

## Outpatient Therapy Scope of Services

Resilire provides a care continuum to rehabilitate the person as a whole. We work with children, adolescents, and adults who have experienced life altering neurological impairments of various severities and acuity levels. We strive to enhance quality of life and participation in meaningful life roles through an interdisciplinary team approach. All services provided are prescribed by a PM&R or referring physician based on diagnosis, medical need, treatment team evaluation and recommendations, and family wishes and consent. Most individuals receiving rehabilitation services are in the Post-Acute or Active Rehabilitation phase in their recovery; however, we do work with Long-Term Care clients to prevent decline and maintain functional status. We communicate with a variety of physicians to discuss treatment planning and approaches. All evaluations consider activity limitations, participation restrictions, and functional performance to ensure a whole person approach to therapy treatment. Services focus on the unique medical, physical, cognitive, communication, psychosocial, cultural, behavioral, vocational, educational, accessibility and leisure needs of persons with neurological impairment. Services are delivered with intent to achieve functional progress, prevent deterioration of abilities, promote productive activities and support quality of life.

The outpatient therapy clinics are located in the cities of Brighton, Romulus, Saginaw, Troy and Wayne. Clinic Hours are 8:30am - 5:00 pm Monday thru Friday with therapy scheduled between the hours of 9am and 4pm. There may be additional early, late, or weekend hours available to accommodate special situations. Therapy sessions may also occur in community, workplace, school or job training sites and in residence depending on individual goals and prescribed plan of treatment.

Referral sources include PM&R and other physicians, clients and families, case managers, guardians, insurance adjusters, social workers, discharge planners, and hospital systems.

We accept a variety of payer sources including:

- Auto No Fault
- BCBS
- BCN
- Private Pay
- Workers Compensation
- Medicare
- Most Traditional Health Insurances

Rate sheet/fees are available upon request. Consumers are encouraged to call an admissions representative for more information

Outpatient Therapy Services offer the following programs to meet the specific needs of each individual:

- Case/Care Management

- Cognitive Therapy
- Occupational Therapy
- Physical Therapy
- Speech Language Pathology
- Massage Therapy
- Therapeutic Recreation
- Psychology
- Social Work Counseling
- Behavior Analysis
- Day Treatment Services
- Vocational Counseling Services
- Pediatric Rehabilitation
- Educational Support
- Nursing Management
- Medical consultative services
- Addictions counseling by consultation
- Services that are not available on site are scheduled with off-site providers

In the event a more extensive service need or specialization within an existing service element exists, networking arrangements are made. This could mean development of a new service in-house or a referral to an outside agency.

All service lines at Resilire work in a closely coordinated fashion in order to support carry over of skills, minimize impact of impairments, avoid collateral complications, decrease barriers and maximize functional independence. Therapists provide training, consultation, plan of care modifications and direct support bridging service lines.

- Behavioral/Psychological Status
  - We provide services to persons with various levels of verbal aggression, mild, and diffuse physical aggression with a maximum of 1:1 care/supervision.
- Activity limitations and participation restrictions
  - We provide services to persons with any activity limitations and participation limitations as a result of the precipitating neurological impairment including but not limited to impairments in ADLs, IADLs, mobility, cognition, school, work, community, and in the home.
  - Limitations of activities and participation restrictions may be in nature, duration, and/or quality.
- Impairments
  - We treat all neurological impairments as a result of the precipitating neurological impairment in addition to many physical, behavioral, and psychological co-morbidities.

