Coleman SM
HEALTH SERVICES

PROGRAMS & SERVICES

Coleman Professional Services dba Coleman Health Services

FY 2027 – AGENCY PLAN

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Coleman Health Services

MISSION

We Foster Recovery, Build Independence, and Change Destinies.

VISION

We aspire to improve the health and mental wellness of our communities through compassionate, evidence-based services and support.

VALUES

Inclusivity
Transparency
Innovation
Collaboration
Compassion
Responsiveness
Excellence

CLINICAL PHILOSOPHY

WE BELIEVE THE PEOPLE WE SERVE:

Wish to fully participate in their communities, their families, their work, and their lives.
Have capacity, capability, strengths, and motivation.
Can use these to develop the essential skills to manage their symptoms, modify their behaviors and achieve their optimum functioning in a recovery-oriented environment.
Seek opportunities for self-awareness, improvement, growth, and wellness.
Expect to be actively involved in the assessment, service planning and care delivery processes.
Desire to be engaged in a respectful, collaborative partnership with their service providers.
Wish for services that provide for, facilitate and support opportunities to achieve mutually desired outcomes in the least amount of time and in the least restrictive and disruptive environment.

WE BELIEVE OUR SERVICES ARE:

Part of a larger continuum of care.
Fully aligned with our corporate mission, vision, principles, clinical philosophy, and protocols.
Provided in an environment of hope, trust, empathy, and support systems.
Reflective of current and emerging best practices.

Designed to deliver consistent, predictable, and known outcomes that are measurable, observable and time specific.

Client centered and provided according to the level of care, with regard to frequency, duration, and intensity of need for people seeking services and throughout the service delivery process.

Solution focused and recovery based.

Provided by staff with the necessary resources to effectively use clinical protocols, evidence-based and best practices and persons are served in an efficient and productive manner.

Provided by staff who are excited about contributing to further development and refinement of future evidence based and best practices for Coleman Health Services, the State of Ohio, and the national behavioral health care field.

Assertive Community Treatment (ACT)

MISSION:

To provide team-based, shared caseload behavioral health treatment to individuals with a severe and persistent mental illness that have not responded well to more traditional treatment approaches.

PHILOSOPHY:

Individuals with serious mental illness can live fulfilling lives and thrive in their communities. This multidisciplinary approach creates caring, consistent, person-centered relationships that have a positive effect upon outcomes and quality of life.

GOALS:

- Clients will reduce utilization of behavioral health inpatient or crisis stabilization settings.
- Clients will remain in the community in the least restrictive environment.
- Clients will reduce or abstain from substance use.
- Clients will have no involvement in the criminal justice system.
- Clients participating in Individualized Supported Employment services will achieve competitive employment within one year.

ADMISSION CRITERIA:

- Meet Ohio criteria for this service
- Clients must agree to the minimum frequency of services for the program.

SETTINGS:

- Community
- Office
- Telehealth

DAYS/HOURS OF SERVICE:

- Scheduled service hours are Monday thru Friday 8:30AM-5:00PM
- Varying weekend service hours
- On-call 24/7

SERVICES PROVIDED:

- Evaluation and Management
- Psychotherapy for Crisis

Individual Psychotherapy
Therapeutic Behavioral Services (TBS)
Psychosocial Rehabilitation (PSR)
Peer Support
Individualized Supported Employment
Group Psychotherapy
Family Psychotherapy
Alcohol and/or drug assessment
SUD counseling and therapy
SUD case management
SUD nursing services
SUD Peer Recovery Support

INDIVIDUALS SERVED:

Clients with a severe and persistent mental illness, including Schizophrenia, Schizoaffective Disorder, Bipolar I Disorder, and Major Depressive Disorder with Psychotic Features.

Special Populations:

- SPMI
- Frequent episodes requiring an inpatient level of care,
- Frequent involvement in the justice system
- Co-occurring substance use disorders

REFERRAL SOURCES:

Individual
Family
Hospitals, emergency departments, health systems, and other medical providers
Prisons and jails
Internal referrals
External service agencies, including developmental disability agencies
Government agencies
Referrals are not needed to receive services

PAYOR SOURCES:

Mental Health and Recovery Boards
Medicaid
Ohio MyCare plans

FEES:

Sliding scale

FREQUENCY OF SERVICE:

The frequency of service is expected to align with the needs, abilities, and level of care of persons served with an average of two contacts per week

SERVICE MODALITY:

Individual in-person sessions in provider offices, homes of persons served, and/or other areas in the community

Individual phone sessions

Group in-person sessions in provider offices or other areas in the community

Individual in-person psychiatrist sessions

Behavioral Family Therapy

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Stark County

Platform used: phone, MS Teams, MEND

TRANSITION/DISCHARGE CRITERIA:

Meet Department of Behavioral Health (DBH) criteria for ACT discharge

EXCLUSIONARY CRITERIA:

Client does not reside in the county where services are being provided.

Client is enrolled in ACT at another provider agency.

Client is less than 18 years old.

CREDENTIALS OF STAFF:

MD/DO, RN, LPN, LPCC, CDCA, Case Manager; QMHS, Peer Support (PRS)

Diagnostic Assessment

MISSION:

To provide a process of gathering information to assess client needs, circumstances, and functioning to determine appropriate mental health, substance-related and addiction and/or employment and vocational rehabilitation services based on the results of the assessment.

PHILOSOPHY:

Our diagnostic assessment service is grounded in the belief that accurate, compassionate and culturally responsive evaluations are the foundation for effective mental health care. We strive to understand each individual's unique experiences and needs, guiding treatment planning through evidence-based practices that promote healing, empowerment and well-being.

GOALS:

- Provide a clinical assessment to determine diagnosis and functioning.
- Determine the treatment needs based on assessment.

ADMISSION CRITERIA:

- Adults
- Adolescents
- Children
- Adults and Transitional Age Youth
- Evidence of symptoms of a disorder recognized in DSM-V.
- Evidence of a disability for employment and vocational rehabilitation services.

SETTINGS:

- Office
- Community
- Schools
- Jails/Juvenile Detention Centers
- Telehealth

DAYS/HOURS OF SERVICE:

- All locations have schedules established for the assessment clinics for same-day assessments, which typically occur during business hours of M-F 8a-5p.
- Some business units have extended hours and/or crisis services which are available 24/7.

SERVICES PROVIDED

- Mental health, substance use and addictive disorders assessment
- Identification of treatment needs and goals
- Enrollment in appropriate CHS behavioral health services
- Advocacy, education, information, and referral
- Crisis intervention

INDIVIDUALS SERVED:

- Adults
- Adolescents
- Children
- Older adults and their families
- Specialty populations:
  - SPMI
  - SED
  - Dual diagnosed MH/SUD
  - First Episode Psychosis
  - Transitional Age Youth
  - Forensic

PAYOR SOURCES:

- Mental Health & Recovery Boards
- Medicaid
- Medicare
- Commercial insurance

FEES:

- Sliding scale

FREQUENCY OF SERVICES:

- Service initiation
- As needed

SERVICE MODALITY:

- Cognitive Behavioral Therapy
- Motivational Interviewing

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Within the state of Ohio

Platform used: MEND

TRANSITION/DISCHARGE CRITERIA:

Discharge criteria is met after assessment is completed and appropriate referral to ongoing services is made.

EXCLUSIONARY CRITERIA:

Individuals who do not reside in the county they are seeking services in and do not have a payor source, except in the event of a crisis and/or emergency.

CREDENTIALS OF STAFF:

Independently or dependently licensed as Counselors, Social Workers, Marriage & Family Therapist, or trainees.

Psychologists or Psychologist Assistants.

Case Management - Adult

MISSION:

To work collaboratively with clients with mental health and substance use disorders to improve their symptoms and activities of daily living, help them maximize independence, and support their recovery goals.

PHILOSOPHY:

Case Management is a service intended to help clients manage symptoms of mental illness and build skills to improve social determinants of health areas in their lives. Case managers meet clients in their home and community to provide practical assistance in building and using coping skills actively to reduce the negative impact of mental illness on their ability to meet basic needs independently.

GOALS:

- Improve the ability of clients to succeed in the community through the provision of individualized services.
- Identify and link client to needed services and community resources.
- Improve community integration by assisting client in developing skills to improve functioning in major life domains (i.e., school, work, family, social, recreational, health).
- Coordinate primary care and behavioral health care.
- Decrease negative social determinants of health.
- Enhance coping skills around behavioral health symptoms.

ADMISSION CRITERIA:

- 18 years of age or older or emancipated youth who will turn 18 during year of service provision.
- Coleman Health Services client
- Meet DBH criteria for TBS, PSR and CPST services

SETTINGS:

- Community
- Office
- Telehealth

DAYS/HOURS OF SERVICE:

- Monday – Friday 8am – 5pm
- Evening hours are available
- Case Managers adjust hours to meet the needs of the individuals

SERVICES PROVIDED:

Develop and coordinate the individual treatment plan.
Identify, link, and refer to community resources and healthcare services
Training and monitoring of clients in the use of resources, including assessment of ongoing needs.
Identification of strategies or treatment options.
Provide opportunities for families and significant others to become involved in treatment planning and implementation.
Encourage and assist in developing personal and social support networks.
Advocacy and outreach for the client.
Assistance with symptom monitoring.
Crisis Prevention and amelioration.
Skill training to address symptoms/behaviors of behavioral health disorders and improve positive impact on the client's environment.
Referral and linkage to, and coordination of intra- and inter-agency services and activities that increase client's ability to positively impact their environment.
Facilitation and development of daily living skills.
Education/training specific to clients' needs, abilities, and readiness to learn.
Restoration of social skills and daily functioning.

INDIVIDUALS SERVED:

Clients of CHS who have an identified behavioral health need and would benefit from case management services.
Special Populations:
- Dual Diagnosed MH/SUD
- Dual-Diagnosed MI/DD
- First Episode Psychosis
- Forensic
- LGBTQIA+
- Re-Entry (CTP)
- Refugee
- Transitional Age youth

REFERRAL SOURCES:

Internal referrals
Individual
Family
External service agencies
Criminal Justice System
In Patient Psychiatric/Medical Hospitals
Physical health care providers
Schools

PAYOR SOURCES:

Mental Health and Recovery Boards
Medicaid
Ohio MyCare plans

FEES:

Sliding scale

FREQUENCY OF SERVICE:

The frequency of service is expected to align with the needs, abilities, and level of care of the client, as well as benefit limits established by payers.

SERVICE MODALITY:

Individual face-to-face sessions in provider office, home of client, and/or other areas in thecommunity.
Individual phone or telehealth sessions.
Group face-to-face sessions in provider office or community.
Motivational Interviewing

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Within the state of Ohio
Platform used: phone, MS Teams

TRANSITION/DISCHARGE CRITERIA:

Person served has moved from their county of residence to another.
Person served is eligible for Case Management but requests that services be terminated.
Person served is eligible for Case Management, but their needs are being met by other services or service providers.
Person served is eligible for Case Management but did not return for service or respond to attempts to contact/engage.
Completed goals on Individual Service Plan and no longer has Case Management needs.

