

# CATALYST

## — LIFE SERVICES —

### CLIENT HANDBOOK

**The Center for Individual  
& Family Services**  
741 Scholl Road  
Mansfield, Ohio 44907  
419-756-1717  
Fax 419-756-5832

**The Rehab Center  
Progress Industries**  
270 Sterkel Blvd.  
Mansfield, Ohio 44907  
419-756-1133  
Fax 419-756-6544

**Helpline/Warmline**  
419-522-HELP (4357)

**Forensic Diagnostic Center**  
741 Scholl Rd.  
Mansfield, Ohio 44907  
419-774-5970  
Fax 419-524-1852

**New Beginnings Recovery**  
711 Scholl Rd.  
Mansfield, Ohio 44907  
419-526-6102  
Fax 419-526-2015

**Shelby Site**  
31 E. Main St., Ste. 3  
Shelby, Ohio 44875  
419-342-2327  
Fax 419-342-2384

**Oasis Club**  
87 East 1st St  
Mansfield, Ohio 44902  
419-522-6443

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# CATALYST

— LIFE SERVICES —

*An agent of change for body, mind and spirit*

THE REHAB CENTER  
CHILD & ADOLESCENT  
MENTAL HEALTH  
& CRISIS SERVICES

THE CENTER ADULT  
MENTAL HEALTH  
& CRISIS SERVICES

NEW BEGINNINGS  
ALCOHOL & DRUG  
TREATMENT SERVICES

AUDIOLOGY SERVICES

COMMUNITY CENTER  
FOR THE DEAF &  
HARD-OF-HEARING

DISTRICT V FORENSIC  
DIAGNOSTIC CENTER

PROGRESS INDUSTRIES

PRECISE SERVICES

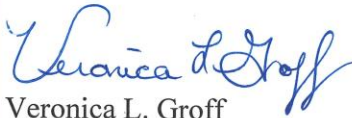
OASIS PEER CENTER

To the Person Who is Considering Obtaining Care at Catalyst Life Services:

No matter where you are in life, there is always room for improvement. At Catalyst Life Services, we serve people at every stage of life. We work toward the total health of ALL the people in our region, in ALL parts of their lives; body, mind and spirit. We serve as an agent of change to help our clients lead better, more fulfilling lives.

Congratulations for taking a positive step toward dealing with your current life situation. If there is anything that I can assist you with in your journey forward, please call me at (419)774-6705.

Sincerely,



Veronica L. Groff  
President & CEO

741 Scholl Road  
Mansfield, OH 44907  
419-756-1717

VERONICA L. GROFF  
PRESIDENT & CEO



[www.catalystlifeservices.org](http://www.catalystlifeservices.org)



***Mission Statement***  
**Catalyst Life Services is an Agent of Change,  
Guiding the People We Serve to Lead More Fulfilling Lives**

*Overview*

The Center is a Comprehensive Mental Health, Rehabilitative, and Alcohol and Drug Addiction Treatment Agency.

*We provide services for four distinct populations*

- Crisis and Access services for adults with emotional or psychiatric crisis
- Adults suffering from a severe form of mental illness, such as Bipolar Disorder and Schizophrenia.
- Children with serious emotional disturbances. These are children under the age of eighteen with mental illness such as Bipolar Disorder, Attention Deficit Hyperactivity Disorder, and Schizophrenia.
- Drug and Alcohol treatment services for adults with chemical dependency or abuse issues.

*Admission Rules*

- Financial forms must be completed to determine the client's service fee and sliding fee scale.
- The client must sign all necessary forms such as Consent for Treatment, permission to submit billing.
- The client will be assessed as to their need for services and will be asked to take part in the development of a service plan for them.
- The client must cooperate in his/her treatment.
- The client must not be threatening or abusive to staff or others.

**WELCOME TO CATALYST LIFE SERVICES!!**  
**Things you need to know about Catalyst Life Services**  
**and the services you will receive.**

1. Your input as to the quality and satisfaction with the services you receive is very important to us. You may be asked to fill out a satisfaction survey, both while you are receiving services and after you have completed your services here. This information helps us evaluate our programs to be sure we are meeting your needs. Please take the time to complete these surveys and return them to us. Catalyst Life Services offers a wide variety of services and activities designed to assist clients in meeting their treatment goals. The staff at Catalyst Life Services will work with you to achieve the goals that you set for your treatment. This can best be accomplished through your attendance and participation in all aspects of your treatment. Please keep your scheduled appointments, as this is vital to your treatment. If you must cancel, please give us 24 hours notice.
2. The agency's normal business hours are Monday through Thursday from 8:00 AM to 8:00 PM and Fridays from 8:00 AM to 5:00 PM. Access to Crisis Services after hours can be reached by calling the Helpline at 419-522-HELP (419-522-4357) 24 hours a day, 7 days a week. Please do not hesitate to call if you need assistance. The agency is closed on Thanksgiving Day, Christmas Day, New Years Day, Martin Luther King Jr. Day, Memorial Day, Fourth of July, and Labor Day. Helpline is available on all holidays and weekends.
3. The agency does not make use of physical restraints or seclusion measures. The agency will notify the Mansfield Police Department if there is sufficient reason to believe that someone is a threat to physically harm themselves or others while on agency property or in an agency facility.
4. Catalyst Life Services and all its facilities are non-smoking environments. Smoking is limited to the designated areas outdoors.
5. No drugs are to be brought onto any agency property or into any agency facility unless they are prescribed medication to be used by that individual. Legal drugs are permitted on site only if they are kept in a safe, restricted manner. They are not to be shared or given away to others. Any illegal possession, use or sale of drugs on the agency property or in an agency facility will result in notification of the Mansfield Police Department and charges being filed.
6. Catalyst Life Services has a "zero tolerance" policy regarding weapons brought onto any agency property or into any agency facility. Weapons will be confiscated and disposed of and, if necessary, the Mansfield Police will be notified.
7. As you begin services here, you will be assigned a lead team member. This will be the individual responsible for assisting in the coordination of your care both inside the agency and in the community, if necessary and agreed upon. This person will assist in the development and the update of your treatment plan and will be meeting with you on a regular basis. Depending on the services you are receiving, this person could be your nurse, your counselor, your Community Psychiatric Support Treatment (CPST) provider /Case Manager or residential staff.

8. You may be involved in only one service, or you may be involved in several services. Each service has its own criteria for admission to that service and criteria for discharge from that service. Your lead team member will assist you in any transition from or between services. Our services are provided through a team concept. Treatment teams meet on a regular basis to provide quality client care. If you have questions about who is on your treatment team, please ask any staff from whom you receive services.
9. The agency regularly conducts various safety drills, such as fire drills, tornado drills, etc. Should this occur while you are at the main building or any of the facilities, you will be directed by staff on what to do. Evacuation routes and safe areas to go to during a tornado are posted throughout the buildings. It is very important that you follow the staff instructions and go quickly to any area that the staff directs you to, even if you suspect that this is only a drill. These drills are conducted to assure that all staff and clients can respond quickly to any emergency situation.
10. The agency has first aid kits throughout agency sites. The poison control number is 1-800-222-1222.
11. Depending on the services you will be receiving while at Catalyst Life Services, you will receive a copy of any rules or regulations about that particular service from your service provider in that program. Feel free to ask any questions that you may have.
12. Risks to the person served: When participating in treatment, persons served may experience an increase in symptoms and distress at the onset. Clinicians and staff will work with persons served to identify potential risks and ways to manage increased symptoms through treatment planning. A crisis plan may be developed in order to ensure client safety and well-being at all times.
13. Rules & Expectations of the Person Served: In some programs within the agency, certain requirements are needed in order to qualify for those specific services. In each of the specific programs, staff meet with persons served to discuss the program rules, expectations, restrictions, possible consequences, how to reinstate privileges and discharge criteria from the program. For information about specific programs, please ask staff for further details.
14. Purpose of the Assessment: The diagnostic assessment is the process by which staff help identify services that may be appropriate for persons served. Historical information about the person served is gathered, including medical, mental health, developmental, educational, occupational and other pertinent information. Once this information is collected, the clinician can assist persons served with identifying the services that may be beneficial for the symptomology presented. Referrals are then made for those services deemed necessary to help stabilize the symptoms. Once the assessment is complete, the Individual Service Plan (ISP) is developed. The ISP incorporates the goal of the person served who is requesting services and what will be alleviated when services are terminated. The goal is written in the language of the person served, and the objective and interventions are developed in conjunction with the person served and clinician. At times, staff may use incentives as a way to motivate persons served to reach their stated goals. In cases where the person

served is ordered by court or probation officers to attend assessments and follow required treatment recommendations, releases of information will need to be signed to allow staff to communicate on behalf of the person served and coordinate care.

**We want your experience here to be a positive one. Please do not hesitate to ask any questions or voice any concerns you may have. Thank you.**

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.**

Catalyst Life Services is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. If you have questions about any part of this notice or if you want more information about the privacy practices at Catalyst Life Services, please contact:

Denise Carson  
Performance Improvement Director  
741 Scholl Road  
Mansfield, Ohio 44907  
419-756-1717

*Effective Date of This Notice: October 1, 2002/Revised April 21, 2010/Revised September 23, 2013/Revised July 16, 2014*

**I. How Catalyst Life Services may Use or Disclose Your Health Information**

Catalyst Life Services collects health information from you and stores it in a chart and on a computer. This is your medical record. The medical record is the property of Catalyst Life Services, but the information in the medical record belongs to you. Catalyst Life Services protects the privacy of your health information. The law permits Catalyst Life Services to use or disclose your health information for the following purposes:

**1. Treatment.** Your personal health information will be used by Catalyst Life Services clinicians to assist in the assessment, diagnosis and treatment of the condition for which you have sought services. If you are being seen by more than one clinician at Catalyst Life Services, or are a part of a program for which you will have a treatment team, then those clinicians may consult and discuss with each other information pertaining to your treatment here at Catalyst Life Services. Use of any of your Personal Health Information (PHI) for treatment at Catalyst Life Services is limited to only those staff with a need to know. An example of this type of information sharing would include your counselor discussing your medications with your Psychiatrist. You may request that your information be restricted from specific staff. By Ohio law, Catalyst Life Services can share PHI with any State psychiatric hospital, without obtaining your authorization to do so, should you be admitted to such a hospital.



