

ALLEGHENY COUNTY OFFICE OF BEHAVORIAL HEALTH (OBH) MENTAL HEALTH RESIDENTIAL PROGRAM DESCRIPTIONS

REFERRAL REQUIREMENTS

- Individuals must be an Allegheny County Resident at the time of referral
- Individuals must be 18 years or older
- Individuals must have a serious mental illness diagnosis such as bipolar disorder, schizophrenia, major depressive disorder etc. Individuals cannot have a primary diagnosis of Substance Use Disorder, Organic Brain Syndrome or Intellectual Disability (ID)
- Individuals must be referred by one of the following:
 - o Service Coordination (SC)
 - o Enhanced Service Coordination (ECSC)
 - o Justice Related Services (JRS)
 - o Community Treatment Team (CTT)
 - o Mobile Transition Age Youth (MTAY)
 - o Integrated Dual Disorder Treatment (IDDT)
 - o Psychiatric hospital social worker (SW)
 - o Residential Treatment Facility-Adults (RTFA)
 - o Extended Acute Care (EAC)
 - o Other Mental Health Professionals approved by Office of Behavioral Health

HOUSING LEVELS: Allegheny County DHS-OBH contracts with providers to offer 9 levels of Mental Health Housing. The degree of support residents receive can vary from minimal to significant assistance with Activities of Daily Living (ADLs) and skill building. The goal of MH housing is to help residents to develop the skills to assist them with moving to independent housing or maintaining stabilization in current setting.

- 1. Group Home Community Residential Rehabilitation (CRR)
- 2. Co-Occurring Disorder Group Home (COD-GH)
- 3. Apartment Community Residential Rehabilitation
- 4. 24/7 Supportive Housing (24/7 SH)
- 5. Domiciliary Care (Dom Care)
- 6. Personal Care Home (PCH)
- 7. Comprehensive Mental Health Personal Care Home (CMHPCH)
- 8. Specialized Residence (SR)
- 9. Long -Term Structured Residence (LTSR)

ADMISSION CRITERIA

- Designed for individuals 18 years and older
- Orientation/Intake may vary from site to site, but usually a tour of the site and or interview are scheduled as a first step in the process. The intake process is conducted in a manner that identifies current and historical information as well as the person's strengths, needs, abilities and preferences. Information can be gathered through face to face contact, conference call or written
- Prior to moving in, the following documents are required:
 - A signed psychiatric evaluation stating the current serious mental Illness diagnosis must be current within 1 year of admission into a CRR.
 - A signed physical exam. Must be current within 6 months of admission into a CRR and must be signed by a Physician and not physician's assistant per state guidelines.
 - Laboratory testing for tuberculosis (TB). If test is positive, then a chest X-Ray is required indicating that there is no active TB. Test results must be current within 6 months of admission into CRR.
 - Per state guidelines, ALL admission documentation must be received before the individual can move in.

LENGTH OF STAY

- Voluntary, Short-Term Housing.
- Recommended length of stay in the program is 12 to 18 months or based individual's readiness.
- Transition/Discharge planning from this program is done in collaboration with the treatment team. The process may include a planned discharge, moving from one level to another, or obtaining services that are not available through MH housing.
- Residents are expected to follow treatment plan and actively participate in the development of their goals, participate in meaningful activities off-site, follow lease agreement, and abide by program rules.
- Residents not abiding by the agreement may be subject to a 30- day notice to leave the program. It may be sooner than 30 days based on specific program policy.

PROGRAM DESCRIPTION

- Group home type of housing is designed for individuals experiencing a Serious Mental Illness (SMI) which may affect their ability to perform their daily tasks such as cooking, cleaning, medication adherence, paying bills, and treatment management. Residents can perform some of their basic daily activities, may require significant hands-on assistance or prompting for task completion.
- Staff are present 24/7 to support residents with adhering to mental and physical health goals.
- Group home living offers congregate living where bedrooms, bathrooms, and kitchen may be shared.
- Residents are required to be off-site during the weekdays and during daylight hours. Offsite activities may include employment, therapy, drop-in center etc.

COST

- On average, a Group Home- CRR requires 72% of a resident's income (employment, SSI, SSD...) for rent up to the SSI maximum. This covers utilities, food and furnishings. A security deposit may be required.
- Laundry is available on site, in some instances, machines are coin operated.
- Residents may need to pay for other added amenities.

