

**General Residential Operations (GRO) Tier II T3C Stabilization Support Service Package Snapshot**

Children, youth, or young adults are only placed in a Tier II Stabilization Support Service Package when other forms of specialized treatment have already been tried and were unsuccessful, and/or treatment in a less-restrictive setting is not safe and appropriate based on individualized needs, and requires a highly structured, intensive treatment program that specializes in providing and coordinating Time-limited Services with daily on-site clinical intervention, and highly complex care coordination and case management services to support the emotional stability, well-being, and therapeutic needs of the child, with the overall goal of achieving emotional and behavioral stability to the level that successful transition to a less restrictive placement offering treatment and recovery services can be achieved.

	<b>Tier II: Substance Use Services to Support Stabilization</b>	<b>Tier II: Sexual Aggression/Sex Offender Treatment Services to Support Stabilization</b>	<b>Tier II: Aggression /Defiant Disorder Services to Support Stabilization</b>	<b>Tier II: Complex Mental Health Services to Support Stabilization</b>	<b>Tier II: Complex Medical Services to Support Stabilization</b>	<b>Tier II: Human Trafficking Victim/Survivor Treatment Services to Support Stabilization</b>
<b>Row Across:</b> Characteristics of Recipients Served (Row Across)	Experiencing challenges with a lack of impulse control; <b>and</b> Presenting or has pending a DSM-5 diagnosis for a substance related and/or addictive disorder with severe impairment; <b>and</b> <b>and</b> May require Treatment Services as defined by Minimum Standards; <b>and</b> For whom other forms of specialized substance use and addictive disorder treatment have been tried and rendered unsuccessful, <b>and/or</b> treatment in a less-restrictive setting such as a Foster Family Home or GRO-Tier I facility is not safe and appropriate based on individualized needs; <b>and</b> Absent the Tier II intervention, the child, youth, or young adult's well-being or that of others they interact with may be at risk.	Experiencing challenges with a lack of impulse control; <b>and</b> On-going, socially, and developmentally inappropriate displays of sexualized behavior; or Sexually aggressive behavior; or Sexual behavior disorder DSM-5 diagnosis; or Adjudication as a sex offender; <b>and</b> May require Treatment Services as defined by Minimum Standards; <b>and</b> For whom other forms of specialized treatment have been tried and rendered unsuccessful, <b>and/or</b> treatment in a less-restrictive setting such as in a Foster Family Home or GRO-Tier I facility is not safe and appropriate based on individualized needs; <b>and</b> Absent the Tier II intervention, the child, youth, or young adult's well-being or that of others they interact with may be at risk.	Experiencing challenges with a lack of impulse control; <b>and</b> Presenting with or has pending an oppositional defiant disorder or other conduct disorder DSM-5 diagnosis; <b>and</b> May present with two or more of the following: - Severe and chronic challenges in school, with peers, and/or in other social settings; or - Severe and chronic challenges with authority and following rules beyond what would be considered age-appropriate behavior; or - Recurring delinquent behaviors which may have resulted in juvenile justice or law enforcement involvement; or - Requiring Treatment Services as defined by Minimum Standards; <b>and</b> For whom other forms of specialized treatment have been tried and rendered unsuccessful, <b>and/or</b> treatment in a less-restrictive setting such as in a Foster Family Home or GRO-Tier I facility is not safe and appropriate based on individualized needs; <b>and</b> Absent the Tier II intervention, the child, youth, or young adult's well-being or that of others they interact with may be at risk.	Experiencing challenges with a lack of impulse control; <b>and</b> Presenting with or has pending multiple, co-occurring DSM-5 diagnoses for emotional, behavioral, neurological, and/or developmental disorders); <b>and</b> May require Treatment Services as defined by Minimum Standards; <b>and</b> If one of the co-occurring DSM-5 diagnoses is IDD or Autism Spectrum Disorder, the child's behavior is characterized by prominent, severe deficits and pervasive impairment in one or more of the following areas (of development if diagnosis is Autism Spectrum Disorder): - Communication, cognition, or expressions of affect; <b>and/or</b> - Self-care activities or participation in social activities; <b>and/or</b> - Responding appropriately to an emergency; <b>and/or</b> - Multiple physical disabilities, including sensory impairments. <b>and</b> Also, recipients may present with a medical diagnosis requiring the use of mechanical supports or services of others because of life threatening conditions, including: - The inability to maintain an open airway without assistance; <b>and/or</b> - The inability to be fed except through a feeding tube, gastric tube, or a parenteral route; <b>and/or</b> - The use of sterile techniques or specialized procedures to promote healing, prevent infection, prevent cross-infection or contamination, or prevent tissue breakdown; <b>and/or</b> - Multiple disabilities including sensory impairments; <b>and</b> For whom other forms of specialized treatment have been tried and rendered unsuccessful, <b>and/or</b> treatment in a less-restrictive setting such as a Foster Family Home or GRO-Tier I facility is not safe and appropriate based on individualized needs; <b>and</b> Absent the Tier II intervention, the child, youth, or young adult's well-being or that of others they interact with may be at risk.	Presenting with a complex medical condition, defined as either one or more diagnoses that affect multiple organ systems or one long-term health condition that results in functional limitations, high health care needs or utilization, and often the need for medical technology; <b>and</b> Has a dual DSM-5 diagnosis for an emotional, behavioral, neurological, and/or developmental disorder(s); <b>and</b> May require Treatment Services as defined by Minimum Standards; <b>and/or</b> if one of the DSM-5 diagnoses is IDD or Autism Spectrum Disorder, the child's behavior is characterized by prominent, severe deficits and pervasive impairment in one or more of the following areas (of development if diagnosis is Autism Spectrum Disorder): - Communication, cognition, or expressions of affect; <b>and/or</b> - Self-care activities or participation in social activities; <b>and/or</b> - Responding appropriately to an emergency; <b>and/or</b> - Multiple physical disabilities, including sensory impairments. <b>and</b> Also, recipients may present with a medical diagnosis requiring the use of mechanical supports or services of others because of life threatening conditions, including: - The inability to maintain an open airway without assistance; <b>and/or</b> - The inability to be fed except through a feeding tube, gastric tube, or a parenteral route; <b>and/or</b> - The use of sterile techniques or specialized procedures to promote healing, prevent infection, prevent cross-infection or contamination, or prevent tissue breakdown; <b>and/or</b> - Multiple disabilities including sensory impairments; <b>and</b> For whom other forms of specialized treatment have been tried and rendered unsuccessful, <b>and/or</b> treatment in a less-restrictive setting such as a Foster Family Home or GRO-Tier I facility is not safe and appropriate based on individualized needs; <b>and</b> Absent the Tier II intervention, the child, youth, or young adult's well-being or that of others they interact with may be at risk.	Experiencing challenges with a lack of impulse control; <b>and</b> Determined to be a victim/survivor of sex and/or labor trafficking based on one or more of the following criteria: - As a result of a criminal prosecution or currently alleged to be a victim or survivor of trafficking in a pending criminal investigation or prosecution; <b>and/or</b> - Identified by the parent or placement agency as a victim or survivor of trafficking; <b>and/or</b> - Determined by the operation to be a victim/survivor based on reasonably reliable criteria, including one or more of the following: • The child's own disclosure as a victim or survivor of trafficking; <b>and/or</b> • The assessment of a counselor or other professional; <b>and/or</b> • Evidence that the child was recruited, harbored, transported, provided to another person, or obtained for the purpose of forced labor or commercial sexual activity. <b>and</b> Presenting with or has pending an emotional, behavioral, neurological, and/or developmental disorder DSM-5 diagnosis; <b>and</b> Recipients may demonstrate two or more of the following: - Severe and chronic challenges in school, with peers, and/or in other social settings; <b>and/or</b> - Severe and chronic challenges with authority and following rules (beyond what would be considered age-appropriate behavior); <b>and/or</b> - Recurring delinquent behaviors which may have resulted in juvenile justice or law enforcement involvement; <b>and/or</b> - Requiring Treatment Services as defined by Minimum Standards; <b>and/or</b> - If DSM-5 diagnosis is for IDD or Autism Spectrum Disorder, behavior is characterized by prominent, severe deficits and pervasive impairment in one or more areas; <b>and</b> For whom other forms of specialized treatment have been tried and rendered unsuccessful, <b>and/or</b> treatment in a less-restrictive setting such as a Foster Family Home or GRO-Tier I facility is not safe and appropriate based on individualized needs; <b>and</b> Absent the Tier II intervention, the child, youth, or young adult's well-being or that of others they interact with may be at risk.
