## **Region 4 Community Based Services and Community Build-Up Definitions**

## **Mental Health Services Definitions:**

**Adult Core Service** is the basic out-patient service for people with a serious mental illness or with an addictive disease. It consists of being evaluated by a psychiatrist and a nurse, and the development of a treatment plan. The treatment plan may include a prescription for medication, a schedule of appointments for out-patient counseling, supported employment and home visits by a community service worker. These services are provided by 3 CSBs (Albany, Georgia Pines and Behavioral Health Service of South Georgia (BHSSGA)).

Assertive Community Treatment (ACT), also known as "a hospital without walls," is a full service team which has smaller case loads in order to provide more intense services in the person's community. Region 4 has three ACT Teams operated by the 3 CSBs. The teams are based in Albany, Moultrie and Thomasville and operate in a 30 mile radius of each town. Each team has a caseload of 100 people consisting of individuals with a serious mental illness and who are most at risk of re-hospitalization, or of being homeless or jailed. This is specified in the DOJ Settlement Agreement.

**Case Management (CM) and Community Service Teams (CST)** are other forms of community based care that go to the person in their homes or other places in the community to support their efforts to recovery. Caseloads are usually no more than 30 individuals per staff member. These are additional services that work in concert with the Core Services an individual is receiving and are designed to help the person be successful in the community. The Albany CSB provides both case management and community service teams, whereas BHSSGA CSB only provides case management services.

**Community Support Team (CST)** is an intensive behavioral health service for individuals with severe mental illness who are discharged from a hospital after multiple or extended stays, from multiple discharges from crisis stabilization unit(s), from correctional facilities or other institutional settings, or those leaving institutions who are difficult to engage in treatment. This service is provided to individuals to decrease hospitalizations, incarcerations, emergency room visits, and crisis episodes and increase community tenure/independent functioning; increase time working or with social contacts; and increase personal satisfaction and autonomy. Through active assistance and based on individualized needs, the individual will be engaged in the recovery process.

**Crisis Apartments** provide short-term respite housing and subsequent placement assistance for individuals who are being discharged from CSUs or inpatient facilities but a lack of housing presents a barrier to discharge. These may also be used when individuals have a disruption in their usual housing arrangement and need a temporary place to stay. These would typically have a length of stay of 14 days or less.

**Georgia Crisis and Access Line (GCAL)** is the central point of entry for all behavioral health services in Georgia. GCAL is a 24 hour/7 days a week toll free help-line that directs individuals to personalized services to meet their immediate need.

**Crisis Stabilization Unit (CSU)** will function as emergency receiving facilities and will provide crisis services in a residential setting to rapidly stabilize the behaviors and symptoms of a person in an acute phase of mental illness, or to provide detoxification services to people high on drugs or alcohol. People are usually discharged in 5 days or less and are referred to a Core Provider for out-patient services. There is one CSU in Region 4 operated by the Albany CSB with a capacity of 30 beds and an additional 6 temporary observation chairs. Average occupancy for the first quarter of Fiscal Year 2013 was 94%.

**Behavioral Health Crisis Center (BHCC)** is an enhanced Crisis Stabilization Unit that combines short-term, 24/7, walk-in crisis intervention and counseling services with emergency receiving capability and crisis stabilization beds. Individuals who are experiencing behavioral health crises are provided assessment, short-term crisis counseling, supportive services, and referrals for ongoing care. Staffing includes physicians, registered nurses, licensed clinicians and other behavioral health professionals to provide interventions designed to deescalate crisis situations and prevent out of community treatment or hospitalization. If individuals need a higher level of care, the attached CSU allows for admissions for short-term residential treatment.

**Housing Vouchers** provide supported housing and bridge funding to persons with serious and persistent mental illness as a part of the DOJ Settlement Agreement's target population. Supported Housing will assist such individuals in attaining and maintaining safe and affordable housing and support their integration into the community. The program is designed to provide housing supports for tenants who are deemed ineligible for any other benefits or for whom a HUD voucher is not available.

**Intensive Case Management (ICM)** is a service geared towards adults with mental illness which provides individualized supports and resource coordination that is determined to be essential in assisting a person with improving independent functioning, gaining access to necessary services, and creating an environment that promotes recovery. The focus of the interventions include assisting the individual with identifying service needs; developing strategies and supportive interventions to avoid out-of-home placement or the need for more intensive services; assisting individuals to increase social support networks to ameliorate life stresses resulting from the individual's disability; and coordinating rehabilitative services. It is expected that participation in ICM will promote decreased psychiatric hospitalizations, decreased incarcerations, decreased episodes of homelessness, increased housing stability, and increased participation in employment activities.

**Mobile Crisis Response Service (MCRS)** is a service available for adults and children which provides community-based face-to-face crisis response 24 hours a day, seven days a week to individuals in an active state of crisis. The Mobile Crisis Response Service offers short-term, mental health services for persons-in-need within their community who may have been unable to successfully maintain stability and may be provided in community settings including but not

limited to homes, schools, hospital emergency departments, and social service settings. Interventions include a brief situational assessment; verbal interventions to de-escalate the crisis; assistance in immediate crisis resolution/stabilization; mobilization of natural support systems; referral to alternate services at the appropriate level and post-crisis follow-up to ensure linkage with recommended services.