- Service supports can be accessed while living in CRRs, however, referrals to these services need to be made separately from referral to the residential program. These include: Service Coordination (SC), Enhanced Service Coordination (ECSC), Justice Related Services (JRS), Community Treatment Team (CTT), Mobile Transition age Youth (MTAY), and Integrated Dual Disorder Treatment (IDDT), Psychiatric Rehab, and Peer Support.
- Service supports will provide continuous collaboration with the residential provider and other members of the treatment team to assess the strengths and needs of the resident.
- Service supports will participate in treatment team and discharge planning meetings.

CO-OCCURING DISORDER – CRR- GROUP HOME

ADMISSION CRITERIA

- Designed for individuals 18 years and older
- Orientation/Intake may vary from site to site, but usually
 a tour of the site and or interview are scheduled as a
 first step in the process. The intake process is conducted
 in a manner that identifies current and historical
 information as well as the person's strengths, needs,
 abilities, and preferences. Information can be gathered
 through face to face contact, conference call, or written
 material
- Prior to moving in, the following is required:
 - A signed psychiatric evaluation stating the current serious mental Illness diagnosis must be current within 1 year of admission into a CRR.
 - A signed physical exam. Must be current within 6 months of admission into a CRR and must be signed by a Physician and not physician's assistant per state guidelines.
 - Laboratory testing for tuberculosis (TB). If the test is positive, then a chest X-Ray is required indicating that there is no active TB. Test results must be current within 6 months of admission into CRR.
 - Per state guidelines, ALL admission documentation must be received before the individual can move in.

LENGTH OF STAY

- Voluntary, Short-Term Housing.
- Recommended length of stay in the program is 6 to 18 months or based on individual's readiness.
- Transition/Discharge planning from this program is done
 in collaboration with treatment team. The process may
 include a planned discharge, moving from one level to
 another, or obtaining services that are not available
 through MH housing.
- Residents are expected to follow treatment plan and actively participate in the development of their goals, participate in meaningful activities off-site, follow lease agreement, and abide by program rules.
- Residents not abiding by the agreement may be subject to a 30-day notice to leave the program. It may be sooner than 30 days based on specific program policies.

PROGRAM DESCRIPTION

- COD-GH is highly structured to support individuals with their recovery goals. This program is designed to assist individuals experiencing Serious Mental Illness (SMI) with Substance Use Disorder which may affect their ability to perform their daily tasks such as cooking, cleaning, medication adherence, paying bills, and treatment management.
- Residents vary in their needs for skill development, from minimal to significant assistance for task completion.
- Staff are present 24/7 to help residents focus on recovery goals for Substance Use Disorder(s), as well as psychiatric stabilization, and physical health goals.
- COD-GH offers congregate living where bedrooms, bathrooms and kitchen may be shared.
- Residents are required to be off site during the weekdays and during daylight hours. Offsite activities may include employment, therapy, drop-in center etc. Residents are also required to work on recovery goals such as building positive supports in Alcoholics anonymous (A/A) and/or Narcotics Anonymous, (N/A).

COST

- On average, a Group Home- CRR requires 72% of a resident's income (employment, SSI, SSD...) for rent up to the SSI maximum. This covers utilities, food and furnishings. A security deposit may be required.
- Laundry is available on site, in some instances, machines are coin operated
- Residents may need to pay for other added amenities.

- Service supports can be accessed while living in CRRs, however, referrals to these services need to be made separately from referral to the residential program. These include: Service Coordination (SC), Enhanced Service Coordination (ECSC), Justice Related Services (JRS), Community Treatment Team (CTT), Mobile Transition age Youth (MTAY), and Integrated Dual Disorder Treatment (IDDT), Psychiatric Rehab, and Peer Support.
- Service supports will provide continuous collaboration with the residential provider and other members of the treatment team to assess the strengths and needs of the resident.
- Service supports will participate in treatment team and discharge planning meetings.

ADMISSION CRITERIA

- Designed for individuals 18 years and older.
- Apartment CRRs can accommodate 4 to 18 individuals per program.
- Orientation/Intake may vary from site to site, but usually
 a tour of the site and or interview are scheduled as a
 first step in the process. The intake process is conducted
 in a manner that identifies current and historical
 information as well as the person's strengths, needs,
 abilities, and preferences. Information can be gathered
 through face to face contact, conference call, or written
 material.
- Prior to moving in, the following is required:
 - A signed psychiatric evaluation stating the current serious mental Illness diagnosis must be current within 1 year of admission into a CRR.
 - A signed physical exam. Must be current within 6 months of admission into a CRR and must be signed by a Physician and not physician's assistant per state guidelines.
 - Laboratory testing for tuberculosis (TB). If the test is positive, then a chest X-Ray is required indicating that there is no active TB. Test results must be current within 6 months of admission into CRR.
 - Per state guidelines, ALL admission documentation must be received before the individual can move in.

