorders

	Panic Disorders	Obsessive-Compulsive Disorders	Posttraumatic Stress Disorder	Generalized Anxiety Disorder	Other Anxiety Disorders
In State					
Acadia Montana					
Shodair Children's Hospital					
Yellowstone Boys & Girls Ranch					
Out of State					
Alabama Clinical Schools					
Benchmark Behavioral					
Cedar Springs Hospital					
Coastal Harbor Treatment Center					
Copper Hills Youth Center					
Cottonwood Treatment Center					
Hill Crest Behavioral					
Lighthouse Care Center					
Mountain Youth Academy					
Provo Canyon School					
Youth Villages					

-  Facility **specializes** in treating youth with this diagnosis
-  Facility **will consider accepting** youth with this diagnosis
-  Facility **will not accept youth with this primary diagnosis**
-  Facility **will not accept youth with this diagnosis**





Somatoform Disorders

	Somatization Disorder	Conversion Disorder	Pain Disorder	Hypochondriasis	Body Dysmorphic Disorder	Somatoform Disorder NOS
In State						
Acadia Montana	Specializes	Specializes	Will consider accepting	Will consider accepting	Will not accept youth with this primary diagnosis	Will consider accepting
Shodair Children's Hospital	Specializes	Specializes	Will consider accepting	Specializes	Specializes	Specializes
Yellowstone Boys & Girls Ranch	Will not accept youth with this primary diagnosis	Will not accept youth with this diagnosis	Will not accept youth with this diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis
Out of State						
Alabama Clinical Schools	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Benchmark Behavioral	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis
Cedar Springs Hospital	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Coastal Harbor Treatment Center	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Copper Hills Youth Center	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Cottonwood Treatment Center	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis	Will not accept youth with this primary diagnosis
Hill Crest Behavioral	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Lighthouse Care Center	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Mountain Youth Academy	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting
Provo Canyon School	Specializes	Specializes	Specializes	Specializes	Will consider accepting	Specializes
Youth Villages	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting	Will consider accepting

-  Facility **specializes** in treating youth with this diagnosis
-  Facility **will consider accepting** youth with this diagnosis
-  Facility **will not accept youth with this primary diagnosis**
-  Facility **will not accept youth with this diagnosis**





Sexual and Gender Identity Disorders

	Exhibitionism	Fetishism	Frotteurism	Pedophilia	Sexual Masochism	Sexual Sadism	Transvestic Fetishism	Voyeurism	Gender Identity Disorder
In State									
Acadia Montana									
Shodair Children's Hospital									
Yellowstone Boys & Girls Ranch									
Out of State									
Alabama Clinical Schools									
Benchmark Behavioral									
Cedar Springs Hospital									
Coastal Harbor Treatment Center									
Copper Hills Youth Center									
Cottonwood Treatment Center									
Hill Crest Behavioral									
Lighthouse Care Center									
Mountain Youth Academy									
Provo Canyon School									
Youth Villages									

-  Facility **specializes** in treating youth with this diagnosis
-  Facility **will consider accepting** youth with this diagnosis
-  Facility **will not accept youth with this primary diagnosis**
-  Facility **will not accept youth with this diagnosis**





Eating Disorders

	Anorexia Nervosa	Bulimia Nervosa	Eating Disorder NOS
In State			
Acadia Montana			
Shodair Children's Hospital			
Yellowstone Boys & Girls Ranch			
Out of State			
Alabama Clinical Schools			
Benchmark Behavioral			
Cedar Springs Hospital			
Coastal Harbor Treatment Center			
Copper Hills Youth Center			
Cottonwood Treatment Center			
Hill Crest Behavioral			
Lighthouse Care Center			
Mountain Youth Academy			
Provo Canyon School			
Youth Villages			

-  Facility **specializes** in treating youth with this diagnosis
-  Facility **will consider accepting** youth with this diagnosis
-  Facility **will not accept youth with this primary diagnosis**
-  Facility **will not accept youth with this diagnosis**

Impulse Control Disorders





	Intermittent Explosive Disorder	Kleptomania	Pyromania	Trichotillomania	Impulse Control Disorder NOS
In State					
Acadia Montana					
Shodair Children's Hospital					
Yellowstone Boys & Girls Ranch					
Out of State					
Alabama Clinical Schools					
Benchmark Behavioral					
Cedar Springs Hospital					
Coastal Harbor Treatment Center					
Copper Hills Youth Center					
Cottonwood Treatment Center					
Hill Crest Behavioral					
Lighthouse Care Center					
Mountain Youth Academy					
Provo Canyon School					
Youth Villages					

-  Facility **specializes** in treating youth with this diagnosis
-  Facility **will consider accepting** youth with this diagnosis
-  Facility **will not accept youth with this primary diagnosis**
-  Facility **will not accept youth with this diagnosis**

Other Conditions that May be a Focus of Clinical Attention

The majority of PRTFs indicate they specialize in treating problems related to abuse or neglect and relational problems.


