

## What Jasper Mountain Requires in a Referral for Residential Treatment:

Thank you for your interest in our program. Our program is long-term, typical lengths of stay are between 12-18 months, and we serve children from all over the country.

We are currently full and working off of a waiting list. That being said, our intake committee reviews files for acuity as well as fit with our current milieu, and we try to serve the most acute children first, not on a first-come, first-served basis.

For review, our intake committee will need the following:

- **Fiscal:** Copy of OHP or Private Insurance cards, both primary and secondary if more than one.
- **Child's Functioning:** Copy of Psychological Evaluation(s) (if more than one, the latest within the past year or two) with a WISC or similar cognitive evaluation included in the report.
- **Academic/School:** Grade level, behaviors in school, suspensions, expulsions and copy of IEP if has one.
- **Treatment History:** Where has child gotten treatment including hospital or other residential stays over time with dates as much as possible.
- **Treatment Reports:** Intake and Discharge Summary Reports from any residential or hospital stays, treatment plan and summary reports for outpatient treatment. Comprehensive Mental Health Assessment reports.
- **Psychiatric/Medical:** Child's current medications. Any serious health issues?
- **Placement history** (where child has lived since birth with approximate dates)
- **Child's trauma history** (including in-utero impacts from substances, witnessing DV, physical and sexual abuse, and neglect, as well as history of multiple placements)
- **Other Systems Involved:** List any other systems involved with the child (i.e. DHS Child Welfare, Developmental Disabilities, Oregon Youth Authority/Probation)
- **Discharge Placement:** Where child will live after treatment.
- **Recent Photo** - OPTIONAL (our committee loves to put a face to the name)

The referral records can be sent via email to: [JMCreferral@jaspermountain.org](mailto:JMCreferral@jaspermountain.org). Records can also be sent to my attention via fax: 541-747-4722.

Please let me know if you have any questions or concerns. Email is best for communication as I am away from my phone often.

Thanks again for your inquiry!

Kiva Michels, LCSW

Intake and Clinical Director

Jasper Mountain Center