Division 1. PROCEDURAL RULES; DEFINITIONS

309-001-0000 Model Rules of Procedure

The Oregon Health Authority (Authority), Health Systems Division (Division), Addiction Services, chapter 309, shall comply with Authority rules in chapter 943 regarding Model Rules of Procedure, Notices of Rulemaking, adoption of Temporary Rules, and Delegation of Rulemaking Authority.

Statutory/Other Authority: ORS 413.042
Statutes/Other Implemented: ORS 413.042
309-001-0100 Definitions

The following definitions apply with respect to OAR chapter 309.

(1) "Abuse" means any of the following, consistent with the definitions in OAR chapter 411, division 20:
   (a) "Physical Abuse",
   (b) "Neglect",
   (c) "Abandonment",
   (d) "Verbal or Emotional Abuse",
   (e) "Financial Exploitation",
   (f) "Sexual Abuse",
   (g) "Involuntary Seclusion",
   (h) "Wrongful Use of a Physical or Chemical Restraint".

(x) "Abuse of an Adult" means the circumstances defined in OAR 407-045 for abuse of an adult.

(x) "Abuse of a Child" means the circumstances defined in ORS 419B.005.

(x) "Activities of Daily Living (ADL)" means those personal, functional activities required by an individual for continued well-being, health, or safety.

(x) "Acute Care Psychiatric Hospital" means a hospital or facility that provides 24 hours-a-day psychiatric, multi-disciplinary, inpatient or residential stabilization, care, and treatment.

(x) "Adolescent" means an individual from 12 through 17 years of age or those individuals who are determined to be developmentally appropriate for youth services.

(x) "Adult" means a person 18 years of age or older or an emancipated minor. An individual with Medicaid eligibility who is in need of services specific to children, adolescents, or young adults in transition shall be considered a child until age 21 for the purposes of these rules, except that any such individual between the ages of 18 and 21 shall have all rights afforded to adults as specified in these rules.

(x) "Aid to Physical Functioning" means any special equipment ordered for an individual by a Licensed Medical Professional (LMP) or other qualified health care professional that maintains or enhances the individual’s physical functioning.

(X) "Allegation of Abuse" means a complaint or mandatory report submitted verbally or in writing alleging abuse of a client, patient or resident by a staff. All allegations of abuse will be appropriately handled per the patient abuse reporting process.

(x) "Applicant" means the individual or entity, including the Division, who owns, seeks to own or operate, or maintains and operates a program and is applying for a license.

(x) "Approved" means authorized or allowed by the Authority or designee.

(x) "Assertive Community Treatment (ACT)" means an evidence-based practice designed to provide comprehensive treatment and support services to individuals with serious and persistent mental illness. ACT is intended to serve individuals who have severe functional impairments and who have not
responded to traditional psychiatric outpatient treatment. ACT services are provided by a single multi-disciplinary team, which typically includes a psychiatrist, a nurse, and at least two case managers and are designed to meet the needs of each individual and to help keep the individual in the community and out of a structured service setting, such as residential or hospital care. ACT is characterized by the following:

(a) Low client-to-staff ratios;

(b) Providing services in the community rather than in the office;

(c) Shared caseloads among team members;

(d) Twenty-four-hour staff availability;

(e) Direct provision of all services by the team (rather than referring individuals to other agencies); and

(f) Time-unlimited services.

(5) “Assessment” means the process of obtaining sufficient information through a face-to-face interview to determine a diagnosis and to plan individualized services and supports.

(6) "The ASAM Criteria" means The ASAM Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions, which is a clinical guide for developing patient-centered service plans and making objective decisions about admission, continuing care, and transfer or discharge and is incorporated by reference in these rules. The publication incorporated by reference in these rules is available from the American Society of Addiction Medicine at www.asam.org.

(x) “ASAM Criteria Level 3.2-WM Clinically Managed Residential Withdrawal Management” (Level 3.2-WM) means a setting in which clinically managed services are directed by non-physician addiction specialists rather than medical and nursing personnel.

(x) “ASAM Criteria Level 3.7-WM Medically Monitored Withdrawal Management” (Level 3.7-WM) means an inpatient setting that provides medically managed intensive inpatient treatment services; such settings are also automatically certified for the provision of Level 3.2-WM. D services.

(X) “The Authority” means the Oregon Health Authority.

(X) “Behavioral Health” means the spectrum of behaviors and conditions comprising mental health, substance use disorders, and problem gambling.

(x) “Behavioral Health Crisis Assessment” means a process which determines a patient’s need for immediate crisis stabilization through evaluation of the patient’s strengths, goals, needs, and current level of functioning

(x) “Behavior Support Plan” means the individualized proactive support strategies that are used to support positive behavior.
(x) “Behavior Support Strategies” mean proactive supports designed to replace challenging behavior with functional, positive behavior. The strategies address environmental, social, neuro-developmental, and physical factors that affect behavior.

(x) “Best Practice Risk Assessment” means a research-informed methodology that provides guidelines or tools to determine an individual’s level of risk for attempting or completing self-inflicted injury or death and may include tools such as the Columbia Suicide Severity Rating Scale or other tools accepted for the Substance Abuse and Mental Health Services Administration National Registry of Evidence-based Programs and Practices or the Suicide Prevention Resource Center Best Practices Registry.

(x) "Building Code" means the Oregon Structural Specialty Code adopted by the Building Codes Division of the Oregon Department of Consumer and Business Services.

(x) "Care" means services including but not limited to supervision; protection; assistance with activities of daily living such as bathing, dressing, grooming or eating; management of money; transportation; recreation; and the providing of room and board.

(X) "Case Management" means the services provided to assist individuals who reside in a community setting, or are transitioning to a community setting, in gaining access to needed medical, behavioral health, social, educational, government entitlement programs, and other applicable community services.

(X) “Care Coordination” means a series of actions contributing to a patient-centered, high-value, high-quality care system. It is defined as the organized coordination of an individual’s health care services and support activities between two or more participants deemed responsible for the individual’s health outcomes and minimally includes the individual (and their family, guardian, or caregiver, as appropriate) and a single consistent individual in the role of care coordinator. Care coordination is characterized by the creation of a team and team meetings, and facilitation of transitions between levels of care

(X) “Care Coordinator” means a single consistent individual who is in charge of care coordination services.

(x) "Case Management" means the services provided to assist individuals who reside in a community setting, or are transitioning to a community setting, in gaining access to needed medical, behavioral health, social, educational, government entitlement programs, and other applicable services.

(X) “Certificate” means a Division-issued document that declares a provider certified pursuant to OAR 309-008-0100 through 309-008-1600. A letter accompanying the certificate explains the certificate’s scope and the provider’s approved service delivery locations.

(X) “Chief Officer” means the Division’s Chief Health Systems Officer, or his or her designee.

(x) "Child" means an individual under the age of 18. An individual with Medicaid eligibility who is in need of services specific to children, adolescents, or young adults in transition, shall be considered a child until age 21 for purposes of these rules.

(x) “Child and Adolescent Needs and Strengths Assessment” means a multi-purpose tool developed to support decision making, including level of care and person-centered service planning, to facilitate
quality improvement initiatives, and to monitor outcomes of services and supports. It utilizes a communication perspective to facilitate the linkage between the assessment process and the design of individualized Wraparound plans of care, including the application of evidence-based practices.


(x) “Children’s Emergency Safety Intervention Specialist (CESIS)” means a Qualified Mental Health Professional (QMHP) licensed to order, monitor, and evaluate the use of seclusion and restraint in accredited and certified facilities providing intensive mental health treatment services to individuals less than 21 years of age.

(x) “Clinical Supervision” means oversight by a qualified clinical supervisor of substance use, gambling disorder, or mental health services and supports provided according to these rules, including ongoing evaluation and improvement of the effectiveness of those services and supports.

(x) “Clinical Supervisor” means a person qualified to oversee and evaluate substance use, gambling disorder, or mental health services and supports.

