

Jasper Mountain Campus: 541-747-1235 SAFE Center Campus: 541-741-7402

Fax: 541-583-4433 jaspermountain.org/

## Requirements for a Residential Referral

Thank you for your interest in our programs! We are currently working from a waiting pool. We make admission determinations based on acuity of symptoms, lack of system supports, and fit with our current milieu; we do not admit on a first-come, first-served basis. Please note, if a client is approved for the waitlist, admission is not guaranteed. The client must continue to meet criteria for this level of care at the time of an opening.

To complete the referral, our Admissions Team requires the following:

- Team Contact Info: Provide email address and phone number for the client's team members and guardians.
  - o If records are being sent from a hospital/facility/etc., a face sheet should be submitted.
- Funding: Please send pictures of the front and back of the insurance card/s.
  - o An actual copy of the card(s) is required by law before admission.
- **Psychiatric:** Psychiatric assessment performed within last 60 days. According to the Oregon Health Authority, a psychiatrist (MD or DO) must certify the need for Psychiatric Residential Treatment Services (PRTS), including the following:
  - o Ambulatory care resources available in the community do not meet the treatment needs of the beneficiary.
  - o Proper treatment of the beneficiary's psychiatric condition requires services on an inpatient basis under the direction of a physician.
  - The services can reasonably be expected to improve the beneficiary's condition or prevent further regression, so that the services will no longer be needed.
- Cognitive Functioning: Cognitive assessment or similar records documenting client's cognitive ability (such as psychological evaluation, WISC, etc.)
- Academic Records: Please submit the following records, if applicable:
  - Actual and functioning grade level
  - o Behaviors in classroom and with peers, any suspensions/expulsions
  - o 504, IEP, eligibility paperwork, and signed initial consent for SPED services
  - o Behavior support or safety plans, disability reports
- **Treatment Records:** Records from previous treatment including outpatient and hospital or other residential stays, including the following medical records:
  - Current diagnoses
  - Current and past medications
  - Health issues and/or allergies
- Placement History: List of dates and locations client has lived, including:
  - o Cities (not specific addresses) / number of times moved
  - Out-of-home placements: foster/relative care, respite, crisis stays, hospitalizations, other facilities, etc.
- Custodial Documentation: Legal documentation must be provided if applicable. Legal guardians will have access to the client and records unless guardians' rights are legally terminated.

Referral records can be sent to the Admissions Specialist via fax: 541-583-4433. If you have questions about your referral, email the Admissions Specialist. For more information, see <a href="https://jaspermountain.org/referral-information/">https://jaspermountain.org/referral-information/</a>. Given the status of our waiting pool, you may want to explore other agencies throughout Oregon that work with children. The Oregon Alliance of Children's Programs has information on these programs and can be accessed at <a href="https://www.oregonalliance.org/our-members">https://www.oregonalliance.org/our-members</a>.