EXCLUSIONARY CRITERIA:

Resident of a county outside of the one in which they are seeking services.

CREDENTIALS OF STAFF:

QMHS HS: High school diploma
QMHS +3: Three years of experience in human services field

QMHS Bachelors: B.A. /B.S. in related field
QMHS Masters: M.A./M.S. in related field (no license)
LSW, LPC or (independent) higher license

Case Management - Child & Transitional Youth

MISSION:

To work collaboratively with youth and transitional-aged youth clients and families to reduce symptoms of mental illness and resolve problem behaviors that negatively impact functioning in the family, school, and other life settings.

PHILOSOPHY:

Case Management is a service intended to help clients manage symptoms of mental illness and build skills to improve social determinants of health areas in their lives. Case managers meet clients in their home and community to provide practical assistance in building and using coping skills actively to reduce the negative impact of mental illness on their ability to meet basic needs independently. With children and families, case managers support meaningful behavior change within family systems in conjunction with other services.

GOALS:

To promote stability, well-being, and successful transitions by coordinating individualized services that support the social, emotional, educational, and developmental needs of children and transitional-aged youth.

ADMISSION CRITERIA:

Youth (age 20 and under)
Transition Age Youth (ages 21-26)
Coleman Health Services client
Meet DBH criteria for TBS, PSR and CPST services

SETTINGS:

Community
Office
Schools
Jails/Juvenile Detention Centers
Telehealth

DAYS/HOURS OF SERVICE:

Monday – Friday 8am – 5pm

Evening hours are available in each business unit.
Case Managers adjust schedules to meet the individual needs of people served.

SERVICES PROVIDED:

Development and coordination of an Individual Service Plan.
Review and monitoring of services and progress within services.
Coordination of service planning and resource identification.
Training and monitoring of persons served in the use of resources.
Provide opportunities for families and significant others to become involved in treatment planning and implementation.
Encouragement and assistance in the development of formal and informal community supportnetworks
Advocacy for persons served.
Crisis prevention and amelioration.
Assistance in obtaining services necessary to meet basic human needs.
Referral and linkage to and coordination of intra- and inter-agency services.
Coordination with schools, community agencies, primary care physicians, hospitals, juvenile court, and probation.
Education of client and parent about their mental illness.
Restoration of social skills and daily functioning

INDIVIDUALS SERVED:

Children and young adults (up to age 26) with a mental health or substance use disorder
Special Populations:
Transitional-aged youth

REFERRAL SOURCES:

Internal referral sources
Jobs & Family Services
Individual
Family
Criminal Justice System
Community agencies
Schools
Primary Care Physician

PAYOR SOURCES:

Medicaid
Grants
Community Mental Health Board

FEES:

Sliding scale

FREQUENCY OF SERVICE:

Frequency of services follows the service plan, the Coleman Level of Care, and the ODMH Medicaid Benefit Limits.

SERVICE MODALITY:

Individual face-to-face sessions in provider office, home of client, and/or other areas in the community.
Individual phone or telehealth sessions.
Group face-to-face sessions in provider office or community.
Transition to Independent Process (TIP).

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Within the state of Ohio
Platform used: phone, MS Teams

TRANSITION/DISCHARGE CRITERIA:

Person served has moved from their county of residence to another.
Person served is eligible for case management but requests that services be terminated.
Person served is eligible for case management, but their needs are being met by other services or service providers.
Person served is eligible for case management but did not return for service or respond to attempts to contact/engage.
Completed goals on Individual Service Plan and no longer has case management needs.

EXCLUSIONARY CRITERIA:

Resident of a county outside of the one in which they are seeking services.

CREDENTIALS OF STAFF:

QMHS HS: High school diploma
QMHS +3: Three years of experience in human services field
QMHS Bachelors: BA /BS in related field
QMHS Masters: MA/MS in related field (no license)
LSW, LPC or (independent) higher license

Counseling/Psychotherapy Services

MISSION:

To provide counseling/psychotherapy services to residents based on their severity of need. These services are provided to individuals who are experiencing personal/emotional distress and/or substance use disorders.

PHILOSOPHY:

Counseling/psychotherapy services are aligned with the CHS philosophy and designed to support recovery service provision should include an endorsed evidence-based practice or endorsed clinical protocol.

GOALS:

Provide client centered psychotherapy to reduce symptoms of subjective distress and objective functional impairments.

ADMISSION CRITERIA:

Evidence of symptoms of a disorder recognized in Diagnostic and Statistical Manual of Mental Disorders (mental health and substance use disorder).

SETTINGS:

Community
Schools
Office
Telehealth

DAYS/HOURS OF SERVICE:

Monday – Friday 8:00am – 5:00pm
Some business units offer evening and weekend hours

SERVICES PROVIDED:

Individual Psychotherapy
Group Psychotherapy
Family/Couples Psychotherapy
Crisis Intervention
Ongoing assessment of treatment needs

INDIVIDUALS SERVED:

Individuals who experience personal emotional distress which impairs interpersonal, occupational, and social functioning or a condition which subjectively impacts upon the client's internal sense of well-being. Individuals experiencing substance use disorders.

Adults

Adolescents

Children

Families

Specialty populations:

- SPMI
- SED
- Dual Diagnosed MH/SUD
- Dual Diagnosed
- ID/DD
- First Episode Psychosis
- Transitional Age Youth
- Forensic

REFERRAL SOURCES:

Self

Family

Physicians

Hospitals

Internal referrals

Agencies

Criminal Justice System

Schools (primary and secondary)

Fire/EMS

PAYOR SOURCES:

Mental Health & Recovery Boards

Medicaid

Medicare

Self-pay

Commercial Insurance

FEES:

Sliding scale

FREQUENCY OF SERVICE:

The frequency of service is guided by the Individualized Treatment Plan and must be aligned with Coleman's Level of Care and DBH rules and regulations.

SERVICE MODALITY:

Cognitive Behavioral Therapy
Dialectical Behavioral Therapy
Motivational Interviewing
Integrated Dual Disorders Treatment (IDDT)
Cognitive Processing Therapy
Cognitive Behavioral Therapy for Chronic Pain
Transition to Independence Process
Trauma Focused Cognitive Behavioral Therapy
Cognitive Behavioral Therapy for Psychosis
EMDR Therapy
Acceptance and Commitment Therapy
Community Reinforcement Model
Intensive Homebased Therapy
Assertive Community Treatment
Assessing and Managing Suicide Risk

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Within the state of Ohio
Platform used: phone, MS Teams, MEND

TRANSITION/DISCHARGE CRITERIA:

Attainment of treatment goals for this episode of care.
Recommendation by therapist that no further benefits shall be accrued in treatment.
Exceeded the length of stay for the level of care and service no longer medically necessary.
Client's or client family member's decision to terminate treatment (i.e., in the case of a Child).
Referral to another treatment facility on mutual agreement by client and service provider.
Client moves out of county.
Exceeded no show/same-day cancellation allowance.

EXCLUSIONARY CRITERIA:

No payer
Resides outside of county of service

CREDENTIALS OF STAFF:

Independently or dependently licensed as Counselor, Social Worker, or Marriage & Family Therapist Trainees; Psychologists or Psychologist Assistants; CDCA, LCDCII, LCDCIII, LICDC

Crisis Services

MISSION:

To provide access to behavioral health services for persons experiencing a crisis. Crisis intervention services are provided via walk in, mobile response, video conferencing, or telephone.

PHILOSOPHY:

A comprehensive and integrated crisis network serves as the first line of defense in preventing tragedies
Effective crisis care that saves lives and dollars
Essential elements within a no-wrong-door integrated crisis system

Someone to Contact:

- Behavioral Health Hotline (BHH) and 988

Someone to Respond:

- Mobile Crisis and Outreach Services
- Mobile Response and Stabilization Services (MRSS)

A Safe Place for Help:

- Crisis Receiving Units
- Crisis Stabilization Units

GOALS:

Linkage to outpatient services and/or community resources
Recommendation/referral to the most appropriate level of care
Assess to provide and/or coordinate access to the appropriate level of care.
Provide crisis support for immediate stabilization.
Coordination of ongoing services.

Crisis Contact Centers (BHH/988)

MISSION:

To “rapidly respond to and resolve crises in a manner that is sensitive to the needs, preferences, cultural backgrounds of persons served and that protects their safety and the safety of others.” (2024 Behavioral Health Standards Manual, p. 193)

PHILOSOPHY:

The Crisis Contact Center operates with a core philosophy rooted in providing accessible, compassionate and confidential support for individual experiencing mental health-related distress, including suicidal thoughts, substance use crises and emotional distress.

GOALS:

Quick response to a caller.

Screening, support, and intervention is appropriate based on caller identification of caller needs, preferences, cultural backgrounds, and safety of caller and others.

Information is provided regarding services and referral to appropriate services are made.

Crisis resources both internal and external to Coleman Health Services are coordinated for appropriate responses to caller’s situation, including but not limited to other behavioral health organizations and emergency systems.

ADMISSION CRITERIA (CALL ANSWER CRITERIA):

A crisis line is called, or chat/text is initiated by a person.

SETTINGS:

Caller contacts are available via phone lines and/or chat/text.

988 lines and chat/text lines may serve persons within the agency’s office, county, state, United States, or Canada.

Some dedicated caller lines are specified for particular counties in Ohio or particular services within a county, i.e. a homeless, veteran, adult protective service lines or county mental health board crisis lines.

DAYS/HOURS OF SERVICE:

24/7/365

SERVICES PROVIDED:

Support, intervention, and crisis management by phone, chat or text.

Provision of suicide, homicide, and other potential violence prevention intervention.

Specific inquiry regarding suicide is asked of each person.

Inquiry of persons regarding whether they have a crisis safety plan and incorporating their information from the plan in intervention for the person.

Interventions provided are based on assessed risk to the person and/or others.

Information provided will link persons to needed services and referrals will be made as appropriate for client needs and preferences.

Information and referral will be made for immediate psychiatric and medical services when indicated. Interventions may include mobile crisis services for adults and youth, a crisis center, a behavioral health urgent care, a hospital emergency room, involvement of emergency management services, or law enforcement, etc.

Calls of agency clients are documented in the Electronic Health Record.

Calls of clients who are not agency clients are documented as inquiries within the Electronic Health Record.

INDIVIDUALS SERVED:

Persons with a perceived emotional health crisis or other behavioral health emergency need, who call, text or chat to the hotline

Any eligible person who contacts the hotline/crisis line via phone, chat or text.

Caller patterns of abusive contacts may be excluded, such ongoing patterns of pranking, harassing, sexually inappropriate, or other inappropriate contacts.

Adults

Adolescents

Children

Specialty Populations:

- SPMI
- SED
- Dual diagnosed MH/SUD
- First Episode Psychosis
- Transitional Age Youth

REFERRAL SOURCES:

Referrals can come from any source and may include but are not limited to any of the following, self, family, physicians, hospitals, law enforcement, the criminal justice system, schools, other behavioral health organizations, fire and EMS, religious organizations.