(x) “Collateral Contacts” means members of the individual’s family or household or significant others (e.g., landlord, employer) who regularly interact with the individual and are directly affected by or have the capability of affecting their condition and are identified in the treatment plan as having a role in the individual’s recovery. For the purpose of the Assertive Community Treatment (ACT) program, a collateral contact does not include contacts with other mental health service providers or individuals who are providing a paid service that would ordinarily be provided by the ACT team (e.g., meeting with a shelter staff who is assisting an ACT recipient in locating housing).

(x) “Community-Based” means services and supports provided in a participant’s home and surrounding community and not solely based in a traditional office-setting.

(X) “Community Mental Health Program” (CMHP) means an entity operated by, or contractually affiliated with, a local mental health authority that is responsible for planning and delivery of services for individuals with behavioral health conditions and developmental disabilities in a specific geographic area of the state under an agreement with the Division, pursuant to OAR chapter 309, division 014.

(x) “Co-occurring Disorders (COD)” means the existence of some combination of diagnoses for a substance use disorder, a gambling disorder, or a mental health disorder.

(4) “Competency” means one year of experience or training in the specialty area and demonstration of the specific skills or knowledge.

(x) "Competitive Integrated Employment" means full-time or part-time work:

(a) At minimum wage or higher, at a rate that is not less than the customary rate paid by the employer for the same or similar work performed by other employees who are not individuals with disabilities, and who are similarly situated in similar occupations by the same employer, and who have similar training, experience, and skill;
(b) With eligibility for the level of benefits provided to other employees;

(c) At a location where the employee interacts with other persons who are not individuals with disabilities (not including supervisory personnel or individuals who are providing services to such employee) to the same extent that individuals who are not individuals with disabilities and who are in comparable positions interact with other persons; and

(d) As appropriate, presents opportunities for advancement that are similar to those for other employees who are not individuals with disabilities and who have similar positions

(x) “Comprehensive Assessment” means the organized process of gathering and analyzing current and past information with each individual and the family and support system and other significant individuals to evaluate:

(a) Mental and functional status;

(b) Effectiveness of past treatment;

(c) Current treatment, rehabilitation, and support needs to achieve individual goals and support recovery; and,

(d) The range of individual strengths (e.g., knowledge gained from dealing with adversity, personal or professional roles, talents, personal traits) that may act as resources to the individual and the recovery planning team in pursuing goals. The results of the information gathering and analysis are used to:

(A) Establish immediate and longer-term service needs with each individual;

(B) Set goals and develop the first person-directed recovery plan with each individual; and,

(C) Optimize benefits that can be derived from existing strengths and resources of the individual and family and natural support network in the community.

(x) "Conditional Release" means placement by a court or the Psychiatric Security Review Board (PSRB) of an individual who has been found eligible under ORS 161.327 or 161.336 for supervision and treatment in a community setting.

(x) "Contract" means a formal written agreement between the CMHP, CCO, Oregon Health Plan contractor, or the Division and a provider.

(x) "Controlled" means a provider requires an individual to receive services from the provider or requires the individual to receive a particular service as a condition of living or remaining in the HCB setting.

(x) “Controlled Environment” means a living environment in which the individual is supervised, overseen, or closely monitored 24 hours a day. A controlled environment includes correctional facilities and licensed residential SUD programs, but does not include alcohol and drug free housing programs, halfway houses, or shelters.
(X) “Coordinated Care Organization” (CCO) means an entity that has contracted with the Authority to provide coordinated health services to members of the Oregon Health Plan, as described in OAR chapter 410, division 141.

(X) “Council” means an organization of individuals with a mission statement and by-laws, comprised of representatives of the regional acute care psychiatric service, Oregon State Hospital, community mental health programs served, consumers, and family members of consumers. The Council is advisory to the regional acute care facility for adults.

(X) "Crisis" means either an actual, or perceived, urgent or emergent situation that occurs when an individual’s stability or functioning is disrupted and there is an immediate need to resolve the situation to prevent a serious deterioration in the individual’s mental or physical health or to prevent referral to a significantly higher level of care, arrest, or death.

(X) "Crisis Intervention" means short-term services to address an immediate crisis need.

(X) “Crisis Line Services” means phone-based services that establish immediate communication links and provide supportive interventions and information for individuals in an urgent or emergent situation. These linkages include but are not limited to mobile crisis services, jail diversion services, and connection to and individual’s ACT team.

“Crisis Plan” means an individualized document designed to help anticipate and prevent future crisis episodes and direct interventions in the instance of a crisis.

(X) “Crisis and Safety Plan” means a document developed by the youth and family and the Wraparound team to address potential crises that could occur for the youth and their family, and to ensure everyone’s safety. It shall include 24-hour, 7-days-a-week response; formal, informal and natural supports; respite or back-up care; details leading to crises; successful strategies that have worked in the past; and strength-based strategies that prevent escalation and maintain safety.

(X) “Crisis Stabilization Plan” means an individualized written plan defining specific short-term rehabilitation objectives and proposed crisis interventions derived from the patient’s behavioral and physical health assessment.

(X) "Culturally Responsive" means the process by which people and systems respond respectfully and effectively to people of all cultures, languages, classes, races, ethnic backgrounds, disabilities, religions, genders, sexual orientations, and other diversity factors in a manner that recognizes, affirms, and values the worth of individuals, families, and communities and protects and preserves the dignity of each.

(X) "Declaration for Mental Health Treatment" means a written statement of an individual’s preferences concerning their mental health treatment, as described in ORS 127.700 through 127.737.

(x) “Deputy Director” means the deputy director of the Health Systems Division of the Oregon Health Authority or designee.

(x) "Direct Care Staff" means program staff responsible for providing services for an individual.

(X) “Designated Representative” means:
(a) Any adult who is not the individual’s paid provider, who:

(A) The individual has authorized to serve as his or her representative; or

(B) The individual’s legal representative is authorized to serve as the individual’s representative.

(b) The power to act as a designated representative is valid until the individual or the individual’s legal representative modifies the authorization and notifies the Division of the modification, the individual or the individual’s legal representative notifies the provider that the designated representative is no longer authorized to act the individual’s behalf, or there is a change in the legal authority upon which the designation was based. Notice shall include the individual’s or the representative’s signature as appropriate;

(c) An individual or the individual’s legal representative is not required to appoint a designated representative; and

(d) For the purposes of these rules, the term individual shall be considered to include the individual’s designated representative.

(x) “Diagnosis” means a DSM diagnosis determined through the mental health assessment and any examinations, laboratory, medical or psychological tests, procedures, or consultations suggested by the assessment.

(x) “The Division” means the Health Systems Division of the Oregon Health Authority.

(x) “Division-Approved Reviewer” means the Division’s contracted entity that is responsible for conducting ACT fidelity reviews, training, and technical assistance to support new and existing ACT programs statewide.

(x) “Division Staff” means individuals employed by the Division or individuals delegated by the Division to conduct licensing activities under these rules.

(x) "DSM" means the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association.

(x) "Emergency Admission" means an admission to a program made on an urgent basis due to the pressing service needs of the individual.

(x) “Emergency Safety Intervention” means the use of seclusion or personal restraint as an immediate response to an unanticipated threat of violence or injury to an individual or others.

(x) “Emergency Safety Intervention Training” means a Division-approved course that includes an identified instructor, a specific number of face-to-face instruction hours, a component to assess competency of the course materials, and an established curriculum including the following:

(a) Prevention of emergency safety situations using positive behavior support strategies identified in the individual’s behavior support plan;
(b) Strategies to safely manage emergency safety situations; and

(c) De-escalation and debriefing.

(x) “Emergency Safety Situation” means an unanticipated behavior that places the individual or others at serious threat of violence or injury if no intervention occurs and that calls for an emergency safety intervention.