- 2. Payment.** PHI cannot be released to any third-party payer without your written authorization. This is Ohio law.
- 3. Regular Health Care Operations.** Catalyst Life Services may disclose your PHI to regulatory, funding and oversight bodies in the course of conducting the ongoing health care operations of the agency. An example of this would be when The Ohio Department of Mental Health & Addiction Services reviews the agency in order for Catalyst Life Services to maintain the necessary certification by the State of Ohio to provide services. They will request to review client records as a part of their review. They will be asked to sign a confidentiality agreement that they will regard all PHI that they review as confidential. Another example would be when Catalyst Life Services conducts an internal quality review, as required by law or accreditation bodies. Designated Catalyst Life Services staff who may not be a member of your treatment team will review your chart to assure that the agency is following all the necessary laws and to monitor that you are receiving quality services. That staff is bound by the agency's confidentiality policy in the use of the information they review. The same rule applies to staff that may be involved in data entry procedures, compiling reports, filing, etc. All staff sign a confidentiality agreement at hiring and staff is limited to what PHI they have access to based on their job duties. This is both Ohio law and Federal law.
- 4. Information provided to you.** You have the right to review and request copies of your medical record. The actual medical record itself belongs to the agency, but the information in it belongs to you. You will receive information on how to access your medical record during your orientation. There are exceptions, as noted in Ohio law, where Catalyst Life Services can withhold documentation in the file from you. This would be if the clinician feels that in their professional opinion, having that information would be an eminent threat to you. Please see your Client Rights Procedures in this Handbook or in your Client Rights Handbook for further clarification.
- 5. Directory.** Catalyst Life Services does not maintain a directory.
- 6. Notification and communication with family.** Under Ohio law, we will not release any information or communicate with a family member without the written authorization of the client.
- 7. Required by law.** As required by Ohio law, we may use and disclose your health information. An example of this would be if we received a court order signed by a judge to release your records to the court. We would first attempt to obtain an authorization from you to release the requested records, but may be required by law to release them without your authorization. Another example would be if you were to be probated to a State psychiatric hospital. Catalyst Life Services is required by Ohio law to provide the requested PHI to the prosecuting attorney or the Mental Health Board attorney pursuant to these proceedings.
- 8. Public health.** As required by Ohio law, we may disclose your PHI to public health authorities for purposes related to reporting child abuse and/or neglect. An example would be if during a counseling session, you revealed that you had physically, sexually or emotionally abused a child. Your counselor would be required by Ohio law to report that information to the appropriate County Children's Services Board.

- 9. Health oversight activities.** We may disclose your health information to health agencies during the course of audits, investigations, inspections, licensure and other proceedings. Another example would be information used in the yearly compliance audit required by the State of Ohio in which client charts and billings are reviewed. All auditors are required to sign confidentiality agreements that any PHI viewed will remain confidential. This is Ohio law.
- 10. Judicial and administrative proceedings.** We may disclose your health information in the course of any administrative or judicial proceeding upon written order by a judge to do so. An example would be if your counselor were subpoenaed to testify at a trial or hearing involving you. The counselor will first attempt to obtain a written authorization from you to release information in the form of testimony. However, if you decline the authorization, the counselor may be ordered by the judge to answer questions. This is Ohio law.
- 11. Law enforcement.** We may disclose your PHI to law enforcement when complying with a court order signed by a judge directing that such information be provided to law enforcement. Catalyst Life Services will first attempt to obtain a written authorization from you that would allow for the release of the requested records. This is Ohio law.
- 12. Deceased person information.** We may disclose your PHI to coroners, upon written request by the coroner in an effort to determine the cause of death, or executors of the estate, for purposes of settling the estate. An executor must produce a court order declaring them to be the executor of the deceased estate. This is Ohio law.
- 13. Organ donation.** Not applicable to Catalyst Life Services.
- 14. Research.** By Ohio Law, we cannot release any of your personal health information to be included in any research project without the written consent of the client, legal guardian or parent.
- 15. Public safety.** We may disclose your PHI to appropriate persons in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person, a particular structure, or the general public. An example of this would be if you were to tell your psychiatrist that you intended to harm a specific individual and that you had the capability, means and intention to carry that out. The psychiatrist, by Ohio law, is obligated to notify that individual of the threat against them.
- 16. Specialized government functions.** Not applicable to Catalyst Life Services.
- 17. Worker's compensation.** We may disclose your health information as necessary to comply with worker's compensation laws, only with your written authorization. This is Ohio law.
- 18. Continuity of Care.** Ohio law allows disclosure of information to certain hospitals and providers of treatment and health services if the purpose of the exchange is to facilitate continuity of care for a patient. Before information is disclosed, attempts will be made to obtain your consent.
- 19. Marketing.** Disclosures of your PHI for marketing purposes requires your written authorization. This agency does not use PHI in marketing.
- 20. Sale of PHI.** Disclosures of PHI for sale requires your written authorization. This agency does not sell PHI.
- 21. Genetic Information.** Use or disclosure of genetic information of an individual and their family members is prohibited. Not applicable to Catalyst Life Services.

## **II. When Catalyst Life Services May Not Use or Disclose Your Health Information**

Except as described in this Notice of Privacy Practices, Catalyst Life Services will not use or disclose your health information without your written authorization. If you do authorize Catalyst Life Services to use or disclose your health information for another purpose, you may revoke your authorization in writing at any time.

## **III. Your Health Information Rights**

- 1.** You have the right to request restrictions on certain uses and disclosures of your health information. Catalyst Life Services is not required to agree to the restriction that you requested.
- 2.** You have the right to receive your health information through a reasonable alternative means or at an alternative location.
- 3.** You have the right to inspect and copy your health information.
- 4.** You have a right to request that Catalyst Life Services amend your health information that is incorrect or incomplete. Catalyst Life Services is not required to change your health information and will provide you with information about Catalyst Life Services' denial and how you can disagree with the denial.
- 5.** You have a right to receive an accounting of disclosures of your health information made by Catalyst Life Services, except that Catalyst Life Services does not have to account for the disclosures described in parts 1) treatment, 2) payment, 3) health care operations, 4) information provided to you, 5) directory listings and 6) certain government functions of Section I of this Notice of Privacy Practices or any disclosures made with your express written authorization.
- 6.** You have a right to a paper copy of this Notice of Privacy Practices.
- 7.** You have the right to opt out of fundraising communications.
- 8.** You have the right to be notified of a breach of PHI.
- 9.** You have the right to prevent PHI from being transmitted to a health care plan if you have paid out of pocket for the service.

If you would like to have a more detailed explanation of these rights or if you would like to exercise one or more of these rights, contact:

Denise Carson  
Performance Improvement Director  
Catalyst Life Services  
741 Scholl Rd.  
Mansfield, Ohio, 44907  
419-756-1717

#### **IV. Changes to this Notice of Privacy Practices**

Catalyst Life Services reserves the right to amend this Notice of Privacy Practices at any time in the future. Until such amendment is made, Catalyst Life Services is required by law to comply with this Notice.

Notice of any revisions will be made available in writing at each agency site.

#### **V. Complaints**

Complaints about this Notice of Privacy Practices or how Catalyst Life Services handles your personal health information should be directed to:

Denise Carson  
Performance Improvement Director  
419-756-1717

Catalyst Life Services will follow the Client Rights and Grievance procedure when receiving and investigating any complaints related to personal health information. This includes the right to freedom from retaliation or retributions to the individual filing the complaint.

If you are not satisfied with the manner in which this office handles a complaint, you may submit a formal complaint to:

Department of Health and Human Services  
Office for Civil Rights  
233 N. Michigan Avenue, Suite 240  
Chicago, Illinois 60601  
800-368-1019  
Hearing Impaired TDD Line 800-537-7697  
[ORCmail@hhs.gov](mailto:ORCmail@hhs.gov)

You may also address your complaint to one of the regional Offices for Civil Rights. A list of these offices can be found online at:

[www.hhs.gov/ocr/regmail.html](http://www.hhs.gov/ocr/regmail.html)

## CODE OF ETHICS

**It is the policy of the agency to establish and communicate a Code of Ethics that governs professional work-related behavior for all staff, students, and volunteers. This policy is posted at all sites in clear view for all staff, consumers, and other stakeholders. In addition, it is reviewed with each staff during their evaluation annually and is a part of a new staff member's orientation process. Peer Recovery Support employees are to follow the “Code of Ethics/Conduct for Peer Recovery Support”. Allegations of violations of the ethical codes will be dealt with in accordance with the agency’s disciplinary policy.**

### *The Ethical Client Relationship*

In a situation where an ethical dilemma exists always consult your supervisor.

In order to support the Mission Statement there is the expectation that the Professional will:

- a. prioritize the needs of the clients before the needs of the organization or personal needs;
- b. develop insight into your own strengths and weaknesses in order to balance the priorities of your responsibilities and to ensure your ability to serve our clients;
- c. uphold the client’s rights (see client’s rights policy), protect the privacy of people by maintaining the confidentiality of the information they share;
- d. have an attitude of collaboration;
- e. behave within the strictest ethical standards of the various professions of staff, including, but not limited to, representing yourself as competent only within the boundaries of your education, training, license, certification, consultation received, supervised experience, or other professional experience;
- f. avoid any action that may give even the perception of a conflict of interest in which a staff member would benefit personally from your relationship with a client, particularly with regard to sexual and financial matters. In a situation where a dual relationship between a staff and a client is unavoidable, you shall consult with your supervisor and make every effort to protect the client’s welfare;
- g. not accept or give gifts, money, or gratuities for personal benefit;
- h. provide a standard of care, regardless of the individual’s ability to pay, that assures that clients will receive benefit and will be free from harm;
- i. encourage an environment of wellness for all client’s;
- j. continue to pursue individual excellence in your respective area of responsibility (this implies taking personal responsibility for your continued learning process);
- k. continue professionalism by respecting personal property of clients, visitors, personnel and property owned by the organization; and
- l. sign as a witness to documents only if you witnessed the document being signed.

### *The Ethical Colleagues/Community Relationships*

In order to support the Mission Statement there is the expectation that the Professional will:

- a. represent the agency in a positive manner;
- b. encourage a language of respect in all interactions, understand that you represent the agency every time you make a phone call, meet with clients, meet with other agencies, and meet with peers;
- c. have an attitude of collaboration;
- d. go directly to a colleague if there is an issue, and involve your supervisor when further resolution is needed;
- e. follow through when you have identified that you will do something. If you cannot, reassess how to deal with the need;
- f. return phone calls;
- g. attend meetings on time;
- h. work with colleagues and the community to provide continuity of care for our clients;
- i. promote the team approach within the community as well as within the agency;
- j. develop insight into your own strengths and weaknesses in order to balance the priorities of your responsibilities and to ensure your ability to work with your colleagues;
- k. continue to pursue individual excellence in your respective area of responsibility (this implies taking personal responsibility for your continued learning process); and
- l. take responsibility for what you post or express online and be sure that social media activities do not reflect negatively on the agency or interfere with your position at the agency.

### ***The Ethical Supervisory Relationship***

In order to support the Mission Statement there is the expectation that the Professional Supervisor will:

- a. represent the agency to their staff in a positive, respectful and ethical manner;
- b. represent the agency by upholding current Policies and Procedures, reviewing, and advocating for change of obsolete Policies and Procedures;
- c. follow through when you have identified that you will do something. If you cannot, reassess how to deal with the need;
- d. provide staff with regular supervision that is based on the staff person's needs;
- e. model the ability to go directly to someone if there is an issue. Require this of staff, act responsibly if mediation is needed, and follow through with consultation with Human Resources when required;
- f. schedule and attend meetings on time;
- g. listen to staff and include their feedback in development and general functioning of the area supervised;
- h. clearly represent the area supervised as both the leader and advocate;
- i. avoid any action that may give even the perception of a conflict of interest in

- which a supervisor would benefit personally from their relationship with a supervisee, particularly with regard to sexual and financial matters;
- j. work with staff to develop each individual's strengths, goals and job skills;
  - k. continue to pursue individual excellence in your respective area of responsibility (this implies taking personal responsibility for your continued learning process);
  - l. encourage an environment of wellness for all staff; and
  - m. prohibit personal fundraising or collections for any purpose on the premises of the agency without the specific approval of staff's supervisor, other than for gifts for staff who are ill or celebrating a special event. The agency holds no responsibility for these activities.

