



THE POWER HOUSE

RESIDENTIAL DRUG TREATMENT CENTER

32405 DIAGONAL RD. HERMISTON, OREGON 97838
OFFICE 541-286-6666 FAX 1-888-977-2106

Referral Procedure & Goals

Referral Process Goals:

1. To simplify the referral process, and to streamline access for clients.
2. To reduce the duplication of paper work for the referral agent.

Guarantees:

1. The referral package will be reviewed within 24 hours (most are reviewed the same day).
2. A confirmed admission date will be provided when the referral is approved.
3. Staff communicate only with the referral agent to streamline access and maintain clear communication.
4. Confirmation of your client's admission will be provided (by phone message or secured email).
5. A Discharge Summary will be faxed to you within 24-48 hours of you client's completion.

Admission Requirements and Documentation:

1. Results of the assessment and application of admission/discharge criteria indicate that residential treatment is an appropriate option at this time for this client.
2. All referral must adhere to the medication policy (See attached medication policy).
3. A complete and current American Society of Addiction Medicine (ASAM).
4. Complete Client Data Form (See attached form).
5. Current proof of insurance (copy of insurance card prior to placement).
6. Psychological Assessment and/or mental status must be provided if under psychiatric care.
7. Referrals out of network must have documentation sent to the coordinated care organization (ie, ASAM/Treatment Plan/Master Issues Needs List/Problem List).

The length of our program is truly based of the ASAM Dimensions, which is different for each client.

1. Admission:

- a. **Criteria for Admission:** The Power House Residential Drug Treatment Center accepts people for alcohol and drug treatment who may or may not meet the ASAM Placement Criteria for Level III—Residential Inpatient Treatment. Referral sources include but are not limited to other alcohol and drug treatment agencies, detoxification centers, mental health agencies, probation/parole, drug court, and self-referral.
- b. **People Not Appropriate for Admission:** Those who are not appropriate for admission include those who need detoxification services, those who display a psychiatric disturbance of a severity that would preclude them from appropriate participation in the program, individuals who need ongoing nursing care or medical supervision or those who have a history of sexual offense (s).
- c. **Referral and Admission Procedure:** A client may be referred by any agency, program, combination of programs, or a self-referral for treatment. Admission to this program occurs when the individual goes through the formal admission procedure including filling out admission forms and a one to one interview with a counselor to gather information for a substance abuse assessment. From this information and if the client is in agreement with the problems identified, the counselor completes the ASAM Addendum, develops a problem list and with the client develops a treatment plan to address the problems.
- d. **Assignment to Services:** All individuals show began treatment and residential treatment. As soon as a client meets ASAM criteria for intensive outpatient, the individual will be transferred to then outpatient service.

Complete documentation is required to determine whether placement is appropriate.

All Required Documents to be sent by fax: 1-888-977-2106 Attn: John Conn



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Internal Use Only	CPMS/MOTS #	Admission Status:	Intake Date:
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CLIENT DATA FORM

Date: _____ **Referral Date:** _____

Client Name: _____ **Age:** _____ **DOB:** ____/____/____

Sex: () M () F (If client is female) **is client pregnant?** () Yes () No

Birth Name (If different than above): _____

Ethnicity: () White (Non-Hispanic) () Black (Non-Hispanic) () Native American () Asian () Alaskan Native
 () Hispanic-Mexican () Hispanic-Puerto Rican () Hispanic-Cuban () Other Hispanic () Southeast Asian
 () Native Pacific Islander () Other Race

Address: _____ **City:** _____

State: _____ **County:** _____ **Zip:** _____

Phone #: _____ () Home () Work () Message

Emergency Contact: _____ **Phone # ()** _____

<p>Health Insurance Info: () CCO- Which CCO _____ Prior-Authorization # _____ () Medicaid () VA () Other () None () Private Pay () Private Health Ins., need name of policyholder: _____ Name of Insurance/Health Plan: _____ SS# _____ Referral Agency: _____ Referent Email: _____ Contact Person: _____ Referent Address: _____ Referent Phone#: _____</p>
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Other Information: DHS Caseworker _____ **Phone #** _____

Probation Officer: _____ **Phone #** _____

Other: _____ **Phone #** _____



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<u>Presenting Problem Substances</u>	
Substance	Frequency Used in Past 30 Days
1st _____	_____
2nd _____	_____
3rd _____	_____
Substances Used in the Past 12 Months:	

Diagnosed with a mental health problem by a qualified mental health professional?

