

REFERRAL PROCESS

Referrals may be made at any time by contacting Reflections at (610) 748-1011.

Please contact us for assistance or to answer questions. Community Provider Referrals, County MH Referrals, and MCO Referrals are also accepted. Self-referrals are also accepted. Assistance will be provided to obtain the necessary information.

A Referral and recommendation form must be completed. Recommendation forms may only be completed by the following: M.D (psychiatrist/family physician), CRNP, Physician's Assistant, or Licensed Psychologist.

Eligibility Criteria for Reflections:

- 18 years of age or older
- **Active Medical Assistance benefits with HealthChoice eligibility through Lehigh/Northampton County or a resident of Northampton County (eligible for county funded MH services)**
- SMI Diagnosis: i.e. schizoaffective disorder, schizophrenia, major depression, bipolar disorder or borderline personality disorder.
- Recommended appropriate level of support by a licensed practitioner of the healing arts. (M.D., D.O., CRNP, PA, or Licensed Psychologist
- Not an imminent danger to self or others.
- No recent and/or recurring episodes of violence and/or abusive behavior.
- Criminal history which **does not** include violent sexual offenses.
- No recent or recurring self-injurious behaviors.
- Able to be administer own medication.
- Guest has a place to return to after leaving the Reflections.
- Able to refrain from the use of alcohol and/or illegal substances while a participant in the program.
- Capable of preparing personal meals or able to ask for assistance.
- Guest has an understanding that Reflections is an alternative environment with a primary emphasis on support offered by peers and learning about self-directed recovery.
- Willing to follow guest agreement upon entering the house.