## **ADMISSION CRITERIA**

Individuals who meet the following criteria may be eligible to receive our services:

1. The applicant shall have sustained a neurological impairment and/or experienced functional deficits of a related nature in characteristic, intervention needs and outcome potentials. The applicant will otherwise present with a functional deficit that would reasonably benefit from rehabilitative services.
2. The applicant has achieved a level of medical stability to the extent care needs can be managed in this setting as determined by assessment. This does not include those clients who are temporarily ill or bedfast.
3. If the applicant presents with a history of alcohol/substance dependence, it must be medically ascertained that the individual does not require detoxification under the supervision of a physician at a medical facility. Such detoxification must occur prior to admission.
4. The applicant presents with behavioral intensities that can be managed in this setting as determined by assessment. It is understood that participants may exhibit variable behavioral intensities. Such behaviors will not necessarily preclude admission or ongoing treatment, provided they can be adequately contained or controlled through available therapeutic intervention.
5. The applicant must be free of disease that is considered contagious through casual contact.
6. A prospective client and/or associated guardian shall exercise free choice in the selection of a rehabilitative facility.
7. Payment for services is available.
8. Admission for eligible candidates are processed in the order received.
9. Adult treatment starts at age 18.
10. Pediatric treatment starts at age 5 and continues through age 18 or up to 26 if still participating in a public school post-secondary program (special consideration will be made and given on a case by case basis for children under 5 years of age wishing to receive therapy services).

Eligibility for outpatient therapy services is reviewed, assessed and documented on a regular basis, through the plan of treatments for each therapy discipline.

There are times when an individual may not be appropriate for our services. These reasons may include but are not limited to:

- Requires 24-hour Nursing Care
- Client's needs are unable to be met in this setting
- Payment for services unavailable
- Acute withdrawal- in need of detox
- Chronic elopement
- Excessive chronic physical aggression
- ASIA A C1 SCI
- Continuous cardiac telemetry
- Continuous and intensive physical behavior management required that may involve: isolation; restraints; locked facility; or chemical sedation

## **TRANSITION/DISCHARGE CRITERIA**

As individuals progress and recover they may transfer to different programs within Resilire. Transitions between community residential, outpatient, and supported living programs are assessed on a case by case basis with guardian approval as needed. Transition from pediatric programming is based on age, high school completion, and appropriateness for adult programming. Individual progress is assessed and reported to each client's internal and external treatment team at regularly scheduled team meetings and physician appointments. The plan of treatment can be updated at any time, with the consent of the client, family, physician, and treatment team.

We make every effort to ensure discharge planning is thorough and every client is discharged to the least restrictive environment. Some of these intended environments include home with or without support or a supported living arrangement. Individuals may be discharged from outpatient therapy services for reasons including but not limited to:

1. The client has regained the ability to live and/or work independently and no longer require services.
2. The client is ready to transfer to another level of care within or outside of Resilire.
3. The client requires services not available through Resilire
4. Discharge is requested by the physician, the client and guardian/designated representative
5. Payment for services is no longer available
6. A client no longer meets admission criteria per agency guidelines.
7. Therapy services are no longer appropriate.
8. The client may be discharged due to situations of substantial risk to self or others when the agency has determined and documented that any of the following exist:
  - a. Substantial risk to the resident due to the inability of the home to meet the residents needs or assure the safety and well-being of other residents of the home.
  - b. Substantial risk, or an occurrence, of self-destructive behavior.
  - c. Substantial risk, or an occurrence of serious physical assault.
  - d. Substantial risk, or an occurrence of the destruction of property.

The Governing Board and Leadership of the agency is actively involved in planning and operations. Management style emphasizes communication, accessibility and involvement. The Company has a strong sense of community responsibility and a history of innovation and quality in cost-effective programs for persons with neurological impairments.

Resilire does not discriminate on the basis of race, color, religion, national origin, language, age, gender, disability, marital status, sexual orientation, height, weight, socio-economic or veteran status as it related to patient admissions, patient care, employment and other stakeholders. Resilire values differences and adapts to diversity and cultural contexts of individuals to provide the best rehabilitation experience possible. We strive to provide culturally sensitive health care, offering services that are relevant to clients' needs and expectations. Therapeutic plans of treatment are adapted and accommodations are made to fit the cultural, behavioral, psychological, and

participatory needs of each client. Accommodations needed are based on input from the client, family, and case manager.

**REVISION HISTORY:**

Number of revisions	Date of Revisions or Review	Description of changes	Reviewed by
NEW	1/1/2021	Policy Established	Board/ Leadership