I. DESCRIPTION

A. Day Treatment is the most intensive non-residential program that can be provided over an extended period of time. School-based day treatment permits access to community-based mental health services in conjunction with and integrated into the child’s educational program. Day Treatment brings together at one site, and in a coordinated manner, a broad range of services designed to strengthen individual and family functioning, and prevent youngsters from requiring more restrictive services.

B. A student identified as eligible for special education and related services must have an Individualized Education Program (IEP) developed to meet his unique needs. This IEP is designed to provide special education and related services necessary for the student to benefit from his education, and is to be implemented in the least restrictive environment determined to be appropriate by an IEP Team. For some students, the least restrictive environment for implementing an IEP is an approved school-based day treatment program.

II. DEFINITIONS

A. Specific features of a school-based day treatment program vary, but typically include the following core components –

1. Education provided in small classes with a strong emphasis on individualized instruction;

2. Child and family services, such as family counseling, parent training, short-term individual counseling with parents, and assistance with specific tangible needs (housing, transportation, and medical care);

3. Age-appropriate vocational training;

4. Crisis intervention;

5. Social skills development;

6. Behavior management, with emphasis on positive behavioral supports;
7. Physical education, art, music, and other electives, as deemed appropriate; and

8. Transitional services into general education class, etc.

B. A student's treatment team should be representative of a multidisciplinary, community-based approach combining educational and mental health elements and other services as needed, which may include social work, psychological testing, and case management. An appropriately credentialed mental health professional is an integral part of an effective school-based day treatment program. This treatment team will be responsible for designing behavior support plans.

C. A school-based day treatment program shall operate consistent with State standards for length of instructional day. However, the length of time a student will participate is based upon the individual student’s needs. For students identified as eligible to receive special education services, such participation is determined in accordance with an IEP.

III. PROGRAM DESCRIPTION/REQUIREMENTS

A. Teacher/Pupil Ratio

1. Each school-based day treatment classroom will maintain a staff to student ratio of 1 to 3. No classroom shall exceed nine students per classroom, which requires a ratio of three adults to nine students. The 1:3 classroom shall utilize, at a minimum, the services of one (1) full-time teacher and one (1) full-time paraprofessional. In the day treatment model, additional staffing would include a full time mental health paraprofessional.

2. Each 1:3 class will be staffed by a certified/licensed Bachelor’s or Master’s level instructor with evidence of competency in areas which include, but are not limited to –

   a. Knowledge of child and/or adolescent development.

   b. Ability to diffuse critical situations.

   c. Ability to design and implement positive behavioral support plans.

   d. Ability to maintain cooperative relationship with co-workers as well as other agencies.
e. Ability to design and provide educational instruction.

B. Classroom Size

See self-contained classroom requirements in Section 17.00 of the document *Special Education and Related Services: Procedural Requirements and Program Standards* (ADE, 2000).

C. Instructional Program

1. The instructional program should be designed to address a student's social, psychological, educational, and vocational needs. Important aspects of the instructional program include, at a minimum, a curriculum that accommodates students according to their needs; appropriate sequences of activities designed to facilitate learning; an environment which provides positive behavioral supports; and the provision of a social skills component. A close relationship between the instructional program and the clinical program is demonstrated through the integration of clinical treatment into the student's instructional day.

2. Interventions and goals will vary according to the ages and needs of the students. The program should be designed to enable these students to experience success in academic and social endeavors. The degree to which each student will participate in the general education program will be determined by the Treatment Team/IEP Team. Participation in the “mainstream” will assist students in maintaining ties to the general school program/community and facilitate interaction/integration.

D. Roles and Responsibilities

1. Teacher/Instructor

   a. The certified/licensed instructor will serve as a member of the treatment team for designated students.

   b. The certified/licensed instructor will serve as the primary source of direct instruction to designated students.

   c. The certified/licensed instructor will develop the instructional plan for each student. For students with disabilities determined eligible under the IDEA, this will include the formal review and/or revision of the IEPs. Instructional plans of students not eligible under the IDEA,
but who are determined eligible for this program in accordance with DSM-IV-R criteria, must be reviewed and revised on a schedule similar to that used in the review and revision of IEPs.

d. The certified/licensed instructor will be responsible for all assignments and tests, grade all material and issue all grades to the students. At a minimum, grades will be issued each nine (9) weeks. Progress notes will be maintained consistent with administrative policy.

e. The certified/licensed instructor, as well as staff she/he supervises as part of the treatment team, will assist in the design and implementation of positive behavioral supports for each student.

f. The certified/licensed instructor will directly supervise paraprofessionals, tutors, and/or volunteers who are assigned to the instructor.