<b>Column Down:</b> Service Package Offerings Provided (Column Down)						
<b>Provider is licensed and prepared to accept and provide the Service Package for children requiring Treatment Services as defined by Minimum Standards; those children who demonstrate two or more of:</b>	✓ -Major self-injurious actions, including a suicide attempt within the last 12 months; <b>and/or</b> -Difficulties that present a significant risk of harm to others, including frequent or unpredictable physical aggression; <b>and/or</b> -An additional DSM-5 diagnosis of substance-related and/or addictive disorder with severe impairment.	✓ -Major self-injurious actions, including a suicide attempt within the last 12 months; <b>and/or</b> -Difficulties that present a significant risk of harm to others, including frequent or unpredictable physical aggression; <b>and/or</b> -An additional DSM-5 diagnosis of substance-related and/or addictive disorder with severe impairment.	✓ -Major self-injurious actions, including a suicide attempt within the last 12 months; <b>and/or</b> -Difficulties that present a significant risk of harm to others, including frequent or unpredictable physical aggression; <b>and/or</b> -An additional DSM-5 diagnosis of substance-related and/or addictive disorder with severe impairment.	✓ -Major self-injurious actions, including a suicide attempt within the last 12 months; <b>and/or</b> -Difficulties that present a significant risk of harm to others, including frequent or unpredictable physical aggression; <b>and/or</b> -An additional DSM-5 diagnosis of substance-related and/or addictive disorder with severe impairment.	✓ -Major self-injurious actions, including a suicide attempt within the last 12 months; <b>and/or</b> -Difficulties that present a significant risk of harm to others, including frequent or unpredictable physical aggression; <b>and/or</b> -An additional DSM-5 diagnosis of substance-related and/or addictive disorder with severe impairment.	✓ -Major self-injurious actions, including a suicide attempt within the last 12 months; <b>and/or</b> -Difficulties that present a significant risk of harm to others, including frequent or unpredictable physical aggression; <b>and/or</b> -An additional DSM-5 diagnosis of substance-related and/or addictive disorder with severe impairment.
<b>Basic living needs including food, clothing, shelter, education, vocation, recreation, and extracurricular activities</b>	✓	✓	✓	✓	✓	✓
<b>Individual Therapy (if eligible, via STAR Health)</b>	✓	✓	✓	✓	✓	✓
<b>Family Therapy (if eligible, via STAR Health)</b>	✓	✓	✓	✓	✓	✓
<b>Group Therapy (if eligible, via STAR Health)</b>	✓	✓	✓	✓	✓	✓
<b>Individualized Service Plan &amp; Service Planning Team Meetings (Provider's Service Plan must include customized goals, documentation of services and progress shown)</b>	✓ (Reviews occur at least every 30 days)	✓ (Reviews occur at least every 30 days)	✓ (Reviews occur at least every 30 days)	✓ (Reviews occur at least every 30 days)	✓ (Reviews occur at least every 30 days)	✓ (Reviews occur at least every 30 days)
<b>Evidence- &amp; Trauma-Informed Treatment Model (specific to Program and Service Package)</b>	✓	✓	✓	✓	✓	✓
<b>Logic Model (specific to Program and Service Package)</b>	✓	✓	✓	✓	✓	✓
<b>Licensed Therapist On-Call and available for consultation via phone or video, or in-person for crisis response, 24 hours a day/7 days a week</b>	✓ (LCDC available to consult or respond in person if needed)	✓ (LSOTP available to consult or respond in person if needed)	✓ (Licensed Therapist that specializes in serving children with DSM-5 diagnosis available to consult or respond if needed)	✓ (Licensed Therapist that specializes in serving children with DSM-5 diagnosis available to consult or respond if needed)	✓ (Licensed Therapist that specializes in serving children with DSM-5 diagnosis available to consult or respond if needed)	✓ (Licensed Therapist that specializes in complex trauma available to consult or respond in person if needed)
<b>Registered Nurse On-Call and available 24 hours a day/7 days a week, as well as being on-site during regular business hours and in accordance with the Treatment Model</b>	✓	✓	✓	✓	✓	✓
<b>CANS 3.0 Assessment (via DFPS/SCCC CANS Assessor staff)</b>	✓	✓	✓	✓	✓	✓