Referrals are not needed to receive services

PAYOR SOURCES:

Mental Health & Recovery Boards
Medicaid
Private insurance
Grants

FEES:

There are no fees associated with use of the hotline or crisis call center.

FREQUENCY OF SERVICE:

As needed

SERVICE MODALITY:

Assessing and managing suicide risk
Counseling for access to lethal means
Zero suicide
Safety planning (Stanley, Brown)

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Generally state of Ohio
Platform used: phone, Vibrant 988 platform

TRANSITION/DISCHARGE CRITERIA:

Clients are not "admitted" to service and do not require discharge
The service ends or is transitioned when:
- The client disconnects the call/stops responding to messages
- Perceived behavioral/emotional health crisis or need has been stabilized or resolved.
- Appropriate clinical referral or admission has been offered and arranged.
- Does not present an imminent safety risk to self or others due to a mental health condition.

EXCLUSIONARY CRITERIA:

Current impairment from intoxicating substance which significantly impedes interview process.
Co-occurring medical conditions that require immediate attention.

CREDENTIALS OF STAFF:

Associate's degree and working toward credentialing under Chemical Dependency Professionals Board
Chemical Dependency Counselor Assistant (CDCA)

Licensed Chemical Dependency Counselor II (LCDCII) or higher
Independently or Dependently Licensed as Counselors, Social Workers, Marriage and Family Therapists
High school diploma, working towards CDCA

Mobile Crisis and Outreach Services

MISSION:

To provide access to behavioral health services for persons experiencing a crisis. Crisis intervention services are provided via walk in, mobile response, video conferencing, or telephone.

PHILOSOPHY:

A comprehensive and integrated crisis network serves as the first line of defense in preventing tragedies
Effective crisis care that saves lives and dollars
An essential element within a no-wrong-door integrated crisis system

GOALS:

Linkage to outpatient services and/or community resources
Recommendation/referral to the most appropriate level of care
Assess to provide and/or coordinate access to the appropriate level of care.
Provide crisis support for immediate stabilization.
Coordination of ongoing services.

ADMISSION CRITERIA:

Primary mental health or acute need
Primary substance use disorder
Dual Diagnosis MH & SUD

SETTINGS:

Home
Office
Community
Hospital Emergency Department
Schools
Jails
Telehealth

DAYS/HOURS OF SERVICE:

24/7/365

SERVICES PROVIDED:

- Emergency mental health evaluation
- Hospital pre-screening
- Walk in and scheduled diagnostic assessment
- Substance abuse assessment
- Referral and linkage to community agencies, hospitals, or CHS providers
- Community consultation
- Assistance with obtaining and/or coordinating mental health services
- Emergency mobile outreach
- Hospital liaison
- Crisis drop-in counseling
- Medication management (Stark)

INDIVIDUALS SERVED:

- Persons with a perceived emotional health crisis or other behavioral health emergency need, who present themselves voluntarily or involuntarily.
- Adults
- Adolescents
- Children
- Special Populations:
    - SPMI
    - SED
    - Dual diagnosed MH/SUD
    - First Episode Psychosis
    - Transitional Age Youth

REFERRAL SOURCES:

- Crisis Call Lines
- Individual
- Family
- Physicians
- Hospitals
- Agencies
- Schools
- Mental Health & Recovery Boards
- Criminal Justice System
- Fire/EMS
- Referrals are not needed to receive services

PAYOR SOURCES:

Mental Health & Recovery Boards
Medicaid
Private insurance

FEES:

Sliding scale

FREQUENCY OF SERVICE:

As needed

SERVICE MODALITY:

Assessing and managing suicide risk
Counseling for access to lethal means
Zero suicide
Safety planning (Stanley, Brown)

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Within the state of Ohio
Platform used: phone, MS Teams, MEND

TRANSITION/DISCHARGE CRITERIA:

Perceived behavioral/emotional health crisis or need has been stabilized or resolved.
Appropriate clinical referral or admission has been offered and arranged.
Does not present an imminent safety risk to self or others due to a mental health condition.

EXCLUSIONARY CRITERIA:

Current impairment from intoxicating substance which significantly impedes interview process.
Co-occurring medical conditions that require immediate attention.

CREDENTIALS OF STAFF:

Independently or Dependently Licensed as Counselors, Social Workers, Marriage and Family, or Counselor, Social Worker, Marriage and Family Trainees
For those staff able to author an involuntary commitment, the staff has been named as *Health Officer* through that county's mental health and recovery board

Mobile Response and Stabilization Services (MRSS)

MISSION:

The MRSS (Mobile Response Stabilization Service) program is **t**o provide rapid, community-based crisis intervention and stabilization services to youth, young adults, and families experiencing behavioral or emotional distress.

VISION

Mobile Response and Stabilization Services (MRSS) is to prevent out-of-home placements, reduce unnecessary use of emergency services, and minimize involvement in child welfare and juvenile justice systems for young people experiencing behavioral health crises.

PHILOSOPHY:

The philosophy of Mobile Response and Stabilization Services (MRSS) is centered around providing rapid, community-based, and family-driven support for young people experiencing behavioral health crises.

GOALS:

Mobile Crisis Response and Stabilization Services (MRSS) are one example of a cost-effective alternative to the use of Emergency Departments and inpatient treatment. MRSS provides mobile, on-site and rapid intervention for youth experiencing a behavioral health crisis, allowing for immediate de-escalation of the situation in the least restrictive setting possible; prevention of the condition from worsening; and the timely stabilization of the crisis.

ADMISSION CRITERIA:

- Youth (age 20 and under) who are experiencing a crisis
- Lives in a county of service

SETTINGS:

- Community
- Face to Face primarily
- Telehealth at times

DAYS/HOURS OF SERVICE:

- M-F 8am – 8pm; 24/7/365 at some locations

SERVICES PROVIDED:

Screening and Triage
Initial Mobile Response
Stabilization

INDIVIDUALS SERVED:

Youth (age 20 and under) and their family
Special Populations:
- SPMI
- SED
- Transitional Age Youth

REFERRAL SOURCES:

988 hotlines
Regional Management Provider (RMP)
Local crisis hotlines
Law enforcement
Youth and families
Schools and other community systems

PAYOR SOURCES:

Ohio Managed Care Medicaids (including OhioRISE)
Commercial Insurance

FEES:

There are NO fees to any persons served under this program.
Regional Management Providers (RMP's) for each region in the state will ensure proper billing is handled between MCO's, OhioRise (Aetna), including private payors that will be processed at zero payment for this service.

FREQUENCY OF SERVICE:

This initial mobile response period is up to 72 hours with a stabilization service period of up to 6 weeks (42 days maximum). Any client identified as needing services past 42 days will require prior authorization from the client's insurance provider. An initial response should occur within 48 hours to be considered a crisis. Families/young persons may return to services as needed with a new family defined crisis and requested assistance for another episode of care

SERVICE MODALITY:

Crisis Interventions/Safety Planning
Family and Systems Therapy
Motivational Interviewing
Case Management, assessment of and linkage for SDOF supports

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Within the state of Ohio, in contracted counties
Platform used: phone, MS Teams, MEND

TRANSITION/DISCHARGE CRITERIA:

Upon goal completions or up to a max of 42 days of services
Per family/young person's request for termination
Linkage to high intensity Outpatient Care (IHBT, MST, ACT)
Long term hospitalization or residential placement

EXCLUSIONARY CRITERIA:

Young persons enrollment in high intensity outpatient program (IHBT, MST, ACT)
Hospitalization/Residential Placement
IOP/PHP
Young Persons must be in the community to engage in MRSS

CREDENTIALS OF STAFF:

Independently or Dependently Licensed as Counselors, Social Workers, Marriage and Family Therapists
Family or Youth Peer Supporter
QBHS

Crisis Receiving Units

Coming soon

MISSION:

Crisis Receiving Unit (CRU) will provide services 24/7/365 days a year with the expectation of no barrier to access and stabilization of a client presenting in a mental health crisis. The agency will promote Crisis Receiving Unit as a safe place for help and there is no wrong door for service requests.

PHILOSOPHY:

The service will provide evidence-based strategies using trauma-informed care and be responsive to our clients' holistic needs. The CRU will ensure a proper pathway to care that is timely and adequate to meet the needs of the individual being served.

GOALS:

Provide assessment and care for individuals in a behavioral health crisis.

A primary goal is to provide a safe environment for assessment and referral to another care setting based on the level of care needed within less than 24 hours of presentation to the CRU.

This specialized environment provides an alternative to traditional emergency room evaluation.

The CRU provides an expedited process for first responders.

ADMISSION CRITERIA:

Primary Behavioral Health or acute need

18 -20 years of age to triage and refer to MRSS

21 years of age or older to remain for assessment

Voluntary and involuntary admission

SETTINGS:

CRU provides a secure unit consistent with accreditation body standards.

CRU will have a dedicated law enforcement/emergency medical services drop off.

CRU ensures policies/procedures that are in compliance and has physical and staffing capacity for seclusion and restraints as needed.

Crisis Receiving Unit will provide an open milieu concept.

DAYS/HOURS OF SERVICE:

24/7/365

SERVICES PROVIDED:

Crisis triage assessment
Crisis intervention
Diagnostic assessment
Medication management
Point of care testing and access to laboratory services
Management of symptoms of substance use, and withdrawal
Safety planning
Medical planning for support of any physical health issues
Discharge planning with referrals to clinically appropriate levels of care

INDIVIDUALS SERVED:

Voluntary or involuntary individuals who present to the CRU who are age 18 or older

REFERRAL SOURCES:

Self Referral
Family
Crisis Call Lines
Criminal Justice System
Community Agencies
Primary Care Physician
Police/Fire/EMS
Emergency Department/Hospitals
Mental Health and Recovery Board
Referrals are not needed to receive services

PAYOR SOURCES:

Medicaid
Medicare
Commercial Insurance
Mental Health and Recovery Boards

FEES:

Sliding scale

FREQUENCY OF SERVICE:

Services are provided as needed.
The Crisis Receiving Unit is available to the community 24/7/365 days a year.

SERVICE MODALITY:

Crisis Receiving Unit will mostly provide services in person in a face-to-face manner with an individual. There will be times when some services may have to initiate telehealth, virtually, as permitted by regulations.

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Clients must be present in the CRU

Platform used: MS Teams, MEND

TRANSITION/DISCHARGE CRITERIA:

Discharge criteria are met after assessment is completed and appropriate referral to ongoing services is made.

EXCLUSIONARY CRITERIA:

Emergency Medical Necessity

Under age 18

CREDENTIALS OF STAFF:

Psychiatrist, MD, or DO; APRN/CNS/PA; RN/LPN; LISW/LSW; LPC/LPCC; QMHS

Crisis Stabilization Services

MISSION:

To provide a 24-hour environment with crisis support, supervision, and clinical treatment for persons experiencing an emotional crisis, and who could benefit from an alternative setting rather than hospitalization. The Crisis Stabilization Unit (CSU) will serve to strengthen a person's individual ability to function at the highest level of independence achievable in the community upon discharge.