(x) “Emergent” means the onset of symptoms requiring attention within 24 hours to prevent serious deterioration in mental or physical health or threat to safety.

(x) “Employee” means an individual employed by a provider who receives wages, a salary, or is otherwise paid by the provider for providing the service.

(x) “Enhanced Care Services (ECS)” and “Enhanced Care Outreach Services (ECOS)” means intensive rehabilitative mental health services to eligible individuals who reside in Aging and People with Disabilities (APD) licensed homes or facilities.

(x) “Entry” means the act or process of acceptance and enrollment into services regulated by this rule.

(x) "Evacuation Capability" means the ability of occupants, including individuals and program staff as a group, to evacuate the building or relocate from a point of occupancy to a point of safety as defined in the Oregon Structural Specialty Code. The category of evacuation capability is determined by documented evacuation drill times or scores on National Fire Protective Association (NFPA) 101A 2000 edition worksheets. There are three categories of evacuation capability:

(a) Impractical (SR-2): A group, even with staff assistance, who cannot reliably move to a point of safety in a timely manner, determined by an evacuation capability score of five or greater or with evacuation drill times in excess of 13 minutes;

(b) Slow (SR-1): A group that can move to a point of safety in a timely manner, determined by an evacuation capability score greater than 1.5 and less than five or with evacuation drill times over three minutes but not in excess of 13 minutes;

(c) Prompt: A group with an evacuation capability score of 1.5 or less or equivalent to that of the general population or with evacuation drill times of three minutes or less. The Division shall determine evacuation capability for programs in accordance with the NFPA 101A 2000 edition. Programs that are determined to be "Prompt" may be used in Group R occupancies classified by the building official in accordance with the building code.

(x) “Face to Face” means a personal interaction where both words can be heard and facial expressions can be seen in person or through telehealth services where there is a live streaming audio and video, if clinically appropriate.

(x) “Family” means the biological or legal parents, siblings, other relatives, foster parents, legal guardians, spouse, domestic partner, caregivers, and other primary relations to the individual whether
by blood, adoption, legal, or social relationships. Family also means any natural, formal, or informal support persons identified as important by the individual.

(x) “Family Partner” means an individual certified and listed on the registry as a Family Support Specialist in accordance with ORS 410-180-0305, and who has completed specialized training approved by the Authority, in the Wraparound process. A Family Partner is a formal member of the Wraparound team whose role is to support the family.

(x) “Family Organization” means a family run and led, non-profit community organization providing education, connection, and empowerment to families and their communities to assure improved outcomes for youth experiencing significant behavioral health challenges. Family Organizations fulfill a significant role in facilitating family voice in local, state and national policy making.

(x) "Family Support" means the provision of peer delivered services to people defined as family to the individual. It includes support to caregivers at community meetings, assistance to families in system navigation and managing multiple appointments, supportive home visits, peer support, parent mentoring and coaching, advocacy, and furthering efforts to develop natural and informal community supports.

(x) “Family Support Specialist” has the meaning defined in OAR 410-180-0305. Family support specialists provide peer delivered services, as defined in these rules.

(x) “Fidelity” means the provider is providing services that are faithful to the evidence-based practice model and obtains a satisfactory score from the Oregon Center of Excellence for ACT as part of their regular reviews.

(x) "Fire Code" means the Oregon Fire Code as adopted by the State of Oregon Fire Marshal.

(x) “Formal Supports” means services and supports provided by professionals or individuals who are financially compensated for their time.

(x) “Full-Time Equivalent” (FTE) means a way to measure how many full-time employees are required to provide the appropriate level of services to fulfill minimum fidelity requirements.

(x) “Gambling Disorder Treatment Staff” means a person certified or licensed by a health or allied provider agency to provide problem gambling disorder treatment services that include assessment, development of a service plan, group and family or impacted other counseling.

(x) “Gender Identity” means a person’s self-identification of gender without regard to legal or biological identification, including but not limited to persons identifying themselves as male, female, non-binary, transgender, and gender-diverse.

(x) “Gender Presentation” means the external characteristics and behaviors that are socially defined as masculine, feminine, or non-binary, such as dress, mannerisms, speech patterns, and social interactions.

(x) "Geographic Service Area" means the geographic area within the county boundaries in which the CMHP operates.
(x) “Goal” means the broad aspirations or outcomes toward which the patient is striving and toward which all services are intended to assist the patient.

(x) “Grievance” means a formal complaint submitted to a provider, whether verbally or in writing, by an individual or the individual’s chosen representative, pertaining to the denial or delivery of services and supports.

(x) "Guardian" means an individual appointed by a court of law to act as the guardian of a minor or a legally incapacitated person.

(X) “Habilitation” or “Habilitative Services” means services designed to help an individual attain or maintain their maximal level of independence and includes, but is not limited to, services provided in order to help an individual acquire, retain, or improve skills in ADLs and IADLs, community survival skills, communication, self-help, socialization, and adaptive skills necessary to reside successfully in an individual’s home or a community-based setting.

(x) “HCB” means Home and Community-Based.

(x) “HCBS” means Home and Community-Based Services, services provided in the individual's home or community.

(x) “Health Systems Services and Supports” means all services and supports including but not limited to Outpatient Community Mental Health Services and Supports for Children and Adults, Intensive Treatment Services for Children, Outpatient and Residential Substance Use Disorders Treatment Services, and Outpatient and Residential Gambling Disorder Treatment Services.


(x) “Home and Community-Based Settings” or “HCB Settings” means a physical location meeting the requirements of OAR 411-004-0020 where an individual receives Home and Community-Based Services.

(x) "Home-Like" means an environment that promotes the dignity, security, and comfort of individuals through the provision of personalized care and services and encourages independence, choice, and decision-making by the individual.

(x) "Hospital" has the meaning given that term in ORS 442.015.

(x) “Hospital Discharge Planning” means a process that begins upon admission to the Oregon State Hospital (OSH) or an acute care psychiatric hospital and that is based on the presumption that with sufficient supports and services, all individuals can live in an integrated community setting. Discharge planning is developed and implemented through a person-centered planning process in which the individual has a primary role and is based on principles of self-determination. For OSH, discharge planning teams include a representative of a community mental health provider from the county where the individual is likely to transition.

(x) “Individual” means any individual being considered for or receiving services and supports regulated by these rules.
(4) “Individual Placement and Support (IPS) Supported Employment Services” means individualized services that assist individuals to obtain and maintain integrated, paid, competitive employment. Supported employment services are provided in a manner that allows individuals to work the maximum number of hours consistent with their preferences, interests, and abilities and are individually planned, based on person-centered planning principles and evidence-based practices.

(x) “Individual Service Record” means an individual’s records maintained by the program.

(x) “Individual Treatment Team” means a group or combination of three to five ACT team staff members who together have a range of clinical and rehabilitation skills and expertise. The core members are the case manager, the psychiatrist or psychiatric nurse practitioner, one clinical or rehabilitation staff individual who backs up and shares case coordination tasks and substitutes for the service coordinator when they are not working, and a peer support and wellness specialist.

(x) "Individually-Based Limitation" means any limitation to the qualities outlined in OAR 309-035-0195 due to health and safety risks. An individually-based limitation is based on a specific assessed need and only implemented with the individual’s or individual's representative's informed consent as described in OAR 309-035-0195.

(x) “Informal Supports” means supports provided by individuals or organizations through citizenship and work on a volunteer basis under a structure of certain qualifications, training and oversight.

(x) “Informed Consent for Services” means that the service options, risks and benefits have been explained to the individual and guardian, if applicable, in a manner that they comprehend, and the individual or guardian has consented to the services on, or prior to, the first date of service.

(x) “Initial Assessment and Individualized Treatment Plan” means the initial evaluation of:

(a) The individual’s mental and functional status;

(b) The effectiveness of past treatment; and

(c) The current treatment, rehabilitation, and support service needs. The results of the information gathering, and analysis are used to establish the initial treatment plan to support recovery and help the individual achieve their goals.

