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| ADMISSION POLICY & PROCEDURE | | | | NO. 103 | |
| STATEMENT: The purpose of the Admission Policy is to define the facility’s policy on admitting residents.  PURPOSE: To provide a smooth and consistent admission process.  PROCEDURES:   1. All requests for admission will be referred to the designated admissions coordinator. 2. Following the initial request for admission the coordinator will forward an application, medical release forms and the facility brochure to either the potential resident, their family or referral source and/or request that medical records be forwarded for review. 3. Upon receipt of the completed application and/or medical records an intake file will be established for the potential resident. The medical records should include, but not be limited to: diagnosis, past treatment and training program participation, social, psychological, educational and vocational assessments as indicated. 4. The potential resident records will be taken to the Director of Nursing, the facility Administrator, Restorative Director, Medical Director, and other staff members as necessary for review. Based on the resident records the Admissions Team will make a decision on admission based on the facilities ability to meet the needs of the potential resident. 5. A personal interview should be scheduled with the resident, family and/or other support systems. The purpose of the interview is not only to aid in gathering information for admission purposes but also to afford the potential resident with the opportunity to tour the facility and ask questions that may influence the decision as to the suitability of the placement. Special consideration should be given to a discussion of the individual’s suitability for the placement. Special considerations should be given to a discussion of the individual’s programs, participation and goals while noting financial costs and arrangements and anticipated length of stay as indicated. 6. The admission team will make a decision for admittance or a decline to admit within 1-2 business days of interview. 7. If the resident is to be admitted a letter or phone call indicating the anticipated date and times of admissions should be made or sent to the resident, their family or referral source. A thank you or acknowledgement letter should also be sent to the referral source. 8. If the resident is denied admission, a letter or phone call so indicating the rejection should be made or sent to the resident, their family or referral source. Whenever possible, appropriate referrals elsewhere should be made. A thank you or acknowledgement letter should be sent to the referral source. | | | | | |
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| ADMISSION POLICY & PROCEDURE | | | | NO. 103 | |
| 1. Prior to admission the resident must have a completed OBRA (pre-screen) to be eligible for admission. A screen may be done after admission if the resident is placed from out of state, there is loss of caregiver, or it is an emergency situation. 2. Within 5 days prior to an admission, or within 72 hours after the admission, a potential resident must have a complete physical examination. 3. The resident must have a two step Mantoux TB screening. This must be started within 7 days of admission. In the event that the resident has had a positive Mantoux a chest x-ray may be required. If the resident has had a 2 step Mantoux within the last 6 months those results may be used for admission. 4. At the time of admission the resident will be afforded the opportunity to review and sign required admission forms and his/her rights and responsibilities form. Immediately upon the residents admission the Social Worker conducting the orientation should have the resident read and sign their “consent and rights statement”. 5. He/she will also receive information on advanced directives. The social worker will be responsible for the resident’s orientation to the facility and the services the facility offer. 6. The Admissions Team will initially determine which Therapy Track the resident is most appropriate for. This can be changed/revised by the IDT as appropriate. | | | | | |
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