### ***The Ethical Agency***

In order to support the Mission Statement there is the expectation that the Professional Agency will:

- a. prioritize resources to serve people who are in the greatest need based on their symptoms;
- b. provide care for the client in the least restrictive, most appropriate environment;
- c. maintain an open, respectful relationship that allows for direct input;
- d. have an attitude of collaboration;
- e. adhere to all regulations/agreements established by our regulatory/accrediting bodies and contractual relationships;
- f. exhibit a commitment to agency excellence in all service areas;
- g. maintain marketing activities that are consistent with our agency mission and vision;
- h. acknowledge the individual's need to take pride in their work, and to assure it is recognized by others;
- i. encourage an environment of wellness for all; and
- j. recognize that each of us is openly accountable to ourselves, our team members, the agency, and our stakeholders.

### **Advance Directive Fact Sheet**

There are 2 kinds of Advance Directives that people use to tell others ahead of time what mental health treatment they want, when they can't speak for themselves. These directives empower you to name the **agent**, a family member or trusted friend, to make health care decisions when an attending physician determines that you have lost the ability to make informed health care decisions for yourself. These directives are (1) the Durable Power of Attorney for Health Care, and (2) the Declaration for Mental Health Treatment.

The Durable Power of Attorney for Health Care is a legal document that lets you tell others what you want for your medical treatment, or for your mental health treatment, or for both your medical treatment and mental health treatment. You can always change or cancel this Advance Directive.

The Declaration for Mental Health Treatment is a legal document that lets you tell others what you want for your mental health treatment only. For persons who have been diagnosed with mental illness, this document addresses issues that are specific to mental health and gives you more control over your mental health treatment if you can't tell others what you want. You cannot change or cancel this Advance Directive if a doctor or one other mental health professional says you are not able to make decisions.

An Advance Directive for Health Care may include instructions to your agent as to what you want done, where you want to go for treatment, who you wish to see or not see, and other important issues related to your treatment.

The Advance Directive may address such issues as:

- Choice of where treatment is provided,
- Preferences about types of treatment (e.g., for or against electroconvulsive treatment),
- Choice of medications you may or may not want to take,
- Choices about the temporary care of children,
- Choices about discharge plans,
- Who should be notified.

Developing either or both of these Advance Directives allows you the opportunity to openly discuss signs and symptoms of your illness, as well as treatment preferences. When properly planned and implemented, it is a natural fit with empowerment and recovery.

**For assistance in completing the *Advance Directives Forms* please see a member of your Treatment Team or Financial Registration.**

#### **CIVIL RIGHTS NONDISCRIMINATION POLICY NOTICE**

It is the policy of the agency to treat all clients without regard to race, color, national origin, disability or physical situation, age, gender or sex, religion, ethnicity or cultural orientation, sexual orientation, mental developmental disability or psychological characteristics, social supports, spiritual beliefs, or any person with HIV or AIDS Related Complex. There is no distinction in eligibility for, or in the manner of providing client services. All services are available without distinction to all client and visitors regardless of race, color, national origin, disability or physical situation, age, gender or sex, religion, ethnicity or cultural orientation, sexual orientation, mental developmental disability or psychological characteristics, social supports, spiritual beliefs, or any person with HIV or AIDS Related Complex. All persons and organizations having occasion either to refer clients for services or to recommend the agency are advised to do so without regard to the potential client's race, color, national origin, disability or physical situation, age, gender or sex, religion, ethnicity or cultural



orientation, sexual orientation, mental developmental disability or psychological characteristics, social supports, spiritual beliefs, or any person with HIV or AIDS Related Complex.

The person designated to coordinate compliance with Section 504 or the Rehabilitation Act of 1973 (Nondiscrimination Against the Handicapped) is the Section 504 Coordinator who can be reached at 419-774-6725.

Any person who feels they have been discriminated against because of their race, color, national origin, disability or physical situation, age, gender or sex, religion, ethnicity or cultural orientation, sexual orientation, mental developmental disability or psychological characteristics, social supports, spiritual beliefs, or any person with HIV or AIDS Related Complex has the right to file a complaint to:

Civil Rights Coordinator  
Richland County Board of Mental Health and Recovery Services  
87 East First Street, Suite L  
Mansfield, Ohio 44902-2060  
419-774-5811

**Additional assistance in filing a complaint may be obtained from:**

Ohio Department of Mental Health  
And Addiction Services  
30 East Broad Street, 8th Floor  
Columbus, Ohio 43215  
Telephone: (614) 466-2596  
Toll free: (877) 275-6364

Department of Health & Human Services  
Office for Civil Rights  
233 N. Michigan Ave., Suite 240  
Chicago, Illinois 60601  
Telephone: (800) 368-1019  
Fax: (312) 866-1807  
TTD/TTY: (800) 357-7697

**CONFIDENTIALITY**

Client information and client records are confidential. Records are kept locked, secure, and are eventually destroyed. If you want the agency to talk with any person(s) about your visits, we will do so only after you have signed a release form giving us permission. This applies to releasing reports, records and even telephone conversations.

**FAMILY INVOLVEMENT IN TREATMENT**

It is important for you to be aware that the agency (with your permission) considers your family members and/or significant others as part of your team. Please know that you are encouraged to sign releases for these individuals so that we can actively involve them in your treatment, to the level you are comfortable with. National Alliance on Mental Illness (NAMI) is an advocacy resource committed to helping family members and their loved ones. Call 419-522-6264 for information on support and group classes.

## **FINANCIAL POLICY**

### **Fees:**

The agency is a private, non-profit community mental health agency. Program fees are based on the operating costs of the agency.

Services are provided at less than full fee to persons in need of financial assistance through the support of funds and donations from organizations and individuals in north central Ohio. Applications for reduced fees are available through Financial Registration.

Payment is expected the day services are rendered for private pay and your co-pay for insurance, Medicare, etc. Payments may be made by cash, check or credit card (Master Card or VISA). We will submit your claims directly to your third party payer.

If ongoing treatment is necessary and you are unable to remit in full following each session, we will arrange a payment program which will enable you to pay your account in a reasonable time.

### **Responsible Party:**

When insurance has been assigned to this agency, you are responsible for the co-insurance portion and should plan to pay that part as service is rendered. When insurance reimbursement does not cover the service, you are responsible for the entire account balance.

The agency cannot bill Opportunities for Ohioans With Disabilities unless specific authorization and verification are obtained prior to the service being rendered. In the case of minors with divorced or separated parents, the parent with legal custody will be billed for services.

The above financial policy is an effort to hold down ever-rising billing expense. We will gladly discuss any questions you may have in regards to this policy. If you have any questions about your billing statement, discuss them with Financial Registration.

## **ACCESSING YOUR RECORDS**

Federal Law and Regulations protect the confidentiality of your client records. You have the right to have access your own psychiatric, medical, or other treatment records, unless access to particular identified items of information are specifically restricted from you for clear treatment reasons in your Individual Service Plan. "Clear treatment reasons" shall be understood to mean only severe emotional damage to you such that dangerous or self-injurious behavior is imminent risk. The person restricting the

information shall explain to you the factual information about you that requires the restriction. The restriction must be renewed at least annually to retain validity. Any person authorized by you has unrestricted access to all information.

A request form must be completed in order to have access to your own record. Request forms may be obtained from any member of your treatment team or at the front desk.

You may meet with a member of your treatment team or the Performance Improvement Director or designee, to have any questions answered regarding the content of the information being released. A scheduled appointment will be necessary to review information from your mental health file.

Catalyst Life Services reserves the right to charge an administrative fee for copying of client records for clients as well as requests from outside agencies.

## **MENTAL HEALTH CLIENT RIGHTS POLICY & GRIEVANCE PROCEDURE**

It shall be the agency's policy to adhere to all federal, state and accrediting bodies standards regarding a client's rights while receiving services at the agency. Each program and all staff shall adhere to the agency's established client grievance procedure as outlined below. Whenever possible, clients and staff will be encouraged to resolve issues in an informal manner, through discussion between the two parties. No formal documentation will be made at that time.

### **Definitions:**

“Client” means an individual applying for or receiving mental health services from a board or mental health agency.

“Client rights specialist” means the individual designated by a mental health agency or board with responsibility for assuring compliance with the client rights and grievance procedure rule as implemented within each agency or board. For these purposes the individual holds the specific title of client rights officer.

“Contract agency” means a public or private service provider with which a community mental health board enters into a contract for the delivery of mental health services. A board which is itself providing mental health services is subject to the same requirements and standards which are applicable to contract agencies, as specified in rule 5122:2-1-05 of the Administrative Code.

“Grievance” means a formal written complaint by a client or by any other person or agency on behalf of a client regarding denial or abuse of any client's rights.

“Reasonable” means a standard for what is fair and appropriate under usual and ordinary circumstances.

“Services” means the complete array of professional interventions designed to help a person achieve improvements in mental health such as counseling, individual or group therapy, education, community psychiatric supportive treatment, assessment, diagnosis, treatment planning and goal setting, clinical review, psychopharmacology, discharge planning, professionally-led support, etc.

### **MENTAL HEALTH CLIENT RIGHTS**

Except for clients receiving forensic evaluation service, each mental health client has all the following twenty-five rights:

1. All clients who access mental health services are informed of these rights:
  - a. The right to be informed of the rights described in this rule prior to consent to proceed with services, and the right to request a written copy of these rights;
  - b. The right to receive information in language and terms appropriate for the person’s understanding; and
  - c. The right to be fully informed of the cost of services.
2. Services are appropriate and respectful of personal liberty:
  - a. The right to be treated with consideration, respect for personal dignity, autonomy, and privacy, and within the parameters of relevant sections of the Ohio Revised Code and the Ohio Administrative Code;
  - b. The right to receive humane services;
  - c. The right to participate in any appropriate and available service that is consistent with an individual service/treatment plan, regardless of the refusal of any other service, unless that service is a necessity for clear treatment reasons and requires the person’s participation;
  - d. The right to reasonable assistance, in the least restrictive setting; and
  - e. The right to reasonable protection from physical, sexual and emotional abuse, inhumane treatment, assault, battery, financial or other exploitation by any other person.
3. Development of service/treatment plans:
  - a. The right to a current ISP that addresses the needs and responsibilities of an individual that specifies the provision of appropriate and adequate services, as available, either directly or by referral; and
  - b. The right to actively participate in periodic ISP reviews with the staff including services necessary upon discharge.
4. Declining or consenting to services:
  - a. The right to give full informed consent to any service including medication prior to commencement and the right to decline services including

- medication absent an emergency;
  - b. The right to be advised of and refuse observation by techniques such as one-way vision mirrors, tape recorders, televisions, movies, or photographs, or other audio and visual technology. This right does not prohibit an agency from using closed-circuit monitoring to observe seclusion rooms or common areas, which does not include bathrooms; and
  - c. The right to decline any hazardous procedures.
5. Restraint or seclusion:  
The right to be free from restraint or seclusion unless there is imminent risk of physical harm to self or others.
6. Privacy:  
The right to reasonable privacy and freedom from excessive intrusion by visitors, guests and non-agency surveyors, contractors, construction crews or others.
7. Confidentiality:  
a. The right to confidentiality unless a release or exchange of information is authorized and the right to request to restrict treatment information being shared; and  
b. The right to be informed of the circumstances under which an agency is authorized or intends to release, or has released, confidential information without written consent for the purposes of continuity of care as permitted by division (A)(7) of section 5122.31 of the Revised Code.
- Ohio Revised Code 5122.31 (A)(7) “That hospitals within the department, other institutions and facilities within the department, hospitals licensed by the department under section 5119.20 of the Revised Code, and community mental health agencies may exchange psychiatric records and other pertinent information with payers and other providers of treatment and health services if the purpose of the exchange is to facilitate continuity of care for a patient.”
8. Grievances:  
The right to have the grievance procedure explained orally and in writing; the right to file a grievance with assistance if requested; and the right to have a grievance reviewed through the grievance process, including the right to appeal a decision.
9. Non-discrimination:  
The right to receive services free of discrimination on the basis of race, ethnicity, age, color, religion, gender, national origin, sexual orientation, physical or mental handicap, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local, state or federal laws.