2. Paraprofessional

a. The paraprofessional will implement activities to reinforce instruction for designated students, as determined by the certified/licensed instructor.

b. The paraprofessional, under the direction of the certified/licensed instructor, will implement positive behavioral supports for designated students.

c. The paraprofessional may assist the certified/licensed instructor in data collection and maintenance.

d. The paraprofessional, under the direction of the certified/licensed instructor, may assist in grading and/or checking student work.

e. The paraprofessional must be appropriately trained and supervised in accordance with ADE policy and guidelines.

E. Case Management or Targeted Case Management

Personnel responsible for case management shall assure that students receive services needed, that all assessments are coordinated, that plans are based on these assessments and executed by brokering necessary services, that adequacy of services is reviewed through student progress,
and that cooperation among agencies providing services is achieved. Providers of targeted case management services must meet requirements established by the Arkansas Medicaid Program to qualify for Medicaid reimbursement.

F. Counseling/Therapy

The need for individual and/or group therapy shall be determined by the treatment team and provided by a mental health professional. For students identified as eligible for services under the IDEA, any therapies addressing individual and/or family needs will be considered a component of the school-based day treatment program and not a related service. Family therapy based on family needs and issues will be offered to the student and his family. The treatment team will determine the frequency and intensity of sessions.

G. Crisis Management

Emergency and crisis intervention will be provided as needed.

H. Coordination with Educational Services

Treatment personnel will be systematically included in classroom activities for program integration.

I. Parental/Family Involvement

Consistent with special education regulations, parents must have the opportunity to participate in the development and implementation of their child’s educational program. In addition, mental health standards provide that family needs and strengths should be considered as services are developed and provided for students with emotional problems. Moreover, research has shown that working with the family can positively impact the student’s in-school behavior. Maximum parental and family involvement, therefore, must be a goal of day treatment. Each program should convey that family participation is both desired and expected.

Family involvement is promoted through setting clear expectations for such involvement during the intake process and during conferences in which the treatment plan and the educational program are updated. Additional opportunities for family involvement may include family counseling, parent training and family support groups. In-home counseling and contact through case managers may be used to ensure family participation.
J. Planning and Implementation Team

A planning and implementation team representing all participating agencies must be formed at the local level to develop and implement the school-based day treatment program.

1. Responsibilities of the team include, but are not limited to -
   
   a. Providing staff with appropriate credentials;
   
   b. Locating the building site for the program;
   
   c. Applying for grants and other financial assistance;
   
   d. Designing the program, including the referral process;
   
   e. Developing a general definition of the roles and responsibilities of each participating agency;
   
   f. Developing and implementing an ongoing professional development program for school-based day treatment staff and other staff members at the building site where the program is located; and
   
   g. Evaluating the effectiveness of the day treatment program.

2. Team members may be selected from the following -

   a. Local School District
      
      i. Superintendent
      
      ii. Special Education Supervisor
      
      iii. Director of Finance
      
      iv. School Social Worker or Counselor
      
      v. Educational Examiner
      
      vi. School Nurse
      
      vii. Early Childhood Coordinator
      
      viii. Transition Specialist
ix. School Psychologist

x. Psychological Examiner

xi. School Psychology Specialist

b. Local Mental Health

i. Director

ii. Program Director

iii. Psychiatrist

iv. Clinical Director

v. Psychologist

vi. Licensed Professional Counselor

vii. Licensed Social Worker

viii. Psychological Examiner

ix. Psychiatric Nurse

c. Department of Human Services

i. Division of Children and Family Services Representative

ii. County Administrator or Representative

iii. Division of Developmental Disabilities Services Field Counselor

iv. Division of Mental Health Services Representative (state level)

v. Division of Alcohol & Drug Abuse Prevention Representative
d. Arkansas Department of Education

i. Area Special Education Supervisor (planning only)

ii. Area Behavior Intervention Consultant

K. Community Resources

City and county officials who may be considered as possible resources to assist the school-based day treatment program staff with funding, provision of related services, transportation, materials, volunteers, community public relations and awareness are -

1. Mayor
2. City Manager
3. Director of Parks and Recreation
4. Law Enforcement Officials
5. Youth Services Provider
6. Youth Shelter Director
7. Juvenile Justice Representative

IV. ADMINISTRATION

The provision of school-based day treatment services is a cooperative effort between a local school district and mental health service providers. Therefore, the planning and implementation team, which includes representatives of the participating agencies and/or organizations, will define roles and responsibilities of each agency/organization. In a school-based program, however, the local school superintendent retains administrative responsibility for final decisionmaking.

