



## **ADULT Long-Term Structured Residences (LTSRs)**

### **PROGRAM DESCRIPTION**

Long-Term Structured Residences (LTSR) are highly structured therapeutic residential mental health treatment facilities designed to treat individuals 18 and older who are eligible for hospitalization but who can receive adequate care in an LTSR. LTSRs serve individuals who have severe and persistent mental illness and who have reached maximum benefit from the mental health resources available elsewhere in the community or hospital. This is generally evidenced by multiple treatment failures in less structured community residential programs, extended acute hospitalizations, and current or prior placement in a state hospital.

LTSRs are the only mental health residential level of care to which an individual may be involuntarily committed by the court. Additionally, the LTSR regulations allow for the sites to be locked. The LTSRs were originally envisioned with the closure of Byberry (Philadelphia State Hospital) and were to be used for individuals transitioning from Byberry or who would have required state hospital level of care. LTSRs provide in-house therapeutic groups, activities, and recreation. It is important to consider that the LTSRs differ from hospitals in that they are not permitted the use of restraint. LTSRs are staffed 24 hours per day.

### **MEDICAL NECESSITY CRITERIA (OMHSAS-approved)**

#### **Admission Criteria**

1. Individual must be 18 years or older.
2. Individual does not meet the criteria for acute inpatient psychiatric hospitalization, extended acute care, or nursing home level of care.
3. Individual has demonstrated the need for a highly structured, supportive, and supervised environment.
4. The individual cannot be appropriately treated at a less structured setting due to the need for 24-hour supervision, medication management and monitoring, and ongoing therapeutic interventions.
5. Individual must have a current serious mental illness (SMI) diagnosis from the DSM 5 from a licensed psychiatrist that causes significant functional and psychosocial impairment.
6. A licensed psychiatrist must recommend LTSR placement as the most clinically appropriate and least restrictive level of care.

7. The individual's behavior does not require the use of chemical or physical restraints or use of seclusion.

8. If the individual has a substance use history, he or she must be substance free for at least 12 months prior to the date of referral.

9. The individual is able to reasonably participate in LTSR programming including, but not limited to, agreeing to follow the program guidelines, accepting the level of supervision provided, and engaging in treatment (i.e. individual therapy, psychiatric appointments, goal planning, etc.).

**Continued Stay Criteria:**

1. The individual continues to meet admission criteria.

3. The individual must continue to show significant functional impairment due to a mental illness.

3. Available community resources and social supports are not adequate to effectively meet the needs of the individual.

4. The individual is reasonably able to participate in LTSR programming including, but not limited to, agreeing to follow the program guidelines, accepting the level of supervision provided, and engaging in treatment (i.e. individual therapy, psychiatric appointments, goal planning, etc.).

**Discharge Guideline:**

1. The individual is taking his or her medication as prescribed by a psychiatrist, their medication regimen is stable, and they are not experiencing significant side effects.

2. The individual has knowledge of, or is actively learning about, the purpose of their medications, the route, dosage and frequency with the goal of assisting them in developing the competency to self-pour medications, under the supervision of the registered nurse, prior to discharge.

3. The individual has accepted their needs, as demonstrated by continued cooperation with medical and psychiatric treatment, for a minimum period of six months.

4. The individual may be responsible for their activities of daily living (ADL) related to care of their personal living space and hygiene with a level of assistance that would be available in the proposed living arrangement.

5. The individual may demonstrate his or her ability to identify and utilize coping skills and individual and community supports. The individual has not displayed physically violent behaviors for at least three to six months prior to discharge.

6. The individual is actively working on money management skills with the social worker, or their representative payee, for at least three to six months prior to discharge.

7. The individual may demonstrate his or her ability to safely travel in the community independently or with a level of assistance no greater than that which would be available in the proposed living arrangement for at least three to six months prior to discharge.

8. The individual is able to express hope and has positive expectations regarding discharge.