

POLICY AND PROCEDURE ON ADMISSION

I. PURPOSE

The purpose of this policy is to establish procedures that ensure continuity of care during admission or service initiation including the company's admission criteria and processes.

II. POLICY

Services may be provided by the company as registered and licensed according to MN Statutes, chapter 245D and MN Statutes, chapter 245A. All services will be consistent with the person's service-related and protection-related rights identified in MN Statutes, section 245D.04. The company may provide services to persons with disabilities, including, but not limited to, developmental or intellectual disabilities, brain injury, mental illness, age-related impairments, or physical and medical conditions when the company is able to meet the person's needs.

Documentation from the admission/service initiation, assessments, and service planning processes related to the company's service provision for each person served and as stated within this policy will be maintained in the person's service recipient record.

III. PROCEDURE

Admission criteria

- A. Certain criteria will be used by this company to determine whether the company is able to develop services to meet the needs of the person as specified in their *Coordinated Service and Support Plan*. In addition to registration and licensed ability, the criteria includes:

To be eligible for services at Partnership Resources, Inc., the eligible applicant:

1. Is a "person with developmental disability." The definition is a person who has been diagnosed under section 256B.092 as having substantial limitations in present functioning, manifested as significantly sub-average intellectual functioning, existing concurrently with demonstrated deficits in adaptive behavior, and who manifests these conditions before the person's 22nd birthday.
2. A person with a related condition means a person who meets the diagnostic definition under section 252.27, subdivision 1a. A "related condition" is a condition: (1) that is found to be closely related to a developmental disability, including, but not limited to: cerebral palsy, epilepsy, autism, fetal alcohol spectrum disorder, and Prader-Willi syndrome; and (2) that meets all of the following criteria:
 - a. is severe and chronic;
 - b. results in impairment of general intellectual functioning or adaptive behavior similar to that of persons with developmental disabilities;
 - c. requires treatment or services similar to those required for persons with developmental disabilities;
 - d. is manifested before the person reaches 22 years of age;
 - e. is likely to continue indefinitely;
 - f. results in substantial functional limitations in three or more of the following areas of major life activity: (A) self-care, (B) understanding and use of language, (C) learning, (D) mobility, (E) self-direction, or (F) capacity for independent living; and
 - g. is not attributable to mental illness as defined in section 245.462, subdivision 20, or an emotional disturbance as defined in section 245.4871, subdivision 15.

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- h. For purposes of item (g.), notwithstanding section 245.462, subdivision 20, or 245.4871, subdivision 15, “mental illness” does not include autism or other pervasive developmental disorders.
 3. Is 21 years of age or older and/or completed high school graduation standards and received the diploma. See B1.
 4. Applicant needs are determined through the referral interviews, review of admission materials and in person observations at the present day program/school. The application process begins when the county case manager submits the following documents: Consent for Release of Information from applicant or legal representative, the County Referral form, the most recent Psychological Evaluation, Coordinated Service and Support Plan (CSSP), Individual Abuse Prevention Plan and Self-Management Assessments, Progress summaries from previous providers, Public School IEP and progress reports, Resume and Vocational Evaluation assessments from previous vocational providers, and Behavior Support Plans.
 5. Partnership Resources’ ability to meet the needs of the applicant is based on:
 - a. Number of staff needed to support the applicant in meeting of his/her needs and wants;
 - b. The training of staff in relation to the applicant needs/wants;
 - c. The available programming and/or resources to meet the applicant needs/wants.
 6. Applicant must be willing and able to participate in the requested services.
- B. When a person and/or legal representative requests services from Partnership Resources, Inc., a refusal to admit the person must be based upon an evaluation of the person’s assessed needs and the company’s lack of capacity to meet the needs of the person.

