	KEMPER'S RECOMMENDATIONS FOR PROGRAM SERVICES (page 41)					
•	Service	Stay	Consultative Results			
1	PHF or other inpatient psychiatric care See attached list of facilities	Ave. 3-5 days Max. 30 days	PHF has most restrictive/expensive staffing needs			
2	Crisis Residential Treatment (CRT)	3 mos. maximum	RQMC "shovel-ready" plan would incorporate CSU &CRT with crisis access (walk-in) as well.			
3	Crisis Stabilization Unit (CSU)	24 hrs. pending legislation to extend 72 hrs.	Types of Involuntary MH Holds 5150 - 72 hours 5250 - + 14 days 5270 - + 30 days			
4	Expanded outreach 3 Mobile Outreach Teams- n. County, s. County, Inland	on call	 Expand MOPS: Coordinate MPS & RQMC services More teams 2 people team (sheriff tech & MH) 			
5	Outlying/Remote areas of county	NOTE: Family Resource Centers (FRC) exist in 10 communities (3-way funding)	 Expand mission & funding of FRCs Coordinate services (ex. who serves client?) Better collaboration between clinics & MH Require compliance (ex. Once hospitalized clinic may not take client back) Provide room/equipment for telepsych at each location Serve all clients, i.e. not just MediCal Use Measure B funds for expansion of services 			
6	Expand support programs & wellness efforts	Rx management Employment services Family support	 Common definition of "wellness" Expand existing RQMC TAY services to adult care Workshops for employers/physicians to educate & reduce stigma 			

•	Service	Stay	Consultative Results
7	Day Treatment Check definition	 Licensed BH treatment outpatient care MD supervision written client plan 	Required: 6 hours/day RQMC uses "Group Rehab" model
8	Supportive Housing		RQMC has 10 residences
9	Partial hospital care Rehabilitative care Board and Care		NOTE: 25+ individuals = \$2.1M in psych hospitals NEED: Conservatorship options
10	Expansion SUDT		"Organized Delivery System" (ODS) in progress which will increase funding to provide more services
11	5-Year Plan Develop continuum of care		



Behavioral Health Facilities

Type of Facility	Definition
Psychiatric Health Facility (PHF)	A 16-bed, 24-hour licensed acute non-medical facility, certified by the Department of Health Care Services. The facility provides an environment for voluntary and involuntary clients needing acute care for mental illness to receive treatment. Services provided include evaluation and stabilization of acute psychiatric crisis, 24-hour nursing care and medication monitoring, and psychiatric consultation. The average length of stay is three to five days.
Crisis Residential Facility	24 hour licensed facility that provides alternatives to acute hospitalization for individuals experiencing an acute psychiatric episode or crisis. The length of stay is no longer than three months.
Crisis Stabilization Unit	24 hour licensed facility that provides crisis stabilization for clients experiencing a mental health crisis. The program offers crisis stabilization for up to 24-hours.
Mental Health Rehabilitation Center MHR.C	24 hour licensed facility that provides intensive support and rehabilitation services. The program is designed to assist persons, 18 years or older, who have a mental illness and need placement in a mental health facility to develop the skills to become self—sufficient and capable of increasing levels of independent functioning. Services provided include housing, evaluation, observation, diagnosis, rehabilitation, mental health treatment, and psychiatric consultation. The average length of stay is from three to six months.
Adult Residential Facility / Board and Care	24 hour licensed facility that provides that is licensed as a social rehabilitation facility or community care facility. The program must be certified as a social rehabilitation program as either a transitional residential treatment program or long term residential treatment program. The program offers intensive residential treatment, supported independent living, mental health services, and case management.
Special Treatment Programs in Skilled Nursing Facilities	24 hour licensed facility that serves clients who have a chronic psychiatric impairment and whose adaptive functioning is moderately impaired. Services are provided to persons having special needs in one or more of the following areas: self-help skills, behavioral adjustment, and interpersonal relationships. They also include pre-vocational preparation and pre-release planning.

By: Jan Mc Ganty