LENGTH OF STAY

- Voluntary, Short-Term Housing
- Recommended length of stay in the program is 12 to 18 months or determined based on individual's readiness.
- Transition/Discharge planning from this program is done
 in collaboration with treatment team. The process may
 include a planned discharge, moving from one level to
 another, or obtaining services that are not available
 through MH housing.
- Residents are expected to follow treatment plan and actively participate in the development of their goals, participate in meaningful activities off-site follow lease agreement, and abide by program rules.
- Residents not abiding by the agreement may be subject to a 30- day notice to leave the program. It may be sooner than 30 days based on specific program policies.

PROGRAM DESCRIPTION

- Apartment CRR is designed for individuals who can perform most of their basic daily activities but may require minimal prompting or assistance with tasks such as cooking, cleaning, medication adherence, paying bills, and treatment management.
- Residential Care Services and Chartiers Center offers
 Full Care and Moderate Care Apartment CRRs. In Full
 Care CRR, staff are located in the same building 24/7
 and provide significant assistance for task completion.
 In the Moderate Care Apartment CRR, staff are
 available but may not be located in the same building,
 but located nearby to provide moderate assistance for
 task completion.
- Apartments may be private or shared with one other person. Staff are present 24/7 to support residents with adhering to mental and physical health goals.
- Residents are required to be off-site during the weekdays and during daylight hours. Off-site activities may include employment, therapy, drop-in center etc.

COST

- On an average, Apartment CRR requires 40% of a resident's income (employment, SSI, SSD...) for rent up to the SSI maximum. This covers utilities, and furnishings. Individuals are required to purchase and prepare their own food.
- A security deposit may be required.
- Laundry is available on site, in some instances, machines are coin operated
- Residents may need to pay for other added amenities.
- Some apartments may be Dom Care eligible through the Department of Aging.

- Service supports can be accessed while living in CRRs, however, referrals to these services need to be made separately from referral to the residential program. These include: Service Coordination (SC), Enhanced Service Coordination (ECSC), Justice Related Services (JRS), Community Treatment Team (CTT), Mobile Transition age Youth (MTAY), and Integrated Dual Disorder Treatment (IDDT), Psychiatric Rehab, and Peer Support.
- Service supports will provide continuous collaboration with the residential provider and other members of the treatment team to assess the strengths and needs of the resident.
- Service supports will participate in treatment team and discharge planning meetings.

24/7 SUPPORTIVE HOUSING

ADMISSION CRITERIA

- Designed for individuals 18 years and older.
- 24/7 Supportive Housing can accommodate 2 to 15 individuals per program.
- Orientation/Intake may vary from site to site, but usually a tour of the site and or interview are scheduled as a first step in the process. The intake process is conducted in a manner that identifies current and historical information as well as the person's strengths, needs, abilities, and preferences. Information can be gathered through face to face contact, conference call, or written material.
- Prior to moving in, the following is required:
- A signed psychiatric evaluation stating the current serious mental Illness diagnosis must be current within 2 year of admission into 24/7 SH.
- A signed physical exam. Must be current within 2 Years of admission into 24/7 SH and must be signed by a Physician and not physician's assistant.
- Laboratory testing for tuberculosis (TB). If the test is positive, then a chest X-Ray is required indicating that there is no active TB. Test results must be current within 6 months of admission into 24/7 SH.
- ALL admission documentation must be received before the individual can move in.

LENGTH OF STAY

- Voluntary, Long-Term Housing
- Recommended length of stay is 3-5 years, or determined based on the individual's readiness, with the goal to move to more independent housing.
- If transition/discharge is necessary, planning from this program is done in collaboration with treatment team.
 The process may include a planned discharge, moving from one level to another, or obtaining services that are not available through MH housing.
- Residents are required to follow the lease agreement and abide by program rules.
- Residents not abiding by the agreement may be subject to a 30-day notice to leave the program. It may be sooner than 30 days based on specific program policies.

