

Residential Programs Scope of Services Program Statement

Resilire provides a care continuum to rehabilitate the person as a whole. We work with adults of all genders ages 18 years and older who have experienced life altering neurological impairments of various severities and acuity levels, including traumatic brain injury and physically handicapped. 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. Individuals receiving rehabilitation services are in the Post-Acute or Active Rehabilitation phase in their recovery; however, we also 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 impairments. Services are delivered with intent to achieve functional progress, prevent deterioration of abilities, promote productive activities and support quality of life.

At our Resilire Community Residences, we serve adults who have experienced a lifealtering event by providing exemplary client care and innovative rehabilitative strategies to help achieve the highest quality of life, dignity and independence. We achieve this goal by providing a safe and supportive family-oriented, home-like environment while facilitating community involvement including meaningful activities and client inspired vacations.

Resilire Residential Services embraces diversity and provides a strong educational foundation that includes intensive, ongoing training. Our Community Residences strive for a world class reputation of excellence.

We value the opinions of each resident and offer Resident Council meetings where opinions and suggestions can be expressed freely. In addition, residents are encouraged to make suggestions and recommendations in regards to community outings, meal planning, events, and in-home activities.

Residential facilities operate 24hrs per day year-round. Residential facilities are located throughout the Michigan counties of Livingston, Macomb, Midland, Monroe, Oakland, Saginaw and Wayne. Visiting hours are 8am to 10pm. Other visitation hours can be arranged through the house staff. Families and significant others are welcome and encouraged to visit in compliance with house rules and the client's own treatment plan.

Resilire values differences and adapts to the diversity and culture 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 such as: Interpretation services provided as needed Accommodations for religious preferences Dietary accommodations Observant of holidays
The home environment, activities, and events are adapted and accommodations are made to fit the cultural, behavioral, psychological, and participatory needs of each client Activity limitations and participatory restriction recommendations are based on input from physician and interdisciplinary team assessments.
The Residential Program partners with Therapy, Nursing, Vocational Counseling, Psychology, and Social Work to implement recommendations and programming to meet the needs of each unique, individual resident. Therapy goals are integrated into the home programs to include oversight by each therapeutic discipline identified in the plan of care. Therapists provide training, consultation, plan of care modifications and direct support. This promotes carry over of therapy goals into the home setting to achieve the maximum and real time utilization of compensation strategies. This allows us to provide the highest quality of care to each of our residents.
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 Most private insurances Private pay Workers Compensation Veterans' Health Benefits
Rate sheet/fees are available upon request. Consumers are encouraged to call an admissions representative for more information.
Residential Services offer the following services: Community Residence (facility) Staffed 24 hours a day, 7 days a week Supported Living Program (apartments) Minimal staffing, on call 24 hours a day, 7 days a week Nursing support Rehabilitation services, as prescribed, including: Cognitive Therapy
Occupational TherapyPhysical Therapy



- Speech Language Pathology
- Massage Therapy
- Therapeutic Recreation
- Psychology
- Social Work Counseling
- Behavior Analysis
- Day Treatment Services
- Vocational Counseling Services
- Educational Support

Behavior Management
Medication management
Transportation
Case 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. The applicant must be compatible with other residents.
- 10. For admission to the Supported Living Program- Individuals must be willing and able to actively participation in a volunteer position, day programming, therapies, employment, or attend school.
- 11. Must be 18 years or older, unless a waiver is obtained from the state.

Eligibility for residential services is reviewed, assessed and documented on a regular basis, through the written assessment, resident care agreement and the healthcare appraisal. These are completed and/or reviewed with the client and/or guardian.

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



Younger than 18 years of age, unless a waiver is signed
Confined to bed
Ventilator Dependent
Supervision or support from Residential Services is not necessary

TRANSITION/DISCHARGE CRITERIA

As individual's progress and recover they may transfer to a different program. Transitions between Residential, Outpatient, and Supported Living programs are assessed on a case by case basis with guardian approval as needed. Transitions to supported living are assessed using a variety of ADL and IADL criteria utilizing the Supported Living Assessment and/or Levels Program created by Resilire. 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 another Residential Placement that meets the needs of the client, home with or without support, or a supported living arrangement. Individuals may be discharged from Residential 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. 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. Residential and 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