**A checkmark indicates the service must be available within the Service Package. A child may not need every service throughout the time that they are receiving the Service Package. Service scope, intensity, and delivery may vary based on the child's current needs and treatment progress, and the specific services utilized are identified in the current Service Plan.**

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Human Trafficking Prevention Training for staff, who are trained on age-appropriate discussions with children	✓	✓	✓	✓	✓	✓
Paid Annual Vacation and Sick Leave for all Direct Delivery Caregivers and/or Cottage Parents	✓	✓	✓	✓	✓	✓
Information Technology System	✓	✓	✓	✓	✓	✓
GRO provides Logistical Support including transportation, coordination, and documentation/ record-keeping in accordance with courts orders & child's customized Service Plan	✓	✓	✓	✓	✓	✓
Enhanced skill in Coordination and Advocacy of Care Systems to include services (as applicable) offered by STAR Health, HHSC Behavioral Health Services, Early Childhood Intervention, the education system, the juvenile justice system, and other county, community, or state agency services	✓	✓	✓	✓	✓	✓
GRO ensures access to and support for educational accommodations including GRO being accessible to teachers and other school staff, as appropriate, if facility-based education is determined necessary	✓	✓	✓	✓	✓	✓
GRO support for Normalcy Activities	✓	✓	✓	✓	✓	✓
Customized Daily Recreation Schedule must offer opportunities for both on-site and off-site activities (as safe and appropriate)	✓	✓	✓	✓	✓	✓
GRO Staff Coordination and Participation in the STAR Health Service Coordination benefit	✓	✓	✓	✓	✓	✓
Specially Trained Direct Delivery Staff with enhanced skill in caring for and meeting the needs of the child, specific to the Service Package	✓	✓	✓	✓	✓	✓
Family Outreach and Engagement Program to ensure inclusion and participation of all Sibling/ Parent/ Fictive Kin/ Adoptive & supportive adult-child relationships (that are safe and appropriate) as a part of on-going service planning and aftercare services	✓	✓	✓	✓	✓	✓
Training and Support for Preparation for Adulthood in addition to PAL engagement for youth 14+ years old	✓	✓	✓	✓	✓	✓

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Delivery of experiential learning opportunities on transition to adulthood, appropriate for the service package population, including transportation, coordination, documentation/ record keeping of services	✓	✓	✓	✓	✓	✓
Provision of one-to-one staff supervision when needed for safety is included in the rate, GRO must have policy that details how, when, and under what circumstances one-to-one supervision will be provided, and who makes the decision	✓	✓	✓	✓	✓	✓
Special Supervision Plan developed at admission to ensure the child remains safe and mitigate risk to other children in the home and/or community	✓	✓	✓	✓	✓	✓
Enhanced GRO child safety/monitoring plan which may include incorporation of additional identified personnel, and/or equipment and technology	✓	✓	✓	✓	✓	✓
Child Services Quality Assurance/ Continued Stay Review following Provider Service Plan Reviews with documentation provided to Field Staff	✓	✓	✓	✓	✓	✓
Provider Identified Anticipated Length of Stay (Individualized plan & based on GRO's Treatment Model specific to each Service Package)	✓	✓	✓	✓	✓	✓
DPS-Imposed Maximum Length of Services	✓ <small>(6 consecutive months for children ages 12 and under, 12 consecutive months or 18 non-consecutive for children over 13)</small>	✓ <small>(6 consecutive months for children ages 12 and under, 12 consecutive months or 18 non-consecutive for children over 13)</small>	✓ <small>(6 consecutive months for children ages 12 and under, 12 consecutive months or 18 non-consecutive for children over 13)</small>	✓ <small>(6 consecutive months for children ages 12 and under, 12 consecutive months or 18 non-consecutive for children over 13)</small>	✓ <small>(6 consecutive months for children ages 12 and under, 12 consecutive months or 18 non-consecutive for children over 13)</small>	✓ <small>(6 consecutive months for children ages 12 and under, 12 consecutive months or 18 non-consecutive for children over 13)</small>
Dedicated, Full-Time Licensed Child Care Administrator	✓	✓	✓	✓	✓	✓
Program Director	✓	✓	✓	✓	✓	✓
