

# Understanding a 5150/5585 Hold and Crisis Stabilization

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Parent Guide



**Fresno County  
Superintendent of Schools**  
Dr. Michele Cantwell-Copher, Superintendent






Pupil Personnel Services Department

*Dear Parent or Caregiver,*

We understand this may be an overwhelming and emotional experience. This guide is meant to help you understand why your child was taken for crisis stabilization, what to expect, and how to support your child, your family and yourself moving forward.

## Why was my child taken to a crisis stabilization center or hospital?

Your child was transported for crisis evaluation because a mental health professional or law enforcement determined that they may be:

-  A danger to themselves
-  At risk for suicide
-  Recovering from or responding to a suicide attempt
-  A danger to someone else
-  Unable to care for their own safety needs due to their mental health

When a child is believed to be at immediate risk, they may be placed on a 5150/5585 hold. This allows them to be taken to a hospital or crisis stabilization unit for a 72-hour mental health assessment and treatment.

Transportation to the crisis center or hospital is usually arranged by ambulance, and law enforcement may be present as part of standard safety procedures. Their presence is primarily for safety. The main focus is stabilization and connecting your child with the appropriate support and services.

## What happens during the evaluation? (Example: Exodus or similar facilities)

### 1. Nursing Staff (First Point of Contact)

- Nurses greet the youth, complete the initial assessment, and gather basic information.
- They will also speak with parents/guardians by phone or in person.
- They may ask about medical history, past mental health treatment, medications, allergies, and any concerns you have.

### 2. Evaluating Clinician/Staff

- A mental health provider evaluates your child.
- Staff may call parents/caregivers for additional information.
- They coordinate plans for discharge and pick up, or transfer to another facility, if the youth meets criteria for further mental health treatment and stabilization.

### 3. Discharge and Follow-Up

You will receive:

- A discharge plan
- Recommendations for therapy or other services
- Referrals to outpatient services (e.g., therapy, psychiatry)
- Follow-up instructions appropriate for your child's age, needs, and insurance

If your child already has a therapist or mental health provider, you will be encouraged to follow up with them.

In some cases, if the child meets criteria for inpatient hospitalization for higher level of care, they may be transferred to the first accepting hospital. Often, this may be outside the Fresno area.

## What should I do next?

### **Communicate with the facility**

You can call the hospital/crisis unit to ask questions.

### **Inform your child's school** (if they don't already know)

Notify your child's school (school administrator or mental health professional) that your child is absent due to being placed on a 5150/5585 hold. Be sure to inform them if your child has an **IEP or section 504 plan**, and request that their case manager be notified.

Your school may:

- Offer check-ins
- Provide counseling services
- Make accommodations to help with your child's transition back to school
- Set up a reentry meeting to discuss safety and wellness planning
- Request to sign a Release of Information\* (ROI) to facilitate communication with outside providers (therapist, psychiatrist, crisis center, etc.)  
\*Youth 12 or older must sign their own ROI

### **Seek or continue mental health treatment**

If your child already has a therapist, notify them - this helps guide treatment. If not, consider setting up therapy. Most insurance plans cover mental health services.

Ask your school psychologist, counselor, or social worker for help finding providers.



### **Support your child at home**

- Provide a safe, calm space to talk about feelings
- Remind your child they are not alone and that you are there to support them
- Establish predictable routines
- Consider family therapy
- After a 5150, it's just as important to have fun with your child as it is to support them through their struggles.

### **Support Yourself**

Caring for a child in crisis is emotionally heavy. You are not expected to manage this alone. Talking with a mental health professional or leaning on your support system (family, friends, faith community, etc.) can help you feel supported through this time.

### **Supporting Your Family**

Talking with your family about a sibling needing a mental health hold can be incredibly hard and emotional. It's important to be honest in an age-appropriate way.

Consider the following sample scripts when preparing for these conversations:



## Safety Planning

A safety plan is a written list of warning signs, coping strategies, people your child can reach out to, and steps to take during a crisis; usually made with a therapist or at the reentry meeting with the child's school.

A strong safety plan may include:

- Warning signs your child may need support
- Healthy coping strategies
- Safe people or places
- Emergency numbers
- A plan to reduce access to means (sharp items, medications, firearms)

## If your child is on medication

To ensure your child is taking the right medication and dosage, follow up with a psychiatrist and/or primary care doctor.

Being consistent with medication is important. Stopping medication without medical supervision can cause increased or worsened mental health symptoms.

## Behavioral Health Support Liaison (BHSL)

The BHSL's role is to facilitate communication between the medical system, the family/youth and the school, along with linking the youth and family to needed resources. Contact the BHSL for additional resources or support.

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Behavioral Health Support Liaison  
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Pupil Personnel Services Department

## Checklist for Parents

Things to do after your child is discharged:

- Inform the school and coordinate support
- Make your home safer:
  - o Remove or lock up medications
  - o Secure firearms
  - o Limit access to sharp items
  - o Increase supervision
- Schedule follow-up appointments (therapist, psychiatrist, or doctor)
- Connect your child with ongoing mental health care
- Keep track of medications and any changes
- Seek emotional support for yourself (family, friends, mental health professional, faith community)



### Suicide Myths Debunked



### Additional Resources