	Psychological Factors Affecting Medical Condition	Medication-Induced Movement Disorders	Relational Problems	Problems Related to Abuse or Neglect
In State				
Acadia Montana				
Shodair Children's Hospital				
Yellowstone Boys & Girls Ranch				
Out of State				
Alabama Clinical Schools				
Benchmark Behavioral				
Cedar Springs Hospital				
Coastal Harbor Treatment Center				
Copper Hills Youth Center				
Cottonwood Treatment Center				
Hill Crest Behavioral				
Lighthouse Care Center				
Mountain Youth Academy				
Provo Canyon School				
Youth Villages				

-  Facility **specializes** in treating youth with this diagnosis
-  Facility **will consider accepting** youth with this diagnosis
-  Facility **will not accept youth with this primary diagnosis**
-  Facility **will not accept youth with this diagnosis**


Additional Conditions That May Be a Focus of Clinical Attention

Over 35% of PRTFs reported they specialize in treating youth with the following conditions: noncompliance with treatment; child or adolescent antisocial behavior; borderline IQ; academic problem.

	Noncompliance with treatment	Malingering	Child or Adolescent Antisocial Behavior	Borderline Intellectual Functioning	Academic Problem	Bereavement Problem	Acculturation Problem
In State							
Acadia Montana							
Shodair Children's Hospital							
Yellowstone Boys & Girls Ranch							
Out of State							
Alabama Clinical Schools							
Benchmark Behavioral							
Cedar Springs Hospital							
Coastal Harbor Treatment Center							
Copper Hills Youth Center							
Cottonwood Treatment Center							
Hill Crest Behavioral							
Lighthouse Care Center							
Mountain Youth Academy							
Provo Canyon School							
Youth Villages							

 Facility **specializes** in treating youth with this diagnosis





 Facility **will consider accepting** youth with this diagnosis

 Facility **will not accept youth with this primary diagnosis**

 Facility **will not accept youth with this diagnosis**

Emerging Personality Disorder Traits

	Paranoid Personality traits	Schizoid Personality traits	Schizotypal Personality traits	Antisocial Personality traits	Borderline Personality traits	Histrionic Personality traits	Narcissistic Personality traits	Avoidant Personality traits	Dependent Personality traits	Obsessive Compulsive Personality traits
In State										
Acadia Montana										
Shodair Children's Hospital										
Yellowstone Boys & Girls Ranch										
Out of State										
Alabama Clinical Schools										
Benchmark Behavioral										
Cedar Springs Hospital										
Coastal Harbor Treatment Center										
Copper Hills Youth Center										
Cottonwood Treatment Center										
Hill Crest Behavioral										
Lighthouse Care Center										
Mountain Youth Academy										
Provo Canyon School										
Youth Villages										

-  Facility **specializes** in treating youth with this diagnosis
-  Facility **will consider accepting** youth with this diagnosis
-  Facility **will not accept youth with this primary diagnosis**
-  Facility **will not accept youth with this diagnosis**

LOCKED FACILITY/UNIT, PHYSICAL RESTRAINTS, SECLUSION

Restraint, seclusion, PRN medication: All of the enrolled PRTFs use physical restraint, the majority (50%) utilize the “Crisis Prevention Institute” model, followed closely by the “Handle with Care” model (33%) and 8.3% report using MANDT. No enrolled PRTFs reported using mechanical restraints. Seclusion is used by 86% of the PRTFs. PRN medication as an alternative to restraint or seclusion was reported by 64% of the PRTFs.

	PRTF IS A LOCKED FACILITY	PRTF HAS A LOCKED UNIT	% YOUTH TO EXPERIENCE PHYSICAL RESTRAINTS	PRTF USES SECLUSION	% YOUTH TO EXPERIENCE SECLUSION
In-State					
Acadia Montana	√	√	51-75%	√	16-20%
Shodair Children’s Hospital	√	√	26-50%	√	26-50%
Yellowstone Boys & Girls Ranch	-	√	26-50%	√	16-20%
Out of State					
Alabama Clinical Schools	√	√	26-50%	-	
Benchmark Behavioral	√	√	21-25%	√	1-5%
Cedar Springs Hospital	-	-	16-20%	√	16-20%
Coastal Harbor Treatment Center	√	√	26-50%	√	6-10%
Copper Hills Youth Center	√	√	26-50%	√	26-50%
Cottonwood Treatment Center	√	√	11-15%	- Will begin using seclusion on 09/30/11	
Hill Crest Behavioral	√	-	6-10%	√	1-5%
Lighthouse Care Center	√	√	21-25%	√	1-5%
Mountain Youth Academy	√	√	11-15%	√	1-5%
Provo Canyon School	-	√	6-10%	√	1-5%
Youth Villages	√	√	6-10%	√	6-10%

√ = YES	- = NO
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Use of functional assessment tool in PRTF

PRTF Program and Services: Use of functional assessment tools. Functional assessment tools are used in 71% of the PRTFs. The Child and Adolescent Functional Assessment Scale (CAFAS) is used by 43% of PRTFs, and 29% utilize the Child and Adolescent Needs and Strengths Survey (CANS). The Child and Adolescent Service Intensity Instrument (CASII) is used by 14%.