PHILOSOPHY:

The Philosophy of Crisis Stabilization Services is aligned with the CHS philosophy designed to support recovery in the least restrictive environment.

GOALS:

- Stabilize to prevent a higher level of care.
- Intensive treatment to prepare for community level of care.

ADMISSION CRITERIA:

- 18 years of age or older
- Voluntary admission
- Medically stable
- Free of behavior that poses risk to others
- Agrees to follow and participate in treatment and the Unit rules at or beyond Coleman Health Services.
- Persons who reside in shelters and who need temporary transitional housing due to an emotional crisis, lack of resources and referred by a community agency.
- Hospital step-down as requested from inpatient unit.
- Need for respite from situational stressors/event to present decompensation.

SETTINGS:

- Crisis Stabilization Unit (CSU)

DAYS/HOURS OF SERVICE:

- 24/7/365

SERVICES PROVIDED:

- Assistance with daily living activities
- Safe and supportive environment

Medication intervention and monitoring
Medication teaching and health promotion
Coordination and linking with intra-/inter-agency services
Socialization skills training
Therapeutic treatment activities
Linkage with family as a support system
Exploration of housing options with Case Manager assistance
Independent living skills training
Post hospital stabilization

INDIVIDUALS SERVED:

A person needing shelter due to a perceived emotional crisis or an emergency needing 24-hour support and supervision.
A person with a mental disability qualifying for post-hospitalization evaluation, stabilization, or treatment benefiting from a 24-hour supervised setting.
A person residing in a shelter or unsafe housing condition who due to some emotional or financial crisis, are in need of temporary transitional housing.
A person suffering from a crisis who needs medication stabilization and linkage to other inter- and intra-agency services.
Special Populations:
SPMI
Dual diagnosis mental health and SUD

REFERRAL SOURCES:

Hospitals
Individual
Family
Internal providers
Physicians
Criminal Justice System
Fire/EMS
Agencies

PAYOR SOURCES:

Mental Health and Recovery Boards
Contracts
Client
Medicaid
Commercial Insurance

FEES:

Sliding scale

FREQUENCY OF SERVICE:

Average length of stay is expected to be 10 days or less.

SERVICE MODALITY:

Most services provided in person in facility setting with some services available via telehealth
Individual & Group sessions
Motivational Interviewing
Cognitive Behavioral Therapy
DBT Skills training

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Clients must be present in the CSU
Platform used: MS Teams, MEND

TRANSITION/DISCHARGE CRITERIA:

Stabilization of perceived emotional crisis or emergency situation.
Achieved treatment goals and objectives.
Linkage, referral, or both to intra-agency services, community services, etc.
Admission to hospital or a different level of care.
Refusal of treatment in program.
Unable to maintain residential contract.
Unable to follow Crisis Intervention/Residential Services Unit rules.

EXCLUSIONARY CRITERIA:

Individuals under 18 years old
Medically unstable individuals requiring skilled nursing care.
Individuals requiring more or less restrictive environment.
Individual resides outside of county where service is being sought (with some exceptions)

CREDENTIALS OF STAFF:

MD/DO, APRN/CNS, RN, LPN, BA, BS, High School diploma

Extended Stay Units

MISSION:

To provide essential step-down transitional residential care for individuals discharging from psychiatric hospitals or crisis stabilization units, delivering the structured support necessary for a safe and successful reintegration into the community.

PHILOSOPHY:

Coleman Health Services believes recovery is possible for every individual and is best supported through compassionate, person-centered, trauma-informed care that promotes dignity, safety, and hope. We are committed to providing a structured transitional environment that builds on individual strengths, ensures continuity of care, and supports successful reintegration into the community.

GOALS:

- Ensure safe and timely transitions of care for those leaving psychiatric hospitals or crisis stabilization units.
- Provide structured, recovery-oriented services that support symptom stabilization, medication adherence, and development of coping skills necessary for sustained community living.
- Assist individuals in building the skills, resources, and supports needed to live independently, including connections to outpatient treatment, primary care, housing, employment, and social supports.
- Decrease avoidable psychiatric hospitalizations and crisis episodes through proactive care coordination, early intervention, and ongoing monitoring during the transitional period.

ADMISSION CRITERIA:

- 18 years of age or older
- Voluntary admission
- Medically stable
- Agrees to follow house rules and resident agreement
- Mental Health Diagnosis or Dual Diagnosis (SUD only accepted at some locations)

SETTINGS:

- Home-like environment with private or semi-private apartments and common areas
- Class 1 Residential License through the Department of Behavioral Health

DAYS/HOURS OF SERVICE:

- 24/7/365

SERVICES PROVIDED:

Assistance with daily living activities
Safe and supportive environment
Medication intervention and monitoring
Medication teaching and health promotion
Coordination and linking with intra-/inter-agency services
Socialization skills training
Therapeutic treatment activities
Linkage with family as a support system
Exploration of housing options with Case Manager assistance
Independent living skills training

INDIVIDUALS SERVED:

LOCUS level 4 or 5
Individuals stepping down from Crisis Stabilization Units in need of further stabilization toward independent living.
Special Populations:
- SPMI
- Dual diagnosis mental health and SUD

REFERRAL SOURCES:

Hospitals
Crisis Stabilization Units
Internal providers
Physicians
Community Agencies

PAYOR SOURCES:

Mental Health and Recovery Boards
Contracts
Client

FEES:

Monthly rent as outlined in Resident Agreement

FREQUENCY OF SERVICE:

Generally short term, usually 30-90 days with some individuals staying up to 18 months

SERVICE MODALITY:

Residential, facility-based services
Time-limited and recovery oriented
Clinically supervised with 24/7 staffing
Focused on stabilization , skill development and discharge planning
Bridging inpatient/crisis care and community-based outpatient services

SERVICE DELIVERY VIA TECHNOLOGY

Due to the residential nature of this program, service is not offered via technology. Some residents may receive telehealth services from other programs.

TRANSITION/DISCHARGE CRITERIA:

Client successfully meets goals and transitions to community setting
Client requires higher or lower level of care

EXCLUSIONARY CRITERIA:

Individuals under 18 years old
Medically unstable individuals requiring skilled nursing care.
Individuals requiring more or less restrictive environment.
Individuals with no payor source.

CREDENTIALS OF STAFF:

RN, LPN, BA, BS, High School diploma with prior behavioral health work experience

Housing and Placement Services

MISSION:

To provide and maintain safe, decent, affordable housing options for persons with a severe and persistent mental health disorder who desire community integration. The Housing and Placement Services program focuses on persons who are homeless or returning to the community after being hospitalized or incarcerated. The program also targets persons who have poor independent living and poor employment histories.

PHILOSOPHY:

Housing and Placement Services will focus on the least restrictive living environment for each person served and will strive to provide safe, decent, and affordable housing for each person referred to the service.

GOALS:

- Assess referred person and provide them with options and resources for placement insupportive living, group homes, or community-based options.
- Provide access to Coleman resources or those provided by others in the community.

ADMISSION CRITERIA:

- County resident
- 18 years of age or older
- Severe and persistent mental health disorder and/or substance use disorder
- Possession of independent living skills without supervision
- Voluntary admission
- Involved in mental health and/or SUD services

SETTINGS:

- Community
- Office
- Telehealth

DAYS/HOURS OF SERVICE:

Monday through Friday during business hours 8:00 am – 5:00 pm

SERVICES PROVIDED:

- Assistance with housing placement
- Assistance with rental subsidy (provision and process)

Assistance with the acquisition of furnishings and other apartment necessities
Assistance with start-up costs and funds to avoid eviction

INDIVIDUALS SERVED:

Homeless or at risk of homelessness
People living in substandard housing
People paying more than 50% of income toward rent
People returning to the community following a hospitalization or incarceration
People with a poor independent living history
Specialty populations:
    Persons with a dual diagnosis of SUD/MH
    Persons with a dual diagnosis of ID/MH
    Transition aged youth

REFERRAL SOURCES:

Hospitals
Individual
Family
Internal providers
External providers

PAYOR SOURCES:

Mental Health and Recovery Boards
Medicaid
Grants
Foundations

FEES:

Sliding scale

FREQUENCY OF SERVICE:

As needed for assessment and assistance

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: within the state of Ohio
Platform used: phone, MS Teams

TRANSITION/DISCHARGE CRITERIA:

Client's and Housing Specialist's decision to terminate services
Housing needs/goals met
Violation of apartment lease
Violation of program requirements

EXCLUSIONARY CRITERIA:

Non-County Resident

CREDENTIALS OF STAFF:

Bachelor's degree or Equivalent

Intensive Home-Based Treatment (IHBT)

MISSION:

To provide intensive home and community-based treatment services to children and families at risk for child services involvement, psychiatric hospitalization, out of home placement, or adverse outcomes at school and other social settings related to a serious emotional disturbance (SED).

PHILOSOPHY:

IHBT centers on empowering youth and families to overcome challenges, find hope and build a brighter future by providing comprehensive, personalized support in in their familiar surroundings – the home, school and community.

GOALS:

- Increase illness education and coping skills for child and family.
- Increase access to community resources.
- Improve risk management skills for child and family.
- Maintain school engagement and enhance outcomes.
- Avoid or successfully resolve juvenile law enforcement involvement with the family.
- Avoid or successfully resolve child protective services involvement with the family.
- Avoid out of home placement.

ADMISSION CRITERIA:

- Meet Ohio criteria for this service.
- Clients must agree to the minimum frequency of services for the program and the regulations set forth for fidelity.

SETTINGS:

- Home
- Community
- School

DAYS/HOURS OF SERVICE:

- Monday – Friday 9:00am – 5pm (with flexibility for after hours)
- Crisis on-call support available 24/7/365

SERVICES PROVIDED:

- Individual & Family Therapy/counseling
- Illness education
- Coping & Social skill building
- Coordination of Services
- Monitoring Service Delivery
- Identification and development of Support System
- Advocacy with involved community systems of care
- Crisis intervention and coordination
- Transitioning from out of home placement

INDIVIDUALS SERVED:

- Under age 18 with a serious emotional disturbance (SED) or between age 18 and 21 with a Serious Emotional Disturbance (SED) that began prior to age 18.
- One or more of the following:
  - Significant disruption/failure in school setting
  - Legal system involvement or immediate risk thereof
  - Child Protective Services involvement (or immediate risk thereof)
  - At risk for out of home placement

REFERRAL SOURCE:

- Government agencies, including Children Services, Courts, Probation/Parole, Family and Children First Councils, and Mental Health Boards.
- Hospitals, emergency departments, health systems, and other medical providers.
- Family
- Individual
- Internal referrals
- External service agencies
- Referrals are needed to receive services

PAYOR SOURCES:

- Medicaid
- Mental Health Boards

FEES:

- No fees to clients

FREQUENCY OF SERVICE:

3-5 hours per week/as needed, with a minimum of 3 hours per week

SERVICE MODALITY:

Face to face
Minimal phone/telehealth
Cognitive Behavioral Therapy
Motivational Interviewing
Dialectical Behavioral Therapy

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Within the state of Ohio
Platform used: phone, MS Teams, MEND

TRANSITION/DISCHARGE CRITERIA:

Treatment goals met
Referred to long term non-community-based level of care
Inability to maintain a minimum of 3 hours per week for the majority of the episode
Episode maximum period is 6 months

EXCLUSIONARY CRITERIA:

Client does not reside in the county where services are being provided.
Client is enrolled in IHBT at another provider agency.
Prior to enrollment in IHBT, client must conclude MRSS, IOP, PHP, parent advocate program, and any other counseling or case management programs as they cannot overlap.