PROGRAM DESCRIPTION

- Residents living in these programs live almost independently. Residents can perform all daily activities but may occasionally require minimal assistance with tasks such as cooking, cleaning, medication adherence, paying bills, and treatment management.
- Staff are available 24/7, however staff may not be in the same building, but located nearby. Staff are available to support residents with adhering to mental and physical health goals.
- Apartments may be private or shared with one other person. This varies from program to program.
- Pittsburgh Mercy offers specialty housing for Transition Age Youth (TAY) age 18 – 25 years. (Bellwood)
- Pittsburgh Mercy also offers specialty housing for individuals who are deaf. (Leland Point/Wolfe)

COST

- Cost may vary site to site but on an average, 24/7 SH requires 40% of a resident's income (employment, SSI, SSD...) for rent up to the SSI maximum. This covers utilities, and furnishings. A security deposit may be required.
- Individuals are required to purchase and prepare their own food
- Laundry is available on site. In some instances, machines are coin operated.
- Residents may need to pay for other added amenities.

- Service supports can be accessed while living in 24/7 SH, however, referrals to these services need to be made separately from referral to the residential program. These include: Service Coordination (SC), Enhanced Service Coordination (ECSC), Justice Related Services (JRS), Community Treatment Team (CTT), Mobile Transition age Youth (MTAY), and Integrated Dual Disorder Treatment (IDDT), Psychiatric Rehab, and Peer Support.
- Service supports will provide continuous collaboration with the residential provider and other members of the treatment team to assess the strengths and needs of the resident.
- Service supports will participate in treatment team and discharge planning meetings.

DOMICILIARY (DOM) CARE

ADMISSION CRITERIA

- Designed for individuals 18 years and older.
- Dom Care is a 6-bed facility that is run by Community Human Services (CHS), certified by the Department of Aging and monitored by Allegheny County Office of Behavioral Health (OBH).
- Orientation/Intake usually starts with a tour of the site and or interview. The intake process is conducted in a manner that identifies current and historical information as well as the person's strengths, needs, abilities, and preferences. Information can be gathered through face to face contact, conference call, or written material.
- Prior to moving in, the following documents are required:
 - A signed psychiatric evaluation stating the current serious mental Illness diagnosis must be current within 1 year of admission into a DOM Care.
 - A signed physical exam. Must be current within 6 months of admission into a DOM Care and must be signed by a Physician and not physician's assistant.
 - Laboratory testing for tuberculosis (TB). If the test is positive, then a chest X-Ray is required indicating that there is no active TB. Test results must be current within 6 months of admission into DOM
 - ALL admission documentation must be received before the individual can move in.

LENGTH OF STAY

- Voluntary, Long-Term Housing
- Recommended length of stay is determined based on the individual's readiness.
- If transition/discharge is necessary, planning from this program is done in collaboration with treatment team.
 The process may include a planned discharge, moving from one level to another, or obtaining services that are not available through MH housing.
- Residents are required to follow lease agreement and abide by program rules.
- Residents not abiding by the agreement may be subject to a 30-day notice to leave the program. It may be sooner than 30 days based on specific program policies.

PROGRAM DESCRIPTION

- Dom Care offers 24/7 staff support to assist individuals experiencing Serious Mental Illness (SMI), which limits their ability to live independently in the community and affects their ability to complete daily activities such as cooking, cleaning, medication adherence, paying bills, and treatment management.
- Meal preparation, laundry, medication administration, and light housekeeping are completed by staff.
- Individuals may have some medical concerns; however, cannot be in need significant medical care or nursing at the time of admission.
- Dom Care offers congregate living where bedrooms, baths, and kitchen may be shared
- Dom care is certified by the Department of Aging.

COST

- Dom Care requires 84% of the resident's income (employment, SSI, SSD) up to the SSI maximum. This covers utilities, food and furnishings. A security deposit may be required.
- Laundry is available on site.
- Residents may need to pay for other added amenities.

- Service supports can be accessed while living in Dom Care, however, referrals to these services need to be made separately from referral to the residential program. These include: Service Coordination (SC), Enhanced Service Coordination (ECSC), Justice Related Services (JRS), Community Treatment Team (CTT), Mobile Transition age Youth (MTAY), and Integrated Dual Disorder Treatment (IDDT), Psychiatric Rehab, and Peer Support.
- Service supports will provide continuous collaboration with the residential provider and other members of the treatment team to assess the strengths and needs of the resident.
- Service supports will participate in treatment team and discharge planning meetings.