No Yes, Within the last 12 months Within a lifetime

Most recent diagnosis # 1: _____

Most recent diagnosis # 2: _____

Hospitalized for a mental health problem?

No Yes, Within the last 12 months Within a lifetime

Received treatment for a mental health, emotional, behavioral, or psychological problem from community mental health program/professional?

No Yes, Currently Within the last 12 months Within a lifetime

Name of service provider: _____

Contact information: _____

Prescribed medication for a mental health problem: No Yes, Currently Within the last 12 months Within a lifetime



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Health concerns: (check all that apply)

<input type="checkbox"/> Allergies	<input type="checkbox"/> Hepatitis A	<input type="checkbox"/> liver disease
<input type="checkbox"/> blood pressure problems	<input type="checkbox"/> Hepatitis B	<input type="checkbox"/> respiratory problems
<input type="checkbox"/> cancer	<input type="checkbox"/> Hepatitis C	<input type="checkbox"/> sexually transmitted illness
<input type="checkbox"/> chronic pain	<input type="checkbox"/> history of head injuries	<input type="checkbox"/> stomach/gastrointestinal
<input type="checkbox"/> HIV/AIDS	<input type="checkbox"/> History of seizures	<input type="checkbox"/> Other:
<input type="checkbox"/> diabetes	<input type="checkbox"/> jaundice	<input type="checkbox"/> Other:
<input type="checkbox"/> heart disease	<input type="checkbox"/> kidney disease	<input type="checkbox"/> Other:
<input type="checkbox"/> eating disorder	<input type="checkbox"/> lice/scabies	<input type="checkbox"/> Other:

Medications Currently Prescribed:

List ALL (prescribed & OTC) medication by classification (e.g. antidepressant, diuretic) currently being used by the client: _____



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Medication Policy

1. Only prescription or over-the-counter medication that is approved by the Power House Residential Drug Treatment Center staff prior to admission will be permitted. The client's current medications are expected to be listed on the Health Screen included in the referral packet.
2. **Important:** All prescription medications must be packaged in **original medication containers/bottles**.
3. Vitamins and other types of over-the-counter medications and preparations must be in their original, sealed containers. If the seal is broken, these medications/preparations will not be allowed.
4. Clients are required to bring enough medication to last for the duration of their treatment stay, it is the client's responsibility to make these arrangements with his physician and/or pharmacy.
5. All pre-approved prescription medication must be brought to the facility by the client. The Power House Residential Drug Treatment Center cannot support a client's arbitrary decision to change a medication regime prescribed by a physician. (Referrals will be made to a local physician to correct medication concerns).
6. Clients arriving with medication that is improperly packaged or without a sufficient supply for their treatment stay or without all his pre-approved medications will not be admitted.
7. If your client has been prescribed any new medication that is not noted on his Health Screen, or there is a change in dosages or frequency, after the referral was approved please call the Power House Residential Drug Treatment Center to have it approved and noted on the client's Health Screen prior to his admission.



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Program Description

In 2014, The Power House Residential Drug Treatment Center embarked on a journey and opened its doors to the chemical dependency population. Our mission is to provide a healing environment in which chemically dependent individuals and their families discover an enhanced quality of life through long-term recovery from alcoholism and drug abuse. We are a 15 bed facility that currently has 2 bed slots for women and 11 bed slots for men. We believe nutrition is a significant factor in the physical and mental recovery process. The program includes a cook that specializes in balanced, nutritional meals and can prepare individual meals to address nutritional deficiencies, allergies, and/or dietary needs.