10.No reprisal for exercising rights:

The right to exercise rights without reprisal in any form including the ability to continue services with uncompromised access. No right extends so far as to supersede health and safety considerations.

11.Outside opinions:

The right to have the opportunity to consult with independent specialists or legal counsel at one's own expense.

12.No conflicts of interest:

No agency employee may be a person's guardian or representative if the person is currently receiving services from said facility.

13.The right to have access to one's own psychiatric, medical or other treatment records, unless access to particular identified items of information is specifically restricted for that individual patient for clear treatment reasons in the patient's treatment plan. If access is restricted, the treatment plan shall also include a goal to remove the restriction.

14.The right to be informed in advance of the reason(s) for discontinuance of service provision, and to be involved in planning for the consequences of that event.

15.The right to receive an explanation of the reasons for denial of service.

**RIGHTS OF CLIENTS RECEIVING A FORENSIC EVALUATION SERVICE  
FROM A CERTIFIED FORENSIC CENTER ARE:**

1. The right to be treated with consideration and respect for personal dignity.
2. The right to be evaluated in a physical environment affording as much privacy as feasible.
3. The right to service in a humane setting which is the least restrictive feasible if such setting is under the control of the forensic center.
4. The right to be informed of the purpose and procedures of the evaluation service.
5. The right to consent to or refuse the forensic evaluation services and to be informed of the probable consequences of refusal.
6. The right to freedom from unnecessary restraint or seclusion if such restraint or seclusion is within the control of the forensic center.

7. The right to be advised of and refuse observation by techniques such as one-way vision mirrors, tape recordings, televisions, movies, or photographs, or other audio and visual technology, unless ordered by the court, in which case the client must be informed of such technique. The right does not prohibit an agency from using closed-circuit monitoring to observe seclusion rooms or common areas, which does not include bathrooms.
8. The right not to be discriminated against in the provision of services on the basis of race, ethnicity, age, color, religion, gender, national origin, sexual orientation, physical or mental handicap, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local, state or federal laws.
9. The right to be fully informed of all rights.
10. The right to exercise any and all rights without reprisal in any form.
11. The right to file a grievance.
12. The right to have oral and written instructions for filing a grievance including an explanation that the filing of a grievance is exclusively an administrative proceeding within the mental health system and will not affect or delay the outcome of the criminal charges.

### **MENTAL HEALTH CLIENT GRIEVANCE PROCEDURE**

Client Rights Officer: Denise Carson, Performance Improvement Director

Location: The Center for Individual & Family Services  
741 Scholl Rd., Mansfield OH 44907

Hours: Monday through Friday, 8am to 5pm.

Phone: 419-774-6768 (message line)  
419-774-6725  
419-756-1717

1. Responsibilities of the client rights officer referenced above:
  - To provide assistance in filing the grievance if needed by the griever.
  - To accept and oversee the process of any grievance filed by a client or other person or agency on behalf of a client.
  - To investigate on behalf of the griever.
  - To represent the griever at the agency hearing on the grievance, if desired by the griever.
  - To provide written notification and explanation of the resolution to the client, or the griever, if other than the client, with the client's permission.
  - To make arrangements for mediation, if desired by the griever.
2. A copy of the client rights policy shall be posted in a conspicuous location in

an area of each building operated by the agency that is accessible to clients and the public.

3. Any client wishing to file a complaint or grievance shall not be subject to any retaliation or barriers to service.
4. Clients shall have prompt accessibility to the client rights officer. Alternative arrangements will be made for situations in which the client rights officer is the subject of the grievance or if the client rights officer is temporarily unavailable.
5. All staff are familiar with all specific client rights and the grievance procedure. The agency will provide annual training to every staff person, including administrative, clerical, and support staff. All staff are required to clearly understand their continuing responsibility to immediately advise any client or any other person who is articulating a concern, complaint, or grievance about the name and availability of the agency's client rights officer and the complainant's right to file a grievance. Staff will explain any and all aspects of client rights and the grievance procedure upon request.
6. All aspects of the filing and investigation of a consumer complaint and grievance shall be explained to the consumer in a manner that is understandable to them.
7. The grievor shall have opportunity to file a grievance within a reasonable period of time from the date the grievance occurred (usually within thirty (30) days). All grievances shall be filed with the client rights officer referenced above.
8. A written copy of the client rights policy and client grievance procedure will be distributed to each applicant or client upon request.
  - a. In a crisis or emergency situation, the client or applicant shall be verbally advised of at least the immediately pertinent rights, such as the right to consent to or refuse the offered treatment and the consequences of that agreement or refusal. Written copy and full verbal explanation of the client rights policy may be delayed to a subsequent meeting.
  - b. Clients or recipients of information and referral service, consultation service, mental health education service, and prevention service may have a copy and explanation of the client rights policy upon request.
9. The grievance must be in writing. The client rights officer or designee can assist with the writing of the grievance if the client so desires.



10. The grievance must be dated and signed by the client.
11. The griever will receive an explanation of the process from the original filing of the grievance to the final resolution, which shall include reasonable opportunity for the griever and/or their designated representative to be heard by an impartial decision maker.
12. The resolution of the grievance shall not exceed twenty (20) working days from the date of filing of the grievance.
  - a. The client rights officer or designee will assist the client in filing the written grievance within five (5) working days of becoming aware of the client's desire to file a grievance.
  - b. The client rights officer shall begin the investigation process within five (5) working days from the filing date of the grievance.
  - c. The grievant may notify the client rights officer or designee at any time if they desire to refrain from filing a formal grievance and resolve the issue in an informal manner.
  - d. Written notification and explanation of the resolution will be provided to the client, or the griever, if other than the client, with the client's permission within twenty (20) working days from the filing date of the grievance.
  - e. If the grievant is dissatisfied with the resolution of a complaint, he/she will be immediately and fully informed of the option of voluntary mediation. Mediation is a voluntary process in which a neutral third party meets with persons who have a disagreement or dispute and facilitates their reaching a mutually satisfactory resolution. If mediation is requested, the clients rights officer or designee will arrange for a meeting time to occur within five (5) working days of the request. If this is not possible, the griever will be informed in writing of the delay and earliest possible time for the meeting to be held.
13. The agency will provide, upon request, all relevant information about the grievance to one or more of the organizations specified to which the griever has initiated a complaint.
14. The agency shall provide for the client rights officer to take all necessary steps to assure compliance with the grievance procedure.
15. The griever may initiate a complaint with any or all of several outside entities (listed below). This list will be made available upon request to the griever at any point in the resolution process.

Richland County Mental Health and Recovery Services Board  
87 East First Street, Suite L  
Mansfield, Ohio 44902  
(419) 774-5811

Ohio Department of Mental Health and Addiction Services  
30 East Broad Street, 8th Floor  
Columbus, Ohio 43215  
(614) 466-2596 (877) 275-6364 TDD (614)752-9696

Disability Rights Ohio  
50 West Broad St., Suite 1400  
Columbus, Ohio 43215-5923  
(800) 282-9181 TTY (800) 858-3542

US Department of Health and  
Human Services  
Office for Civil Rights  
233 N. Michigan Avenue, Suite 240  
Chicago, Illinois 60601  
(800) 368-1019 TDD (800) 537-7697 ocrmail@hhs.gov

Counselor, Social Worker & Marriage and Family Therapist Board  
77 South High Street, 24<sup>th</sup> Fl.  
Columbus, Ohio 43215-6171  
(614) 466-0912

Ohio Board of Nursing  
17 South High Street  
Suite 660  
Columbus, Ohio 43215-7410  
(614) 466-3947

State Medical Board of Ohio  
30 E. Broad St., 3rd Floor  
Columbus, Ohio 43215  
(614)-466-3934 (800) 554-7717

**CONFIDENTIALITY OF ALCOHOL AND DRUG ABUSE CLIENT RECORDS**

The *Confidentiality of Alcohol and Drug Abuse Client Records* maintained by this program is protected by Federal Law and Regulations (42CFR Part 2). Generally, the program will not convey to a person outside the program that a client attends or receives services from the program or disclose any information identifying a client as an alcohol or drug abuser UNLESS:

- The client consents in writing;
- The disclosure is allowed by court order;
- The disclosure is made to medical personnel in a medical emergency, or;
- The disclosure is made to qualified personnel for research, audit, or program evaluation.

Violation of the Federal Law and Regulations is a crime. Suspected violations may be reported to appropriate authorities in accordance with Federal Regulations.

Federal Law and Regulations do not protect any information about a crime committed by a client, either at the program or against any person who works for that program, or about any threat to commit such a crime.

Federal Laws and Regulations do not protect any information about suspected child abuse or neglect from being reported under state law to appropriate state or local authorities.

### **ALCOHOL AND DRUG PROGRAM CLIENT RIGHTS**

1. The right to be treated with consideration and respect for personal dignity, autonomy and privacy.
2. The right to receive services in the least restrictive feasible environment.
3. The right to be informed of one's own condition.
4. The right to be informed of available program services.
5. The right to give consent or to refuse any service, treatment or therapy.
6. The right to participate in the development, review and revision of one's own individualized treatment plan and receive a copy of it.
7. The right to freedom from unnecessary or excessive medication, unnecessary physical restraint or seclusion.
8. The right to be informed and the right to refuse any unusual or hazardous treatment procedures.
9. The right to be advised and the right to refuse observation by others and by techniques such as one-way vision mirrors, tape recorders, video recorders, television, movies or photographs.
10. The right to consult with an independent treatment specialist or legal counsel at one's own expense.
11. The right to confidentiality of communications and personal identifying information within the limitations and requirements for disclosure of client information under state and federal laws and regulations.
12. The right to have access to one's own client record in accordance with program procedures.
13. The right to be informed of the reason(s) for terminating participation in a program.
14. The right to be informed of the reason(s) for denial of a service.
15. The right not to be discriminated against for receiving services on the basis of race, ethnicity, age, color, religion, sex, national origin, disability or HIV infection, whether asymptomatic or symptomatic, or AIDS.

16. The right to know the cost of services.
17. The right to be informed of all client rights.
18. The right to exercise one's own rights without reprisal.
19. The right to file a grievance in accordance with program procedures.
20. The right to have oral and written instructions concerning the procedure for filing a grievance.

In addition to the rights listed above, no person will be denied admission to a program due to their use of prescribed psychotropic medications.

### **ALCOHOL AND DRUG CLIENT GRIEVANCE PROCEDURE**

All grievances must be written, dated and signed by the client or the person filing the grievance on behalf of the client and should include the date, approximate time, description of the incident and names of the individuals involved in the incident/situation being grieved. Grievances should be given to Performance Improvement Director or their designee. Any program supervisor will assist you in filing a grievance upon your request. All grievance-associated documentation will be kept on file two years from resolution.

