AE-203

Admission Criteria

Inclusion and exclusion criteria for referral partners.

These criteria help referral partners identify who is likely to do well at Aeternum. They are guidelines, not a scoring rubric — every referral receives an individualized review and we welcome a conversation about anyone who seems close to the line.

Inclusion criteria

- Adult, 18 years or older
- Would benefit from a supported residential setting and is willing to live here
- Support needs that can be met safely by awake staff in a small, unlocked home
- Able to live respectfully alongside a small group of housemates
- Medical needs manageable through community providers, with support for appointments, medications, and monitoring
- Able to evacuate the home with the level of assistance available
- A funding source or private payment arrangement in place or achievable
- Willing to participate in person-centered planning, at whatever level is realistic

Exclusion criteria

We are generally not the right setting when an individual:

- Requires hospital-level psychiatric or medical care, or acute detoxification
- Requires skilled nursing care, ventilator support, or continuous medical monitoring
- Requires a locked or secured residential setting to remain safe
- Presents an active, unmitigated risk of serious harm to housemates or staff
- Has support needs exceeding what our staffing ratio and training can responsibly provide
- Is subject to legal conditions incompatible with a shared residential home in a residential neighborhood

Considered case by case

None of the following is an automatic exclusion. We look at current status, supports in place, and what safety planning would need to look like:

- History of substance use, with current recovery supports
- Prior residential placements that ended difficultly
- Justice system involvement, probation, or parole
- History of self-harm or suicidality with a current safety plan
- Significant medical complexity with strong community provider involvement
- Mobility limitations or adaptive equipment needs
- Limited English proficiency — interpretation is arranged at no cost

How we decide

1. Review of referral documents and clinical records
2. Person-centered assessment conversation with the individual
3. Consultation with current providers and, with consent, family
4. Tour and meeting with the household where possible
5. Team review of fit, safety, staffing, and household composition
6. Written determination to the referring party within two business days

If we cannot accept a referral

We explain why in plain terms, promptly, and we help identify other Oregon options where we can. A declined referral is never a judgment about the person — it is a statement about what this particular home can safely provide.

Non-discrimination

Admission decisions are never based on race, color, national origin, ethnicity, language, religion, age, sex, gender identity or expression, sexual orientation, marital status, disability, veteran status, HIV status, or source of payment.