



SCOPE OF SERVICES

I. PURPOSE:

To define the admission criteria for our residential programs and identify the types of residents accepted by Resilient Life Care.

II. POLICY:

Resilient Life Care's residential program accepts residents with traumatic and non-traumatic injuries and illnesses affecting the brain. The program provides residential therapeutic services to these individuals admitted to our care in compliance with the non-discriminatory policies of Resilient Life Care. The person-centered approach to care has been developed in conjunction with a neuropsychologist and is based upon the best evidence-based practices embracing the principles of neuroplasticity. Of particular emphasis will be quality sleep, regular exercise, proper nutrition and hydration, community vocational and avocational placement, and exposure to life-enriching and novel experiences.

III. PROCEDURE;

A. Admission criteria:

1. Residents admitted to the program are 18 years of age or older.
2. Residents must be medically stable and able to participate in a community activities.
3. Residents must be ambulatory or mobile non-ambulatory to evacuate the building in a reasonable amount of time using an assistive device or verbal cues.
4. Residents must not be considered to be at risk of imminent harm to self or others.
5. Residents must have the physical and/or cognitive potential to benefit from the program.
6. Residents must be able to reasonably interact with their local community.
7. Residents must not have a spinal cord injury, have a trach, be vent dependent, have communicable diseases, or wounds.

B. Clearances for admission include:

1. Medical – The medical status and medical orders for residential care of the resident is reviewed prior to admission by the program director.
2. Financial – Resilient Life Care Administrative staff obtains financial information and preadmission clearances from the payor. Funding sources may include private insurance (managed care and indemnity), worker's compensation, and self-pay.
3. Other Stakeholders – The Resilient Life Care Case Manager communicates with all other stakeholders especially the person served as to choice of the residential program.

C. Services Provided

1. Given the typically pervasive nature of the effects of catastrophic brain injury or illness, it is recognized that residents have a variety of needs and issues. These areas will be addressed by Resilient staff unless otherwise noted. The type and frequency of services will be wholly determined by the needs of each individual resident. These services include, but are not limited to:
 - Medical status (contract physicians)
 - Admitting nursing assessments (contract nurses)
 - Prevention of complications associated with the injury or illness
 - Behavior (contract psychologist)
 - Cognition and communication (contract SLP)
 - Mobility
 - Activities of daily living
 - Psychosocial status, including psychological and social coping and adaptation skills
 - Community reintegration and participation in life roles
 - Education, including didactic information about the injury or illness, information about recognizing and preventing complications, and information about preventing recurrent events (e.g. recurrent stroke).
 - Leisure and recreation
 - Cultural and spiritual issues
 - Mental health and substance use/abuse concerns
 - Sexuality issues
 - Support group
 - Educational materials (Brain Injury Alliance of KY resource)
 - Services for families and support systems
 - Outpatient therapies (contract therapists)

D. Patient populations served:

1. Residential Brain Injury Program:
 - a) Residents with brain injury – any injury to the brain that results from traumatic incident, tumor progressive disease, or metabolic dysfunction. Residents with developmental disabilities may also be admitted to this program.
 - b) Residents with stroke – any injury to the brain of vascular origin, (e.g. occlusive or hemorrhagic stroke), post-surgical complications of aneurysm clipping, complications of arteriovenous malformation, etc.

E.

- a) Hours of Operation:
- b) Therapeutic activities are provided to residents throughout the day and evenings
- c) Therapeutic activities are provided on weekends.
- d) Direct care services are 24/7

F. Payers:

1. Private Pay
2. Workers Compensation
3. Commercial Insurance where applicable

G. Fees are on a sliding scale and will be determined by the individual needs of each

resident.

H. Referrals Sources:

1. Frazier Rehab
2. Pathways
3. Kort Rehab
4. NeuroRestorative
5. Regional Worker's Comp Catastrophic Case Managers
6. Bridge Healthcare Solutions
7. Litigation Funding Firms
8. National Brain Injury Personal Injury Attorneys

