• Seven-day crisis stabilization, residential care, 15 maximum census
• Male/female ages 10-17
• Gap Level of Care: Higher than outpatient, not as intense as inpatient
• Diversity of criteria/referral concerns, primarily related to disruption of functioning associated with suicidality, defiance in home/school, dangerous behavior (run away, self-injurious behavior, online promiscuity, etc.)
• Services at no cost to client/guardian
• Initial phone or walk-in crisis screening & assessment by master’s level clinician
• Group therapy (2 hours/day)
• Individual therapy with master’s level clinician (at least 1x/week)
• Physician assessment & possible medication review/adjustment
• Tristesse Grief Center and HIV/STD education groups (1x/weekly)
• Tulsa Public Schools teacher on-site (3 hours/school day)
• Strong decrease in depression & anxiety symptoms in one week
  o CES-DC (depression): 45% reduction
  o GAD-7(anxiety): 53% reduction

**Three Major Goals:**

**A pause:** Provide children a safe environment to be less impacted by community or family stressors, to be exposed to and potentially integrate new coping skills, and to talk to experienced staff;

**A perspective:** Clinical feedback and perceptions from experienced team members, physicians, nurses, and therapists regarding client’s mental health, diagnoses, and future needs;

**A plan:** Assistance in connecting the parent/guardian with the next step in treatment.