Safety Stabilization Period (SSP)

2960.0730 Subpart 1 A. Staff must place a resident in SSP when: (1) a resident exhibits unsafe or unstable behavior; and (2) staff cannot address the behavior with less-restrictive behavioral interventions. B. A resident cannot remain in SSP for more than 24 hours. C. For purposes of this part, "hours" means awake hours.

NOTIFICATIONS	**APPROVAL**	**REVIEWS** **DOCUMENTATION** **2960.0730 Subpart 3** All documentation must be signed by all staff overseeing SSP,including staff conducting the well-being checks and reintegration assessments, and by all staff whose notification and approval are needed under this part.
2960.0730 Subpart 2 A When a resident is placed in SSP, staff must notify a staff supervisor or lead staff member as soon as possible but no later than 30 minutes after placement. Staff must document when SSP began and whether the supervisor or lead staff member was notified.		**2960.0730 Subpart 2 B** While a resident is in SSP, staff must, every 30 minutes and including sleeping hours, conduct a well-being check and assess the resident for reintegration.
2960.0720 Subpart 11 A resident's case manager or treatment team, placing agency, legal guardian, and family must be notified within four hours after each incident of safety-based separation has begun. The notification must be documented.	**2960.0730 Subpart 5 A** At one hour in SSP, a staff supervisor or lead staff member not involved in the resident's behavioral incident that resulted in SSP	**Document: 2960.0730 Subpart 3 A**. at one hour in SSP: (1) the reason for SSP, including the behavior that led to SSP; (2) how the behavior threatened the safety of the resident, other residents, or facility staff; (3) why continued SSP is needed to alleviate the ongoing safety risk; (4) why reintegration is not possible; and (5) the behavioral interventions that were tried but did not alleviate the continued need for SSP;
		Document: 2960.0730 Subpart 3 B at two hours and three hours in SSP: (1) why continued SSP is needed to alleviate the ongoing safety risk; (2) why reintegration is not possible; and (3) the behavioral interventions that were tried but did not alleviate the continued need for SSP;
2960.0730 Subpart 4 A Each hour, at 4 hours through 15 hours each hour the staff supervisor or a higher-level supervisor	**2960.0730 Subpart 5 B** Each hour, at four hours through 23 hours, a staff supervisor or higher-level supervisor not involved in the resident's behavioral incident that resulted in SSP.	**Document: 2960.0730 Subpart 3 C** each hour, at four hours through 15 hours in SSP: (1) why continued SSP is needed to alleviate the ongoing safety risk; (2) why reintegration is not possible; (3) the behavioral interventions that were tried but did not alleviate the continued need for SSP; and (4) a reintegration plan, created with resident input if the resident was willing to participate, that: (a) lists which behaviors the resident must demonstrate to transition from SSP; (b) identifies any necessary restorative activities; and (c) corresponds with the resident's behavior and the resident's cognitive and developmental ability;
2960.0730 Subpart 4 B Each hour, at 16 hours through 23 hours, a higher-level supervisor not involved in the resident's behavioral incident that resulted in SSP and the facility's chief administrator		**Document: 2960.0730 Subpart 3D** Each hour, at 16 hours through 24 hours: (1) why continued SSP is needed to alleviate the ongoing safety risk; (2) why reintegration is not possible; (3) the behavioral interventions that were tried but did not alleviate the continued need for SSP; and (4) any updates to the reintegration plan.
2960.0730 Subpart 4 C at 24 hours, the higher-level supervisor; the facility's chief administrator; the resident's case manager or treatment team, placing agency, legal guardian, and family; and, as provided under subpart 6, the commissioner.		**2960.0730 Subpart 6 B and C** At 24 hours staff must attempt reintegration; and if reintegration is unsuccessful, staff must: (1) transition the resident to administrative separation; or (2) place the resident in administrative separation while waiting for the resident to be placed in another facility. **2960.0730 Subpart 7** A resident who has been in SSP for 24 hours must be immediately referred to a mental health professional or, if a mental health professional is unavailable, a medically licensed person. The mental health professional or medically licensed person must determine whether the resident needs additional treatment services.

2960.0730 Subpart. 9. Reporting.

A. Each quarter and annually at the end of the calendar year, a license holder must report to the commissioner the following data: (1) every SSP incident, including: (a) the length of each incident, excluding sleeping hours; and (b) the cumulative time that all residents were removed from their units and programming; and (2) the number of residents who were placed in SSP, including demographic data disaggregated by age, race, and gender. B. For each SSP incident, staff must document how many hours that a resident spends in a locked space, excluding sleeping hours and when the resident may leave without staff approval. This data must be provided in the facility's quarterly and annual reporting under item A.