Treatment Director	✓ <small>(must meet one of the qualifications to provide Tier II: Substance Use Services to Support Stabilization)</small>	✓ <small>(must meet one of the qualifications to provide Tier II: Sexual Aggression/Sex Offender Treatment Services to Support Community Transition)</small>	✓ <small>(must meet one of the qualifications to provide Tier II: Aggression /Defiant Disorder Services to Support Stabilization)</small>	✓ <small>(Must ensure that the GRO's Case Management, Direct Delivery Caregivers, and Licensed Therapist receive on-going training on interpretation and analysis of complex medical records, and care planning for children, youth, and young adults with Complex Medical Needs)</small>	✓ <small>(must meet one of the qualifications to provide Tier II: Complex Medical Services to Stabilization)</small>	✓ <small>(must meet one of the qualifications to provide Tier II: Human Trafficking Victim/Survivor Treatment Services to Support Stabilization)</small>
Case Management Staff	✓ <small>(rate-based ratio is 1:10)</small>	✓ <small>(rate-based ratio is 1:10)</small>	✓ <small>(rate-based ratio is 1:10)</small>	✓ <small>(rate-based ratio is 1:10)</small>	✓ <small>(rate-based ratio is 1:10)</small>	✓ <small>(rate-based ratio is 1:10)</small>
Registered Nurse On Staff and/or Contract (as applicable to the Service Package)	✓ <small>(rate-based ratio is 1:16)</small>	✓ <small>(rate-based ratio is 1:16)</small>	✓ <small>(rate-based ratio is 1:16)</small>	✓ <small>(rate-based ratio is 1:16)</small>	✓ <small>(rate-based ratio is 1:16)</small>	✓ <small>(rate-based ratio is 1:16)</small>
Admissions/ Placement Staff On-Call and available to review and admit children 24 hours per day, 365 days per year	✓	✓	✓	✓	✓	✓
Staff Training and Workforce Development Staff	✓	✓	✓	✓	✓	✓
Licensed Therapist to Oversee Treatment and Service Planning (not necessarily child's individual therapist)	✓ <small>(rate-based ratio is 1:13, services provided by a LCDC)</small>	✓ <small>(rate-based ratio is 1:10, services provided by a LSOTP)</small>	✓ <small>(rate-based ratio is 1:10, services provided by a LT that specializes in serving children with a DSM-5 diagnosis for oppositional defiant disorder and conduct disorders)</small>	✓ <small>(rate-based ratio is 1:10, services provided by a LT experienced in serving children with complex co-occurring DSM-5 diagnosed disorders)</small>	✓ <small>(rate-based ratio is 1:10, services provided by a LT that specializes in treating children with complex medical and behavioral needs)</small>	✓ <small>(rate-based ratio is 1:10, services provided by a LT with enhanced training in all forms of sex and labor trafficking, and specialized in treating complex trauma)</small>

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Staff Recruitment and Retention Staff	✓	✓	✓	✓	✓	✓
Driver	✓	✓	✓	✓	✓	✓
Aftercare Services Planning and Case Management Staff (requirement lasts for 6 months after placement discharge)	✓ <small>(rate-based ratio is 1:25)</small>	✓ <small>(rate-based ratio is 1:25)</small>	✓ <small>(rate-based ratio is 1:25)</small>	✓ <small>(rate-based ratio is 1:25)</small>	✓ <small>(rate-based ratio is 1:25)</small>	✓ <small>(rate-based ratio is 1:25)</small>
Continuous Quality Assurance and Improvement Program Staff (Program is data-informed)	✓	✓	✓	✓	✓	✓
Billing/ Cost Reporting/ Medicaid Claims Support Staff	✓	✓	✓	✓	✓	✓
Cross-System Coordination Staff to maintain & support school, medical, dental, behavioral health, and other service needs (Must be well-versed in STAR Health Services to ensure children requiring this Service Package maximize eligible benefits)	✓	✓	✓	✓	✓	✓
Awake Daytime Direct Delivery Caregivers	✓ <small>(rate-based ratio is 1:4)</small>	✓ <small>(rate-based ratio is 1:4)</small>	✓ <small>(rate-based ratio is 1:4)</small>	✓ <small>(rate-based ratio is 1:4)</small>	✓ <small>(rate-based ratio is 1:4)</small>	✓ <small>(rate-based ratio is 1:4)</small>
Awake Nighttime Direct Delivery Caregivers	✓ <small>(rate-based ratio is 1:5)</small>	✓ <small>(rate-based ratio is 1:5)</small>	✓ <small>(rate-based ratio is 1:5)</small>	✓ <small>(rate-based ratio is 1:5)</small>	✓ <small>(rate-based ratio is 1:5)</small>	✓ <small>(rate-based ratio is 1:3)</small>

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