	Facility does not use functional assessment tools	Child and Adolescent Functional Assessment Scale (CAFAS)	Child and Adolescent Needs and Strengths Survey (CANS)	Child and Adolescent Service Intensity Instrument (CASII)	Other functional assessment tools
In State					
Acadia Montana	√	-	-	-	
Shodair Children’s Hospital	-	-	-	-	Clinical Global Assessment of Functioning
Yellowstone Boys & Girls Ranch	-	√	-	-	Child Behavior Checklist
Out of State					
Alabama Clinical Schools	√	-	-	-	
Benchmark Behavioral	-	-	√	-	
Cedar Springs Hospital	-	-	-	-	Colorado Client Assessment Record
Coastal Harbor Treatment Center	-	√	-	√	CAFAS and CASII are administered upon request by agency/insurance
Copper Hills Youth Center	√	-	-	-	
Cottonwood Treatment Center	√	-	-	-	Brief Psychiatric Rating Scale Columbia Risk Assessment
Hill Crest Behavioral	√	-	-	-	
Lighthouse Care Center	-	√	-	-	Calocus
Mountain Youth Academy	-	√	√	-	
Provo Canyon School	-	-	-	√	Youth-Outcomes Questionnaire Brief Psychiatric Rating Scale, Columbia Risk Assessment
Youth Villages	-	-	√	-	
		√ = YES		- = NO	

Services provided at PRTF by either staff or through contractual arrangements

PRTF Services: All PRTFs responded that they offer individual, group and family counseling and care coordination. Recreational therapy is offered in 93%; speech therapy in 86%, psycho-sexual assessments and chemical dependency assessments in 72%, chemical dependency treatment in 64%; occupational therapy in 64%; physical therapy in 64% and art therapy in 57%. **The survey question did not require indicating whether the service is provided by a professional meeting recognized industry standards (license, certification, etc.) Further inquiry about the specific qualification of staff providing the service is strongly encouraged.**

	Individual counseling	Group Counseling	Family Counseling	Chemical dependency assessment	Chemical dependency treatment	Occupational therapy	Speech therapy	Physical therapy	Art therapy	Recreational therapy	Psycho-sexual assessment	Sex offender treatment	Applied behavior analysis	Case management	Care coordination
In State															
Acadia Montana	√	√	√	√	√	√	√	√	-	√	-	-	-	-	√
	Acadia currently does not have staff members licensed in art therapy; however, art and play therapy are important components in numerous treatment plans.														
Shodair Children's Hospital	√	√	√	-	-	√	√	√	-	√	-	-	-	√	√
Yellowstone Boys & Girls Ranch	√	√	√	√	√	√	√	√	-	√	-	-	-	√	√
Out of State															
Alabama Clinical Schools	√	√	√	-	-	-	√	-	-	√	√	√	-	-	√
Benchmark Behavioral	√	√	√	√	√	√	√	-	√	√	√	√	√	√	√
Cedar Springs Hospital	√	√	√	√	√	-	-	-	√	√	√	-	-	√	√
Coastal Harbor Treatment Center	√	√	√	√	√	-	√	-	√	√	√	√	√	√	√
Copper Hills Youth Center	√	√	√	√	√	√	√	√	√	√	√	√	-	√	√
Cottonwood Treatment Center	√	√	√	√	√	√	√	√	√	√	√	-	√	√	√
Hill Crest Behavioral	√	√	√	√	-	√	√	√	√	√	√	√	√	√	√
Lighthouse Care Center	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√
Mountain Youth Academy	√	√	√	-	-	-	√	√	-	√	-	-	-	√	√
Provo Canyon School	√	√	√	√	√	√	√	√	√	√	√	-	√	√	√
Youth Villages	√	√	√	-	-	-	-	-	-	√	√	√	-	-	√

√ = YES

- = NO

Additional services provided at the PRTF

In addition, the following services are reported to be available in over 35% of PRTFs: anger management; training and assistance in ADLs; grief and loss work; vocational training; DBT; Native American groups/activities; music therapy; EMDR; neurofeedback. .) **The survey question did not require indicating whether the service is provided by a professional meeting recognized industry standards (license, certification, etc.) Further inquiry about the specific qualification of staff providing the service is strongly encouraged.**

