

RRP REFERRAL PROCESS (updated 1-6-15)

Purpose: To ensure that RRP beds are filled in a timely manner, to ensure that priority is given to State Hospital referrals, and to ensure that the goals of residential rehabilitation are met by assisting residents to move to the least restrictive environment available to meet their needs. This process will begin January 2015 and be reviewed after 6 months by all stakeholders (State Hospitals, RRP providers, CSAs).

Basic Referral Process: All referrals for RRP services must be completed using the Statewide RRP application which must be sent to the Core Service Agency (CSA) of the applicant's county of origin. The CSA will review the referral and determine the applicant's eligibility for RRP and the appropriate level of care (Intensive or General). If a vacant RRP bed exists in the county, the CSA will make a referral to that RRP program. If there are no vacant RRP beds in the county, the CSA will assign the applicant to a waiting list for an appropriate bed when available. The CSA will maintain and review the waiting lists on a regular basis. The CSA may also suggest other services available in the public behavioral health system (PBHS).

Out-of-County Referral Process:

The CSA may refer the individual to an out-of-county RRP for the following reasons:

- 1) Consumer preference. The individual requests to live in a particular jurisdiction or their family has relocated to another county and the individual wants to live near them, or,
- 2) Provider Capacity. All RRP agencies in the CSA jurisdiction are at capacity and are not likely to have a vacancy in the foreseeable future, or,
- 3) Provider Capability. All RRP agencies in the CSA jurisdiction lack the special programming to meet the needs of the particular individual referred (ex: deaf, young adult, geriatric, etc)

If a referral is sent out-of-county, all RRP applications and supporting documentation will be sent from the CSA of origin to the CSA being considered for placement.

Priority of Referrals:

Intensive LOC: RRP applicants from State Hospitals that are ready for discharge will be the highest priority for an Intensive level bed. If no State Hospital referrals are ready for placement from the county of origin, a State Hospital referral can be prioritized for a vacancy in another county if the applicant is willing to relocate. If no State Hospital referrals are ready or willing to accept an Intensive RRP placement, a Community referral from the county of origin will be considered for an Intensive level bed. CSAs can establish other priority categories for Community referrals (ex: HIU, mental health court, homeless, etc). If no higher priority referrals are ready for placement, a CSA can consider an applicant on the Community waiting list for Intensive level bed.

General LOC: Any vacant General level bed will be prioritized for RRP residents currently living in an Intensive level bed within the RRP program, or the county of origin, who are appropriate for the lower level of care. If no Intensive level residents are ready for graduation to a General level bed, the CSA will consider referrals from the Community waiting lists for General level.

Expedited Process for sending referrals to new vacancies:

RRP programs are responsible to notify the CSA at a minimum of once weekly of any current or pending vacancies. The following timeline addresses prompt notification of vacancies and creates structure for prioritizing referrals:

1. RRP providers will notify the local CSA of actual or pending vacancies upon knowledge of the vacancy's existence (pending is defined as up to 4 weeks in advance).

2. Within two (2) business days of notification of the vacancy, the CSA will share information about the vacancy and seek referrals from any and all State Hospitals, prioritizing referrals from the county of origin in any State Hospital.
3. Within four (4) business days of notification of the vacancy to the CSA, State Hospitals will send a referral to the CSA, or notify the CSA of any referrals currently on the waiting lists that are ready for discharge. CSAs will wait the full four (4) business days before sending a Community referral to an RRP provider so that State Hospitals have an adequate opportunity to send a referral. Upon receipt of notification from a State Hospital that an individual is ready for discharge, the CSA can send the RRP referral to a provider, without having to wait the full four (4) days. The CSA will then notify the State Hospital contacts that a referral has been sent.
4. If an RRP provider has not received a State Hospital referral after four (4) business days of the notification of the vacancy, the provider may request a Community referral from the CSA. If no Community referrals are available or ready from the county of origin, the CSA will send a request to all other CSAs seeking out-of-county Community referrals for those willing to relocate.
5. If after five (5) business days of the notification of a vacancy, the RRP provider has not received any referral from the CSA, the provider may request a Community referral directly from any other CSA. If another CSA has a Community referral with an applicant willing to relocate, that CSA will send the referral to the CSA in the jurisdiction where the vacancy exists and simultaneously send the referral to the provider with the vacancy. The CSA sending the referral will email both the receiving CSA and RRP provider when they send the referral paperwork.
6. An “actual vacancy” is a higher priority than a “pending vacancy,” as noted in #1 above. If there are no State Hospital referrals ready for placement, the CSA can send a Community referral for any RRP vacancy after four (4) business days, but if the vacancy is a “pending vacancy” that will not be available for up to 4 weeks, the CSA will still consider State Hospital referrals if they become available prior to a Community referral being considered for placement.

Attachments:

- 1) Social Work contacts info for all 5 State Hospitals
 - Spring Grove Hospital Center
 - Springfield Hospital Center
 - Clifton T Perkins Hospital Center
 - Eastern Shore Hospital Center
 - Thomas B Finan Center
- 2) Residential Specialists contact info for all 19 CSA jurisdictions