**Admission Criteria Policy and Service Suspension and Termination Policy**

**AXIS Alternatives, Inc.**

**8/10/15**

**Course 2323**

**Record 1121**

**Admission Criteria Policy and Service Suspension and Termination Policy**

AXIS Alternatives will inform the host County whenever an opening occurs. No individual shall be denied admission on the basis of race, religion, sex or national origin.

The county case manager is responsible for initiating services based on matching the resources of the program with the needs identified in the individual’s service plan. The county case manager submits pertinent referral information, which determines the adequacy and appropriateness of the resources and services available to meet the individual’s needs.

Prior to placement or initiation of services, the individual and his or her case manager and legal representative visits the program and meets with a representative of AXIS Alternatives to determine if the services available are desirable.

The interdisciplinary team meets to schedule the initiation of services and to share information regarding the person receiving services.

Employees and subcontractors will review this written information contained in the individual’s plan file prior to their direct service delivery and will receive training from the Qualified Intellectual Disability Professional (QIDP) regarding the goals and objectives for the individual.

**Admission process**

1. Screening process

- A current Individual Service Plan (ISP) or Consolidated Support Service Plan (CSSP) from the County Case Manager will serve as the preliminary evaluation containing background information and currently valid assessments of functional developmental, behavioral, social, health and nutritional status to determine if the facility can provide for the client’s needs and if the client is likely to benefit from placement in the facility

- The decision to admit an individual to the program is based on the findings of an interdisciplinary team, including a QIDP. In our case the house leadership team, facilitated by the QIDP will determine appropriateness of the admission by:

- Evaluating the ISP based on the approved Utilization Review or Need Determination plan;

- Meeting with the individual, the parent, guardian and case manager during a visit to determine the level of support needed and desired by the individual and whether or not the setting is able to accommodate the supports.

- If admitted, the QIDP will develop a continuous plan for active treatment from the time of the individual’s admission to the program if the individual will be staying for more then 30 consecutive days. For short term or respite stays of 30 consecutive days or less, the consumer’s IPP will consist of a risk management plan, medication administration record and daily planner.

Note: During the admission process, which extends from the time the individual is admitted to the time the initial Individual Program Plan is completed, a physician is required to ensure that an assessment of the individual’s medical status is thoroughly considered and addressed by the team as it develops the Individual Program Plan. The physician’s input may be by means of written reports, evaluations, and recommendations.

2. Health information required for admission

- Medical history with record of immunizations

- Physical examination by a physician (30 days preceding or within 3 days after admission)

- Physician’s statement assuring that the person is free of communicable disease (Mantoux, Hep B screening) at the time of admission

- Dental examination done within 12 months prior to or 1 month after admission

- Instructions for meeting special needs such as diet or medications

- Emergency medical treatment release identifying the hospital of preference and a disclaimer that says to the extent possible we will use this hospital

3. Information reviewed with individual and guardian at time of admission

• Acknowledged review of and receipt of Bill of Rights

• Review of data practices and confidentiality

• Risk Management Plan/Program Abuse Prevention Plan

• Vulnerable Adult/ Child Protection reporting procedures

• Personal property inventory

**Termination or suspension of services**

Services are terminated when the individual’s interdisciplinary team agrees that the services no longer meet the needs of the individual or when the individual or his or her representative request termination of services. Prior to termination of or during temporary suspension of services, AXIS Alternatives will work with the appropriate county agency to develop reasonable alternatives to protect the individual and others document all actions to minimize or eliminate the need for termination or temporary suspension of services. AXIS Alternatives will provide information requested by the individual or his or her legal representative upon notice of termination or suspension of services.

Temporary suspension of services will be restricted to situations in which the individual’s behavior causes immediate and serious danger to the health and safety of the individual or others. Notice of temporary suspension will be given to the interdisciplinary team in writing as soon as possible. Emergency discharges can only by initiated by the consumer, consumer's family or the county. Emergency discharges will not be initiated by AXIS unless AXIS gives 60 days written notice.

AXIS Alternatives will notify the individual or legal representative and the case manager in writing of the intended termination or temporary suspension of services and the right for them to seek a temporary order staying the decision.

Written notice of termination of services, including those situations that began with a temporary services suspension, must be given in writing to the individual and his or her representative and the individual’s case manager no less than 60 days prior to the proposed termination date. This notice includes the proposed date of termination, the reason for termination and resources and services recommended to meet the person’s needs for future services. A written request will be made to the case manager to convene a screening meeting to determine appropriate services at least 60 days before the planned date of discharge.

At least one staff member from the residential program familiar with the person shall attend the discharge planning meeting convened by the person's case manager. Staff familiar with the person will be available to:

• provide a summary of the person's current medical status and current progress in achieving goals and objectives;

• review the ISP developed for discharge and recommend additional services or service modifications to the person's case manager and the discharge screening team, and;

• advise the person's case manager to develop an interim program plan for the person's first 30 days after discharge.

The person's case manager will be provided copies of the person's medical records and programs, plans, and consultant reports relating to the reduction of inappropriate behaviors.

Within 30 days after discharge, a discharge summary will be entered in the person's record that includes a review of the person's progress from the date of the person's last annual review to the discharge date, the program to which the person is discharged, and the date of discharge.

In the event of an emergency termination of services, the individual, his or her case manager, legal representative and a representative of AXIS Alternatives will meet for a discharge planning meeting to document the reason for termination and resources and services recommended to meet the person’s needs for future services.

As of Aug. 1, 2015 the Axis Director of Program Services will notify the DHS commissioner in writing when issuing a temporary service suspension or service termination to a person receiving residential services.