PERSONAL CARE HOME (PCH)

ADMISSION CRITERIA

- Designed for individuals 18 years and older (average age is 60).
- PCH is an 18-bed facility run by Mon-Yough Community Services Inc. (MYCS).
- Orientation/Intake usually starts with a tour of the site and or interview. The intake process is conducted in a manner that identifies current and historical information as well as the person's strengths, needs, abilities, and preferences. Information can be gathered through face to face contact, conference call, or written material.
- Prior to moving in, the following documents are required:
 - A signed psychiatric evaluation stating the current serious mental Illness diagnosis must be current within 1 year of admission into a PCH.
 - A signed physical exam. Must be current within 6 months of admission into a PCH and must be signed by a Physician and not physician's assistant per state guidelines.
 - Laboratory testing for tuberculosis (TB). If the test is positive, then a chest X-Ray is required indicating that there is no active TB. Test results must be current within 6 months of admission into the PCH
 - MA-51 must be signed by doctor 60 days prior to admission.
 - A Diagnostic Medical Evaluation (DME) is required as well as the Preadmission Screening Form to be completed 30 days prior to admission. The Person Care Home Assessment is to be completed by the PCH 15 days after admission.
 - ALL admission documentation must be received before the individual can move in per state guidelines.

LENGTH OF STAY

- Voluntary, Long-Term Housing.
- Recommended length of stay is determined based on the individual's readiness.
- If transition/discharge is necessary, planning from this
 program is done in collaboration with treatment team.
 The process may include a planned discharge, moving
 from one level to another, or obtaining services that
 are not available through MH housing.
- Residents are required to follow lease agreement and abide by program rules. Individuals not abiding by the agreement may be subject to a 30-day notice to leave the program. It may be sooner than 30 days based on specific program policies.

PROGRAM DESCRIPTION

- Allegheny County/DHS contracts with one Personal Care Home run by Mon-Yough Community Services (MYCS). MYCS operates Long-Run Road PCH, an 18bed facility in Allegheny County. It is highly supervised by staff who are present 24/7 to assist residents with focusing on psychiatric stabilization and recovery.
- Long Run Road PCH offers private rooms for individuals who are unable to live independently, but do not need nursing home or significant medical care.
- Staff provide supervision and assistance with personal self-care tasks such as eating, bathing, dressing, hygiene etc.
- Meal preparation, laundry, medication administration, and light housekeeping are completed by staff.
- Staff are present 24/7 to support residents with adhering to mental and physical health goals.

COST

- Residents have an opportunity to apply for personal care home supplement. This covers utilities, food and furnishings.
- The residents will receive a minimum of \$80 per month in spending money depending on the resident's income.
- Meals are included.

- Service supports can be accessed while living in PCHs, however, referrals to these services need to be made separately from referral to the residential program. These include: Service Coordination (SC), Enhanced Service Coordination (ECSC), Justice Related Services (JRS), Community Treatment Team (CTT), Mobile Transition age Youth (MTAY), and Integrated Dual Disorder Treatment (IDDT). Psychiatric Rehab, and Peer Support.
- Service supports will provide continuous collaboration with the residential provider and other members of the treatment team to assess the strengths and needs of the resident.
 - Service supports will participate in treatment team and discharge planning meetings.

COMPREHENSIVE MENTAL HEALTH PERSONAL CARE HOME (CMHPCH)

ADMISSION CRITERIA

- Designed for individuals 18 years and older; however, the average age is 60.
- CMHPCH can accommodate between 8 and 56 individuals per residential program.
- Orientation/Intake usually starts with a tour of the site and or interview. The intake process is conducted in a manner that identifies current and historical information as well as the person's strengths, needs, abilities, and preferences. Information can be gathered through face to face contact, conference call, or written material.
- Prior to moving in, the following documents are required:
 - A signed psychiatric evaluation stating the current serious mental Illness diagnosis must be current within 1 year of admission into a CMHPCH.
 - A signed physical exam. Must be current within 6 months of admission into a CMHPCH and must be signed by a Physician and not physician's assistant per state guidelines.
 - Laboratory testing for tuberculosis (TB). If the test is positive, then a chest X-Ray is required indicating that there is no active TB. Test results must be current within 6 months of admission into the CMHPCH
 - MA-51 must be signed by doctor 60 days prior to admission.
 - A Diagnostic Medical Evaluation (DME) is required as well as the Preadmission Screening Form to be completed 30 days prior to admission. The Person Care Home Assessment is to be completed by the CMHPCH 15 days after admission.
 - ALL admission documentation must be received before the individual can move in per state guidelines.

