

Admission and Retention 3 Hours
Instructor: Vivian Regalado

Admission Policies (80068, 85068)

Documentation shall include:

Admission Agreement
Refund Policy
Current IPP
Needs and service plan
Functional capabilities assessments
Information regarding individual likes and dislikes, abilities, interests and activities
History of aggressive or dangerous behavior of the consumer towards self or others
Identified needs for training and treatment activities
Identified medical needs including dietary requirements
Name, address and telephone number of the consumer's authorized representative
The name address and telephone number of actively involved parents or relatives.
Developmentally Disabled (written certification there is no objection) (WIC 4803)
Telecommunication Device if hearing impaired

Admission Agreement (80068, 85068.1)

Handout: Admission Agreement Guide Residential Care Facilities LIC 604
<http://www.cdss.ca.gov/cdssweb/entres/forms/English/LIC604.pdf>

Handout: Sample Admission Policy: Review in Class if time permits
<http://www.psi-ceu.com/wp-content/uploads/2017/12/Admission-Agreement-Sample.pdf>

Basic Services (80068, 85068)

Available Optional Services

Payment Provisions
Basic Rate (Modification Conditions – 30-day notice)
Optional Services – more relevant for mental health board and care. Not for Regional Center.
Payor – Social Security SSI or Regional Center or Private Pay.
Due Date
Frequency of Payment

Program Statement (included in admission agreement)

Goals and philosophy

Handout: *Sample Goals Statement: Review in Class if time permits*

<http://www.psi-ceu.com/wp-content/uploads/2017/12/Sample-Goals-Statement.pdf>

Days and Hours of operation – always 24/7 for residential
Schedule of Activity – use monthly schedule from license application.
Basic Services
Incidental and Medical Services – you are responsible for monitoring all medical care.

Medical Emergencies

Admission and Retention 3 Hours

Smart Seminars

12/28/17

Policy for Medications – User your medication policy from your license application.
SIR Policy – use both Regional Center reporting requirement and CCL.

Acceptance and Retention Limitations (85068.4)

Category and type of clients accepted.

Prohibited Restricted Conditions - Indicate what restricted conditions you will accept.

Age Exceptions - Exceptions

Aggression and Behaviors

Intake Procedures

Criteria for placement based on needs.

Handout: <http://www.psi-ceu.com/wp-content/uploads/2017/12/Entrance-and-Exit-Criteria-Sample.pdf>

Needs and Service Plan (prior admission appraisal) (85068.2 85068.3)

Establish goals (not more than one year old

TimeLine for meeting goals and method to reach goal.

Staff training on going observation

Should always be changing

Conservator involvement

Updated often as necessary

(Regional Center Quarterly ISP satisfies requirement)

Handout:

<http://www.psi-ceu.com/wp-content/uploads/2017/12/Sample-Needs-and-Service-Plan.pdf>

Handout: Needs and Service Plan Blank LIC 625

<http://www.cdss.ca.gov/cdssweb/entres/forms/English/LIC625.PDF>

Developmentally Disabled (written certification there is no objection) (WIC 4803)

Telecommunication Device if hearing impaired

Handout: Telecommunications Device Notification LIC 9158

<http://www.cdss.ca.gov/cdssweb/entres/forms/English/LIC9158.PDF>

Some Conditions for agreement to be terminated.

Medication Non-Compliance

Non-Compliance with Restricted Condition Health Plan

Aggression, Violation of Existing Laws

Destruction of Property

Non-Payment

Visitation Policy (85072)

Policy should be liberal. Clients have rights to come and go as please.

If issue you may need to obtain denial of rights via IPP process

Handout: Sample Visting Policy

<http://www.psi-ceu.com/wp-content/uploads/2017/12/Sign-in-and-Visting-Policy.pdf>

Admission and Retention 3 Hours

Smart Seminars

12/28/17

List Restricted Health Condition (client must agree and comply with plan) 80092.1

Diabetes
Colostomy
Fecal Impaction
Use of Inhalation Devices
Use of Catheters
Staph or other communicable infections
Insulin – Dependent Diabetes
Stage one and two dermal ulcers
Wounds
Gastrostomies
Tracheostomies

A Restricted health care plan is prepared by a licensed health care professional such as a RN or MD that includes instructions on observing and reporting symptoms and any interventions needed for optimal care.

See Physical Needs section for specific plans.

Modification to original agreement when conditions change

Change in IPP Plan, Rate, House Discipline (rules) etc.

