



Hope House

A Division of Resources for Human Development, Inc
3606 Hecktown Road, Bethlehem, PA 18020
Phone (610) 882-2008 Fax (610) 882-2009

RE: REFERRAL PROCESS

Dear Mental Health or Medical Professional:

As you may be aware, Hope House is a short-term residential service for individuals who are currently in psychiatric crisis and in need of additional support and supervision to assist them in remaining in the community. Services provided include psychiatric assessment, counseling, medication, monitoring, therapeutic recreational activities, psycho education and skills training, case management, and crisis resolution. Individuals in crisis may be referred for any of the following reasons.

1. Thought Disorders
2. Mood Disorders
3. Suicidal Thinking
4. Anxiety
5. Depression
6. Severe emotional problems dealing with relationships

Hope House cannot accept the following types of individuals

1. Those in need of drug or alcohol detoxification;
2. Those currently inebriated;
3. Persons with a primary diagnosis of drug and alcohol abuse or addiction;
4. Persons with a significant history of assaultive behavior;
5. Persons in need of emergency medical attention; and
6. Those in need of physical restraint.

In order to accept your referral, we need to receive the referral information (**Hope House Referral Form.**) In addition to the referral form, we need information regarding the person's current threat to himself or herself as well as others (**Face to Face.**) People with suicidal thoughts who are willing to contract for safety will not be denied acceptance. The statement of current status can be signed by a medical or osteopathic doctor, psychologist, licensed social worker, mental health worker, or nurse. A medical clearance is only necessary if the client is suffering from, or is at risk of any significant medical problem. (**Medical Clearance.**) Medical clearance can only be given by a medical or osteopathic doctor.

It is our intention to make the referral process as smooth and quick as possible. A determination of acceptance or denial will be made within thirty minutes of receiving all needed information. If you have any questions about the referral process, our program, or the appropriateness of our program for your client, please do not hesitate to call us at: **610-882-2008.**