(x) “Integrated Psychiatric Residential Treatment Facility and Residential Substance Use Disorders Treatment Program” (IPSR or “Integrated Program”) means a residential program that is licensed to provide both residential substance use disorders treatment and psychiatric residential treatment services in the same facility to children and adolescents.

(X) “Intensive Care Coordination Plan” (ICCP) means a collaborative, comprehensive, integrated and interdisciplinary-focused written documentation that includes details of the supports, desired outcomes, activities, and resources required for an individual receiving ICC Services to achieve and maintain personal goals, health, and safety. It identifies explicit assignments for the functions of specific care team members, and addresses interrelated medical, social, cultural, developmental, behavioral, educational, spiritual and financial needs in order to achieve optimal health and wellness outcomes.
(x) “Intensive Outpatient Services and Supports (IOSS)” means a defined, specialized set of integrated and comprehensive in-home and community-based supports and mental health treatment services for children, organized by care coordination, developed by the child and family team, and delivered in the least restrictive setting in the community.

(x) “Intensive Treatment Services (ITS)” means the range of services in the system of care comprised of Psychiatric Residential Treatment Facilities (PRTF) and Psychiatric Day Treatment Services (PDTS), or other services as determined by the Division that provide active psychiatric treatment for children with severe emotional disorders and their families.

(X) “Interdisciplinary Team” (IDT) means a group of professional and direct care staff that have primary responsibility for the development of a service plan for an individual receiving services.

(x) "Intern" or "Student" means an individual providing paid or unpaid program services to complete a credentialed or accredited educational program recognized by the State of Oregon.

(x) “Juvenile Psychiatric Security Review Board (JPSRB)” means the entity described in ORS 161.385.

(x) "Legal Representative" means an individual with the legal authority to act for an individual and only within the scope and limits to the authority designated by the court or other agreement. A legal representative may include:

(a) For an individual under the age of 18, the parent, unless a court appoints another individual or agency to act as the guardian; or

(b) For an individual 18 years of age or older, a guardian appointed by a court order or an agent legally designated as the health care representative.

(X) "Legally Incapacitated" means that a person:

(a) Has been found by a court of law under ORS 426.295 to be unable, without assistance, to properly manage or take care of one’s personal affairs; or

(b) Is under guardianship.

(x) “Lethal Means Counseling” means best practice research-based counseling strategies to help patients at risk for suicide and their families reduce access to lethal means, including but not limited to firearms.

(x)”Level of Care" means the range of available services provided from the most integrated setting to the most restrictive and most intensive in an inpatient setting.

(x) “License” means a document or documents issued by the Division that identify and declare the provider to be licensed pursuant to OAR chapter 415 division 012 and applicable provider rules.

(X) "Licensed Health Care Professional" (LHCP) means a practitioner of the healing arts who is:

(a) Licensed by a recognized governing board in Oregon; and
(b) Acting within their scope of practice under state law.

(x) “Licensed Medical Practitioner” (LMP) means a physician, nurse practitioner, or physician’s assistant who is:

(a) Licensed to practice in the State of Oregon; and

(b) Competent by training and experience to conduct a mental health assessment and provide medication management.

(x) “Linguistic Responsiveness” means that individuals are informed of the availability of language assistance services in their preferred language, both verbally and in writing. Individuals are provided with easy to understand print and multi-media materials and signage appears in the languages commonly used by the populations in the service area.

(x) “Linkage agreement” means a written agreement between the program and other entities involved in supporting the individual’s welfare and recovery. The agreement describes the roles and responsibilities each entity assumes in order to assure that the program’s goals are achieved.

(X) “Local Mental Health Authority” (LMHA) means any of the following entities:

(a) The board of county commissioners, of one or more counties, that establishes or operates a community mental health program;

(b) The tribal council, in the case of a federally recognized tribe of Native Americans that elects to enter into an agreement to provide mental health services;

(c) A regional local mental health authority comprised of two or more boards of county commissioners; or

(d) If the county declines to operate or contract for all or part of a CMHP, the board of directors of a public or private corporation that contracts with the Division to operate a CMHP for that county.

(X) “Medicaid” means the public insurance program operated pursuant to Title XIX of the Social Security Act.

(x) “Medical History” means a review of the patient’s current and past state of health as reported by the patient or other reliable sources, including, but not limited to:

(a) History of any significant illnesses, injuries, allergies, or drug sensitivities; and

(b) History of any significant medical treatments, including hospitalizations and major medical procedures.

(x) "Medical Director" means a physician licensed to practice medicine in the State of Oregon and who is designated by a program to be responsible for the program’s medical services, either as an employee or through a contract.
(x) "Medically Appropriate" means services and medical supplies required for prevention, diagnosis, or treatment of a physical or behavioral health condition or injuries and that are:

(a) Consistent with the symptoms of a health condition or treatment of a health condition;

(b) Appropriate with regard to standards of good health practice and generally recognized by the relevant scientific community and professional standards of care as effective;

(c) Not solely for the convenience of an individual or a provider of the service or medical supplies; and

(d) The most cost effective of the alternative levels of medical services or medical supplies that can be safely provided to an individual.

(x) “Medically Appropriate Treatment” has the meaning given that term in OAR 410-172-0630.

(x) "Medication" means any drug, chemical, compound, suspension, or preparation in suitable form for use as a curative or remedial substance either internally or externally by any individual.

30) “Medication Administration Record” refers to the medication-related documentation described in OAR 309-018-0190.

(X) “Mental Health Intern” means a person who:

(a) Meets the qualifications for a QMHA, but not the minimum educational qualifications for a QMHP;

(b) Is currently enrolled in a graduate program for a master’s degree in psychology, social work, or in a behavioral science field;

(c) Has a collaborative educational agreement with the graduate program and the CMHP or other applicable provider;

(d) Works within the scope of practice and competencies identified by the CMHP or provider’s policies and procedures for credentialing clinical staff; and

(e) Receives, at a minimum, weekly supervision by a qualified clinical supervisor employed by the provider.

(39) "Mental or Emotional Disorder" means a primary Axis I or Axis II DSM diagnosis, other than Intellectual/Developmental Disability or a substance abuse disorder that limits an individual's ability to perform activities of daily living.

(40) "Mental Health Assessment" means a determination by a Qualified Mental Health Professional (QMHP) of an individual's need for mental health services. It involves collection and assessment of data pertinent to the individual's mental health history and current mental health status obtained through interview, observation, testing, and review of previous treatment records. It concludes with determination of a DSM diagnosis or other justification of priority for mental health services or a written statement that the person is not in need of community mental health services.
“Mental Status Examination” means an overall assessment of an individual’s mental functioning that includes descriptions of appearance, behavior, speech, and mood, and affect suicidal or homicidal ideation, thought processes and content, and perceptual difficulties including hallucinations and delusions. Cognitive abilities are also assessed and include orientation, memory, concentration, general knowledge, abstraction abilities, judgment, and insight.

“Mistreatment” means the following behaviors displayed by program staff when directed toward an individual:

(a) “Abandonment” means desertion or willful forsaking when the desertion or forsaking results in harm or places the individual at a risk of serious harm;

(b) “Financial Exploitation” means:

(A) Wrongfully taking the assets, funds, or property belonging to or intended for the use of an individual;

(B) Alarming an individual by conveying a threat to wrongfully take or appropriate money or property of the individual if the individual reasonably believes that the threat conveyed would be carried out;

(C) Misappropriating, misusing, or transferring without authorization any money from any account held jointly or singly by an individual;

(D) Failing to use the individual’s income or assets effectively for the support and maintenance of the individual. “Effectively” means use of income or assets for the benefit of the individual.

(c) “Involuntary Restriction” means the involuntary restriction of an individual for the convenience of a program staff or to discipline the individual. Involuntary restriction may include but is not limited to placing restrictions on an individual’s freedom of movement by restriction to his or her room or a specific area or restriction from access to ordinarily accessible areas of the setting, residence, or program, unless agreed to by the service plan.