	Anger management work	Grief and loss work	Native American group/activities	Vocational Training	Music therapy	Training/assistance in activities of daily living	Neurofeedback	Biofeedback	Equine therapy	Eye movement desensitization and reprocessing (EMDR)	Dialectical behavioral therapy (DBT)
In State											
Acadia Montana	√	√	√	-	-	√	-	-	-	-	√
Shodair Children's Hospital	√	√	√	-	√	√	-	-	-	-	√
Yellowstone Boys & Girls Ranch	√	√	√	√	-	√	-	-	√	-	√
Out of State											
Alabama Clinical Schools	√	√	-	√	-	√	-	-	-	-	-
Benchmark Behavioral	√	√	-	√	√	√	-	-	√	-	√
Cedar Springs Hospital	√	√	-	√	-	√	-	-	-	√	√
Coastal Harbor Treatment Center	√	√	-	-	-	√	-	-	-	-	√
Copper Hills Youth Center	√	√	√	√	√	√	√	√	-	√	√
Cottonwood Treatment Center	√	√	√	√	√	√	√	√	-	√	√
Hill Crest Behavioral	√	-	-	√	√	√	√	-	√	√	-
Lighthouse Care Center	√	√	-	-	-	√	-	-	-	-	√
Mountain Youth Academy	√	√	-	√	√	√	√	-	-	√	-
Provo Canyon School	√	√	√	√	-	√	√	√	√	√	√
Youth Villages	√	√	-	√	-	√	-	-	-	-	-

√ = YES

- = NO

Youth and Parent Voice

All PRTFs reported that youth and parent/guardians are involved in the development of the plan of care. When queried about having a choice in the type of care youth will be provided, 64% reported youth and parent/guardian are offered choices; 36% of parents are “sometimes” offered choices; 21% of youth are “sometimes” offered choices. Youth are not offered choices in the type of care they will be provided in 14% of the facilities.

	Is the youth offered choices in type of care they will be provided?		Is the parent/guardian given choices in the type of treatment offered to their child?
In State			
Acadia Montana	Sometimes		Acadia will always consider the wishes of parent/guardians in providing treatment to their children and will modify treatment to address concerns within the realm of what we deem to be appropriate care.
Shodair Children’s Hospital	√		√
Yellowstone Boys & Girls Ranch	√		√
Out of State			
Alabama Clinical Schools	√		√
Benchmark Behavioral	√		Sometimes
Cedar Springs Hospital	Sometimes		Sometimes
Coastal Harbor Treatment Center	√		√
Copper Hills Youth Center	√		√
Cottonwood Treatment Center	√		√
Hill Crest Behavioral	Sometimes		Sometimes
Lighthouse Care Center	√		√
Mountain Youth Academy	√		√
Provo Canyon School	√		√
Youth Villages	-		Sometimes

√ = YES	- = NO
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Strategies PRTFs use to engage families/guardian in planning and treatment

Assistance with travel costs is reported to be available in 65% of PRTFs; the availability of videoconferencing is increasingly available and often must be requested. This is the link to Montana Medicaid travel and any information related to what they cover: <http://medicaidprovider.hhs.mt.gov/clientpages/clientindex.shtml> (See Client Transportation Assistance pdf document).





	Facility offers videoconferencing for families/guardians in MT	Family therapy	Parent education/support	Parent/Guardian encouraged to participate in treatment meetings	Visitations are encouraged	PRTF assists with travel costs for visitations	PRTF assists with hotel costs for visitations	PRTF assists with hotel and travel cost for visitations
In State								
Acadia Montana	±	√	√	√	√	√	√	√
Shodair Children's Hospital	√	√	√	√	√	√	√	√
	Shodair: Families encouraged to make daily phone contact.							
Yellowstone Boys & Girls Ranch	Φ	√	√	√	√	√	√	√
	Yellowstone: Limited guest housing on campus is free of charge to families able to attend family therapy with youth.							
Out of State								
Alabama Clinical Schools	±	√	√	√	√	√	√	√
Benchmark Behavioral	√	√	√	√	√	Φ	Φ	Φ
Cedar Springs Hospital	-	√	√	√	√	Φ	Φ	Φ
Coastal Harbor Treatment Center	√	√	√	√	√	√	√	√
Copper Hills Youth Center	√	√	√	√	√	√	√	√
Cottonwood Treatment Center	±	√	√	√	√	√	√	√
Hill Crest Behavioral	-	√	√	√	√	Φ	Φ	Φ
Lighthouse Care Center	-	√	√	√	√	Φ	Φ	Φ
Mountain Youth Academy	±	√	Φ	√	√	√	√	√
Provo Canyon School	√	√	√	√	√	√	√	√
Youth Villages	±	√	Φ	√	√	Φ	Φ	Φ

<p>√ = YES</p> <p>± = Upon Request</p>	<p>- = NO</p> <p>Φ = May Consider</p>
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Information addressed in treatment team meetings

All PRTFs report addressing six of the listed treatment team components; estimated discharge date and plan is reported to be discussed in treatment teams in 93% of facilities.