We believe that chemical dependency is a treatable disease. Through education, intervention and innovative treatment services, recovery from the illness can be accomplished.

Our company includes a staff of experienced, educated, and dedicated professionals who strive to develop trust and confidence with our guests in a comfortable atmosphere that feels like home. Our goal is to give in-depth knowledge about issues you're struggling with including a high level of retention through audiovisual read back classes. One-on-one and group sessions, guest speakers, and proven practice evidence based programs all culminate into a cohesive learning environment to develop the mental tools and mind set for achieving a healthy, productive lifestyle. You truly feel at home in this natural, down to earth facility. We provide personalized treatment and a tranquil atmosphere for our guests. Our highly trained staff offers customized treatment for each individual and our goal is to help you persevere through life's troubles.

We Believe

- Addiction is a progressive, chronic, non-discriminatory disease which, if left untreated, can be fatal.
- An abstinence-based, 12-step treatment program encompassing a full and appropriate continuum of care is the most effective model to achieve recovery.
- All persons have the capacity for recovery, and as such, they need and deserve the highest quality, individualized treatment regimen in order to maximize their chances of successful recovery.
- All individuals who come to us for help deserve to be treated with dignity, respect, and compassion.
- Addiction affects not just the individual, but also one's family, friends, coworkers, and community.
- Patients with co-occurring psychiatric and substance use disorders are at greater risk for relapse and have higher rates of disability; therefore, their conditions must be assessed and addressed concomitantly in the treatment plan.
- A major contribution to positive treatment outcomes involves extra therapeutic factors; therefore family and other systems should be actively involved in preparing for all aftercare experiences.
- We have a responsibility to our clinical staff, which, in the role of healers, need ongoing nurturance and enrichment in order to provide optimal service to the patient.
- Continuous quality improvement involves ongoing training and education of our staff, and a rigorous review of our program content and outcomes.



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Clinical Programming

At the Power House Residential Drug Treatment Center we believe that a program should consist of true individualization of programming. By offering a wide range of groups we can tailor the treatment experience to each individual. We also believe that the true power of change is within the context of individual counseling sessions where the client can truly feel safe and comfortable within a therapeutic relationship that has been built with an eclectic theoretical approach. Individual counseling sessions will consist of two (2) hours per week. Here is an example of the group clinical programming we utilize at the Power House Residential Drug Treatment Center:

Motivation for Change

Group Description: *Motivation for change helps* the clients begin to think about aspects of motivation that govern decisions to change behavior. It utilizes node-link mapping and related cognitive strategies to engage clients in discussions of motivation. As part of this introductory process, clients are invited to make a commitment to a behavior or attitude they are willing to work on and report to the group about over the course of the 4-sessions in the module

Positive Approach

Group Description: Focus is placed on such topics as positive emotions, optimism, gratitude, creativity, humor, goal setting, accomplishments, spirituality, optimal “flow”, values and character strengths, and resilience plus much more. Clients work through the utilization of character strengths to build a foundation for recovery. This group steps away from the pathogenic disease model and takes a more traditional approach to life, which places focus on well-being.

Conflict Resolution

Group Description: A skilled-based therapeutic training book that is focused on the brain, specifically how it works in conflict and how to affect the quality of recovery in relationships. These tools have been designed to help reduce relapse and sustain recovery of adult and adolescent substance use, abuse and dependent persons by improving their conflict resolution knowledge, attitudes and skills. This kit includes a Facilitator’s Guide that features talking points, exercises and role plays that focus around the course themes, as well as tips for interacting with groups and individual/family/couple clients around substance abuse conflict resolution issues, visual aids and evaluation forms and a Participant Workbook that outlines key concepts, provides visuals that reinforce content and includes homework assignments and personal exercise sheets.