Within three working days of receiving the grievance program staff will provide the client with acknowledgement that includes:

- a. the date the grievance was received.
- b. a summary of the grievance and an overview of the grievance investigative process.
- c. a timetable for completing the investigation.
- d. notification of the resolution.
- e. the treatment provider/contact person's name, address and telephone number.

Within 21 calendar days of receiving the grievance the program will make a resolution decision on the grievance. Any exceptions that cause this time period to be extended will be documented in the grievance file and written notification will be given to the client or persons filing grievances on the client's behalf.

At any time clients or persons filing on the clients behalf have a right to file a grievance with any of the organizations listed below:

Ohio Department of Mental Health and Drug Addiction Services  
30 East Broad Street, 8th Floor  
Columbus, Ohio 43215  
614-466-5296 (877) 275-6364

Disability Rights Ohio  
50 West Broad Street, Suite 1400  
Columbus, Ohio 43215-5923  
614-466-7264 or 1-800-282-9181 (toll-free in Ohio only)  
TTY: 614-728-2553 or 1-800-858-3542

U.S. Dept. Health/Human Services  
Office for Civil Rights  
233 N. Michigan Ave., Suite 240  
Chicago, Ill. 60601  
Voice Phone (800) 368-1019  
TDD (800) 537-7697

The Richland County Mental  
Health & Recovery Services Board  
87 East First Street, Suite L  
Mansfield, OH 44902  
419-774-5811

## **PROGRAM DESCRIPTIONS**

### **SEVERELY PERSISTENTLY MENTALLY ILL ADULT SERVICES (SPMI)**

The purpose of the program is to provide a safe and affordable education, training and housing for our clients so they can function in the community.

### **ADULT MEDICAL**

#### **Brief Description of Program/Philosophy/Modalities/Goals:**

The program goals are:

- To provide appropriate and safe therapy to all clients.
- To provide hospital/crisis intervention.
- To assure that clients receive adequate medical care.
- To assist the client in receiving/paying for prescribed medications.
- To provide a smooth transition from inpatient to outpatient.
- To participate on treatment teams to facilitate the coordination and integration of services.
- To provide planning for the Medical/Somatic staff.
- To provide education/consultation to clients regarding symptom management and medication issues.
- To provide education/consultation to staff and community.

**Client Populations Served:** Adult Richland County residents in emotional or mental distress.

**Special Populations and Mechanisms to Address Their Needs:** Consumers with intellectual or other developmental disabilities – activities are coordinated with the Developmental Disabilities Board. Consumers with physical disabilities – activities are coordinated with appropriate outside assistance, e.g. transportation, hearing impaired. Consumers whose primary language is not English are linked with interpreters.

**Settings:** Catalyst Life Services – Mansfield and Shelby

**Hours and Days of Operation: Catalyst Life Services/The Center:** Med/Som services: 8:00am -5:00pm Monday through Friday; **Catalyst Life Services/Shelby**

**Site:** Tuesday, Wednesday and Friday 8:00am – 5:00pm. Psychiatric consult is available 24 hours/day, 7 days/week. Nursing consult is available 24 hours/day, 7 days/week.

**After Hours Contact:** Helpline - 419-522-4357, (419-522-HELP)

**Frequency of Service:** As medically necessary.

**Payer Sources:** Medicaid, Medicare, Mental Health Recovery Services Board, Private Insurance

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Referrals come from many community contacts. These would include clients themselves, their immediate and extended family members and their friends and neighbors. Referrals are also received from other community agencies such as other mental health agencies, other social service agencies, the Mental Health and Recovery Services Board, NAMI, the local and state hospitals and other community and state contacts not listed.

**Specific Services Offered:** Med Management and Med/Som Education provided directly to client.

### **ADULT CRISIS RESPONSE**

**Brief Description of Program/Philosophy/Modalities/Goals:** Catalyst Life Services' Crisis Response is responsible for triaging clients for access into the agency and/or referring clients to the appropriate level of care (within or external to the agency). Crisis Response provides the stabilizing support and wrap around for clients in need of ongoing care. The clients can remain under Crisis Response care for up to ninety days (if a client needs ongoing care at that time they will be assessed for referral to our various SPMI Teams or the Clinic). Crisis Response supports the thirteen residential crisis beds by providing individual therapy, group therapy, CPST group therapy, alcohol and other drug treatment and prevention, and crisis intervention. The ongoing teams may use the stabilization unit to stabilize clients instead of placing them in a hospital setting. Crisis Response provides wrap around services for the client while they are on the unit. These clinical treatments, along with the expertise in assessing level of care needs, have greatly reduced recidivism on the stabilization unit. Crisis Response is a twenty-four/ seven service providing crisis screeners on an on-call basis, the residential specialists, and on-call nursing available twenty-four/ seven. Crisis Response is under the supervision of the Director of Operations and the CSU Coordinator. Mobile triage provides counseling and psychiatric services to clients on the CSU, with clients in the community, and diagnostic services to clients who are new to the agency. There is one utilization review staff on the team who also acts as a case manager. Staff monitor length of stay in the hospital settings and facilitate discharge

planning. There are Alcohol and Other Drug (AOD) staff in the agency to help with dual-diagnosis issues including prevention. All Crisis Response staff are trained to assess an appropriate level of care for AOD treatment.

**Client Populations Served:** Adult Richland County Residents in Emotional or Mental Distress.

**Special Populations and Mechanisms to Address Their Needs:** Consumers with intellectual or other developmental disabilities – activities are coordinated with the Developmental Disabilities Board. Consumers with physical disabilities – activities are coordinated with appropriate outside assistance.

**Settings:** Services can be provided in a variety of settings. These settings include, but are not limited to Catalyst Life Services, the client's home, the local hospital or emergency room, the county jail, a school setting, a place of employment, a supported group living facility, a residential treatment facility, the courthouse, a local shelter, in a public setting, another mental health agency, another social service agency or at another facility not listed above.

**Hours and Days of Operation:** Crisis Response operates 24 hours a day, 7 days a week. Diagnostic assessments will be available Monday through Friday, according to the diagnostic clinic schedule.

**After Hours Contact:** Helpline – 419-522-4357, (419-522-HELP)

**Frequency of Service:** Services are available 24 hours a day, 7 days a week. Crisis interventions can take place for any length of time, depending upon the circumstances of the crisis presented.

**Payer Sources:** Medicaid, Medicare, Private Insurance, Mental Health Recovery Services Board

**Fees:** Fees are based on Funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Referrals come from many community contacts. These would include clients themselves, their immediate and extended family members, and their friends and neighbors. Referrals are also received from other community agencies such as the courts, probation, police, Children Services, other mental health agencies, other social service agencies, the Domestic Violence Shelter, United Way, the Mental Health and Recovery Services Board, NAMI, the local and state hospitals, and other community and state contacts not listed.

**Specific Services Offered** – Crisis team members meet with clients who are deemed a potential risk of harm to themselves or others, or those who are in need of potential hospitalization for psychiatric reasons. Crisis team members provide intervention to stabilize the client, assessing their need for hospitalization and determining the

lowest level of care necessary. This could include returning the client to their own living situation, stabilization on our Catalyst Stabilization Unit, or hospitalization at the local or state hospital.

### **CATALYST STABILIZATION UNIT (CSU)**

**Brief Description of Program/Philosophy/Modalities/Goals:** The Catalyst Stabilization Unit (CSU) is a hospital diversion, step-down, and respite unit for Richland County residents 18 years of age and older. Persons admitted to the CSU are evaluated and treated during their short-term stay by a multi-disciplinary team of professionals. On the unit, we focus on the rapid stabilization of individuals who are experiencing addictive and substance abuse disorders or co-occurring disorders. In addition to a thorough diagnostic assessment, we also offer pharmacological, psychotherapeutic group interventions, and case management services while on the CSU. This supervised short-term residential-type setting provides clients with a protective and supportive environment for stabilization. The goal is to continue to enhance the team process to ensure appropriate discharge planning for all clients on the unit, to ensure appropriate utilization of the services, to enable the clients to move to less restrictive environments in a timely manner, and to decrease hospitalizations.

**Client Populations Served:** The unit is available for adults, 18 years or older, who are assessed as needing short-term stabilization due to substance abuse, mental health, or co-occurring disorders.

**Special Populations and Mechanisms to Address Their Needs:** For consumers with hearing disabilities, TTDY Communication equipment is available. Consumers with intellectual or other developmental disabilities – activities are coordinated with the Developmental Disabilities Board. Consumers with physical disabilities – activities are coordinated with appropriate outside assistance.

**Settings:** Services are provided at Catalyst, in the on-site Catalyst Stabilization Unit.

#### **Hours and Days of Operation:**

The Catalyst Stabilization Unit (CSU) will operate 24 hours per day 7 days a week.

**After Hours Contact:** Helpline – 419-522-4357, (419-522-HELP)

**Frequency of Service:** Services are available 24 hours a day, 7 days per week. Staff are available to support clients at all times.

**Payer Sources:** Mental Health Recovery Services Board

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Referrals come from many community contacts. These would include clients themselves, their immediate and extended family members, and their friends and neighbors. Referrals are also received from other community agencies



such as the courts probation, police, other mental health agencies, other social service agencies, the Mental Health and Recovery Services Board, NAMI, the local and state hospitals, and other community and state contacts not listed.

**Specific Services offered:** Agency staff members meet with clients who are deemed a potential risk of harm to themselves or others, or those who are in need of potential stabilization for substance use, mental health, and co-occurring disorders. Agency staff provides intervention to stabilize the client, assessing their need for placement on the unit and determine the lowest level of care necessary. This could include returning the client to their own living situation, stabilization on our CSU, or hospitalization at the local or state hospital. If appropriate for the CSU, clients receive 24 hour monitoring by attending supportive groups during the day, meeting with a unit therapist each day, and receiving medications as applicable. Services are provided directly.

### **SUBSTANCE ABUSING MENTALLY ILL (SAMI) Team: ACT/IDDT Team**

**Brief Description of Program/Philosophy/Modalities/Goals:** The Substance Abusing Mentally Ill (SAMI) Team is the team that works with the Severe Mentally Ill clients who are Substance Abusing. This team works with the clients who are in the “fourth quadrant” meaning that the clients are *severely* mentally disabled and also have *severe* addictions, as well as “second quadrant” high severity of mental disorder, low severity of substance use disorder.

**Client Populations Served:** Adult Richland County Residents experiencing severe mental disability and severe addiction or severe mental disability without severe addiction.

**Special Populations and Mechanisms to Address Their Needs:** Activities for consumers with intellectual or other developmental disabilities are coordinated with the Developmental Disabilities Board. Activities for consumers with physical disabilities are coordinated with appropriate outside assistance.

**Settings:** Services can be provided in a variety of settings. These settings include, but are not limited to, Catalyst, the client’s home, the local hospital or emergency room, the county jail, a school setting, a place of employment, a supported group living facility, a residential treatment facility, the courthouse, a local shelter, in a public setting, another mental health agency, another social service agency or at another facility not listed above.

### **Hours and Days of Operation:**

Therapy services: 8:00am- 9:00pm Monday through Thursday and 8:00am – 5:00pm Friday. Med/Som services: 8:00am. -5:00pm Monday through Friday. Case Management services are available 8:00am –5:00pm Monday through Friday.

**After Hours Contact:** 419-522-4357, (419-522-HELP)

**Frequency of Service:** Services are available during the hours listed above as well as crisis intervention, available 24 hours a day, 7 days per week.

