

# Community Stabilization and Reintegration Unit (CSRU)



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# WHAT IS THE CSRU?

The Community Stabilization and Reintegration Residential Unit (CSRU) treats adults over 18 years old who are dually diagnosed with mental illness and an intellectual or developmental disability.

The goal of the CSRU program is to increase independence in personal skills, home skills, community skills, and social skills, while managing challenging behaviors that result from the intellectual developmental disability or other mental health conditions. The intent of the CSRU is to divert dually diagnosed adults from admissions to state hospitals, inpatient units, or state centers. Affording the individuals the necessary skills to return to their home communities to have productive lives is the overall goal of the CSRU program. In addition, another goal of the program is to promote permanency and foster stabilization. This is accomplished through crisis management, individual therapy, and coordination and training with aftercare services.

The length of stay in the program will vary due to the individual care plans, with the average length of stay anticipated at no more than 90 days.

The objective of the CSRU program is to identify the environmental stressors and symptoms of mental disorder leading to unwanted behaviors in order to assist the individuals and those around them in learning appropriate interventions and to foster the development of a support network services aimed at increasing independence through the acquisition of appropriate adaptive and pro-social behaviors.

Clinical interventions will include intensive individual therapy, sensory awareness and integration crisis intervention, Applied Behavioral Analysis along with formal supports of the mental health systems. In addition, the agency's team will work closely with and collaborate with the Dual Diagnosis Treatment Teams (DDTT) if appropriate. The philosophy is to focus on client self-determination and allow the individual and his/her family/community supports to drive the process.

The target population is adults who are dually diagnosed (MH/ID) and in need of diversion from inpatient units and/or state hospitals (the most restrictive mental health level of care) and state centers (the most restrictive Intellectual Disabilities level of care). In most cases, these individuals present with complex emotional, behavioral, physical, and social problems that create challenges for families, service agencies, and community supports.

## Benefits to Clients, Consumers, and the Community:

Many of the individuals targeted for the CSRU program have spent a portion of their lives in state hospitals, state centers, psychiatric units, and/or are in danger of entering this level of care for the first time. This unit will be one of a kind in the Commonwealth and its main objective is to stabilize and divert these individuals from requiring higher levels of psychiatric care. This program, hopefully, will provide this vulnerable population of adults the opportunity to live productive and content lives in their home communities with supportive services working with them.

# ADMISSION CRITERIA

The CSRU will consider for treatment adult individuals who meet the following criteria:

- Presentation with co-morbidity specific to an intellectual and developmental disability and an Axis I diagnosis as described in the DSM IV and its revisions.
- Meet all of the related managed care organization medical necessity criteria specific to this level of care.
- Be in a crisis or have frequent utilization of crisis services.
- Be at risk of losing current community placement that may be a result of one or more of the following, but not limited to:
  - Admission to a hospital's behavioral unit (multiple admission within one year)
  - A state hospital admission
  - A state center admission
  - Any placement in a criminal detention center

- Documentation that the person continues to pose a risk of harm to self or others and is unable to care for themselves in a community setting, but is not in need of acute inpatient psychiatric hospitalization.
- Documentation that the person has a medical condition or illness that cannot be managed in a less intensive level of care, because the psychiatric, intellectual developmental disability and medical conditions so affect each other that there is a significant risk of medical crisis or instability.
- Confirmation that the individual's judgment or functional capacity is so impaired that self maintenance, occupational, or self functioning is severely threatened.
- Verification that there is an increase in the severity of symptoms such that continuation at a less intense level of care cannot offer an expectation of improvement of the prevention of deterioration.

Persons admitted to the residential CSRU must be voluntarily agreeable to treatment under Section 201 of the Mental Health Procedures Act or involuntarily placed for treatment under Sections 303 or 304 of the Mental Health Procedures Act. Voluntary admissions under Section 201 must be arranged so that a physician is on site at the CSRU to complete the examination and preliminary treatment plan, or the individual referred must be seen the same day by a physician who has completed the evaluation, physical examination and preliminary treatment plan and provides this documentation to the CSRU.

Persons referred who require medical care beyond the scope of this program/facility may not be appropriate for admission. The Treatment Team reserves the right to exclude any individual who exhibits repeated incidents of high-risk behaviors and/or a combination of high-risk behaviors that cannot be safely served in this setting. In addition, the program may also exclude any individual if it is deemed that admission in the current population would not be appropriate for the clientele in care.