CREDENTIALS OF STAFF:

Independently or Dependently Licensed as Counselors, Social Workers, Marriage and Family Therapists

Intensive Outpatient Program (IOP)

MISSION:

To provide intensive outpatient services for those with substance use disorders (SUD) needing structured group and individual treatment of 9-16 hours total per week of interventions to recover at the ASAM 2.1 Level of Care (LOC).

PHILOSOPHY:

To provide holistic, patient-centered therapeutic approach to recovery while allowing individuals to maintain their daily lives and relationships.

GOALS:

Increase awareness of symptoms and behaviors associated with SUD.
Increase awareness of principles of recovery from SUD.
Enhance and sustain motivation to change substance use behavior.
Build coping and craving management skills.
Increase social, familial, and other supports to help reduce substance use behaviors.
Assess ongoing needs of individuals as they progress in recovery

ADMISSION CRITERIA:

Symptoms of and diagnosis of a SUD
ASAM LOC placement of 2.1

SETTINGS:

Community
Office

DAYS/HOURS OF SERVICE:

Monday – Friday 8:30am – 7pm
Client is met where they are and offered times/places that are convenient for the client (or if CHS is not able to offer, then client is referred to another agency)

SERVICES PROVIDED:

Individual & family therapy/counseling
Group counseling
Education on recovery, resiliency and wellness

Coping & social skill building
Coordination of services
Identification and development of support system
Drug screening

INDIVIDUALS SERVED:

Adults age 18+ with a SUD
Special Populations:
    Dual diagnosis MH/SUD

REFERRAL SOURCES:

Self
Family
Criminal Justice System
Withdrawal management and residential treatment facilities
Internal referrals
External service agencies
Referrals are not needed to receive services

PAYOR SOURCES:

Medicaid
Mental Health Boards
Commercial insurance

FEES:

Sliding scale

FREQUENCY OF SERVICE:

Group counseling 3 days per week, 3 hours per session.
Individual counseling 1x weekly or more as needed.
A minimum of 2 hours and 1 minute per group, performed by the same licensed staff to bill Medicaid.
A minimum of 9 hours and maximum of 15 hours treatment per week.
Two services during the time that they are participating in (individual, family, or group counseling)
Optional: SUD Case Management adjunct weekly or more as needed.
Optional: Peer Recovery Support adjunct weekly or more as needed.
Optional: Nursing Support as needed.

SERVICE MODALITY:

Face to face
Phone
Telehealth

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Within the state of Ohio
Platform used: phone, MS Teams, MEND

TRANSITION/DISCHARGE CRITERIA:

90 days no service
Treatment goals met
Referred to higher or lower level of care based on ongoing ASAM LOC assessments.

EXCLUSIONARY CRITERIA:

Client does not reside in the county where services are being provided.
Client does not meet ASAM LOC of 2.1

CREDENTIALS OF STAFF:

Independently or Dependently Licensed as Counselors, Social Workers, Marriage and Family Therapists CDCA, LCDCII, LCDCIII, or LICDC

Medically Managed Withdrawal (MMW)

MISSION:

This program is to assist with the uncomfortable withdrawal symptoms for the client addicted to opiates or stimulants allowing them to successfully stop using without the severe discomfort that they would have experienced if not under medical/environmental supervision.

PHILOSOPHY:

The CSU/MMW Center provides short-term, recovery-focused, trauma-informed care to adults of all genders who are experiencing mental health or substance use crises. Services are designed to promote symptom reduction, sobriety stabilization, medication compliance, and skill-building in a supportive, nonjudgmental, and culturally responsive environment.

GOALS:

Complete withdrawal from opiates or stimulants
Prepare for community-based recovery with MAT
Prepare for community-based recovery without MAT
To become active with a treatment agency to connect discharge plan/treatment to reduce relapse

ADMISSION CRITERIA:

18 years and older with Opioid or stimulant Addiction
Approved contract with MHRSB of county of origin
Voluntary
ASAM 3.7

SETTINGS:

A 7-bed facility licensed by the State of Ohio. A congregate living environment that provides supervised care to individuals 18 years and older which includes room and board, personal care, and substance use services. Individuals may or may not share a bedroom. There is a facility director who provides administrative oversight, certified staff and case management support services that include life skills development. Program is time limited.

DAYS/HOURS OF SERVICE:

24/7

SERVICES PROVIDED:

- Psychiatric Services
- 24-hour supervision/support
- Individual Psychotherapy
- Group Psychotherapy
- Family Psychotherapy
- Pharmaceutical Services
- Crisis Intervention
- Peer Recovery Support
- Housing and Placement Services
- Nursing Services
- Case management

INDIVIDUALS SERVED:

- 18 years and older with an opiate or stimulant addiction
- Do not meet the level of care for acute hospital detoxification
- Voluntary
- Special Populations:
  - SPMI
  - Dual diagnosis MH/SUD

REFERRAL SOURCES:

- Hospitals
- Law Enforcement
- County Behavioral Health Agencies
- Private Behavioral Health Providers
- Jails
- Probation/Parole
- Referrals are not needed to receive services

PAYOR SOURCES:

- Medicaid
- MHRB Contracts
- Contracts with other referrals
- Commercial insurance

FEES:

- Sliding scale

FREQUENCY OF SERVICE:

As needed

SERVICE MODALITY:

Face to face

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Clients must be present in the MMW unit

Platform used: MS Teams, MEND

TRANSITION/DISCHARGE CRITERIA:

Goals of treatment met and/or able to transition to lower level of care

Continued violation of program rules/referred to higher level of care

Discontinues programming AMA

Requires Medical stabilization

EXCLUSIONARY CRITERIA:

Client does not voluntarily engage in the service

Under the age of 18

Medical needs exceed ability to serve

CREDENTIALS OF STAFF:

MD, DO, APRN, NP, RN, LPN,

Independently Licensed or Dependently Licensed Counselors, Social Workers, Marriage and Family Therapist or trainees,

BA

High School diploma plus relevant behavioral health experience.

Mental Health Day Treatment Services

MISSION:

To promote stabilization and increased independence among individuals with severe and persistent mental illness or severe emotional disturbance through the provision of mental health services in an intensive, structured and goal-oriented treatment environment. Therapeutic Behavioral Day Treatment is defined as an intensive, structured, goal-oriented, distinct and identifiable group treatment service that addresses the individualized mental health needs of the client. The environment at this level of treatment is highly structured, and has an appropriate staff-to-client ratio to guarantee sufficient therapeutic services and professional monitoring, control, and protection.

PHILOSOPHY:

Day Treatment Services center on providing intensive, personalized and structured care that empowers individuals to manage their symptoms, develop coping skills, and achieve a higher quality of life while remaining connected to their communities and support systems.

GOALS:

Stabilize, increase, or sustain the highest level of functioning.
Promote movement to the least restrictive level of care.

ADMISSION CRITERIA:

Need for intensive services following step down from inpatient care or partial hospitalization, residential.
Need for transitional care following a higher level of care.
Need for intensive, high structured treatment to stabilize and prevent a higher level of care.

SETTINGS:

Services are provided in a therapeutic setting designed for group treatment, psychoeducation, and individual treatment.

DAYS/HOURS OF SERVICE:

Monday – Friday 8am – 5pm

SERVICES PROVIDED:

Individual, group and family counseling and psychoeducation groups to address goals.

Skills development; interpersonal and social competency, functional relationships.
Problem solving, conflict resolution and emotions/behavior management through individual counseling, family counseling, and group counseling, and psychoeducation.
Developing positive coping mechanisms.
Alcohol, tobacco, and other drug education.
Medication education
Activities to encourage interpersonal relationships and emotional development.
Activities to managing mental health and behavioral symptoms to enhance vocational/school/opportunities and/or independent living.

INDIVIDUALS SERVED:

Adults with severe and persistent mental illness
Special Population:
Transitional age youth with SED
Youth with SED

REFERRAL SOURCES:

Individual
Family
Physicians
Hospitals
Agency
School
JFS

PAYOR SOURCES:

Mental Health & Recovery Boards
Medicaid
Commercial insurance
Grant Funding

FEES:

Sliding scale

FREQUENCY OF SERVICE:

Day treatment is offered at least two hours and 45 minutes per day and a minimum of four days per week Monday thru Friday.

SERVICE MODALITY:

Dialectical Behavioral Therapy (DBT) skills teaching delivered in a group curriculum setting
Seeking Safety
EBP for Trauma and Addiction
Cognitive Behavioral Therapy (CBT)
Motivational Interviewing (MI)

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: Within the state of Ohio
Platform used: phone, MS Teams, MEND

TRANSITION/DISCHARGE CRITERIA:

Upon achievement of treatment plan goals
Need for a higher level of care

EXCLUSIONARY CRITERIA:

Higher or lower LOC
Lack of valid payor

CREDENTIALS OF STAFF:

Independently or Dependently Licensed Counselors, Social Workers, Marriage & Family, or trainees, QMHS+3.

Peer Recovery Support

MISSION:

Peer Support is a strength-based approach where people who have lived experiences with mental health and/or substance misuse disorders; giving each other encouragement, hope, assistance, guidance, and understanding that aids in recovery. Peer recovery support provides community-based supports to an individual with a mental illness and/or SUD with individualized activities that promote recovery, self-determination, self-advocacy, well-being and independence through a relationship that supports the person's ability to promote his or her own recovery. Peer Recovery Support is delivered by people who have progressed in their path to recovery and have acquired the knowledge and skills to help others.

PHILOSOPHY:

Peer support is guided by the principle of self-determination for all and in all circumstances. The mutuality of the peer supporter and the client promotes connection and inspires hope through a level of acceptance, understanding and validation not found in many other professional relationships (SAMHSA).

GOALS:

It is the goal of Peer Recovery Support to help people become and stay engaged and remain in recovery.

Peer Recovery Supporters embody a powerful message of hope, as well as a wealth of lived experience.

Peer Recovery Supporters assist clients with setting recovery goals, developing recovery action plans and problem solving directly related to recovery.

There is an emphasis on discovering, reaffirming, and enhancing the abilities, interests, knowledge, resources and aspirations of individuals, families, groups, and communities.