A. Local School District Responsibilities

1. Developing and providing an appropriate educational program for students in the day treatment program.

2. Providing related services for identified special education students.

3. Funding all educational costs or accessing other funding sources for these costs.
4. Maintaining compliance with applicable rules and regulations governing the provision of educational services.

5. Supervising designated staff.

6. Cooperating with mental health professionals to coordinate the educational and treatment programs.

B. Local Mental Health Responsibilities

1. Developing and providing an appropriate treatment program for students in the day treatment program.

2. Assisting with accessing funding for mental health services that are specified in the student’s treatment plan.

3. Maintaining compliance with applicable rules and regulations governing the provision of mental health services.

4. Supervising designated staff.

5. Cooperating with educational professionals to provide a coordinated treatment and educational program.

V. ELIGIBILITY CRITERIA

Any student can be deemed eligible for day treatment if the following criteria are met -

A. Admission Criteria (must meet either 1, 2, 4, and 5 OR 1, 3, 4, and 5 below)

1. Student presents psychological symptomatology consistent with DSM-IV-R (Axis 1-2) diagnosis and which requires, and is likely to respond to, therapeutic intervention.

2. Treatment at a less restrictive level of care has been attempted within the last 3 months and failed, despite student’s active participation in treatment and optimal involvement by family or primary custodian.

3. Behavior has stabilized as a result of treatment in a more restrictive level of care, but current level of stability continues to require qualitative level of programming to maintain progress.
4. Student has been identified as eligible to receive services under any IDEA disability category or Section 504.

5. Risk to self, others, property may be present, but can be adequately managed within the design of the school-based day treatment program.

6. Not currently meeting basic expectations of school relative to attendance, and academic and behavioral functioning. Less restrictive placement options within the school system do not meet the clients' needs at current time.

B. Medical/Educational/Social/Family (must meet all)

1. Client is medically stable, but may require occasional medical observation and care.

2. Client demonstrates impaired educational functioning arising from a psychiatric disorder or exacerbation of a chronic psychiatric condition requiring active treatment to resume an adequate level of functioning. Prior efforts to remediate have failed, despite optimal family participation.

3. Less restrictive educational setting in the public schools will not meet client's needs at this time.

4. Client demonstrates significantly impaired interpersonal functioning arising from a psychiatric condition which requires active treatment to resume an adequate level of interpersonal/family functioning. Prior efforts to remediate the condition have failed, despite full family participation.

C. Exclusionary Criteria

A primary diagnosis of substance abuse or developmental disability does not, in and of itself, qualify a student to participate in a school-based day treatment program. However, this is not to exclude a student who has a dual diagnosis of substance abuse or developmental delay and otherwise meets the eligibility criteria.

VI. FUNDING

A. Eligible students with disabilities under the IDEA who are receiving special education and related services in an approved school-based day treatment program in accordance with their IEPs may be counted on the December 1 child count to generate federal special education funds.
[Student(s) must have an IEP and be receiving special education and related services on December 1.]

B. Federal funds that a district receives under Part B of the IDEA may be used to implement any or all of the day treatment program. This includes not only the district’s “child count funds,” but also any “sliver funds” under Part B a district may receive.

C. State funding for education is based on an amount per student referred to as the Base Local Revenue per Student. These dollars incorporate previous funding for special education. Thus, for a district to establish a day treatment program, it will need to restructure its state/local expenditures for special education and related services.

D. In accordance with § 17.06 of the regulations in the document, Special Education and Related Services: Procedural Requirements and Program Standards (ADE, 2000) districts may include a limited number of students who are not eligible under the IDEA, but who have been properly diagnosed with emotional disturbance and who need school-based day treatment services. These students may NOT be counted in the December 1 child count for federal funds.

E. A school district which is enrolled as a Medicaid provider for speech therapy, physical therapy, occupational therapy and targeted case management may bill Medicaid for the provision of these services to Medicaid eligible students who are in the day treatment program. If the district chooses not to enroll as the provider, it may seek an enrolled provider for these services, which would then bill Medicaid.

F. The mental health providers working with the district in the provision of services in the day treatment program may be eligible to bill Medicaid for certain mental health services. The district and the mental health provider should work together to determine the extent of billing that is available.

G. In some cases, special education and related services provided to a student in the day treatment program may be so costly as to qualify for reimbursement under the category of “catastrophic occurrences.” See Section 24.00 of the document, Special Education and Related Services: Procedural Requirements and Program Standards (ADE, 2000) for details.