	Introduction of parties present and roles, in room and phone	Identify if parent/guardian present, if not, why not	Diagnostic changes	Current clinical/behavioral goals	Co-morbid or Co-occurring issues	Feedback on progress and/or setbacks in therapy	Feedback on progress/setbacks in educational program	Feedback on progress/setbacks in milieu activities	Review of medication regimen including changes in meds	Review of special procedures; restraint, seclusion, PRN meds	Implications of special procedures for discharge planning	Solicitation of family/guardian feedback	Solicitation of youth feedback on progress, setbacks	Estimated discharge date and plan	Clinical factors/barriers that might delay discharge	Open question period	Setting of next master treatment plan date
In State																	
Acadia Montana																	
Shodair Children's Hospital																	
Yellowstone Boys & Girls Ranch																	
Out of State																	
Alabama Clinical Schools																	
Benchmark Behavioral																	
Cedar Springs Hospital																	
Coastal Harbor Treatment Center																	
Copper Hills Youth Center																	
Cottonwood Treatment Center																	
Hill Crest Behavioral																	
Lighthouse Care Center																	
Mountain Youth Academy																	
Provo Canyon School																	
Youth Villages																	

	Always		Occasionally
	As Indicated		Never

Outcomes/Performance Indicators

The majority (71%) of PRTFs track having community supports in place upon discharge. Less than 43% track return to PRTF level of care. Less than 36% track return to school and less than 29% track involvement with Juvenile Justice/law enforcement. Confidentiality may play a part in accessing this information.

Which of the following outcomes does your PRTF track?

What performance indicators does your facility monitor on each youth?

	Return to acute or PRTF care	Return to school	Involvement with law enforcement Juvenile justice	Having community supports in place upon discharge		Number of critical incidents	Number of seclusions	Number of physical restraints	Number of PRN medications	Performance in academics	Participation in therapies (individ, family, group)	Increase in pro-social behavior	Increase in self management or emotional regulation	Reduction in behavior that led to placement
In State														
Acadia Montana	-	-	-	√		√	√	√	√	√	√	√	√	√
Shodair Children's Hospital	-	-	-	√		√	√	√	-	-	-	-	-	-
Yellowstone Boys & Girls Ranch	√	√	√	√		√	√	√	√	√	√	√	-	√
Out of State														
Alabama Clinical Schools	√	√	√	√		√	-	√	√	√	√	-	-	√
6 months and 1 year post discharge.														
Benchmark Behavioral	-	-	-	√		√	√	√	√	√	√	√	√	√
Cedar Springs Hospital	-	-	-	-		√	√	√	-	√	√	-	-	-
Coastal Harbor Treatment Center	√	-	-	√		√	√	√	√	√	√	√	√	√
Copper Hills Youth Center	-	-	-	-		√	√	√	√	√	√	√	√	√
Cottonwood Treatment Center	-	-	-	√		√	-	√	√	√	√	√	√	√
Hill Crest Behavioral	√	-	-	-		√	-	√	√	√	√	-	√	√
Lighthouse Care Center	-	√	-	√		√	√	√	√	√	√	√	√	√
Mountain Youth Academy	√	√	√	√		√	√	√	√	√	√	√	√	√
Provo Canyon School	√	√	√	√		√	√	√	√	√	√	√	√	√
Up to 6 months post discharge														
Youth Villages	√	√	√	√		√	√	√	-	-	√	√	√	√
Surveys of discharged youth occur at 6, 12 and 24 months														

√ = YES

- = NO

What specific strategies/modalities/treatment methods do you use for youth with developmental disabilities/cognitive delays?

In State	
Acadia Montana	Behavioral therapy including Applied Behavioral Analysis and Collaborative Problem Solving
Shodair Children’s Hospital	Comprehensive assessment to evaluate the level of cognitive delays. Evaluate for language disorders. Comprehensive developmental history. Collaborative problem solving and parent groups for collaborative problem solving. Individual and family intervention and collaborating with schools to help these patients to be less explosive. Medication management if necessary.
Yellowstone Boys & Girls Ranch	Comprehensive biopsychosocial evaluation at admission, review of received admission materials, collaboration with school staff to assist with assessment and appropriate placement. Individual, family, and group therapy. Chemical dependency assessment and treatment as needed. Medication management as needed. Individual Crisis Management Plans (ICMP).
Out of State	
Alabama Clinical Schools	We have a specific unit to treat sexually reactive youth with cognitive delays. They are in a special classroom and have a higher patient staff ratio than our other units. Their treatment program is altered as well to assist in understanding the content.
Benchmark Behavioral	Focus treatment on psycho education, daily living skills, social skills development, anger modulation
Cedar Springs Hospital	CPT, Behavior Shaping Skills Assessment and Development
Coastal Harbor Treatment Center	Dedicated classrooms determined by level of functioning, “star charts” to assist in visualizing goals and progress, “hands on” activities instead of process groups
Copper Hills Youth Center	Special Education Experiential Therapy
Cottonwood Treatment Center	Special education classes, daily reward system, repetition and visual cues
Hill Crest Behavioral	The main theoretical basis for the cognitive aspect of treatment at Hill Crest is the Hazelden book, Parenting for Prevention. This concept assumes that children who learn and demonstrate a set of “life skills” have much less chance of engaging in negative behaviors. This is a skills-based approach. This process is simplified for this specific population.
Lighthouse Care Center	No response
Mountain Youth Academy	Crisis Prevention Intervention, Cognitive Behavior Therapy, Sensory Modulation Room, Neurofeedback, EMDR, Psycho-Drama
Provo Canyon School	Neurofeedback, functional behavioral and skills training
Youth Villages	No response

What specific strategies/modalities/treatment methods do you use for youth with autism?