**Payer Sources:** Medicaid, Medicare, Mental Health Recovery Services Board, Private Insurance

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Referrals come from many community contacts. These would include clients themselves, their immediate and extended family members and their friends and neighbors. Referrals are also received from other community agencies such as the courts, probation, police, Children Services, other mental health agencies, other social service agencies, the Domestic Violence Shelter, United Way, the Mental Health and Recovery Services Board, NAMI, the local and state hospitals, and other community and state contacts not listed above.

**Specific Services Offered:** SAMI team members meet with clients who present with severe mental illness and/or co-occurring AOD dual diagnoses. Services provided include individual therapy, CPST, group CPST which may be around dual disorders when applicable, group therapy, vocational services, nursing services, peer support, psychiatric services and mobile outreach. Services are provided directly.

### **HELPLINE/HOTLINE/WARMLINE SERVICES**

**Brief Description of Program/Philosophy/Modalities/Goals:** Helpline is a 24-hour telephone service that provides crisis intervention and non-crisis referrals both internally to Catalyst Life Services and to other community agencies such as Children Services, Human Services, etc. Helpline also provides TTY communication services for deaf clients and other additional community services as needed. Helpline services can be contacts with any of the following:

Crisis calls from clients or individuals in the community experiencing a psychiatric crisis,

Individuals, who as part of their individual service plan, call in for support,

Individuals who want mental health and/or drug and alcohol services,

Individuals who want information about community resources.

**Client Populations Served:** Helpline is available to all populations without restriction.

**Special Populations Served:** Helpline is available to all populations without restriction.

**Settings:** By phone at Catalyst located in the Catalyst Stabilization Unit.

**Hours and Days of Operation:** All Helpline Services will operate 24 hours/day 7 days/week.

**Frequency of Service:** Services are available 24 hours a day, 7 days per week.

**Payer Sources:** Mental Health Recovery Services Board.

**Fees:** no fee to person served.

**Referral Sources:** Referrals come from many community contacts. These would include clients themselves, their immediate and extended family members, and their friends and neighbors. Referrals are also received from other community agencies such as the courts, probation, police, Children Services, other mental health agencies, other social service agencies, the Domestic Violence Shelter, United Way, the Mental Health and Recovery Services Board, NAMI, the local and state hospitals, and other community and state contacts not listed.

**Specific Services Offered:** Helpline staff answer the phones and triage calls 24 hours a day. Helpline will contact adult and/or children's crisis response members when calls come in for those services. Helpline staff also provide information and referral services for community members who are seeking information. Staff are liaisons for the hospital and police in crisis situations. They provide after-hours support for Children Services. Services are provided directly.

### **RESIDENTIAL 24 HOUR/7 DAY**

**Brief Description of Program/Philosophy/Modalities/Goals:** Our residential continuum is based on the level of care needs of the clients with the philosophy of placing the client in the least restrictive environment. We have the most intense/ acute clients often on the thirteen bed crisis unit. These clients are stabilized and if they need a residential facility are evaluated by our Residential Advisory Committee and assessed for that level of care. The goal is to provide a continuum of residential services with varied degrees of support if mentally ill individuals are to establish themselves independently in the community.

**Client Populations Served:** Severely persistently mentally ill adult Richland County residents.

**Special Populations and Mechanisms to Address Their Needs:** Activities for consumers with intellectual or other developmental disabilities are coordinated with the Developmental Disabilities Board. Activities for consumers with physical disabilities are coordinated with appropriate outside assistance.

**Settings:** Services are provided at SEH in the on-site housing unit and at the Catalyst Stabilization Unit located at The Center.

### **Hours and Days of Operation:**

Residential services are available 24 hours a day, seven days a week.

**Frequency of Service:** Services are available 24 hours a day, 7 days per week. Staff are available to support clients at all times.

**Payer Sources:** Mental Health Recovery Services Board, self-pay.

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Referrals come from many community contacts. These would include clients themselves, their immediate and extended family members, and their friends and neighbors. Referrals are also received from other community agencies, the Mental Health and Recovery Services Board, NAMI, the local and state hospitals, and other community and state contacts not listed.

**Specific Services Offered:** Staff supports clients to help them function as independently as possible in a monitored setting. Clients are encouraged to interact with other peers, help with the preparation of food, and participate in therapeutic activities. They are also given prompts to help monitor their daily living activities while performing them on their own. Medications are also monitored and administered to clients. Services are provided directly.

### **ADULT SEVERELY PERSISTENTLY MENTALLY ILL TEAM**

#### **Brief Description of Program/Philosophy/Modalities/Goals:**

This team is composed of clients who have a diverse range of presenting problems – these include clients experiencing depression, anxiety, psychosis, personality disorders such as Borderline Personality Disorder, trauma, and multiple life stressors such as homelessness and lack of income. The services offered by the team are counseling, case management, and med-somatic. Clients on this team can also be referred to Catalyst Life Services' vocational program if this is an identified need. Staff members within the team are also able to provide specialized treatment for trauma victims (Eye Movement Desensitization and Reprocessing, or EMDR) and those clients with Borderline Personality Disorder and Bipolar Depression (Dialectical Behavior Therapy, or DBT). In addition, a weekly DBT group is conducted that has a psychoeducational focus, and teaches complementary coping skills. Clinicians and case managers on the team are also able to consult with those on the agency's AOD team regarding clients with dual diagnosis issues. This corresponds with an overall goal of the team which is to have open and fluid communication with other teams within the agency.

**Client Populations Served:** Richland County adults experiencing severe Mood Disorders including Bipolar Depression, severe Anxiety Disorders, Posttraumatic Stress Disorder (PTSD), Psychotic Disorders including Schizophrenia, and Personality Disorders.

**Special Populations and Mechanisms to Address Their Needs:** Consumers with intellectual or other developmental disabilities – activities are coordinated with the Developmental Disabilities Board. Consumers with physical disabilities – activities

are coordinated with appropriate outside assistance, e.g. transportation, hearing impaired. Consumers whose primary language is not English are linked with interpreters.

**Settings:** Provided in a variety of settings such as Catalyst Life Services, the client's home and community and outside agencies.

**Hours and Days of Operation: Therapy services:** The Center - 8:00am - 5:00pm Monday through Friday, Shelby Site – 8:00am -5:00pm Tuesday, Wednesday and Friday 8:00am – 5:00pm. **Med/Som services:** 7:00am - 5:00pm Monday through Friday. **Case Management services** are available 8:00am - 5:00pm Monday through Friday.

**After Hours Contact: Helpline:** 419-522-4357, (419-522-HELP)

**Frequency of Service:** Varies based on clinical necessity.

**Payer Sources:** Medicaid, Medicare, Private Insurance, Mental Health Recovery Services Board.

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Referrals come from many community contacts. These would include clients themselves, their immediate and extended family members and their friends and neighbors. Referrals are also received from other community agencies such as the courts, probation, police, Children Services, other mental health agencies, other social service agencies, the Domestic Violence Shelter, United Way, the Mental Health and Recovery Services Board, NAMI, the local and state hospitals and other community and state contacts not listed.

**Specific Services Offered:** Individual and group therapy, CPST services, mental health assessments and med-somatic services. Provided directly.

### **OASIS PEER CENTER**

**Brief Description of Program/Philosophy/Modalities/Goals:** The Oasis Peer Center is a consumer-operated peer center providing a positive social gathering place for individuals with mental illness. The peer center provides and maintains a community that is committed to offering its members a warm and nurturing environment that fosters community stability and reintegration, as well as overall wellness. Members offer one another peer-to-peer support. The Oasis Peer Center offers educational groups, as well as recreational and social activities.

**Client Population Served:** Population served are people in Richland County over the age of 18 years of age with a mental health diagnosis.

**Special Populations and Mechanisms to Address Their Needs:** Transportation provided which includes handicap-accessible van.

**Settings:** Oasis Peer Center, community

**Hours and days of Operation:** Oasis Peer Center is open from 12pm to 5pm on Monday, Tuesday, Thursday and Friday and from 1pm to 5pm on Wednesday.

**After Hours Contact:** Helpline/Warmline: (419)522-4357, (419-522-HELP)

**Frequency of Service:** Client determined.

**Payer Sources:** Richland County Mental Health Board.

**Fees:** No fee to person served.

**Referral Sources:** self-referral, community and Catalyst Life Services.

**Specific Services Offered:** Peer support, social and recreational activities. Also includes educational activities. Services provided directly.

### **NEW BEGINNINGS ALCOHOL AND DRUG TREATMENT SERVICES**

**Brief Description of Program/Philosophy/Modalities/Goals:** The New Beginnings Alcohol and Drug Treatment Services provide supportive options for men and women to address substance use concerns. Clinicians utilize a variety of treatment options including, but not limited to, motivational interviewing, cognitive behavioral therapy, 12-Step model and medication-assisted treatment. Outpatient services are available for individuals who need a structured program and supportive environment to address their substance use issues. Residential services offer a safe and supportive interim living environment for men and women beginning recovery from chemical dependency. Transitional and recovery housing provide a safe environment and offer a variety of programs and services that enable individuals to work toward self-sufficiency and independence. Access to detox services and transportation is available for those who need this level of care. Medical, mental health and vocational services are also offered.

**Client Populations Served:** Adult Richland County diagnosed with substance use disorders as well as those with co-occurring disorders.

**Special Populations and Mechanisms to Address Their Needs:** Individuals involved with specialty docket courts can be seen in jail, at court, or at Catalyst Life Services. Incarcerated individuals who would benefit from medication assisted treatment are connected with services prior to release from jail. Pregnant females can utilize New Beginnings residential facility. The baby can stay with the mother.

**Settings:** Catalyst, New Beginnings residential facility, the jail, Municipal Court and Common Pleas Court.

**Hours and Days of Operation:** Outpatient services Monday through Friday. Services are offered 8:00am – 5:00pm Wednesday, Thursday and Friday; 8:00am to 6:00pm Monday and Tuesday. Residential services are available 24/7.

**After Hours Contact:** 419-522-4357, 419-522-HELP

**Frequency of Service:**

- **Opportunity Group** – 1.5 hour sessions, 1 time/week for an average of 10 sessions
- **Education Group** – 2 hour sessions, 1 time/week for 8 weeks
- **Intensive Outpatient Group** – 3 hour sessions, 3 times/week for an average of 18 sessions
- **Relapse Prevention Group** – 1.5 hour sessions, 1 or 2 times/week depending on need for an average of 12 sessions
- **Medication-Assisted Treatment Group** – candidates for medication will be referred to a physician to determine appropriate treatment options  
2.5 hour sessions 3 times/week
- **Cognitive Behavioral Therapy Focus Group** – 2 hour sessions 1 time/week
- **Individual Counseling** – based on consumer need
- **Case Management Services** – based on consumer need
- **Residential Services** – provided 24 hours a day

**Payer Sources:** Self-Pay, Medicaid, Mental Health and Recovery Services Board, United Way, private insurance, Recovery to Work, Women’s Treatment Grant

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** County and Municipal Courts, Third Street Family Health Services, faith-based organizations, hospitals, Richland County Children Services, Job and Family Services, other behavioral health agencies, individuals, and family members.

**Specific Services Offered:** Individuals interested in medication-assisted treatment are referred to Third Street Family Health Services to discuss medication options. All other substance use services are provided at Catalyst.