(d) “Neglect” means active or passive failure to provide the care, supervision, or services necessary to maintain the physical and mental health of an individual that creates a significant risk of harm to an individual or results in significant mental injury to an individual. Services include but are not limited to the provision of food, clothing, medicine, housing, medical services, assistance with bathing or personal hygiene, or any other services essential to the individual’s well-being;

(e) “Verbal Mistreatment” means threatening significant physical harm or emotional harm to an individual through the use of:

(A) Derogatory statements, inappropriate names, insults, verbal assaults, profanity, or ridicule;

(B) Harassment, coercion, punishment, deprivation, threats, implied threats, intimidation, humiliation, mental cruelty, or inappropriate sexual comments;

(C) A threat to withhold services or supports, including an implied or direct threat of termination of services. “Services” include but are not limited to the provision of food, clothing, medicine, housing,
medical services, assistance with bathing or personal hygiene, or any other service essential to the individual's well-being;

(D) For purposes of this definition, verbal conduct includes but is not limited to the use of oral, written, or gestured communication that is directed to an individual or within their hearing distance or sight, regardless of the individual’s ability to comprehend. In this circumstance the assessment of the conduct is based on a reasonable person standard;

(E) The emotional harm that can result from verbal abuse may include but is not limited to anguish, distress, or fear.

(f) “Wrongful Restraint” means the use of physical or chemical restraint except for:

(A) An act of restraint prescribed by a licensed physician pursuant to OAR 309-033-0730; or

(B) A physical emergency restraint to prevent immediate injury to an individual who is in danger of physically harming himself or herself or others, provided that only the degree of force reasonably necessary for protection is used for the least amount of time necessary.

(x) "Mobile Crisis Services" means mental health services for individuals in crisis provided by mental health practitioners who respond to behavioral health crises onsite at the location in the community where the crisis arises and who provide a face-to-face therapeutic response. The goal of mobile crisis services is to help an individual resolve a psychiatric crisis in the most integrated setting possible and to avoid unnecessary hospitalization, inpatient psychiatric treatment, involuntary commitment, and arrest or incarceration.

(x) “Natural Supports” means personal associations and relationships typically developed in the community that enhance the quality and security of life for individuals, including but not limited to family relationships, friendships reflecting the diversity of the neighborhood and the community, association with fellow students or employees in regular classrooms and work places, and associations developed though participation in clubs, organizations, and other civic activities.

(x) "Nursing Care" means the practice of nursing by a licensed nurse, including tasks and functions that are delegated by a registered nurse to an individual other than a licensed nurse, which are governed by ORS Chapter 678 and rules adopted by the Oregon State Board of Nursing in OAR chapter 851.

(x) “Objective” means an interim level of progress or a component step the specification of which is necessary or helpful in moving toward a goal.

(X) “Oregon State Hospital” (OSH) means the Oregon State Hospital system and any campus thereof.

(46) “Outpatient Substance Use Disorders Treatment Program” means a program that provides assessment, treatment, and rehabilitation on a regularly scheduled basis or in response to crisis for individuals with substance use disorders and their family members or significant others.

(47) “Outpatient Community Mental Health Services and Supports” means all outpatient mental health services and supports provided to children, youth, and adults.
(48) “Outpatient Problem Gambling Treatment Services” means all outpatient treatment services and supports provided to individuals with gambling related problems and their families or impacted others.

(x) "Outreach" means the delivery of behavioral health services, referral services, and case management services in non-traditional settings, including but not limited to the individual's residence, shelters, streets, jails, transitional housing sites, drop-in centers, single-room occupancy hotels, child welfare settings, educational settings, or medical settings. It also refers to attempts made to engage or re-engage an individual in services by such means as letters or telephone calls.

(x) “Patient” means an individual who is receiving care and treatment in a regional acute care psychiatric service.

(X) “Peer” means any individual supporting an individual or the individual's family member who has similar life experience, either as a current or former recipient of substance use, problem gambling, or mental health services, or as a family member of an individual who is a current or former recipient of substance use, problem gambling, or mental health services.

(X) “Peer Coaches” means one who can provide coaching to bilingual Peer Coaches in the same

(X) “Peer Delivered Services” means community-based services and supports provided to individuals or family members by trained peer wellness specialists, family support specialists and youth support specialists and peer support specialists, peer wellness specialists, family support specialists and youth support specialists, workers with similar lived experience. These person-directed services are designed to support individuals and families in achieving and maintaining long-term recovery and in living successfully in the community. Peer delivered services may only be delivered by specialists who have been certified pursuant to OAR chapter 410, division 180, including, as appropriate, peer support specialists, peer wellness specialists, family support specialists, and youth support specialists.

(x) “Peer Partner Supervisor or Coach” means an individual with Youth Partner or Family Partner expertise, certified and listed on the registry in accordance with OAR 410-180-0300, who has a specific intentional focus in supporting Youth Partners or Family Partners to ensure the meaningful engagement of youth and family voices in the Wraparound plan, to develop their practice skills in Wraparound principles and participation in the Wraparound process and who works in connection with other Peer Support Specialists or peer delivered services.

(x) “Peer Support and Peer Wellness Specialist Supervision” means supervision by a qualified clinical supervisor and a qualified peer delivered services supervisor as resources are available. The supports provided include guidance in the unique discipline of peer delivered services and the roles of peer support specialists and peer wellness specialists.

(x) “Peer Delivered Services Supervisor” means a qualified individual certified as a PSS or PWS with at least one year of experience as a PSS or PWS in behavioral health services to evaluate and guide PSS and PWS program staff in the delivery of peer delivered services and supports.

(X) “Peer Support Specialist” has the meaning defined in OAR 410-180-0305. Peer wellness specialists provide peer delivered services, as defined in these rules.
(X) “Peer Wellness Specialist” has the meaning defined in OAR 410-180-0305. Peer support specialists provide peer delivered services, as defined in these rules.

(x) “Person-Centered Service Plan" means written documentation that includes details of the supports, desired outcomes, activities, and resources required for an individual to achieve and maintain personal goals, health, and safety.

(x) "Person-Centered Service Plan Coordinator" means the individual who may be a case manager, service coordinator, personal agent, or other individual designated by the Division to provide case management services or person-centered service planning for and with an individual.

(x) “Personal Restraint” means the application of physical force, without the use of any device, for the purpose of restraining the free movement of an individual’s body to protect the individual or others from immediate harm. Personal restraint may be used only in approved ITS or Integrated/IPSR programs as an emergency safety intervention under OAR 309-022-0175. Personal restraint does not include:

(a) Briefly holding without undue force an individual to calm or comfort him or her or holding an individual’s hand to safely escort him or her from one area to another;

(b) Mechanical restraints, meaning any device attached or adjacent to the resident’s body he or she cannot easily remove and that restricts freedom of movement or normal access to their body; or

(c) Chemical restraint, meaning the administration of medication for the acute management of potentially harmful behavior.

(x) "Personal Service Plan Team (PSP Team)" means a group composed of the individual, the case manager or other designated representative, CMHP representative, the provider, resident manager, and others needed including the individual's legal guardian, representatives of all current service providers, advocates, or others determined appropriate by the individual receiving services. If the individual is unable or does not express a preference, other appropriate team membership shall be determined by the PSP team members.

(x) “Phases of Wraparound” means the four distinct phases of Wraparound: engagement, initial plan development, implementation, and transition. The activities within each phase of Wraparound are part of fidelity practice.

(x) "P.R.N. (pro re nata) Medications and Treatments" means those medications and treatments that have been ordered to be given as needed.

(x) “Program” means a particular type or level of service that is organizationally distinct.

(x) “Program Administrator” or "Program Director" means a person with appropriate professional qualifications and experience who is designated to manage the operation of a program.