In State	
Acadia Montana	Behavioral therapy including Applied Behavioral Analysis and Collaborative Problem Solving
Shodair Children’s Hospital	Comprehensive psychiatric, social and psychological assessments. Evaluate cognitive abilities. Individual and family therapy to identify triggers toward aggression. Collaborative problem solving and parent group collaborative problem solving. Medication management if necessary.
Yellowstone Boys & Girls Ranch	Comprehensive biopsychosocial evaluation at admission, review of received admission materials, collaboration with school staff, individual, family and group therapy; chemical dependency assessment and treatment as needed. Medication management as needed. Individual Crisis Management Plans (ICMP). Psychological evaluations as need. Animal assisted therapy (i.e., equine therapy).
Out of State	
Alabama Clinical Schools	Youth on the spectrum can be placed on our low functioning unit as a lot of visual cues and low stimulus opportunities exist on this unit. Most of our youth are PDD and not severe.
Benchmark Behavioral	N/A
Cedar Springs Hospital	CBT, CPT, Behavior Shaping Skills Assessment and Development
Coastal Harbor Treatment Center	Special training for staff to teach about interventions with autistic youth; individualized education plans, family education.
Copper Hills Youth Center	Experiential Therapy Teaching Social Skills Daily life skills/self-care, Anger Management, Sensory Integration
Cottonwood Treatment Center	Educational and behavioral interventions. Medication if needed
Hill Crest Behavioral	The main theoretical basis for the cognitive aspect of treatment at Hill Crest is the Hazelden book, Parenting for Prevention. This concept assumes that children who learn and demonstrate a set of “life skills” have much less chance of engaging in negative behaviors. This is a skills-based approach. This process is simplified for this specific population.
Lighthouse Care Center	No response
Mountain Youth Academy	Crisis Prevention Intervention, Cognitive Behavior Therapy, Sensory Modulation Room, Neurofeedback ,EMDR
Provo Canyon School	N/A
Youth Villages	No response

What specific strategies/modalities/treatment methods do you use for youth with violent or aggressive behaviors?

In State	
Acadia Montana	Mandt for verbal de-escalation and physical restraint if necessary.
Shodair Children’s Hospital	Assess level of aggression and violence. Individual and family treatment to understand the complexity of violence/aggression. Clarify diagnosis and how the diagnosis contributes to the violence/aggression. Medication intervention if needed. Collaborative problem solving.
Yellowstone Boys & Girls Ranch	Comprehensive biopsychosocial evaluation at admission, review of received admission materials, collaboration with school staff, individual, family and group therapy; chemical dependency assessment and treatment as needed. Medication management as needed. Individual Crisis Management Plans (ICMP). Psychological evaluations as need. Therapeutic Crisis Intervention and de-escalation techniques.
Out of State	
Alabama Clinical Schools	We utilize a rational behavior treatment program to assist youth in recognizing triggers and to develop alternatives to cope with anger versus utilizing physical violence.
Benchmark Behavioral	Cognitive behavioral approach focusing on victim reparation
Cedar Springs Hospital	CBT with Level System
Coastal Harbor Treatment Center	Level System, precautions as ordered by the MD; physical restraint if nonverbal methods have been ineffective; encouraging accountability
Copper Hills Youth Center	Anger management, discover needs not being met and how to meet needs
Cottonwood Treatment Center	Anger management, neurofeedback, cognitive behavior therapy
Hill Crest Behavioral	The main theoretical basis for the cognitive aspect of treatment at Hill Crest is the Hazelden book, Parenting for Prevention. This concept assumes that children who learn and demonstrate a set of “life skills” have much less chance of engaging in negative behaviors. This is a skills-based approach.
Lighthouse Care Center	DBT, TF-CBT, Thought Stopping, Imagery
Mountain Youth Academy	Crisis Prevention Intervention, Cognitive Behavior Therapy, Sensory Modulation Room, Neurofeedback, EMDR ,Psycho-Drama
Provo Canyon School	CBT Anger management, self-relaxation techniques, emotional regulation
Youth Villages	No response

What specific strategies/modalities/treatment methods do you use for youth with conduct disorders?