Relapse Prevention Group

Group Description: Relapse Prevention Therapy (RPT) is a behavioral self-control program that teaches individuals with substance addiction how to anticipate and cope with the potential for relapse. RPT can be used as a stand-alone substance use treatment program or as an aftercare program to sustain gains achieved during initial substance use treatment. Coping skills training is the cornerstone of RPT, teaching client’s strategies to:

- Understand relapse as a process
- Identify and cope effectively with high-risk situations such as negative emotional states, interpersonal conflict, and social pressure
- Cope with urges and craving
- Implement damage control procedures during a lapse to minimize negative consequences
- Stay engaged in treatment even after a relapse
- Learn how to create a more balanced lifestyle



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Coping skills training strategies include both cognitive and behavioral techniques. Cognitive techniques provide clients with ways to reframe the habit change process as a learning experience with errors and setbacks expected as mastery develops. Behavioral techniques include the use of lifestyle modifications such as meditation, exercise, and spiritual practices to strengthen a client's overall coping capacity.

Process Group

Group Description: This is a process group focusing on individual's interpersonal/personal issues, which aims to provide corrective emotional experience. The group members are collectively encouraged to allow their adult thoughts and feelings to modify their earlier traumatic experiences.

Straight Ahead: Transition Skills for Recovery

Group Description: The focus of the manual is on helping clients develop social skills and support networks for recovery maintenance. The manual addresses relapse prevention, friends and social networks, 12-step and other community-based self-help, family recovery issues, assertive communication, stress reduction, anger management, and planning and problem-solving. These "transition" skills are seen as an important adjunct for preparing the client to establish his or her own continuing aftercare support system for recovery maintenance once involvement in primary treatment has ended.

Living in Balance-12 Core Client Sessions

This group provides the foundational core for the Power House Residential Treatment Center. These sessions provide basic information about addiction and recovery, which clients explore using session-specific reproducible worksheets. The 12 core session topics are:

- Session 1 Definitions, Terms, and Self-Diagnosis
- Session 2 Drug Education
- Session 3 What Are Triggers?
- Session 4 Planning for Sobriety
- Session 5 Alcohol and Tobacco
- Session 6 Spirituality
- Session 7 Sex, Drugs, and Alcohol
- Session 8 Stress
- Session 9 Skills for Stress
- Session 10 Negative Emotions
- Session 11 Anger and Communication
- Session 12 Relapse Prevention

Optional Groups (Based on the gender demographics and individualization of treatment)

These groups are broken down in smaller group sizes that target specific areas for the client while in our program, which include:

- 24/7 Dad
- Time Out! For Men: A Communication Skills Group for Men
- Women of Worth
- Seeking Safety
- Step Group
- Unlock Your Thinking
- Relational/Communication Skills



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ACT for Substance Abuse
Trauma Centered Treatment
Family/Support System Information

The Power House Residential Drug Treatment Center believes that addiction not only impacts the client but affects their families and support systems. Naturally, the recovery process of the client includes their family and/or support system. While the client is in treatment at the Power House Residential Drug Treatment Center, we encourage families and support systems to be involved in the recovery process.

Family and Support system involvement includes completion of the family questionnaire provided in the packet and communications with the Power House Residential Drug Treatment Center staff. We believe that family can be utilized as a vital resource of information when it comes to better understanding of the client that leads to better case conceptualization.

Contracted Care

We believe that the utilization and partnership of community practices can create a continuum of care for the client to meet his/her needs.

We are contracted with a Licensed Professional Counselor to work with clients that have higher levels of biopsychosocial needs.

We have a medical affiliate contract with a local urgent care to provide services for any medical needs and concerns.

