

Mobile Crisis Response Teams Training and Orientation Plan

All crisis training curriculum is developed with person-centered, trauma-informed, and strengths-based approaches that are culturally and linguistically appropriate, which are coordinated and focused on outcomes. Content includes materials with information on marginalized populations, underserved communities, and specialty populations. Training involving peer providers (e.g., peer specialists, parent peer specialists, peer recovery coaches, etc.) is for a wide range of specialties.

The following key competency areas are required for Mobile Crisis Response Team Orientation training:

1. Working with Peer Providers

Training for all crisis staff include understanding the capabilities and strengths of Peer Providers.

Core competencies include:

- Understanding the role of Peer Providers (engagement with person in crisis and collaterals, stabilization, de-escalation, and near-term post-crisis follow-up and linkage), utilizing their expertise, and knowing how to support them
- Recognizing different ways to bring Peer Providers into a crisis situation, tag-teaming, and using Peer Providers with collaterals
- Utilizing trauma-informed practices when working with Peer Providers

2. Mobile Teaming

Training for all crisis staff include the benefits of mobile teaming, understanding the crisis continuum, and knowledge of and access to community resources.

Core competencies include:

- Understanding effective teaming practices and different models for 2 in-person teaming scenarios, and 1 in-person and 1 telehealth teaming
- Understanding the roles of different team members, boundaries while on a mobile crisis response, and how to be supportive of each other
- Knowledge of co-responder models and working with first responders (EMT, law enforcement), hospital staff, or other facility staff
- Ability to conduct an environmental assessment and knowledge of working with collaterals
- Ability to provide care coordination/linkage with the least restrictive level of care
- Application of trauma-informed care and de-escalation strategies in teams
- Understanding the person in crisis as an expert with shared responsibility
- Ability to recognize situations that may require mandated reporting and steps to take
- Understanding acceptable methods for self-protection and protection of the client and others in emergency situations
- Knowledge of and ability to utilize crisis screening and assessment tools for youth
- Knowledge of and ability to refer families to appropriate community-based services
- Knowledge and application of age/developmentally appropriate, authentic youth engagement, and intervention of youth including using play as a tool
- Ability to provide assistance to family/caregivers through collaborative family engagement

3. Secondary Trauma

Training for all crisis staff includes the potential for secondary trauma in any team member, ability to recognize when a debriefing is warranted, and how to conduct a debriefing.

Core competencies include:

- Understanding secondary trauma, and how to recognize it within oneself and others
- Supervision and reducing the likelihood of re-traumatization of self and others
- Ability to respond to team member secondary trauma while working with a person in crisis
- Ability to debrief a person in crisis and/or collaterals
- Recognizing when a debriefing for self or other team members should be requested

4. Substance Use Disorders

Training for all crisis staff include assessing a person with substance use disorder, utilizing person-centered and strengths-based interventions, belief that anyone is capable of recovery, and the importance of meeting the person where they are in use/recovery.

Core competencies Include:

- Understanding of diagnostic criteria for substance use disorders, treatment modalities, and appropriate placement within continuum of care based on ASAM criteria
- Ability to conduct screening and multidimensional assessment for substance use disorder in every situation possible
- Ability to recognize risk and resiliency factors
- Knowledge of co-occurring substance use and mental health conditions
- Application of treatments/referrals to treatment and sobriety housing options that align with person's stage of dependence, change, or recovery and their preferences
- Knowledge of client's rights and confidentiality laws surrounding substance use disorder
- Ability to provide warm hand-offs in care transitions, and follow-up for persons released from detox or other treatment
- Basic understanding of the stages of change
- Basic understanding of SBIRT

5. Harm Reduction Practices and Principles

Training for all crisis staff include understanding the benefits of harm reduction, utilizing person-centered and strengths-based practices, and how harm reduction can be useful in substance use disorder and other mental health conditions.

Core competencies include:

- Thorough understanding of the principles of harm reduction and available options such as needle exchanges and NARCAN direct
- Thorough understanding of the techniques of harm reduction for both substance use disorder and mental health conditions
- Ability to implement practical strategies of harm reduction
- Knowledge of how to address conditions of use/root causes of mental health conditions

- Understanding that harm reduction and abstinence are congruent goals, how harm reduction expands the therapeutic conversation, and how to use it at any point in the change process
- Knowledge of organizational and clinical concepts, and implementation methods of harm reduction

6. Effective Telehealth for Mobile Teaming

Training for all crisis staff should include basic understanding of how to operate technology used in telehealth, when telehealth is appropriate, ensuring it is functionally equivalent to face-to-face, and the back-up options available.

Core competencies include:

- Knowledge of technological aspects/requirements for interactive synchronous telehealth for team members and person in crisis
- Ability to provide services via telehealth that are functionally equivalent to a face-to-face interaction
- Exercise professional judgement and use telehealth only for services that can be delivered appropriately and effectively
- Knowledge of potential back-up plans if initial telehealth response fails
- Development of web-side manner
- Knowledge and application of telehealth etiquette
- Knowledge of and ability to perform virtual de-escalation
- Knowledge of and ability to perform virtual harm reduction techniques
- Knowledge of and ability to analyze environment virtually
- Knowledge of when and how to bring in other specialists virtually (specialty providers, prescribers, etc.)

Training Available through the Behavioral Health Training Partnership

Mobile Crisis Response Team Orientation Training includes:

Asynchronous (Web-based, Self-paced):

Mobile Crisis Response Teams Orientation	10 hours
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Synchronous (Live) Training:

Mobile Crisis Teaming with Adults and Youth	12 hours
Substance Use in Crisis Intervention	8 hours
Harm Reduction in Crisis Intervention	4 hours
Peer Support in Crisis Services	4 hours
Self-Awareness and Co-Regulation	4 hours
Working with Individuals at Elevated Risk for Suicide via Telehealth	4 hours

46 hours

Mobile Crisis Response Teams Orientation Checklist

Employee:	Start Date:
Position:	Supervisor:

Task/Concept	Method of Training	Time Spent	Date	Responsible Party signature
Working with Peer Providers	<i>Web-based orientation course</i>	1.5 hours		
	<i>Peer Support in Crisis Intervention training</i>	4 hours		
Mobile Teaming, including de-escalation strategies, trauma-informed practice principles, and working with both adults and youth	<i>Web-based orientation course</i>	3 hours		
	<i>Mobile Teaming with Adults and Youth training</i>	12 hours		
	<i>Self-Awareness and Co-Regulation training</i>	4 hours		
Substance Use Disorders	<i>Substance Use in Crisis Intervention training</i>	8 hours		
Harm Reduction Principles and Practices	<i>Web-based orientation course</i>	2 hours		
	<i>Harm Reduction in Crisis Intervention training</i>	4 hours		
Effective Use of Telehealth for Suicide Assessment in Mobile Teams	<i>Web-based orientation course</i>	2.5 hours		
	<i>Working with Individuals at Elevated Risk for Suicide via Telehealth training</i>	4 hours		
Secondary Trauma	<i>Web-based orientation course</i>	1 hour		