**Peer Support Services** provide structured activities within a peer support center that promotes socialization, recovery, wellness, self-advocacy, development of natural supports, and maintenance of community living skills. Activities are provided between and among individuals, who have common issues and needs, are consumer motivated, initiated and/or managed, and assist individuals in living as independently as possible. The 3 CSB's and American Work operate Peer Support services in Region 4.

**Psychosocial Rehabilitation-Individual (PSR-I)** services consist of rehabilitative skills building, the personal development of environmental and recovery supports considered essential in improving a person's functioning, learning skills to promote the person's self-access to necessary services and in creating environments that promote recovery and support the emotional and functional improvement of the individual.

**Supported Employment** emphasizes that a rapid job search and placement approach should be prioritized above traditional prevocational training or traditional vocational rehabilitation. Job development, placement and training are for people who, due to the severity of their disabilities, need support to locate, choose, obtain, learn and maintain a job. Services include supports to choose and obtain paid employment in competitive wage, individual-based community jobs, as well as brief training support to learn the specific skills/task necessary to perform and retain a particular job. American Work, LAC and G&B Works provide supported employment services in Region 4.

**Treatment Court Services** serve to pair traditional outpatient behavioral health services with court systems for individuals with severe and persistent mental illness and/or chronic substance abuse issues and chronic histories of legal involvement. Functionally, traditional behavioral health service providers work with Superior or State Courts to craft treatment plans for which the court holds the consumer accountable in lieu of incarceration. In Region 4, the Dougherty County Superior Court partners with the Albany CSB and Albany ARC to operate a treatment court serving individuals who have committed non-violent felony or misdemeanor crimes. In conjunction with Georgia Pines CSB, the State Court Judge in Mitchell County operates a drug court.

**Independent Residential Service (IRS)** provides scheduled residential service to a consumer who requires a low level of residential structure to maintain stable housing, continue with their recovery, and increase self-sufficiency. This residential placement will reflect consumer choice and should be fully integrated in the community in a scattered site individual residence. Similarly, Intensive Residential Service provides around the clock assistance to consumers within a residential setting that assists them to successfully maintain housing stability in the community, continue with their recovery, and increase self-sufficiency.

## **Developmental Disabilities Services Definitions**

**Crisis Support Home** is a residential setting that provides short-term crisis services. The Crisis Respite Home serves up to four (4) individuals who are experiencing an emotional/behavioral change and/or distress that leads to a disruption of essential functions. Placement in a Crisis Respite Home occurs when an individual has not responded to less restrictive crisis interventions.

**Group Homes** are licensed homes that serve up to four (4) individuals with developmental disabilities who require intense levels of residential support. Group Homes provide a range of interventions with a particular focus on training and support in one or more of the following areas: eating and drinking, toileting, personal grooming and health care, dressing, communication, interpersonal relationships, mobility, home management, and use of leisure time.

**Host Homes** are the private home of an individual or a family, whether owned or leased, in which life-sharing, residential supports are provided to one or two adults with developmental disabilities. The adults with developmental disabilities in the host home are not to be related to the occupant owner or lessee by blood or marriage. The home owner or lessee is not an employee of the provider agency, which subcontracts for the Host Home services.

**DD Mobile Crisis Services** involve the dispatching of a Mobile Crisis Team to a crisis location for an individual with developmental disabilities. The Mobile Crisis Team members are responsible for completing comprehensive assessment(s) of the current crisis situation. The Mobile Crisis Team addresses the crisis situation to mitigate any risk to health and safety of the individual and/or others and makes referrals to intensive crisis services or a hospital emergency department if indicated by their assessment.

## Addictive Disease Services Definitions

Adult Behavioral Health Core Services offer a range of outpatient treatment services for adults with mental health and substance abuse disorders. CORE outpatient services help determine a person's immediate needs and are designed to help consumers reach their optimal level of functioning while they continue to live in the community.

**Specialty Services - Ambulatory Substance Abuse Detoxification** is the medical monitoring of the physical process of withdrawal from alcohol or other drugs in an outpatient setting for those individuals with an appropriate level of readiness for behavioral change and level of community/social support. Residential Substance Detoxification is an organized and voluntary service that may be delivered by appropriately trained staff that provides 24-hour per day, 7 day per week supervision, observation and support for individuals during detoxification. Residential detoxification is characterized by its emphasis on medical monitoring and/or on peer/social support, and should reflect a range of residential detoxification service intensities from ASAM (American Society of Addiction Medication).

**Specialty Services Intensive - Residential Treatment Services** are services in which providers are expected to provide a 24/7 clinically managed medium/high intensity services for individuals in a residential setting with a substance use disorder. These services assist in successfully maintaining sobriety while transitioning into recovery. Through skill building programming, individuals can then transition into stable housing in the community while increasing self-sufficiency.