Conservator must sign admission agreement.

Terminated on Death of Client.

Admission Documentation

Inform client of their personal rights
Handout: Personal Rights Statement LIC 613
<http://www.cdss.ca.gov/cdssweb/entres/forms/English/LIC613.PDF>

Sample House Rules

<http://www.psi-ceu.com/wp-content/uploads/2017/12/House-Rules.pdf>

Medical Screening Assessment by MD

Handout: Physician Report For Community Care Facilities LIC 602
<http://www.cdss.ca.gov/cdssweb/entres/forms/English/LIC602.PDF>

Medical conditions
Medications
TB Test
Ambulatory Status: Fire Marshall Definition

Functional Capabilities Assessment (80069)

Maintain in Record
Bathing, Dressing, Toileting, Transferring, Continence, Eating, Grooming, Repositioning, Wheelchair, Vision, Communication and Walking
Admission and Retention 3 Hours
Smart Seminars

12/28/17

Handout: Functional Capabilities Assessment LIC 9172
<http://www.cdss.ca.gov/cdssweb/entres/forms/English/LIC9172.PDF>

Mental Health Assessment (80069.3)

Written mental health assessment residents who have mental illness prior to admission

Pre Admission Interview with Client

Opportunity for the client and facility to determine if placement is suitable.
Describe the facility, the current residents, activities, services and rules.
Help the client and his or her advocate decide if placement is a compatible one.
If client is unable to express a choice, the designated representative will approve the placement.

Other Documentation

Identification and emergency contact to include doctors, family etc.

Handout: Identification and Emergency Information LIC 601
<http://www.cdss.ca.gov/cdssweb/entres/forms/English/LIC601.PDF>

Medical Insurance e.g. Me-Cal Medicare card or private insurance

APS Emergency Placement Each County APS (85081)

Accept emergency placement - in danger/abuse
Submit request APS
Private room
60 or older - statement
restrictions

Client Satisfaction

Handout: Quality of Life Survey
<http://www.dds.ca.gov/Publications/docs/LookingServiceQuality.pdf>

Relocation – Cannot meet needs of client (80078)

Health Condition Relocation Order

Facility not providing adequate care for health condition
Client has prohibited health condition
IDT meet at client request to review order

Transfer Trauma: Emotional and stress as result of abrupt or involuntary transfer

Relocation in time of emergency - hotel relocation letter

Relocation plan by licensee (80078)

CCL requires resident to be relocated reduce stress
measures to be taken to meet client 's health and safety
agreement to notify licensing when relocation occurs
plan submitted to CCL within time period specified by CCL
changes in relocation plan submitted to CCL
separate plan for each client

Admission and Retention 3 Hours
Smart Seminars
12/28/17

CCL may order immediate relocation if resident in imminent danger

Cooperation with relocation plan
contact prepare and identify meds, valuable belongings cash resources
authorized representative of client
assist with transport of client
contacting other suitable facilities if necessary

Age Exception (85068.4)

May retain but not admit clients over 59 if needs are compatible with other clients

No exception needed if number of persons over 59 does not exceed 50% of census in facilities with 6 or under.

No exception for clients over 59 in capacity over six if does not exceed 255

Relocation And Eviction Regs Summary:

<http://www.psi-ceu.com/wp-content/uploads/2017/12/10-relocation-eviction10.pdf>

Group Discussion Points:

What are some reasons why a facility would evict a client.
What alternatives are there to eviction.

Eviction (85068.5)

If unable to meet client' needs licensee may issue eviction notice

30-day written notice that specifies the reasons:

Nonpayment within ten days of due date
Failure of client to comply with law after receiving violation
Failure to comply with facility policies
Clients' needs cannot be met
Change of use of the facility

May evict with 3-day notice if:

CCL may grant prior written approval
CCL shall reply to request in two days - no response shall be approval
Client's behavior is threatening to mental or physical health safety of others
Licensee must include in notice reasons for eviction including specific facts.
Must mail copy to authorized rep.
Written report of eviction sent to licensing within 5 days of the eviction.

Handout: Eviction Rights: Disability Rights California

<http://www.dds.ca.gov/Publications/docs/LookingServiceQuality.pdf>

Handout Practice Questions: Admission and Retention Aspects

44 Questions.

In class review of each question.

Admission and Retention 3 Hours

Smart Seminars

12/28/17

<http://www.psi-ceu.com/wp-content/uploads/2017/12/Admission-Practice-Questions.pdf>