LENGTH OF STAY

- Voluntary, Long-Term Housing.
- Recommended length of stay is determined based on the individual's readiness.
- If transition/discharge is necessary, planning from this
 program is done in collaboration with treatment team.
 The process may include a planned discharge, moving
 from one level to another, or obtaining services that are
 not available through MH housing.
- Residents are required to follow lease agreement and abide by program rules. Residents not abiding by the agreement may be subject to a 30-day notice to leave the program. It may be sooner than 30 days based on specific program policies.

PROGRAM DESCRIPTION

- CMHPCHs are enhanced Personal Care Homes (PCH)
 designed to assist individuals with Serious Mental
 Illness (SMI) and physical health conditions. Individuals
 are generally in need of additional mental health
 supports and are typically admitted to CMHPCH after
 an extended stay in a state hospital, community
 psychiatric hospital or other MH housing level.
- CMHPCHs are highly supervised by staff who are present 24/7 to assist residents with focusing on psychiatric stabilization and recovery.
- CMHPCHs offer private rooms in a home like environment for individuals who are unable to live independently, but do not need nursing home or significant medical care.
- Staff provide supervision and assistance with personal self-care tasks such as eating, bathing, dressing, hygiene etc. Meal preparation, laundry, medication administration, and light housekeeping are completed by staff.
- Staff are present 24/7 to support residents with adhering to mental and physical health goals.

COST

- Residents have an opportunity to apply for personal care home supplement. This covers utilities, food and furnishings.
- The residents will receive \$150 per month depending on the resident's income
- Laundry is available on site.
- Residents may need to pay for other added amenities.

- Service supports can be accessed while living in CMHPCHs, however, referrals to these services need to be made separately from referral to the residential program. These include: Service Coordination (SC), Enhanced Service Coordination (ECSC), Justice Related Services (JRS), Community Treatment Team (CTT), Mobile Transition age Youth (MTAY), and Integrated Dual Disorder Treatment (IDDT), Psychiatric Rehab, and Peer Support.
- Service supports will provide continuous collaboration with the residential provider and other members of the treatment team to assess the strengths and needs of the resident.
 - Service supports will participate in treatment team and discharge planning meetings.

SPECIALIZED RESIDENCE (SR)

ADMISSION CRITERIA

- Designed for individuals 18 years and older.
- Specialized Residences (SR) are 3 person homes.
- Orientation/Intake usually starts with a tour of the site and or interview. The intake process is conducted in a manner that identifies current and historical information as well as the person's strengths, needs, abilities, and preferences. Information can be gathered through face to face contact, conference call, or written material.
- Prior to moving in, the following documents are required:
 - A signed psychiatric evaluation stating the current serious mental Illness diagnosis must be current within 1 year of admission into a Specialized Residence (SR).
 - A signed physical exam. Must be current within 6 months of admission into a Specialized Residence (SR) and must be signed by a Physician and not physician's assistant.
 - Laboratory testing for tuberculosis (TB). If the test is positive, then a chest X-Ray is required indicating that there is no active TB. Test results must be current within 6 months of admission into Specialized Residence (SR).
 - ALL admission documentation must be received before the individual can move in.

LENGTH OF STAY

- Voluntary, Long-Term Housing. In some instances, length of stay could be 12 -18 months
- Recommended length of stay is determined based on the individual's readiness.
- If transition/discharge is necessary, planning from this
 program is done in collaboration with treatment team.
 The process may include a planned discharge, moving
 from one level to another, or obtaining services that are
 not available through MH housing.
- Residents are required to follow lease agreement and abide by program rules.
- Residents not abiding by the agreement may be subject to a 30-day notice to leave the program. It may be sooner than 30 days based on specific program policies.