(x) "Program Staff" means an employee or person who, by contract with the program, provides a service and who has the applicable competencies, qualifications, or certification required in this rule to provide the service.
(x) "Progress Notes" means the notations in the individual’s record documenting significant information concerning the individual and summarizing progress made relevant to the objectives outlined in the residential service plan.

(x) "Protection" means the necessary actions taken by the program to prevent abuse, mistreatment, or exploitation of the individual to prevent self-destructive acts and to safeguard the individual’s property and funds when used in the relevant context.

(x) "Provider" means an organizational entity or qualified individual that is operated by or contractually affiliated with a community mental health program or contracted directly with the Division for the direct delivery of substance use, gambling disorder, or mental health services and supports.

(x) “Psychiatric Day Treatment Services (PDTS)” means the comprehensive, interdisciplinary, non-residential, community-based program certified under these rules consisting of psychiatric treatment, family treatment, and therapeutic activities integrated with an accredited education program.

(x) “Psychiatric Emergency Services (PES)” means medical and behavioral health services provided to individuals experiencing an acute disturbance of thought, mood, behavior, or social relationship that requires an immediate intervention as defined by the patient, family or the community, to prevent harm to the patient or others.

(x) “Psychiatric Residential Treatment Facility (PRTF)” means facilities that are structured residential treatment environments with daily 24-hour supervision and active psychiatric treatment including Psychiatric Residential Treatment Services (PRTS), Secure Children’s Inpatient Treatment Programs (SCiIP), Secure Adolescent Inpatient Treatment Programs (SAiP), and Sub-acute Psychiatric Treatment for children who require active treatment for a diagnosed mental health condition in a 24-hour residential setting.

(x) “Psychiatric Residential Treatment Services (PRTS)” means services delivered in a PRTF that include 24-hour supervision for children who have serious psychiatric, emotional, or acute mental health conditions that require intensive therapeutic counseling and activity and intensive staff supervision, support, and assistance.

(x) "Psychiatric Security Review Board (PSRB)” means the entity described in ORS 161.295 through 161.400.

(X) "Psychiatrist" means a physician licensed pursuant to ORS 677.010 to 677.228 by the Board of Medical Examiners for the State of Oregon and who has completed an approved residency training program in psychiatry.

(X) “Psychologist” means a psychologist licensed by the Oregon Board of Psychologist Examiners.

(X) “Psychosocial Rehabilitation Services” means medical or remedial services recommended by a licensed physician or other licensed practitioner to reduce impairment to an individual’s functioning associated with the symptoms of a mental disorder or to restore functioning to the highest degree possible.
“Publicly Funded” means financial support, in part or in full, with revenue generated by a local, state, or federal government.

“Qualified Mental Health Associate” (QMHA) means a person who delivers services under the direct supervision of a QMHP, and who meets both of the following criteria.

(a) A QMHA must be competent, by training and experience, to:

(A) Communicate effectively;

(B) Understand mental health assessment, treatment, and service terminology, and apply each of these concepts;

(C) Implement skills development strategies; and

(D) Identify, implement, and coordinate the services and supports identified in a service plan.

(b) A QMHA must meet one of the following minimum qualifications:

(A) Bachelor’s degree in a behavioral science field; or

(B) A combination of at least three years of relevant work, education, training, or experience.

“Qualified Mental Health Professional” (QMHP) means an LMP, LHCP, or any other person who meets both of the following criteria.

(a) A QMHP must be competent, by training and experience, to:

(A) Conduct an assessment including identifying precipitating events, to include health and safety risks to self or others; gathering histories of mental and physical health, substance use, past behavioral health services, and criminal justice contacts; assessing family, cultural, social, and work relationships; conducting a mental status examination; and completing a DSM diagnosis;

(B) Develop a safety plan;

(C) Write and supervise the implementation of a service plan; and

(D) Provide individual, family, or group therapy within the scope of their training.

(b) A QMHP must meet one of the following minimum qualifications:

(A) Bachelor’s degree in nursing and licensed by the State of Oregon. Nurses must abide by the Oregon Nurse Practice Act when determining if job descriptions are compliant with the competencies listed above;

(B) Bachelor’s degree in occupational therapy and licensed by the State of Oregon;

(C) Graduate degree in psychology;
(D) Graduate degree in social work;

(E) Graduate degree in recreational, art, or music therapy;

(F) Graduate degree in a behavioral science field; or

(G) A qualified mental health intern, as defined in this rule.

(x) "Qualified Person" means an individual who is a QMHP or a QMHA and is identified by the PSRB and JPSRB in its Conditional Release Order. This individual is designated by the provider to deliver or arrange and monitor the provision of the reports and services required by the Conditional Release Order.

(x) “Regional Acute Care Psychiatric Service” or “Service” means 24-hour psychiatric, multi-disciplinary, inpatient or residential stabilization care and treatment for adults with severe psychiatric disabilities that are funded by the Division, provided under contract with the Division or county, and operated in cooperation with a regional or local council. Campuses of the Oregon State Hospital are not considered regional acute care psychiatric services for the purpose of these rules.

(x) “Reportable Incident” means an incident involving an individual in an ITS program that caused serious harm or presented a serious risk to health and safety, including a serious injury or illness, an act of physical aggression that results in injury, suspected abuse or neglect, or involvement of law enforcement or emergency services.

(x) “Recovery” means a process of healing and transformation for a person to achieve full human potential and personhood in leading a meaningful life in communities of his or her choice.

(x) "Representative" means an individual who acts on behalf of an individual at the individual’s request with respect to a grievance including but not limited to a relative, friend, Division employee, attorney, or legal guardian.

(x) "Residency Agreement" means the written, legally enforceable agreement between a provider and an individual or the individual’s representative when the individual receives services. The Residency Agreement identifies the rights and responsibilities of the individual and the provider.

(x) "Resident Manager" means an employee of the provider who is approved by the Division to live in the AFH and is responsible for the care and services of individuals on a day-to-day basis.

(X) “Residential care” means services such as supervision; protection; assistance while bathing, dressing, grooming or eating; management of money; transportation; recreation; and the providing of room and board.

(x) “Residential Gambling Disorder Treatment Program” means a publicly or privately operated program that is licensed in accordance with OAR 415-012-0000 through 415-012-0090 that provides assessment, treatment, rehabilitation, and twenty-four-hour observation and monitoring for individuals with a gambling disorderrelated problems.

(x) "Residential Service Plan" means an individualized, written plan outlining the care and treatment to be provided to an individual in or through the program based upon an individual assessment of needs.
The residential service plan may be a section or subcomponent of the individual’s overall mental health treatment plan when the program is operated by a mental health service agency that provides other services to the individual.

(x) “Residential Substance Use Disorders Treatment Program” means a publicly or privately operated program as defined in ORS 430.010 that provides assessment, treatment, rehabilitation, and twenty-four-hour observation and monitoring for individuals with substance use dependence, consistent with Level III of The ASAM Criteria.

(X) “Residential Treatment” means a planned, individualized program of medical, psychological or rehabilitative procedures, experiences and activities designed to relieve or minimize mental, emotional, physical or other symptoms or social, educational or vocational disabilities resulting from or related to the mental or emotional disturbance, physical disability or alcohol or drug problem.

(55) "Residential Treatment Facility (RTF)" means a program licensed by the Division to provide residential care and residential treatment services on a 24-hour basis for six to 16 individuals as described in ORS 443.400. An RTF does not include the entities set out in ORS 443.405.

(56) “Residential Treatment Home (RTH)” means a program that is licensed by the Division and operated to provide residential care and residential treatment services on a 24-hour basis for up to five individuals as defined in ORS 443.400. A RTH does not include the entities set out in ORS 443.405.

(x) “Resilience” means the universal capacity that a person uses to prevent, minimize, or overcome the effects of adversity. Resilience reflects an individual’s strengths as protective factors and assets for positive development.