A prospective applicant may be ineligible if s/he:

1. received services and related services as defined in the Education of the Handicapped Act, U.S. Code, Title 20, Section 1401 (6) and (17) as amended through 12/31/1985 which are otherwise available to individuals through a local educational agency;
 2. The inability of PRI to meet applicants’ needs.
 3. The inability to maintain quality services as well as providing for individual client needs;
- C. Partnership Resources, Inc. must not refuse to admit a person based solely on the type of residential services the person is receiving or solely on the person’s:
1. Severity of disability.
 2. Orthopedic or neurological handicaps.
 3. Sight or hearing impairments.
 4. Lack of communication skills.
 5. Physical disabilities.
 6. Toilet habits.
 7. Behavioral disorders.

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8. Past failures to make progress.

- D. Documentation regarding the basis for the refusal will be completed using the *Admission Refusal Notice* and must be provided to the person and/or legal representative and case manager upon request. This documentation will be completed and maintained by the Designated Coordinator and/or Program Director.

Admission process and requirements

An informational interview appointment may be made by the case manager, educational personnel, residential personnel, prospective applicant, or family. The informational interview is an informal opportunity for prospective applicants to find out about Partnership Resources, Inc. services. The Program Director may be contacted to arrange an appointment. During the interview, the prospective applicant's service wants and needs may be discussed.

Referral interview is a more structured opportunity for prospective clients/families and case managers to find out about Partnership Resources, Inc. services. This interview will provide information for both the prospective client and PRI to discuss and decide if a match is available within the program. Case managers usually would make an appointment to meet with a Program Director.

The Admission Process is official with the receipt of the Referral from the county case manager or legal representative.

- A. In the event of an emergency service initiation, the company must ensure that staff training on individual service recipient needs occurs within 72 hours of the direct support staff first having unsupervised contact with the person served. The company must document the reason for the unplanned or emergency service initiation and maintain the documentation in the person's service recipient record.
- B. Prior to or upon the initiation of services, the Designated Coordinator and/or Program Director will develop, document, and implement the *Individual Abuse Prevention Plan* according to MN Statutes, section 245A.65, subdivision 2.
- C. The Designated Coordinator and/or Program Director will ensure that during the admission process the following will occur:
1. Each person to be served and/or legal representative is provided with the written list of the *Rights of Persons Served* that identifies the service recipient's rights according to MN Statutes, section 245D.04, subdivisions 2 and 3.
 - a. An explanation will be provided on the day of service initiation or within five (5) working days of service initiation and annually thereafter.
 - b. Reasonable accommodations will be made, when necessary, to provide this information in other formats or languages to facilitate understanding of the rights by the person and/or legal representative.
 2. Orientation to the company's *Program Abuse Prevention Plan* will occur within 24 hours of service admission, or for those persons who would benefit more from a later orientation, the orientation may take place within 72 hours.
 3. An explanation and provision of copies (may be provided within five [5] working days of service initiation) of the following policies and procedures to the person and/or legal representative:
 1. *Policy and Procedure on Grievances*
 2. *Policy and Procedure on Temporary Service Suspension*
 3. *Policy and Procedure on Service Termination*