ADMISSION CRITERIA:

The frequency and duration of peer support will be identified on the person-centered treatment plan and must be supported by an identified need and recovery goal.

Client must be willing to engage in Peer Support Services.

SETTINGS:

Recovery community organizations

Recovery centers

Churches

Child welfare organizations

Recovery homes

Drug courts

Pre-release jail and prison programs

Parole and probation programs
Behavioral health agencies
HIV/AIDS and other medical or social service centers
Home and Community Environment

DAYS/HOURS OF SERVICE:

Monday – Friday 8am – 5pm

SERVICES PROVIDED:

Goal setting
Provide support and education
Facilitation and leading Formal Support Groups
Activity focused peer support
1:1 peer support
Advocacy and outreach
Role modeling, mentoring,
Assistance with creating recovery action plans
Resource connecting
Fight stigma and labels through sharing and education

INDIVIDUALS SERVED:

Individuals with substance use disorders and/or mental health disorders
Special Populations:
- Specialty Court clients
- Pre-release from jail/prison
- Clients on parole/probation

REFERRAL SOURCES:

Individuals
Family
Internal Providers
External providers
Hospitals
Courts
Hospitals
Referrals are not needed to receive services

PAYOR SOURCES:

Mental Health and Recovery Service Board
Medicaid

FEES:

Sliding scale

FREQUENCY OF SERVICE:

- The frequency and duration of peer support will be identified on the person-centered treatment plan.

SERVICE MODALITY:

- Peer Support
- Psychosocial education

SERVICE DELIVERY VIA TECHNOLOGY

- Geographic area served: within the state of Ohio
- Platform used: phone, MS Teams

TRANSITION/DISCHARGE CRITERIA:

Achieved treatment goals and objectives
Client's decision to terminate service

EXCLUSIONARY CRITERIA:

No payer
Clients with inappropriate boundaries

CREDENTIALS OF STAFF:

Certified Peer Recovery Supporter

Psychosocial/Drop In Center

MISSION:

Psychosocial Services and Drop-in Centers offer a skill development, socialization and recreational opportunities, and a peer support program that is designed to optimize a person's personal, social, and vocational competencies and skills in order to live successfully in the community.

PHILOSOPHY:

The recovery philosophy is aligned with Coleman's clinical philosophy and the strength-based approach emphasizes client empowerment, hope, and skill building.

GOALS:

- Provide a safe place where individuals receive encouragement, respect, and hope that supports and strengthens their recovery in mental health, addiction, and homelessness.
- Provide a safe space where individuals learn about their illnesses or addiction while spending time with others who have "walked the walk".
- Assist individuals develop socialization skills, become involved in the community and expand their support system.
- Offer peer support groups that focus on empowerment, wellness, accountability, responsibility, education, esteem, understanding mental health, and respect.

ADMISSION CRITERIA:

- 18 years of age or older

SETTINGS:

- Community-based

DAYS/HOURS OF SERVICE:

- Monday – Friday 8am – 5pm

SERVICES PROVIDED (VARIES BY LOCATION):

- Learning Environment
- Educational classes designed to assist clients in their work toward recovery.
- Psychosocial recovery values (work, belonging, empowerment, working together, client choice, a safe environment, accountability, responsibility, and respect).

Utilization of community resources to address a variety of client issues such as safety and family education.
Peer support
Peer facilitated groups
Self-help groups
Access to showers and laundry
Meals
Social activities (games, television, etc)

INDIVIDUALS SERVED:

Any Coleman Health Services client or individual from the community needing this level of service may participate.
Special Populations:
- SPMI
- Substance Use Disorders
- Homeless

REFERRAL SOURCES:

Individual
Family
Internal referrals
NAMI
Referrals are not needed to receive services

PAYOR SOURCES:

Mental Health & Recovery Boards
Grant Funding

FEES:

None

FREQUENCY OF SERVICE:

As needed

SERVICE MODALITY:

Psychosocial rehabilitation
Peer support

SERVICE DELIVERY VIA TECHNOLOGY

Service is not delivered via technology

TRANSITION/DISCHARGE CRITERIA:

No longer in need of intervention.
Client moved out of county.
Client's decision to terminate treatment.
Referral to more appropriate treatment and/or service.

EXCLUSIONARY CRITERIA:

People under age 18

CREDENTIALS OF STAFF:

Peer Supporter
Three years of experience in human services field
B.A. /B.S.
M.A. (no license)
Dependently or independently licensed as Counselor, Social Worker, Marriage & Family Therapist

Psychiatric Services - Adult

MISSION:

To provide diagnostic, psychiatric and medication monitoring and treatment for adults with mental health symptoms, SUD diagnosis, and adults with dual diagnoses (i.e., substance abuse, intellectual disability).

PHILOSOPHY:

Psychiatry is aligned with the Coleman Health Services philosophy designed to support and promote recovery.

GOALS:

- Complete a psychiatric evaluation in order to determine if medication is appropriate, identify treatment needs and referrals based on evaluation.
- Provide ongoing psychiatric follow up to include medication efficacy, illness, and medication education.

ADMISSION CRITERIA:

- 18 years of age or older
- Coleman Health Services client
- Individuals with mental health problems which may/or may not include those with other disabilities such as intellectual disability and substance abuse.
- Individuals with a substance use diagnosis.
- Client and/or professional request for services

SETTINGS:

- Community
- Office
- Telehealth
- Jails

DAYS/HOURS OF SERVICE:

- Monday – Friday 8:30am – 5pm
- All business units offer evening hours

SERVICES PROVIDED:

- Psychiatric/diagnostic evaluation
- Medication monitoring and teaching significant other/family/guardian
- Referral to intra-/inter-Agency services

Coordination with other CHS services
Coordination with other medical services
Nurse assessment and referral
Psychotherapy

INDIVIDUALS SERVED:

Clients with mental health problems and/or psychiatric disorders
Medication Assisted Treatment Program
Special Populations:
- SPMI
- Dual diagnoses, mental health and/or substance abuse
- ID/DD
- First Episode Psychosis

REFERRAL SOURCES:

Self
Family
Hospitals
Physicians
Jails/Prisons
Internal referrals
Agencies

PAYOR SOURCES:

Mental Health & Recovery Boards
Medicaid
Medicare
Commercial insurance
Self-pay
Contracts

FEES:

Sliding scale

FREQUENCY OF SERVICE:

The frequency of services is guided by the Treatment Plan and must be aligned with Coleman's Level of Care and DBH rules and regulations.

SERVICE MODALITY:

Psychiatry follows the best practice guidelines as outlined by the American Psychiatric Association.

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: within the state of Ohio
Platform used: phone, MEND

TRANSITION/DISCHARGE CRITERIA:

No longer in need of intervention
Client moved out of county
Service is no longer medically necessary.
Client's decision to terminate treatment
Referral to more appropriate treatment and/or service.
Death
Involuntary termination
Failure to pay

EXCLUSIONARY CRITERIA:

Under age of 18
Resides outside of county of service

CREDENTIALS OF STAFF:

MD, DO, APRN, NP, RN, LPN, PA, MA

Psychiatric Services – Child and Adolescent

MISSION:

To provide diagnostic, psychiatric and medication monitoring and treatment for children with mental health symptoms, behavioral issues, and children with dual diagnoses (i.e., substance abuse, intellectual disability).

PHILOSOPHY:

Psychiatry is aligned with the Coleman Health Services philosophy designed to support and promote recovery.

GOALS:

- Complete a psychiatric evaluation in order to determine if medication is appropriate, identify treatment needs and referrals based on evaluation.
- Provide ongoing psychiatric follow up to include medication efficacy, illness, and medication education.

ADMISSION CRITERIA:

- 4-17 years of age
- Coleman Health Services client
- Individuals with mental health problems which may/or may not include those with other disabilities such as intellectual disability and substance abuse.
- Client and/or professional request for services

SETTINGS:

- Office
- Telehealth

DAYS/HOURS OF SERVICE:

- Monday – Friday 8:30am – 5pm

SERVICES PROVIDED:

- Psychiatric/diagnostic evaluation
- Medication monitoring and teaching of client, parent/guardian
- Referral to intra-/inter-agency services
- Coordination with other CHS services
- Coordination with other medical services

Nurse assessment and referral
Psychotherapy

INDIVIDUALS SERVED:

Clients with mental health problems and/or psychiatric disorders
Special Populations:
- SPMI
- Dual diagnoses, mental health and/or substance abuse
- ID/DD
- Transitional Age Youth
- Trauma
- First Episode Psychosis

REFERRAL SOURCES:

Family
Hospitals
Physicians
Juvenile Court
Job & Family Services
Internal referrals
Schools
Agencies

PAYOR SOURCES:

Mental Health & Recovery Boards
Medicaid
Medicare
Commercial insurance
Self-pay
Contracts

FEES:

Sliding scale

FREQUENCY OF SERVICE:

The frequency of services is guided by the Treatment Plan and must be aligned with Coleman's Level of Care and DBH rules and regulations.

SERVICE MODALITY:

Psychiatry follows the best practice guidelines as outlined by the American Psychiatric Association.

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: within the state of Ohio
Platform used: phone, MEND

TRANSITION/DISCHARGE CRITERIA:

No longer in need of intervention
Client moved out of county
Service is no longer medically necessary.
Client/guardian's decision to terminate treatment
Referral to more appropriate treatment and/or service.
Failure to pay
Age out of services and transitioned to adult provider

EXCLUSIONARY CRITERIA:

Age 18 or older
Resides outside of county of service

CREDENTIALS OF STAFF:

MD, DO, APRN, NP, RN, LPN, PA, MA

Residential Group Homes

MISSION:

To provide education, socialization, leisure/recreation, medication monitoring, and independent living skill training for adults with behavioral problems and a severe mental health disorder, who are striving toward community integration. The program is designed to maximize one's ability to live in the least restrictive environment, obtain and maintain independent living in the community, minimize hospitalization and provide persons with the ability to control behaviors that are socially unacceptable. Priority is given to county residents who are homeless, hospitalized, and who experience a severe and persistent mental health disorder.

PHILOSOPHY:

The Philosophy of Residential Group Homes aligns with the CHS philosophy to support recovery and help people thrive in their community. Residential Group Homes provide Housing and Housing supports to individuals in order for them to live in the most independent environment in the community.

GOALS:

Assess referred persons and provide a setting with the appropriate level of care.
Provide 24-hour on-site services so persons can live successfully in the community.

ADMISSION CRITERIA:

18 years or older
Voluntary admission
Ability to bathe, feed self, dress, take medication, and ambulate without constant 1:1 staff supervision.
Severe and persistent mental health disorder and/or co-occurring disorders.
Coleman Health Services client
Evidence of behavior that cannot be controlled in current living arrangement.
Willingness to be involved in treatment program.

SETTINGS:

Community

DAYS/HOURS OF SERVICE:

Staffing is available on site 24 hours per day, 7 days per week.