(x) "Restraints" means any chemical or physical methods or devices that are intended to restrict or inhibit the movement, functioning, or behavior of an individual.

(x) "Room and Board" means compensation for the provision of meals, a place to sleep, and tasks such as housekeeping and laundry.

(X) “Safety Plan” means a document developed through a collaborative process by the individual and the individual’s family, as appropriate, in consultation with the individual’s provider to address suicide risk, as well as other potential crises that could occur and to ensure everyone’s safety. The plan shall include, as appropriate, 24-hour, 7-days-a-week response; formal, informal and natural supports, as defined in 309-019-0325; respite or back-up care; details leading to crises; successful strategies that have worked in the past; and strength-based strategies, as defined in 309-019-0325, that prevent escalation and maintain safety.

(x) "Screening" means the process to determine whether the individual needs further assessment to identify circumstances requiring referrals or additional services and supports.

(x) “Seclusion” means the involuntary confinement of a resident alone in a room or an area from which the resident is physically prevented from leaving.

(x) “Secure Children’s Inpatient Programs” (SCIP) and “Secure Adolescent Inpatient Programs (SAIP)” means ITS programs that are designed to provide inpatient psychiatric stabilization and treatment.
services to children up to age 14 for SCIP services and individuals under the age of 21 for SAIP services who require a secure intensive treatment setting.

(x) "Secure Residential Treatment Facility (SRTF)" means any Residential Treatment Facility, or portion thereof, approved by the Division that restricts an individual’s exit from the setting through the use of approved locking devices on individual exit doors, gates, or other closures.

(x) "Self-Administration of Medication" means the act of an individual placing a medication in or on the individual’s own body. The individual identifies the medication and the times and manners of administration and placed the medication internally or externally on the individual’s own body without assistance.

(x) "Self-Preservation" means in relation to fire and life safety the ability of individuals to respond to an alarm without additional cues and be able to reach a point of safety without assistance.

(X) “Serious Emotional Disorder” (SED) means a subpopulation of individuals under age 21 who meet the following criteria:
  o A child or youth, between the ages of birth to 21 years of age
  o Must meet criteria for diagnosis, functional impairment and duration
    ▪ **Diagnosis:** The child or youth must have an emotional, socio-emotional, behavioral or mental disorder diagnosable under the DSM-5 or its ICD-10-CM equivalents, or subsequent revisions (with the exception of DSM “V” codes, substance use disorders and developmental disorders, unless they co-occur with another diagnosable serious emotional, behavioral, or mental disorder).
      ● For children 3 years of age or younger:
        o The child or youth must have an emotional, socio-emotional, behavioral or mental disorder diagnosable under the Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood-Revised (DC: 0-3R) (or subsequent revisions).
      ● For children 4 years of age and older:
        o The child or youth must have an emotional, socio-emotional, behavioral or mental disorder diagnosable under the Diagnostic Interview Schedule for Children (DISC) or DSM-V or its ICD-10-CM equivalents, or subsequent revisions (with the exception of DSM 5 codes, substance use disorders and developmental disorders, unless they co-occur with another diagnosable serious emotional, behavioral, or mental disorder).
    ▪ **Functional impairment:** An individual is unable to function in the family, school or community, or in a combination of these settings; or the level of functioning is such that the individual requires multi-agency intervention involving two or more community service agencies providing services in the areas of mental health, education, child welfare, juvenile justice, substance abuse, or primary health care.
• **Duration:** The identified disorder and functional impairment must have been present for at least 1-year or, on the basis of diagnosis, severity or multi-agency intervention, is expected to last more than 1 year.

(X) “Serious and Persistent Mental Illness” (SPMI) means the current DSM diagnostic criteria for at least one of the following conditions, as a primary diagnosis for an adult 18 years of age or older:

(a) Schizophrenia and other psychotic disorders;

(b) Major depressive disorder;

(c) Bipolar disorder;

(d) Anxiety disorders limited to Obsessive Compulsive Disorder (OCD) and Post Traumatic Stress Disorder (PTSD);

(e) Schizotypal personality disorder; or

(f) Borderline personality disorder.

(X) “Serious Incident” means an incident involving an individual that caused harm or presented a risk to health and safety, including a death, attempted suicide, serious injury or illness, an act of physical aggression that results in injury, suspected abuse or neglect, or involvement of law enforcement or emergency services. (45) "Service Plan" means a comprehensive plan for services and supports provided to or coordinated with an individual and his or her family, as applicable, that is reflective of the assessment and the intended outcomes of service.

(46) “Service Note” means the written record of services and supports provided, including documentation of progress toward intended outcomes, consistent with the timelines stated in the service plan.

(47) “Service Record” means the collected documentation, written or electronic, of an individual’s entry, assessment, orientation, service planning, service notes, and transfer.

(48) "Services" means activities and treatments that are intended to assist the individual's transition to recovery from a substance use disorder, gambling disorder, or mental health condition and to promote resiliency and rehabilitative and functional individual and family outcomes.

(62) "Setting" means one or more buildings and adjacent grounds on contiguous properties that are used in the operation of a program.

(49) “Signature” means any written or electronic means of entering the name, date of authentication, and credentials of the person providing a specific service, or the person authorizing services and supports. Signature also means any written or electronic means of entering the name and date of authentication of the individual receiving services, the guardian of the individual receiving services, or any authorized representative of the individual receiving services.
(50) "Skills Training" means providing information and training to individuals and families designed to assist with the development of skills in areas including but not limited to anger management, stress reduction, conflict resolution, self-esteem, parent-child interactions, personal relationships, drug and alcohol awareness, behavior support, symptom management, accessing community services, and daily living.

(x) “Strength-based” means based on functional assets, skills, capacities, and talents of a person, family or group.

(x) “Strengths and Needs Summary” means a comprehensive “strengths and needs” assessment and summary process that begins immediately when a youth and their family are referred into Wraparound. This process is complemented by other Division-approved assessment tools, such as the Child and Adolescent Needs and Strengths Assessment (CANS).

(x) “Sub-Acute Psychiatric Care” means services that are provided by nationally accredited providers to children who need 24-hour intensive mental health services and supports provided in a secure setting to assess, evaluate, stabilize, or resolve the symptoms of an acute episode that occurred as the result of a diagnosed mental health condition.

(51) "Substance Abuse Prevention and Treatment Block Grant” or “SAPT Block Grant” means the federal block grants for prevention and treatment of substance abuse under Public Law 102-321 (31 U.S.C. 7301-7305) and the regulations published in Title 45 Part 96 of the Code of Federal Regulations.

(x) "Substance Use Disorders” means disorders related to the taking of a drug of abuse including alcohol to the side effects of a medication and to a toxin exposure. The disorders include substance use disorders such as substance dependence and substance abuse and substance-induced disorders, including substance intoxication, withdrawal, delirium, and dementia, as well as substance induced psychotic disorder, mood disorder, etc., as defined in DSM criteria.

(x) “Substance Use Disorders Treatment Staff” means an individual certified or licensed by a health or allied provider agency to provide substance use disorders treatment services that include assessment, development of a service plan, and individual, group, and family counseling.

(4) “Substance Use, Problem Gambling, and Mental Health Services and Supports” means all services and supports including but not limited to Outpatient Behavioral Health Services and Supports for Children and Adults, Intensive Treatment Services for Children, Outpatient and Residential Substance Use Disorders Treatment Services, and Outpatient and Residential Gambling Disorder Treatment Services.

(x) “Substitute Caregiver” means any individual meeting the qualifications of a caregiver who provides care and services in an AFH under the Division's jurisdiction in the absence of the provider or resident manager. An individual may not be a substitute caregiver.

(x) “Successful DUII Completion” means that the DUII Services Provider has documented in its records that, for the period of service deemed necessary by the program, the individual has met the completion criteria specified in this rule or otherwise required by the Division
(X) “Superintendent” means the chief executive officer of any campus of the Oregon State Hospital or
the chief executive officer’s designee.