In State	
Acadia Montana	N/A
Shodair Children’s Hospital	Assess level of aggression and violence. Individual and family treatment to understand the complexity of violence/aggression. Clarify diagnosis and how the diagnosis contributes to the violence/aggression. Medication intervention if needed. Also may utilize psychological testing to help clarify diagnosis and personality assessments. Collaborative problem solving.
Yellowstone Boys & Girls Ranch	Comprehensive biopsychosocial evaluation at admission, review of received admission materials, collaboration with school staff, individual, family and group therapy; chemical dependency assessment and treatment as needed. Medication management as needed. Individual Crisis Management Plans (ICMP). Psychological evaluations as need. Therapeutic Crisis Intervention and de-escalation techniques.
Out of State	
Alabama Clinical Schools	We utilize a rational behavior treatment program to assist youth in recognizing triggers and to develop alternatives to cope with anger versus utilizing physical violence.
Benchmark Behavioral	Cognitive behavioral approach focusing on victim reparation
Cedar Springs Hospital	CBT with Level System
Coastal Harbor Treatment Center	Strict adherence to rules; natural and logical consequences
Copper Hills Youth Center	Anger management; discover needs not being met and how to meet needs. Family therapy, empathy work with victims
Cottonwood Treatment Center	CBT, medication, family therapy
Hill Crest Behavioral	The main theoretical basis for the cognitive aspect of treatment at Hill Crest is the Hazelden book, Parenting for Prevention. This concept assumes that children who learn and demonstrate a set of “life skills” have much less chance of engaging in negative behaviors. This is a skills-based approach.
Lighthouse Care Center	DBT – TF-CBT, Imagery
Mountain Youth Academy	Crisis Prevention Intervention, Cognitive Behavior Therapy, Sensory Modulation, Neurofeedback ,EMDR, Psycho-Drama
Provo Canyon School	Structured milieu, CBT, anger management, self-relaxation techniques, emotional regulation, PBIS
Youth Villages	No response

CBT: Cognitive Behavioral Therapy
DBT: Dialectical Behavior Therapy

PBIS: Positive Behavioral Intervention and Supports
EMDR: Eye Movement Desensitization and Reprocessing

What specific strategies/modalities/treatment methods do you use for youth with sexually reactive behaviors?

In State	
Acadia Montana	Trauma Focused Cognitive Behavioral Therapy
Shodair Children’s Hospital	Placed on sexually reactive status to identify patients and alert staff. One-to-one intervention if needed. Individual/family therapy to address the behavior. Medication management.
Yellowstone Boys & Girls Ranch	Comprehensive biopsychosocial evaluation at admission, review of received admission materials, collaboration with school staff, individual, family and group therapy; chemical dependency assessment and treatment as needed. Medication management as needed. Individual Crisis Management Plans (ICMP). Psychological evaluations as need. Therapeutic Crisis Intervention and de-escalation techniques.
Out of State	
Alabama Clinical Schools	We utilize Pathways as our primary treatment book for the sexual issues, along with comprehensive therapy and psycho-educational groups to address other behavioral issues.
Benchmark Behavioral	Cognitive behavioral approach using elements of Pathways, trauma based approach when appropriate
Cedar Springs Hospital	CBT with Safety Plans and work through the Roadmaps to Recovery and Pathways workbooks in individual therapy
Coastal Harbor Treatment Center	Monitoring of boundaries, detailed sexual histories, concurrent treatment of sexual abuse and reactive behaviors to encourage understanding of the cycle of behaviors; sexual health education.
Copper Hills Youth Center	Trauma Based Therapy Gender Specific Workbooks Specific Sexual/Emotional Workbooks
Cottonwood Treatment Center	NOJOS certified therapist Education Boundary and emotional training
Hill Crest Behavioral	Relapse Prevention Model, all therapists are Juvenile Sexual Offender Certified. The goal of this treatment program is to teach each patient the cognitive thinking/behavioral actions skills to help reduce sexual impulsivity that may result in sexually inappropriate behaviors.
Lighthouse Care Center	Trauma Journal Good Lives Model
Mountain Youth Academy	N/A
Provo Canyon School	CBT, Positive Behavioral Supports, desensitization techniques. PTSD specific approaches
Youth Villages	No response

What specific strategies/modalities/treatment methods do you use for sexual offenders?

In State	
Acadia Montana	N/A
Shodair Children’s Hospital	We do not offer a treatment program for sexual offenders.
Yellowstone Boys & Girls Ranch	No response
Out of State	
Alabama Clinical Schools	We specialize in treating sex offenders; there must be a history of sexual issues to be admitted. We also have a low functioning unit. All our therapists and clinical director are Certified Juvenile Sex Offender Counselors.
Benchmark Behavioral	Cognitive behavioral approach using a Pathways model for sexual offender population. Psychosexual education.
Cedar Springs Hospital	No response
Coastal Harbor Treatment Center	Several clinicians and Director of Clinical Services have received intensive training at University of Kentucky at Louisville as Certified Juvenile Sex Offender Counselors.
Copper Hills Youth Center	Trauma Based Therapy Gender Specific Workbooks
Cottonwood Treatment Center	N/A
Hill Crest Behavioral	Relapse Prevention Model; all therapists are Juvenile Sexual Offender Certified. The goal of this treatment program is to teach each patient the cognitive thinking/behavioral action skills to help reduce sexual impulsivity that may result in sexually inappropriate behaviors.
Lighthouse Care Center	Trauma Journal Good Lives Model Offense Cycle Deviant Arousal Patterns Relapse Prevention
Mountain Youth Academy	N/A
Provo Canyon School	N/A
Youth Villages	No response