SERVICES PROVIDED:

Independent living skill training (laundry, meal preparation and planning, chore completion, hygiene)

Socialization skill training (weekly outings to community resources)
Leisure/recreational skill training (provision of groups on a daily basis)
Receiving mental health services
Links with resources at or beyond CHS
Medication monitoring
Three (3) meals per day plus two (2) snacks and special diets
Provision of laundry detergent, paper towels, Kleenex, toilet paper and cleaning supplies
Housing
Transportation education
24/7 staff coverage

INDIVIDUALS SERVED:

Lack independent living objectives
Lack independent living skills
Lack socialization skills
Poor use of leisure/recreation time
Poor independent living history
Low motivation
Poor support group/network
Inadequate vocational skills
Poor self-care/hygiene skills
Homeless
People living in substandard housing
Exhibit challenging behaviors
Specialty Populations:
    SUD/MH dual diagnosis,
    ID/MH dual diagnosis

REFERRAL SOURCES:

Hospitals
Individual
Family
Internal providers
Physicians

PAYOR SOURCES:

Mental Health and Recovery Boards
Grants
Subsidy Programs
Rent

Medicaid

FEES:

Sliding scale

FREQUENCY OF SERVICE:

Average length of stay is between 1 and 5 years.

SERVICE DELIVERY VIA TECHNOLOGY

This service is offered in-person only, though clients may receive telehealth services from other programs.

TRANSITION/DISCHARGE CRITERIA:

Completion of individualized treatment plan
Referred and linked to alternative community resources
Client's decision to terminate services
Violation of contract
In need of a different level of care
Deceased

EXCLUSIONARY CRITERIA:

Non-Coleman Health Services client
Individuals without a primary diagnosis of mental illness
Individuals with a primary diagnosis of ID
Individuals with primary diagnosis of substance abuse
Individuals under 18 years old
Individuals requiring more or less restrictive environment
In need of hospitalization
In need of nursing home care

CREDENTIALS OF STAFF:

Minimum of High School diploma with prior experience in Human Services related position preferred.

Residential Supportive Living

MISSION:

The Residential Supportive Living Program is designed to maximize one's ability to live in the least restrictive environment, obtain and maintain independent living in the community, and minimize hospitalization. Priority is given to county residents who are homeless, hospitalized, and have a severe and persistent mental health disorder.

PHILOSOPHY:

The Philosophy of the Residential Supportive Living Program aligns with the CHS philosophy to support recovery and help people thrive in their community. The Residential Supportive Living Program provides housing and housing supports to individuals in order for them to live in the most independent environment in the community.

GOALS:

Assess referred person and coordinate access to the appropriate level of care in supportive living.
Provide on-site services that support persons living in supportive housing.

ADMISSION CRITERIA:

18 years or older
Voluntary admission
Ability to bathe, feed self, dress, take medication, and ambulate without constant 1:1 staff supervision.
Experiencing a severe and persistent mental health disorder or co-occurring disorder.
Coleman Health Services client
In need of housing with supports

SETTINGS:

Community

DAYS/HOURS OF SERVICE:

Staffing varies from 2 hours per day to 24 hours per day, 7 days a week.

SERVICES PROVIDED:

Housing in a group living environment
On site assistance by case management and/or residential staff
Laundry facilities
Assistance with independent living skills (laundry, meal prep, hygiene, budgeting)

Socialization/leisure skill training (group activities)
Medication monitoring/education
Links with internal and external resources

INDIVIDUALS SERVED:

Low motivation
Poor support group/network
Homeless
People living in substandard housing
Unemployed
Specialty populations:
    Persons with a dual diagnosis of SUD/MH
    Persons with a dual diagnosis of ID/MH

REFERRAL SOURCES:

Hospitals
Individual
Family
Internal providers
Physicians

PAYOR SOURCES:

Mental Health and Recovery Boards
Grants
Subsidy Programs
Rent
Medicaid

FEES:

Sliding scale

FREQUENCY OF SERVICE:

Average length of stay is between 6 months and 3 years.

SERVICE DELIVERY VIA TECHNOLOGY

This service is offered in-person only, though clients may receive telehealth services from other programs.

TRANSITION/DISCHARGE CRITERIA:

Referred and linked to alternative community resources
Client's decision to terminate lease
Violation of lease
Requires different level of care
Deceased

EXCLUSIONARY CRITERIA:

Non-Coleman Professional Services client
Individuals with a primary diagnosis of ID
Individuals under 18 years old
Individuals requiring more or less restrictive environment
Individuals in need of hospitalization
Individuals who primarily need nursing home level of care

CREDENTIALS OF STAFF:

Minimum High School diploma with prior experience in Human Services related position preferred.

Vocational & Employment Services

MISSION:

To assist individuals with disabilities to obtain and maintain appropriate, competitive, and integrated employment.

PHILOSOPHY:

Vocational and Employment Services are aligned with the CHS philosophy designed to support recovery. Vocational and Employment Services should be delivered within guidelines as prescribed by the payer.

GOALS:

Individualized based on participant employment goals.
Typically, we assist participants to achieve and maintain job of choice in setting of choice.

ADMISSION CRITERIA:

At least 14 years of age
Physically able to work
Stable on prescribed medication, if appropriate

SETTINGS:

Community

DAYS/HOURS OF SERVICE:

Monday-Friday 8:30-5:00
Evening and weekend appointments are available to accommodate employer and/or customer needs.

SERVICES PROVIDED:

Community-based assessment
Job coaching
Job placement and retention
Benefits counseling
Comprehensive vocational assessment
On-the-job-supports

INDIVIDUALS SERVED:

People with severe mental disabilities, DD, and other significant disabilities.
People who are unemployed and/or underemployed.
Special populations:
- First Episode
- TIP
- TAY
- ACT

REFERRAL SOURCES:

Self
Family
Internal referrals
Opportunities for Ohioans with Disabilities Agency (OOD)
Mental Health Boards

PAYOR SOURCES:

Allen, Auglaize and Hardin Mental Health and Recovery Services Board
Belmont, Harrison and Monroe Mental Health and Recovery Board
Jefferson County Prevention and Recovery Board
Mental Health & Recovery Board of Portage County
Mental Health & Recovery Services Board of Trumbull County
Opportunities for Ohioans with Disabilities Agency
Stark County Mental Health & Addiction Recovery
Stark and Tuscarawas Workforce Development Board
Medicaid

FEES:

Most fees are paid by the referring entity. If a customer is a self-referral and an appropriate payer cannot be arranged, a self-pay fee can be established on a sliding scale.

FREQUENCY OF SERVICE:

The frequency of services is guided by the service plan and must be aligned with Coleman's level of care and the OOD or other payer authorization.

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: within the state of Ohio

Platform used: phone, MS Teams

TRANSITION/DISCHARGE CRITERIA:

Successful program completion

Job placement and stabilization

Dismissal for specific circumstances, such as repeated failure to meet minimum standards, repeated refusal of placement, etc.

Participant decision to terminate services

EXCLUSIONARY CRITERIA:

No payer

CREDENTIALS OF STAFF:

B.A./B.S.

High school with three years' experience in employment/vocational services

Benefit Consultation

MISSION:

To provide benefits consultation services to clients, helping them determine the financial feasibility and practicality of working.

PHILOSOPHY:

Benefit Consultation services are aligned with the CHS philosophy designed to support recovery. Benefit Consultation services should be delivered within guidelines as prescribed by the payer.

PROGRAM GOALS:

- Provide 1st contact within 2 days of referral
- Provide individual assessment of benefits
- Increase client's awareness of work incentives resulting in customer making a more informed choice regarding work.
- Maximize customer satisfaction

ADMISSION CRITERIA:

- At least 14 years of age
- Physically able to work

SETTINGS:

- Community

DAYS/HOURS OF SERVICE:

- Monday-Friday 8:30-5:00
- All business units offer evening hours

CRITICAL PATH:

- Individuals presenting at CHS without OOD eligibility will be referred to OOD or attempts will be made to identify an alternate payer source. After CHS receives the referral from OOD, the first appointment will be scheduled as soon as possible from the date the referral is received.

SERVICES PROVIDED:

- Benefits guidance

Review of SSI/SSDI
Review of all benefits received
Benefits/Work Incentives planning and report

INDIVIDUALS SERVED:

Individuals interested in working who are concerned about the impact of working on their benefits and/or entitlements.

Special Populations:

Social Security recipients who are employed or are considering employment.

REFERRAL SOURCES:

Self
Family
Internal referrals
Opportunities for Ohioans with Disabilities Agency (OOD)
Mental Health Boards

PAYOR SOURCES:

Allen, Auglaize and Hardin Mental Health and Recovery Services Board
Belmont, Harrison and Monroe Mental Health and Recovery Board
Jefferson County Prevention and Recovery Board
Mental Health & Recovery Board of Portage County
Mental Health & Recovery Services Board of Trumbull County
Opportunities for Ohioans with Disabilities Agency
Stark County Mental Health & Addiction Recovery
Stark and Tuscarawas Workforce Development Board
Medicaid

FEES:

Most fees are paid by the referring entity. If a customer is a self-referral and an appropriate payer cannot be arranged, a self-pay fee can be established on a sliding scale.

FREQUENCY OF SERVICE:

The frequency of services is guided by the service plan and must be aligned with Coleman's level of care and the OOD or other payer authorization.

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: within the state of Ohio

Platform used: phone, MS Teams

TRANSITION/DISCHARGE CRITERIA:

Successful review and completion of the benefits report and report presentation meeting.

EXCLUSIONARY CRITERIA:

No payer

CREDENTIALS OF STAFF:

CRC
Certified Benefits Counselor
Work Incentives Practitioner

Community Work Experience

MISSION:

The Community Work Experience is designed to assist clients and rehabilitation professionals to determine employability of disabled clients.

PHILOSOPHY:

The Community Work Experience services are aligned with the CHS philosophy designed to support recovery. Community Work Experience services should be delivered within guidelines as prescribed by the payer.

PROGRAM GOALS:

- Individualized based on participant employment goals.
- Typically, we assist participants to achieve and maintain job of choice in setting of choice.
- Provide 1st contact within 2 days of referral.
- Identify client's strengths, weaknesses, potential accommodations, and recommendations to enhance the individual's employability.
- Address all referral questions
- Maximize customer satisfaction

ADMISSION CRITERIA:

- At least 14 years of age
- Physically able to work
- Stable on prescribed medication, if appropriate

SETTINGS:

- Community

DAYS/HOURS OF SERVICE:

- Monday-Friday 8:30-5:00
- Evening and weekend appointments are available to accommodate employer and/or customer needs.

CRITICAL PATH:

- Individuals presenting at CHS without OOD eligibility will be referred to OOD or attempts will be made to identify an alternate payer source. After CHS receives the referral from OOD, the first appointment will be scheduled as soon as possible from the date the referral is received.

SERVICES PROVIDED:

Time-limited paid work experience in a community business or industry using supported employment and vocational evaluation methods and techniques to determine employability.

Services will include observations of basic vocational attributes, specific strengths, and weaknesses for each different work experience; a report identifying strengths, weaknesses, potential accommodations; and recommendations to enhance the individual employability.