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4. *Policy and Procedure on Data Privacy*
 5. *Policy and Procedure on Emergency Use of Manual Restraint*
 6. *Policy and Procedure on Reporting and Reviewing of Maltreatment of Vulnerable Adults*
 7. *Policy and Procedure on Reporting and Reviewing of Maltreatment of Minors*
4. Written authorization is obtained (and annually thereafter) by the person and/or legal representative for the following:
 - a. *Authorization for Medication and Treatment Administration*
 - b. *Agreement and Authorization for Injectable Medications*
 - c. *Authorization to Act in an Emergency*
 - d. *Standard Release of Information*
 - e. *Specific Release of Information*
 - f. *Financial Authorization*
 - i. This authorization may be obtained within five (5) working days of the service initiation meeting and annual thereafter.
 - g. The *Admission Form and Data Sheet* is signed by the person and/or legal representative and includes the date of admission or readmission, identifying information, and contact information for members of the support team or expanded support team and others as identified by the person or case manager.
- D. Also during the admission meeting, the support team or expanded support team will discuss:
1. Partnership Resources, Inc.'s responsibilities regarding health service needs and the procedures related to meeting those needs as assigned in the *Coordinated Service and Support Plan* and/or *Coordinated Service and Support Plan Addendum*.
 2. The desired frequency of progress reports and progress review meetings, at a minimum of annually.
 3. The initial financial authorization and the Designated Coordinator and/or Program Director will survey, document, and implement the preferences of the person served and/or legal representative and case manager for the frequency of receiving statements that itemizes receipt and disbursements of funds or other property. Changes will be documented and implemented when requested.
- E. If a person's licensed health care professional or mental health professional has determined that a manual restraint would be medically or psychologically contraindicated, the company will not use a manual restraint to eliminate the immediate risk of harm and effectively achieve safety. This statement of whether or not a manual restraint would be medically or psychologically contraindicated will be completed as part of service initiation planning.

Admission process follow up and timelines

- A. The Designated Coordinator and/or Program Director will ensure that the person's other providers, medical and mental health care professionals, and vendors are notified of the change in address and phone number.
- B. The Designated Coordinator and/or Program Director will ensure that the person's service recipient record is assembled according to company standards.
- C. Within 15 calendar days of service initiation, the Designated Coordinator and/or Program Director will complete a preliminary *Coordinated Service and Support Plan Addendum* that is based upon *Coordinated Service and Support Plan*. At this time, the person's name and date of admission will be added to the *Admission and Discharge Register* maintained by the Designated Coordinator and/or Program Director.
- D. When a person served requires a *Positive Support Transition Plan* for the emergency use or planned use of restrictive interventions prohibited under MN Statutes, chapter 245D, and is admitted after January 1, 2014:
 1. The *Positive Support Transition Plan* must be developed and implemented within 30 calendar days of

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service initiation.

2. No later than 11 months after the implementation date, the plan must be phased out.
- E. Before the 45-day meeting, the Designated Coordinator and/or Program Director will complete the *Self-Management Assessment* regarding the person's ability to self-manage in health and medical needs, personal safety, and symptoms or behavior. This assessment will be based on the person's status within the last 12 months at the time of service initiation.
- F. Within 45 calendar days of service initiation, the support team or expanded support team must meet to assess and determine the following based on information obtained from the assessment, *Coordinated Service and Support Plan*, and person centered planning:
1. The scope of services to be provided to support the person's daily needs and activities.
 2. Outcomes and necessary supports to accomplish the outcomes.
 3. The person's preferences for how services and supports are provided including how the provider will support the person to have control of the person's schedule.
 4. Whether the current service setting is the most integrated setting available and appropriate for the person.
 5. How services for this person will be coordinated across 245D licensed providers and members of the support team or expanded support team to ensure continuity of care and coordination of services for the person.
- G. Also, at the 45-day meeting, a discussion of how technology might be used to meet the person's desired outcomes will be included. The *Coordinated Service and Support Plan* and/or *Coordinated Service and Support Plan Addendum* will include a summary of this discussion. The summary will include a statement regarding any decision that is made regarding the use of technology and a description of any further research that needs to be completed before a decision regarding the use of technology can be made.
- H. Within 10 working days of the 45-day meeting, the Designated Coordinator and/or Program Director will develop a service plan that documents outcomes and supports for the person based upon the assessments completed at the 45-day meeting.
- I. Within 20 working days of 45-day meeting, the Designated Coordinator and/or Program Director will submit to and obtain dated signatures from the person and/or legal representative and case manager to document completion and approval of the assessment and *Coordinated Service and Support Plan Addendum*.
1. If, within 10 working days of this submission, the legal representative or case manager has not signed and returned the assessments or has not proposed written modifications, the submission is deemed approved and the documents become effective and remain in effect until the legal representative or case manager submits a written request to revise the documents.