APPENDIX

SERIOUS EMOTIONAL DISTURBANCE

August 2007

Serious emotional disturbance (SED) means with respect to a youth from age 6 through 17, that the youth meets requirements of (a), and (b).

(a) The youth has been determined by a licensed mental health professional as having a mental disorder with a primary diagnosis falling within one of the following DSM-IV (or successor) classifications when applied to the youth's current presentation (current means within the past 12 calendar months unless otherwise specified in the DSM-IV) and the diagnosis has a severity specifier of moderate or severe:

- (i) childhood schizophrenia (295.10, 295.20, 295.30, 295.60, 295.90);
- (ii) oppositional defiant disorder (313.81);
- (iii) autistic disorder (299.00);
- (iv) pervasive developmental disorder not otherwise specified (299.80);
- (v) Asperger's disorder (299.80);
- (vi) separation anxiety disorder (309.21);
- (vii) reactive attachment disorder of infancy or early childhood (313.89);
- (viii) schizo affective disorder (295.70);
- (ix) mood disorders (296.0x, 296.2x, 296.3x, 296.4x, 296.5x, 296.6x, 296.7, 296.80, 296.89);
- (x) obsessive-compulsive disorder (300.3);
- (xi) dysthymic disorder (300.4);
- (xii) cyclothymic disorder (301.13);
- (xiii) generalized anxiety disorder (overanxious disorder) (300.02);
- (xiv) posttraumatic stress disorder (chronic) (309.81);
- (xv) dissociative identity disorder (300.14);
- (xvi) sexual and gender identity disorder (302.2, 302.3, 302.4, 302.6, 302.82, 302.83, 302.84, 302.85, 302.89);
- (xvii) anorexia nervosa (severe) (307.1);
- (xviii) bulimia nervosa (severe) (307.51); and
- (xix) intermittent explosive disorder (312.34); and
- (xx) attention deficit/hyperactivity disorder (314.00, 314.01, 314.9) when accompanied by at least one of the diagnoses listed above.

(b) As a result of the youth's diagnosis determined in (a) and for a period of at least 6 months, or for a predictable period over 6 months the youth consistently and persistently demonstrates behavioral abnormality in two or more spheres, to a significant degree, well outside normative developmental expectations, that cannot be attributed to intellectual, sensory, or health factors:

- (i) has failed to establish or maintain developmentally and culturally appropriate relationships with adult care givers or authority figures;
- (ii) has failed to demonstrate or maintain developmentally and culturally appropriate peer relationships;
- (iii) has failed to demonstrate a developmentally appropriate range and expression of emotion or mood;
- (iv) has displayed disruptive behavior sufficient to lead to isolation in or from school, home, therapeutic or recreation settings;
- (v) has displayed behavior that is seriously detrimental to the youth's growth, development, safety or welfare, or to the safety or welfare of others; or
- (vi) has displayed behavior resulting in substantial documented disruption to the family including, but not limited to, adverse impact on the ability of

family members to secure or maintain gainful employment.

(c) Serious emotional disturbance (SED) with respect to a youth under 6 years of age means the youth exhibits a severe behavioral abnormality that cannot be attributed to intellectual, sensory, or health factors and that results in substantial impairment in functioning for a period of at least 6 months and obviously predictable to continue for a period of at least 6 months, as manifested by one or more of the following:

- (i) atypical, disruptive or dangerous behavior which is aggressive or selfinjurious;
- (ii) atypical emotional responses which interfere with the child's functioning, such as an inability to communicate emotional needs and to tolerate normal frustrations;
- (iii) atypical thinking patterns which, considering age and developmental expectations, are bizarre, violent or hypersexual;
- (iv) lack of positive interests in adults and peers or a failure to initiate or respond to most social interaction;
- (v) indiscriminate sociability (e.g., excessive familiarity with strangers) that results in a risk of personal safety of the child; or
- (vi) inappropriate and extreme fearfulness or other distress which does not respond to comfort by care givers.

To view the **CMHB Provider Manual and Clinical Guidelines for Utilization Management** (August 1, 2011) for the section related to PRTF electronically, use this link to DPHHS/Children's Mental Health Bureau website at: <http://www.dphhs.mt.gov/publications/cmhbprovidermanualandclinicalmanagementguidelines.pdf> or copy and paste it into your web browser. The section on PRTF can be found on page 32 of the manual.