**PEER RECOVERY SUPPORTED SERVICES**

**Brief Description of Program/Philosophy/Modalities/Goals:** Catalyst Life Services provides peer support services to assist individuals who have substance use and mental health disorders. These services include life skills development, community support connections, and assisting with personal recovery goals based on the strengths, needs and preferences of the person served. Program goals are to promote recovery and support the continuation of recovery journey, to assist with eliminating barriers, to connect people with recovery support services and community resources, and to encourage hope, optimism and healthy living.

**Client Population Served:** Adult individuals living with or in recovery from SUD and/or co-occurring disorders,

**Settings:** Provided in a variety of settings such as Catalyst Life Services, client's home, community, and other outside agencies.

**Hours and Days of Operation:** Varies based on client needs.

**After Hours Contact:** Helpline – 419-522-4357, 419-522-HELP

**Frequency of Service:** Varies based on client needs.

**Payer Sources:** S.N. & Ada Ford Grant, Medicaid

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Outpatient AOD treatment counselors, residential New Beginnings counselors, Catalyst Stabilization Unit staff, Withdrawal Management staff, self-referral.

### **CHILD AND ADOLESCENT SERVICES**

The Child and Adolescent Programming Department offers the following services: Child Psychiatry, Children's Case Management, Medical/Somatic Nursing Services, Individual and Group Counseling, In-School Services, and Crisis Intervention Services. We provide as many in home services as possible (and as appropriate). Children and adolescents from birth to 18 years of age (or until completion of high school), whichever comes later, are eligible for various services provided by the Child and Adolescent Programming Department.

### **C & A CRISIS RESPONSE**

**Brief Description of Program/Philosophy/Modalities/Goals:** The Child/Adolescent Crisis Response mission is to provide an immediate and effective response to young people in crisis. The major goal of the Child/Adolescent Crisis Response is to provide the support needed to stabilize a crisis situation and to maintain the child, adolescent, or young adult in the least restrictive environment as possible, while ensuring personal safety until the crisis has been resolved.

**Client Populations Served:** Richland County Children & Adolescents in Emotional Distress/Crisis.

**Special Populations and Mechanisms to Address Their Needs:** Special populations of children and adolescents are served in this program. Activities for consumers with intellectual or other developmental disabilities are coordinated with the Developmental



Disabilities Board. Activities for consumers with physical disabilities are coordinated with appropriate outside assistance.

**Settings:** In the community including home, school, medical office, recreational areas and periodically in Catalyst offices.

**Hours and Days of Operation:** Services are in operation 24 hours a day, 7 days a week.

**After Hours Contact:** 419-522-4357, (419-522-HELP)

**Frequency of Service:** As needed and up to 5 days after initial contact.

**Payer Sources:** Medicaid, Medicare, Private Insurance, Mental Health Recovery Services Board.

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Individual or family, school personnel, Richland County Children Services, Juvenile Court, Domestic Court.

**Specific Services Offered:** Child & Adolescent Crisis Response and Assessment provided directly.

### **SERIOUSLY EMOTIONALLY DISTURBED (SED)**

**Brief Description of Program/Philosophy/Modalities/Goals:** The goal of the Child and Adolescent Programming Department is to provide high quality mental health and rehabilitation services to seriously emotionally disturbed (SED) youth. We provide complete, holistic, quality mental health services, emphasizing care in the consumer's and family's environment. We empower the family to function on its own and honor the family's treatment wishes, allowing the family system to advocate for, and achieve its own health and survival. We strive for innovative and creative solutions to meet the mental health challenges encountered by children and families.

**Client Populations Served:** Seriously Emotionally Disturbed Children & Adolescents from birth up to age 18 or until completion of high school, whichever occurs later.

**Special Populations and Mechanisms to Address Their Needs:** Special population of children and adolescents are served in this program. For consumers with intellectual or other developmental disabilities, activities are coordinated with the Developmental Disabilities Board. For consumers with physical disabilities, activities are coordinated with appropriate outside assistance.

**Settings:** Catalyst Life Center, homes, schools, community and other agencies as requested.

**Hours and Days of Operation:** Psychiatric care is provided each weekday as follows: Catalyst/Rehab Center - Monday through Thursday from 7:00am until 7:00pm. and Friday only under special circumstances. Catalyst/Shelby site: Tuesday, Wednesday and Friday from 8:00am to 5:00pm. Psychiatric consult is available 24 hours a day. The Child & Adolescent Counseling staff provide counseling Monday through Friday between the hours of 7:00 am and 7:00pm. Children's Community Psychiatric Supportive Treatment Provider hours are 8:00am to 5:00pm Monday-Friday with availability to Helpline 24 hours a day. Access to Emergency Services/Helpline is available after 5:00pm and on weekends and holidays to address crisis calls. The need is assessed and the client is referred for appropriate services.

**After Hours Contact:** Helpline – 419-522-4357, 419-522-HELP

**Frequency of Service:** When needed as deemed medically necessary and appropriate.

**Payer Sources:** Medicaid, Medicare, Mental Health Recovery Services Board, private insurance.

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Individual or family, school personnel, Richland County Children Services, Juvenile Court, Domestic Court, pediatricians and others in the community.

**Specific Services Offered:** The Child and Adolescent Programming Department offers the following services: Child Psychiatry, Children's CPST, Medical/Somatic Nursing Services, Individual and Group Counseling, In-School Services and Crisis Intervention Services. We provide as many in-home services as possible (and as appropriate). Children and adolescents from birth to 18 years of age (or until completion of high school), whichever occurs later, are eligible for various services provided by the Child and Adolescent Programming Department. They can be direct or by referral.

### **INTENSIVE FAMILY-BASED TREATMENT (IFBT)**

**Brief Description of Program/Philosophy/Modalities/Goals:** IFBT is a comprehensive service that incorporates resilience and system of care in all aspects of treatment with Seriously Emotionally Disturbed (SED) youth. The service bundles mental health services into a coordinated service that includes CPST service, mental health assessment, crisis response, behavioral health counseling and therapy, and support for the basic needs and functioning of the youth and family through social services. The purpose is to support the SED child to live and function successfully in the least restrictive environment in their community. IBF is provided in the home, school, and community settings. IFBT also respects and builds upon the strengths of the child and family's race, culture and ethnicity.

**Client Population Served:** SED youth of Richland County who are under the age of 18.

**Special Populations and Mechanisms to Address Their Needs:** SED clients 18 to 21 years of age who still live in the home, meet all the criteria for SED, except age criteria, and who are working towards a high school diploma or equivalent, who are under the jurisdiction of Juvenile Court, Children Services, or receive services from the Board of Developmental Disabilities.

**Settings:** Primarily in the home of the family or other desired location as indicated by the parent, child and IFBT team.

**Hours and Days of Operation:** Psychiatric care is provided each weekday as follows: Catalyst/Rehab Center - Monday through Thursday from 7:00am until 7:00pm and Friday only under special circumstances. Psychiatric consult is available 24 hours a day. The Child & Adolescent Counseling staff provide counseling Monday through Friday between the hours of 7:00am and 7:00pm. Children's Community Psychiatric Supportive Treatment Provider hours are 8:00am – 5:00pm Monday-Friday with availability to Helpline 24 hours a day. Access to Emergency Services/Helpline is available after 5 p.m. and on weekends and holidays to address crisis calls. The need is assessed and the client is referred for appropriate services.

**After Hours Contact:** Helpline – 419-522-4357, 419-522-HELP

**Frequency of Service:** When needed, as deemed medically necessary and appropriate.

**Payer Sources:** Richland County Mental Health Board.

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Individual or family, school personnel, Richland County Children Services, Juvenile Court and other community organizations.

## **MEDICAL REHABILITATION SERVICES**

Upon the referral of a physician, our Medical Rehabilitation Department provides services to clients of all ages. Physical Therapy, Occupational Therapy, Speech/Language Therapy, Audiology, specialized Pediatric Therapy Programs and Deaf Services may be provided directly or through referral. Therapists work closely with families and caregivers so that they can also actively assist with therapy activities at home. Services are provided on an outpatient basis at the Rehab Center site, in the client's home, assisted living facilities, and a number of contract sites including area schools, specialty clinics, and the Health Department.

## **AUDIOLOGY** (Medical Rehabilitation)

**Brief Description of Program/Philosophy/Modalities/Goals:** Audiology Services provides hearing related services to patients of all ages. Services are provided on an outpatient basis at the Rehab Center site, in the client's home, assisted living facilities, and a number of other sites including area industries and other community agencies. The audiologist works closely with families and caregivers to assist with treatment planning and implementation.

**Client Populations Served:** Ages 0-6 months – otoacoustic emission screenings, hearing aid sales and service; Ages 6-12 months – otoacoustic emission screenings, tympanometry (middle ear testing), hearing aid sales and service; 1-3 years – otoacoustic emission screenings, visual reinforcement and play audiometry (hearing test), tympanometry (middle ear testing), hearing aid sales and service; 3-21 years – otoacoustic emission screenings, behavioral hearing testing, tympanometry (middle ear testing), hearing aid sales and service.

**Settings:** Catalyst/Rehab Center Clinic, schools, area industries, and other community agencies.

**Hours and Days of Operation:** 8:00AM – 5:00PM and as coordinated with audiologist's schedule.

**After Hours Contact:** 419-756-1133 (voicemail)

**Frequency of Service:** Dependent on the needs of the patient.

**Payer Sources:** Insurance, Medicare, Medicaid, Medicaid MHO's, Opportunities for Ohioans with Disabilities (OOD), Bureau for Children with Medical Handicaps, United Way and private pay.

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees. Product costs vary depending upon technology level and accessories needed to meet the patient's individual needs.

**Referral Sources:** family, physician, insurance, self-referral, medical professionals.

**Specific Services Offered:** Diagnostic behavioral testing can be provided by patient referral but often will need a referral by a primary health care provider of medical necessity for insurances. Testing is done to determine degree and type of hearing loss, middle ear and cochlear function. Hearing aid sales and services are available for those patients identified with hearing loss and may require medical necessity dependent upon age of patient, type of hearing loss and patient's insurance policies. Hearing testing and hearing conservation programming is available directly to area industries to help them maintain Occupational Safety and Health Association compliance for hearing conservation. This service can be completed at the Rehab Center or at local industries.

## **DEAF/HARD OF HEARING SERVICES**

**Brief Description of Program/Philosophy/Modalities/Goals:** The goal of the Mansfield Community Center for Deaf/Hard of Hearing is to provide four core services to the Deaf/Hard of Hearing. These services are: 1) Communication access through professional American Sign Language interpreting services and Captioning services, 2) Community support through Support Services/Advocacy/Case Management which includes but is not limited to: independent living services/referrals, community services/resources contact and referrals, vocational resources/referrals, educational workshops on various topics, and family sign language classes, 3) Public Education, Community Awareness and Community Sign Language classes and 4) Youth Services through Pre-employment Transitional Youth Services, “Do It Deaf” Summer Youth Program and Leadership Opportunities. These services provide the consumer with assistance, information and referrals necessary for daily inclusion of the Deaf /Hard of Hearing individual within their communities.

**Client Populations Served:** Birth to death.

**Special Populations and Mechanisms to Address Their Needs:** Deaf/Blind interpreting: tactical interpreting.

**Settings:** Clinic, hospitals, physician offices, courts, schools, industrial, individual work settings.

**Hours and Days of Operation:** Office hours: 8:00am – 5:00pm Monday through Friday. Interpreting services are also available during non-office hours by pre-scheduling. After hours emergency interpreting services are also available 24/7.