PROGRAM DESCRIPTION

- Specialized Residences (SR) are small 1-3 person homes that provide intensive and enhanced staffing to individuals who have a serious mental health disorder and are in need of a highly supportive environment. In some instances, one- on- one support is provided.
- Individuals are generally admitted to an Specialized Residence from state hospital, community psychiatric hospitals, or other MH housing levels.
- Staff provide supervision and assistance with personal self-care tasks such as eating, bathing, dressing, hygiene etc.
- Meal preparation, laundry, medication administration, and light housekeeping are completed by staff.
- Staff are present 24/7 to support residents with adhering to mental and physical health goals.
- OBH/DHS contracts with Residential Care Services to offer a specialty program at Wetzel House. Wetzel House is a specialized 3- person program designed to assist residents who experience challenges with establishing and sustaining interpersonal relationships in everyday life.

COST

- Specialized Residence (SR) requires 72% of a resident's income (employment, SSI, SSD...) for rent up to the SSI maximum. This covers utilities, food and furnishings.
- Laundry is available on site.
- Residents may need to pay for other added amenities.

- Service supports can be accessed while living in Specialized Residences, however, referrals to these services need to be made separately from referral to the residential program. These include: Service Coordination (SC), Enhanced Service Coordination (ECSC), Justice Related Services (JRS), Community Treatment Team (CTT), Mobile Transition age Youth (MTAY), and Integrated Dual Disorder Treatment (IDDT), Psychiatric Rehab, and Peer Supports.
- Service supports will provide continuous collaboration with the residential provider and other members of the treatment team to assess the strengths and needs of the resident.
- Service supports will participate in treatment team and discharge planning meetings.

LONG TERM STRUCTURED RESIDENCE (LTSR)

ADMISSION CRITERIA

- Designed for individuals 18 years and older.
- Must be on a psychiatric commitment.
- Orientation/Intake usually starts with a tour of the site and or interview. The intake process is conducted in a manner that identifies current and historical information as well as the person's strengths, needs, abilities, and preferences. Information can be gathered through face to face contact, conference call, or written material.
- LTSRs can accommodate 8 to 16 individuals per program.
- Prior to moving in, the following documents are required:
 - A signed psychiatric evaluation stating the current serious mental Illness diagnosis must be current within 1 year of admission into a LTSR.
 - A signed physical exam. Must be current within 6 months of admission into a LTSR and must be signed by a Physician and not physician's assistant per state guidelines.
 - Laboratory testing for tuberculosis (TB). If the test is positive, then a chest X-Ray is required indicating that there is no active TB. Test results must be current within 6 months of admission into the LTSR.
 - ALL admission documentation must be received before the individual can move in per state guidelines.

LENGTH OF STAY

- Short-Term Treatment Residence.
- Recommended length of stay is 12 to 18 months or determined based on the individual's readiness to move to a less restrictive setting.
- Transition/Discharge planning from this program is done
 in collaboration with treatment team. The process may
 include a planned discharge, moving from one level to
 another, or obtaining services that are not available
 through MH residential.
- Residents are expected to follow treatment plan and actively participate in the development of their goals, follow lease agreement, and abide by program rules
- Residents not abiding by the agreement may be subject to a 30-day notice to leave the program. It may be sooner than 30 days based on specific program policy.

PROGRAM DESCRIPTION

- LTSR is highly structured and secured. To qualify for this level of housing, a civil commitment is required.
- This type of housing is designed for individuals experiencing Serious Mental Illness symptoms (SMI) who are ready for discharge from an extended stay at a state hospital, community psychiatric hospital or criminal detention.
- All mental health treatment is provided on site which includes individual and group therapy.
- Residents vary in their skill development from minimal to significant assistance needed to perform their daily tasks such as cooking, cleaning, medication adherence, paying bills, and treatment management.
- LTSR offers private rooms, however in some instances, a person may be required to share a room with one other person.
- Staff are present 24/7 to help residents focus on psychiatric stabilization and recovery
- Some LTSR programs offer specialized services for individuals with forensic backgrounds or geriatric supports for individuals over age 50.

COST

- Cost requires 72% of the person's income up to the SSI maximum. This covers rent, utilities, furnishings, and meals
- Laundry is available on site.
- Residents may need to pay for other added amenities.

- Service supports can be accessed while living in LTSRs, however, referrals to these services need to be made separately from referral to the residential program. These include: Service Coordination (SC), Enhanced Service Coordination (ECSC), Justice Related Services (JRS), Mobile Transition age Youth (MTAY), and Integrated Dual Disorder Treatment (IDDT), Psychiatric Rehab, and Peer Supports.
- Service supports will provide continuous collaboration with the residential provider and other members of the treatment team to assess the strengths and needs of the resident.
 - Service supports will participate in treatment team and discharge planning meetings.