(x) “Supervisor” means an individual with two years of experience as a qualified mental health
professional and who, in accordance with OAR 309-032-0870, reviews the services provided to patients
by qualified individuals.

(x) "Supervision" means a program staff’s observation and monitoring of an individual or oversight of a
program staff by the program administrator applicable to the context.

(x) “Supports” means activities, referrals, and supportive relationships designed to enhance the services
delivered to individuals and families for facilitating progress toward intended outcomes.

(x) “Ten Wraparound Principles” means these principles associated with Wraparound supports: family-
driven and youth-guided, collaboration, persistence, culturally and linguistically responsive, community
based, team based, natural supports, individualized, strength-based, and outcome-based.

(x) “Termination of Residency” means the time at which the individual ceases to reside in the program
and includes the transfer of the individual to another program, but does not include absences from the
setting for the purpose of taking a planned vacation, visiting family or friends, or receiving time-limited
medical or psychiatric treatment.

(x) “Time-Unlimited Services” means services with a duration that is established based on medical
appropriateness, not on the basis of predetermined timelines.

(x) “Transfer” means the process of assisting an individual to transition from the current services to the
next appropriate setting or level of care.

(x) “Transition of Care Coordination” means the process of transferring a patient from one provider to
another, prior to discharge.

(x) “Telehealth” means a modality of delivery healthcare services from one site to another using
telecommunications technology; Telehealth includes:

(a) Synchronous – live, two-way audio video interactive transmissions, including but not limited to:
    telephone, audio and video; and
(b) Asynchronous – stored and forwarded to be viewed at a later time from a distant sight,
    including but not limited to: fax, email, text.
(c) Remote patient monitoring (RPM): the use of connected electronic tools to record personal
    health and medical data in one location for review by a provider in another location, usually at a
different time.
(d) Mobile health (mHealth): health care and public health information provided through mobile
devices. The information may include general educational information, targeted texts, and
    notifications about disease outbreaks.
(X) “Trauma Informed Approach” means an approach undertaken by providers and healthcare or human services programs, organizations, or systems in providing mental health and substance use disorders treatment wherein there is a recognition and understanding of the signs and symptoms of trauma in, and the intensity of such trauma on, individuals, families, and others involved within a program, organization, or system and then takes into account those signs, symptoms, and their intensity and fully integrating that knowledge when implementing and providing potential paths for recovery from mental health or substance use disorders. The Trauma Informed Approach also means that providers and healthcare or human services programs, organizations, or systems and actively resist re-traumatization of the individuals being served within their respective entities.

(X) “Trauma Informed Behavioral Health Services” means services that are reflective of a trauma informed approach, considering trauma that may have occurred in the lives of people seeking mental health, substance use, or problem gambling services, including recognition of the traumatic effect of misdiagnosis and coercive treatment. Services are responsive to the vulnerabilities of trauma survivors and are delivered in a way that avoids inadvertent re-traumatization and facilitates individual direction of services.

(x) “Treatment” means the planned, medically appropriate, individualized program of medical, psychological, and rehabilitative procedures, experiences and activities designed to remediate symptoms of a DSM diagnosis that are included in the Service Plan.

(x) “Triage” means a classification process to determine priority needs.

(x) "Unit" means the bedroom and other space of an individual receiving services from a program, as agreed to in the Residency Agreement. Unit includes private single occupancy spaces and shared units with roommates.

(x) "Urgent" means the onset of symptoms requiring attention within 48 hours to prevent a serious deterioration in an individual's mental or physical health or threat to safety.

(X) "Variance" means an exception from a provision of these rules, granted in writing by the Division, upon written application from the provider.

(x) “Vocational Services” means employment support services that leads to competitive integrated employment. The Division requires the use of fidelity IPS Supported Employment for providing vocational services within the ACT program. 019-0225

(x) "Volunteer" means an individual who provides a program service or who takes part in a program service and who is not an employee of the program and is not paid for services. The services shall be non-clinical unless the individual has the required credentials to provide a clinical service.

(X) “Warm Handoff” means the process of transferring a patient from an acute care psychiatric hospital to a community provider at discharge, that involves face-to-face meetings with the patient, either in person or through the use of telehealth, and coordinates the transfer of responsibility for the patient’s ongoing care and continuing treatment and services. A warm handoff shall include either:
(a) A face-to-face meeting with the community provider and the client, and if possible, the hospital staff, or
(b) provide a transitional team to support the client as a bridge between the hospital and the community provider, and ensure that the client connects with the community provider.

(x) “Wellness” means an approach to healthcare that emphasizes good physical and mental health, preventing illness, and prolonging life.

(x) “Wraparound” means a definable planning process that results in a unique set of community services and supports individualized for a youth and family to achieve a positive set of outcomes.

(x) “Wraparound Care Coordinator (WCC)” means a QMHA or QMHP, as defined in OAR 309-019-0125, who is completing or has completed a Division-approved Wraparound foundational training program. The WCC is a member of the Wraparound team specifically trained to coordinate and facilitate the components of a Wraparound team meeting to fidelity, in each phase of the Wraparound process, for an individual family. The person in this role may change over time, and may include a parent, caregiver, youth or other team member who takes over facilitating Wraparound team meetings.

(x) “Wraparound Coach” means an individual with Wraparound expertise in relation to Wraparound principles and in strategies to facilitate a Wraparound meeting to fidelity. Wraparound Coaches provide clear and constructive feedback regarding fidelity components and facilitation skills to Wraparound Care Coordinators.

(x) “Wraparound Flexible Funding” means a financial resource for purchasing one-time or occasional needed goods or services for youth and/or their families, when the goods and services cannot be provided by another funding source, and the services or goods are directly tied to meeting needs and outcomes in the Wraparound plan of care.

(x) “Wraparound Plan of Care” means a dynamic document which describes the youth, the family, the team, and the goals and action plan to be undertaken to meet the youth and family’s needs, achieve the team mission and work toward the family’s long-term vision.

(x) “Wraparound Review Committee” means a local community group of people representing Child Welfare, Juvenile Justice, Intellectual Developmental Disabilities, Education, Mental Health, Federally Recognized Tribes or tribal entities, Youth and Family members and/or youth and family advocates who convene with the goal of reviewing and determining Wraparound eligibility.

(x) “Wraparound Supervisor” means an individual responsible for supervising a Wraparound Care Coordinator, Wraparound Coach, Family Partner, or Youth Partner through their respective agency.

(x) “Wraparound Team” means a group of people chosen by the youth and family and connected to them through natural, community, and formal supports. The Wraparound team develops and implements the youth and family’s plan, addresses unmet needs, and works toward the family’s vision and team mission together with the youth and family.

(x) “Wraparound Team Meeting” means a meeting where members of the Wraparound team convene to address the family and youth’s mission, vision, strengths and needs identified by the team.
(x) “Young Adult in Transition” means an individual who is developmentally transitioning into independence, sometime between the ages of 14 and 25.

(x) “Youth” means a person who participates in Wraparound. Youth is the accepted term in statewide Wraparound to describe children, adolescents, teenagers and young adults. Youth who participate in Wraparound may remain in Wraparound as young adults if they entered prior to age 18.

(x) “Youth Organization” means a youth-led non-profit organization dedicated to improving the services and systems that foster and promote positive growth of youth and young adults. Youth Organizations ensure that youth voices are represented at all levels of policy and practice by utilizing peer support and uniting the voices of individuals who have experienced obstacles in child-serving systems.

(x) “Youth Partner” means an individual certified and on the registry as a Youth Support Specialist in accordance with OAR 410-180-0305. A Youth Partner is a formal member of the Wraparound team whose role is to support the youth.

(X) “Youth Support Specialist” has the meaning defined in OAR 410-180-0305. Family support specialists provide peer delivered services, as defined in these rules.