Individuals will be paid minimum wage for work performed during the assessment period.

The assessment will result in a written report that summarizes the job-related observations, the results of testing, and addresses the questions posed by the referral agent.

INDIVIDUALS SERVED:

The Community Work Experience is designed for those individuals who are interested in assessing interests, strengths and/or barriers to employment.

Special populations:

- First Episode
- TIP
- TAY
- ACT

REFERRAL SOURCES:

Self
Family
Internal referrals
Opportunities for Ohioans with Disabilities Agency (OOD)
Mental Health Boards

PAYOR SOURCES:

Allen, Auglaize and Hardin Mental Health and Recovery Services Board
Belmont, Harrison and Monroe Mental Health and Recovery Board
Jefferson County Prevention and Recovery Board
Mental Health & Recovery Board of Portage County
Mental Health & Recovery Services Board of Trumbull County
Opportunities for Ohioans with Disabilities Agency
Stark County Mental Health & Addiction Recovery
Stark and Tuscarawas Workforce Development Board
Medicaid

FEES:

Most fees are paid by the referring entity. If a customer is a self-referral and an appropriate payer cannot be arranged, a self-pay fee can be established on a sliding scale.

FREQUENCY OF SERVICE:

The frequency of services is guided by the service plan and must be aligned with Coleman's level of care and the OOD or other payer authorization.

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: within the state of Ohio

Platform used: phone, MS Teams

TRANSITION/DISCHARGE CRITERIA:

Individuals may be discharged from service when all program goals and objectives of the work assessment have been met

Individual is unable to participate

Individual chooses to discontinue the service.

Length of service is determined by the BVR counselor or alternate payersource.

EXCLUSIONARY CRITERIA:

No payer

CREDENTIALS OF STAFF:

B.A./B.S.

High school with three years' experience in employment/vocational services

M.A.

CRC

Comprehensive Vocational Evaluation

MISSION:

To provide a comprehensive vocational evaluation for clients, to determine vocational and employment skills and abilities and set appropriate employment goals.

PHILOSOPHY:

Vocational and Employment Services are aligned with the CHS philosophy designed to support recovery. Vocational and Employment Services should be delivered within guidelines as prescribed by the Opportunities for Ohioans with Disabilities Agency.

PROGRAM GOALS:

- Individualized based on participant employment goals. Typically, we assist participants to achieve and maintain job of choice in setting of choice.
- Provide 1st contact within 2 days of referral.
- Provide individual assessment of interests, abilities, and work skills.
- Increase client's awareness of community employment.
- Maximize customer satisfaction.

ADMISSION CRITERIA:

- At least 14 years of age
- Physically able to work
- Stable on prescribed medication, if appropriate

SETTINGS:

- Community

DAYS/HOURS OF SERVICE:

- Monday-Friday 8:30-5:00
- All business units offer evening hours

CRITICAL PATH:

- Individuals presenting at CHS without OOD eligibility will be referred to OOD or attempts will be made to identify an alternate payer source. After CHS receives the referral from OOD, the first appointment will be scheduled as soon as possible from the date the referral is received.

SERVICES PROVIDED:

Comprehensive evaluation
Skill assessment
Interest assessment
Other assessments as necessary
Comprehensive final report

INDIVIDUALS SERVED:

Individuals who may benefit from vocational testing to facilitate career planning.
Special Populations:
- First Episode
- TIP
- TAY
- ACT

REFERRAL SOURCES:

Self
Family
Internal referrals
Opportunities for Ohioans with Disabilities Agency (OOD)
Mental Health Boards

PAYOR SOURCES:

Allen, Auglaize and Hardin Mental Health and Recovery Services Board
Belmont, Harrison and Monroe Mental Health and Recovery Board
Jefferson County Prevention and Recovery Board
Mental Health & Recovery Board of Portage County
Mental Health & Recovery Services Board of Trumbull County
Opportunities for Ohioans with Disabilities Agency
Stark County Mental Health & Addiction Recovery
Stark and Tuscarawas Workforce Development Board
Medicaid

FEES:

Most fees are paid by the referring entity. If a customer is a self-referral and an appropriate payer cannot be arranged, a self-pay fee can be established on a sliding scale.

FREQUENCY OF SERVICE:

The frequency of services is guided by the service plan and must be aligned with Coleman's level of care and the OOD or other payer authorization.

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: within the state of Ohio

Platform used: phone, MS Teams

TRANSITION/DISCHARGE CRITERIA:

Successful review and completion of the comprehensive vocational evaluation report and report presentation meeting.

EXCLUSIONARY CRITERIA:

No payer

CREDENTIALS OF STAFF:

CRC

Certified Vocational Evaluator

Job Coaching

MISSION:

Job Coaching Services are designed to provide people with disabilities intensive training and support to gain employment, adjust to a specific job, and maintain employment in an integrated work environment.

PHILOSOPHY:

Job Coaching services are aligned with the CHS philosophy designed to support recovery. Job Coaching services should be delivered within guidelines as prescribed by the Opportunities for Ohioans with Disabilities Agency.

PROGRAM GOALS:

Individualized based on participant employment goals.
Typically, we assist participants to achieve and maintain job of choice in setting of choice.
Provide support and assistance needed to succeed in competitive employment.
Identify natural supports on the job.
Maximize customer satisfaction.

ADMISSION CRITERIA:

At least 14 years of age
Physically able to work
Stable on prescribed medication, if appropriate

SETTINGS:

Community

DAYS/HOURS OF SERVICE:

Monday-Friday 8:30-5:00
Evening and weekend appointments are available to accommodate employer and/or customer needs.

CRITICAL PATH:

Individuals presenting at CHS without OOD eligibility will be referred to OOD or attempts will be made to identify an alternate payer source. After CHS receives the referral from OOD, the first appointment will be scheduled as soon as possible from the date the referral is received.

SERVICES PROVIDED:

Job Coaching provides individuals the support and assistance needed to succeed in competitive employment.

The Employment Specialist meets with the client to learn the job requirements and responsibilities.

The Employment Specialist will address the client's transportation needs and will provide assistance to the client at the worksite.

The Employment Specialist will provide assistance in the training of tasks at the worksite, assure that all safety requirements are met, train the client in appropriate work behaviors, and assist in identifying and resolving work-related problems and connect the client with the natural supports offered at the job.

The Employment Specialist is also responsible for maintaining a good working relationship with the employer as well as facilitating a good working relationship with the client and their fellow co-workers.

A Job Coaching Plan will be implemented to build upon the client's strengths and overcome barriers to assist in job retention.

INDIVIDUALS SERVED:

Job Coaching Services are for individuals in need of an Employment Specialist to provide assistance in negotiating the work environment and mastering the skills needed to be productive in that job.

Special populations:

- First Episode
- TIP
- TAY
- ACT

REFERRAL SOURCES:

Self
Family
Internal referrals
Opportunities for Ohioans with Disabilities Agency (OOD)
Mental Health Boards

PAYOR SOURCES:

Allen, Auglaize and Hardin Mental Health and Recovery Services Board
Belmont, Harrison and Monroe Mental Health and Recovery Board
Jefferson County Prevention and Recovery Board
Mental Health & Recovery Board of Portage County
Mental Health & Recovery Services Board of Trumbull County
Opportunities for Ohioans with Disabilities Agency
Stark County Mental Health & Addiction Recovery

Stark and Tuscarawas Workforce Development Board
Medicaid

FEES:

Most fees are paid by the referring entity. If a customer is a self-referral and an appropriate payer cannot be arranged, a self-pay fee can be established on a sliding scale.

FREQUENCY OF SERVICE:

The frequency of services is guided by the service plan and must be aligned with Coleman's level of care and the OOD or other payer authorization.

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: within the state of Ohio
Platform used: phone, MS Teams

TRANSITION/DISCHARGE CRITERIA:

Individuals may be discharged from service when all program goals and objectives of the job coaching have been met
Individual is unable to participate
Individual chooses to discontinue the service.
Length of service is determined by the BVR counselor or alternate payer source.

EXCLUSIONARY CRITERIA:

No payer

CREDENTIALS OF STAFF:

B.A./B.S.
High school with three years' experience in employment/vocational services
M.A.
CRC

Job Placement and Retention

MISSION:

To provide vocational guidance job development, placement, and retention services to obtain and maintain appropriate, competitive, and integrated employment.

PHILOSOPHY:

Vocational and Employment Services are aligned with the CHS philosophy designed to support recovery. Vocational and Employment Services should be delivered within guidelines as prescribed by the Opportunities for Ohioans with Disabilities Agency.

GOALS:

- Individualized based on participant employment goals. Typically, we assist participants to achieve and maintain job of choice in setting of choice.
- Provide 1st contact within 2 days of referral.
- Assist client in making appropriate job match.
- Maximize customer satisfaction.

ADMISSION CRITERIA:

- At least 14 years of age
- Physically able to work
- Stable on prescribed medication, if appropriate

SETTINGS:

- Community

DAYS/HOURS OF SERVICE:

- Monday-Friday 8:30-5:00
- All business units offer evening hours

SERVICES PROVIDED:

- Vocational guidance
- Job Seeking skills training
- Assistance in job search, interviews, job development, negotiating start date, salary, and schedule.
- Job analysis and job match
- Job Retention support

INDIVIDUALS SERVED:

Job Placement services are for individuals who may benefit from assistance in obtaining and maintaining appropriate, competitive, and integrated employment

Special populations:

- First Episode
- TIP
- TAY
- ACT

REFERRAL SOURCES:

- Self
- Family
- Internal referrals
- Opportunities for Ohioans with Disabilities Agency (OOD)
- Mental Health Boards

PAYOR SOURCES:

- Allen, Auglaize and Hardin Mental Health and Recovery Services Board
- Belmont, Harrison and Monroe Mental Health and Recovery Board
- Jefferson County Prevention and Recovery Board
- Mental Health & Recovery Board of Portage County
- Mental Health & Recovery Services Board of Trumbull County
- Opportunities for Ohioans with Disabilities Agency
- Stark County Mental Health & Addiction Recovery
- Stark and Tuscarawas Workforce Development Board
- Medicaid

FEES:

Most fees are paid by the referring entity. If a customer is a self-referral and an appropriate payer cannot be arranged, a self-pay fee can be established on a sliding scale.

FREQUENCY OF SERVICE:

The frequency of services is guided by the service plan and must be aligned with Coleman's level of care and the OOD or other payer authorization.

SERVICE DELIVERY VIA TECHNOLOGY

Geographic area served: within the state of Ohio

Platform used: phone, MS Teams

TRANSITION/DISCHARGE CRITERIA:

All program goals and objectives of the placement services have been met

Individual is unable to participate

Individual chooses to discontinue the service

Length of service is determined by the BVR counselor or alternate payer source

EXCLUSIONARY CRITERIA:

No payer

CREDENTIALS OF STAFF:

B.A./B.S.

High school with three years' experience in employment/vocational services

M.A.

CRC