Coordinated Care

At the Power House Residential Drug Treatment Center, we believe in being logistically sound to provide the best services to our clients, referents, and managed care organizations. We believe in having a streamlined process when it comes to documentation and pre-authorization processes. We understand that each coordinated care can have different requirements when it comes to the pre-authorization process and we will do whatever it takes to create and comply with each coordinated care organization to provide timely requests of documentation. At the Power House Residential Drug Treatment Center, we take great pride in building healthy collaborative relationships to help serve the chemical dependency population and community partnerships. We understand that coordinated care organizations have a process when it comes to reviewing pre-authorizations that consist of:

1. ASAM Addendum to justify appropriate placement and continuity of care.
2. Initial treatment plan
3. Master Issues Needs List (Problem list)
4. Pre-authorization paperwork (varies on the CCO)

We can accommodate any requests and gladly adapt our procedures to meet the requirements of each CCO. We understand that most CCO's would like to have all the information listed above prior to the arrival of the client. We also understand that CCO's also give a grace period of 1-2 days to complete the steps listed above. We are currently implementing BestNotes© which will help us streamline the referral and intake procedure, allowing more time to get the provided documentation requested by the CCO completed in a timely manner.

Collaborative relationships with the managed care organizations is the first step in providing care for our clients. At the Power House Residential Drug Treatment Center, we emphasize the importance of integrated treatment planning with the client, family, and referral source (with appropriate releases of information). It is vital to establish working relationships with the referents to instill a positive approach in the discharge planning process.



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FEES FOR RESIDENTIAL TREATMENT

Services are billed based upon designated fees and contracts. Please call to make financial arrangements prior to Intake.

RESIDENTIAL TREATMENT:

Private Pay (No Insurance): \$237.00 per day (Payment is due at the time of service)

Private Insurance: \$237.00 per day- Client pays deductible (down payment required on entry and required for the co-pay amounts)

Public Beds: We contract with several Coordinated Care Organizations and will work with insurance companies to provide the best possible services.

Clients are required to apply for Food Stamps to help pay towards food costs, if eligible. For those who do not qualify, other arrangements will be made.

Down Payments towards treatment cost:

For Private Pay, a minimum down payment of \$3300.00 is required. The daily rate is on a sliding fee basis and ranges from \$110.00 per day to \$237.00 per day.

LIST OF WHAT TO BRING

NOTE: Storage space is limited. You must be able to fit personal items in a four-drawer dresser. Laundry is available two times a week.

<p><u>PERSONAL CARE ITEMS</u></p> <ul style="list-style-type: none"> • Hair care items, including shampoo • Toothbrush • Toothpaste • Deodorant • Soap • Shaving equipment 	<p><u>TREATMENT MATERIALS</u></p> <ul style="list-style-type: none"> • AA/NA Self Help books • Letter writing materials (pens, pencils, notebooks, stamps, envelopes, 2 inch ring binders) • Treatment related books
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<ul style="list-style-type: none"> • Feminine hygiene products 	
<p><u>SHOES</u></p> <ul style="list-style-type: none"> • Comfortable shoes or sandals • Tennis shoes to use for activities • Slippers <p><u>OPTIONAL</u></p> <ul style="list-style-type: none"> • Personal bedding, towels • Family pictures 	<p><u>MEDICAL CONCERNS</u></p> <ul style="list-style-type: none"> • Medical card/ insurance information • Doctor’s note for self-administering medications • Prescription medications, 90 day supply • Over the counter medications with Doctor’s order • Information about upcoming court, DHS, medical appointments
<p><u>CLOTHING</u></p> <ul style="list-style-type: none"> • Appropriate outerwear • Sleep wear/bathrobe • Long pants for groups • Shirts, blouses, sweaters • Sweatshirts • Long shorts only • Long skirts or dresses • At least 3 pair of underwear • Socks 	<p><u>OTHER / IDENTIFICATION</u></p> <ul style="list-style-type: none"> • Alarm clock- No clock radio • Oregon Trail Card • Phone card (s) • Picture ID • Social Security Card • TB Testing Results (if applicable) <p><u>OPTIONAL</u></p> <ul style="list-style-type: none"> • Petty cash (nothing over \$100.00)