**After Hours Contact:** Helpline – 419-522-4357, 419-522-HELP

**Frequency of Service:** Dependent on the needs of the consumer.

**Payer Sources:** For interpreting and captioning services: Requesting entity (i.e., court, doctor, hospital, et al) will be billed. For Support Services, Advocacy and Public Awareness: Opportunities for Ohioans with Disabilities Grant and United Way funding. Specific questions can be directed to the Director of Deaf Services.

**Fees:** Specific questions can be directed to the Director of Deaf Services.

**Referral Sources:** family, self-referral, medical professionals, schools, employers.

## **FORENSIC SERVICES**

### **FORENSIC TREATMENT**

**Brief Description of Program/Philosophy/Modalities/Goals:** The District V Forensic Diagnostic Center provides forensic evaluations to assist the courts in decision-making when possible mental health issues are presented by a person accused or, or convicted of, a crime. The Forensic Diagnostic Center will address

community safety issues through a combination of forensic evaluations, risk assessment evaluations, and recommendations for treatment when appropriate (often for those convicted of sexual offenses and/or domestic violence, as well as individuals with drug and alcohol problems).

**Client Populations Served:** Forensic evaluations are completed on persons accused of, or convicted of, a crime and are ordered by the criminal court, juvenile court or municipal court with jurisdiction in the case. The exception is second opinion (non-secured status) evaluations that are requested by the state hospital treating the individual.

**Settings:** The Forensic Diagnostic Center, various jails in 13 county catchment area, Courts of Common Pleas, Municipal Courts or Juvenile Courts or other locations as required.

**Hours and Days of Operation:** At Catalyst/District 5 Forensic Center Monday through Friday from 8:00 a.m. until 4:30 p.m.

**Referral Sources:** Criminal, Juvenile or Municipal Courts in the 13 county catchment area.

**Specific Services Offered:**

Forensic evaluations.

## **VOCATIONAL SERVICES PROGRAM**

### **VOCATIONAL/COMMUNITY EMPLOYMENT SERVICES (CES)**

**Brief Description of Program/Philosophy/Modalities/Goals:** Community employment services assist a person seeking employment in choosing, obtaining and retaining integrated employment in the community. The following categories of services descriptors are available under CES:

Job Development – Successful job development concurrently uses assessment information about the person seeking employment to target the types of jobs available from potential employers in the local labor market.

Job Supports – Ongoing job support services are activities that are employment-related and needed to promote job adjustment retention and advancement. These services are based on the individual needs of the employee with focus on long-term retention of the person in the job after the initial training period.

Job-Site Training – Job-site training services vary according to the needs of the new employee and the complexity of the job. Training can include assisting the employee with performance on the new job task and helping the person to understand the job culture, industry practices and work behaviors expected by the employer. These services are typically not long-term, ceasing after the individual has become stabilized on the job.

**Client Populations Served:** Disabled individuals who have had difficulty obtaining or maintaining education.

**Special Populations and Mechanisms to Address Their Needs:** For consumers with intellectual or other developmental disabilities, activities are coordinated with the Developmental Disabilities Board. For consumers with physical disabilities, activities are coordinated with appropriate outside assistance.

**Settings:** Progress Industries and various other community job sites.

**Hours and Days of Operation:** Vocational Services are offered Monday through Friday, 8:00am – 5:00pm. Occasional exceptions may occur in the event an individual plan requires it.

**After Hours Contact:** Helpline – 419-522-4357, 419-522-HELP

**Frequency of Services:** While participating in Job Development Services, clients typically meet with their Employment Specialist one time a week.

**Payer Sources:** Services are paid for through Temporary Assistance for Needy Families (TANF), Workforce Innovation and Opportunity Act (WIOA) local Area 10 funding, United Way, Opportunities for Ohioans with Disabilities (OOD), managed care organizations (BWC) and contracted services.

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Referrals may be made through Opportunities for Ohioans with Disabilities, schools, Richland County Mental Health and Recovery Services Board, managed care organizations (BWC) or self-referral.

**Specific Services Offered:** Services associated with this program include weekly meetings with assigned Employment Specialist, development of resume, interviewing techniques, development of job search, provide job leads, job coaching and supports on the job as needed. Services provided upon referrals.

### **VOCATIONAL/EMPLOYEE DEVELOPMENT SERVICES (EDS)**

**Brief Description of Program/Philosophy/Modalities/Goals:** Employee development services are individualized services/supports that assist persons seeking employment to develop or reestablish skills, attitudes, personal characteristics, interpersonal skills, work behaviors, functional capacities, etc., to achieve positive employment outcomes. Job Seeking Skills Training-Preparation for Community Employment Services includes interviewing skills, resume writing, cover letters, and soft skills training.

**Client Populations Served:** Individuals who have had difficulty obtaining or maintaining education and employment.

**Special Populations and Mechanisms to Address Their Needs:** For consumers with intellectual or other developmental disabilities, activities are coordinated with the Developmental Disabilities Board. For consumers with physical disabilities, activities are coordinated with appropriate outside assistance.

**Settings:** Progress Industries and various other community job sites.

**Hours and Days of Operation:** Vocational Services are offered Monday through Friday, 8:00am – 5:00pm. Occasional exceptions may occur in the even an individual plan requires it.

**After Hours Contact:** Helpline – 419-522-4357, 419-522-HELP

**Frequency of Services:** Services typically run from 2-4 weeks.

**Payer Sources:** Services are paid for through Temporary Assistance for Needy Families (TANF), Workforce Innovation and Opportunity Act (WIOA) local Area 10 funding, United Way, OOD, managed care organizations (BWC).

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Referrals may be made through Opportunities for Ohioans with Disabilities, schools, Richland County Mental health and Recovery Services Board, managed care organizations (BWC) or self-referral.

**Specific Services Offered:** Services provided included assessment at a specific work site to determine skills level, work behaviors, possible accommodations, interpersonal relationships with supervisor and work peers, attendance and/or need of further education or training. May include a job try out to assist consumer in determining a job goal. Services provided with referral.

### **VOCATIONAL/EMPLOYMENT SERVICES COORDINATION (ESC)**

**Brief Description of Program/Philosophy/Modalities/Goals:** Through employment services coordination, an organization provides goal-oriented and systematic services and supports to the person served through advocacy, coordination of services, and formation of linkages with community resources and services. Successful services coordination results in opportunities for the person served that meet his or her employment-related wants, desires, goals and needs.

**Client Populations Served:** Individuals who have had difficulty obtaining or maintaining education and employment.



**Special Populations and Mechanisms to Address Their Needs:** For consumers with intellectual or other developmental disabilities, activities are coordinated with the Developmental Disabilities Board. For consumers with physical disabilities, activities are coordinated with appropriate outside assistance.

**Settings:** Progress Industries and various other community job sites.

**Hours and Days of Operation:** Vocational Services are offered Monday through Friday, 8:00am – 5:00pm. Occasional exceptions may occur in the event an individual plan requires it.

**After Hours Contact:** Helpline – 419-522-4357, 419-522-HELP

**Frequency of Services:** Services typically run from 2-4 weeks.

**Payer Sources:** Services are paid for through Temporary Assistance for Needy Families (TANF), Workforce Innovation and Opportunity Act (WIOA) local Area 10 funding, United Way, OOD, managed care organizations (BWC).

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Referrals may be made through Opportunities for Ohioans with Disabilities, schools, Richland County Mental health and Recovery Services Board, Managed Care organizations (BWC), or self-referral.

**Specific Services Offered:** Services provided include coordination with referral source, consumer and community agencies to support the consumer in their intended job goal. These may include: referrals for technical assistance, further education/training, volunteer work, job tryouts or further work assessments. Provided with referrals.

### **VOCATIONAL/ORGANIZATIONAL EMPLOYMENT SERVICES (OES)**

**Brief Description of Program/Philosophy/Modalities/Goals:** Organizational employment services are designed to provide paid work to the persons served in locations owned, leased, rented or managed by the service provider. A critical component and value of organizational employment services is to use the capacity of the organization's employment and training service design to create opportunities for persons to achieve desired employment outcomes in their community of choice.

**Client Populations Served:** Individuals who have had difficulty obtaining or maintaining education and employment.

**Special Populations and Mechanisms to Address Their Needs:** For consumers with intellectual or other developmental disabilities, activities are coordinated with the Developmental Disabilities Board. For consumers with physical disabilities, activities are coordinated with appropriate outside assistance.

**Settings:** Progress Industries and various other community job sites.

**Hours and Days of Operation:** Vocational Services are offered Monday through Friday, 8:00am – 4:00pm. Occasional exceptions may occur in the event an individual plan requires it.

**After Hours Contact:** Helpline – 419-522-4357, 419-522-HELP

**Frequency of Services:** Services typically run from 2-4 weeks.

**Payer Sources:** Services are paid for through Temporary Assistance for Needy Families (TANF), Workforce Innovation and Opportunity Act (WIOA) local Area 10 funding, United Way, OOD, managed care organizations (BWC).

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Referrals may be made through Opportunities for Ohioans with Disabilities, schools, Richland County Mental health and Recovery Services Board, Managed Care organizations (BWC), or self-referral.

**Specific Services Offered:** Services include work opportunities to assist consumer in developing appropriate work skills. These may include arriving for work on time, setting an appropriate work schedule, appropriate work attire and hygiene, coping skills related to their disability, how to get along on the job and interpersonal relationships related to work. Services provided with referral.

### **VOCATIONAL/EMPLOYMENT TRANSITIONAL SERVICES**

**Brief Description of Program/Philosophy/Modalities/Goals:** Employment transitional services are designed to provide work skills training to community youth. A critical component and value of employment transitional services is to use the capacity of the organization's employment and training service design to create opportunities for youth to achieve desired education and training outcomes.

**Client Populations Served:** Individuals who have had difficulty obtaining or maintaining education and employment.

**Special Populations and Mechanisms to Address Their Needs:** For consumers with

intellectual or other developmental disabilities, activities are coordinated with the Developmental Disabilities Board. For consumers with physical disabilities, activities are coordinated with appropriate outside assistance.

**Settings:** Progress Industries and various other community job sites.

**Hours and Days of Operation:** Vocational Services are offered Monday through Friday, 8:00am – 5:00pm. Occasional exceptions may occur in the event an individual plan requires it.

**After Hours Contact:** Helpline – 419-522-4357, 419-522-HELP

**Frequency of Services:** Clients participate from 3-4 hours per day Monday through Friday for 2-4 weeks.

**Payer Sources:** Services are paid for through Temporary Assistance for Needy Families (TANF), Workforce Innovation and Opportunity Act (WIOA) local Area 10 funding, United Way, OOD, managed care organizations (BWC).

**Fees:** Fees are based on funding source and service provider. Financial Registration staff are available to meet with clients to assist with determination of fees.

**Referral Sources:** Referrals may be made through Opportunities for Ohioans with Disabilities, schools, Richland County Mental health and Recovery Services Board, Managed Care organizations (BWC), or self-referral.

**Specific Services Offered:** Transitional services are offered to high school students entering the world of work. They are provided work opportunities to develop work skills leading to further education/training or moving directly in to a work environment after graduation. They are provided skills training, taught appropriate work place behaviors and provided guidance on training opportunities and/or higher level education. The Vocational Specialist attends IEP sessions and works directly with high school staff in the coordination of services.