

403 Admission Policy

Section	Initiated	Last Update	Last Review	Related Procedure/Form	Page
Program	November 2022	September 2025	September 2025	See Appendix	1 of 4

Purpose:

To establish continuity of care during admission or service initiation including ProAct's admission criteria and processes.

Scope:

All ProAct employees and participants

Policy:

Services may be provided by ProAct as registered and licensed according to MN Statutes, chapter 245D and MN Statutes chapter 245A. All services will be consistent with the participant's service-related and protection-related rights identified in MN Statue section 245D.04. ProAct may provide services to persons with disabilities when ProAct is able to meet the person's needs. ProAct's admission process for Extended Employment and Vocational Rehabilitation Services is person centered, ensuring services align with individual needs, preferences, strengths, and goals to promote optimal outcomes in full compliance with CARF standards.

Documentation from the admission/service initiation, assessments, and service planning processes related to ProAct's service provision for each participant and as stated with this policy will be maintained in the participant's case file.

Admission Criteria

- Be at least 14 years old or as funding determines.
- Have a diagnosed educational, mental or physical disability or functional limitations in three or more major life activities.
- Able to control behaviors so that you are not hazardous or threatening to yourself or others.
- Require at least one of the program services.
- Eligible to ProAct's transportation or have access to reliable transportation.
- Have sufficient financial support.
- ProAct has adequate staffing to support the participant.

Refusal to Provide Services

When a participant and/or legal representative requests services from ProAct, a refusal to admit the participant must be based upon an evaluation of the participant's assessed needs and ProAct's lack of capacity to meet the needs of the participant.

ProAct must not refuse to admit a participant solely on the basis of the type of services the person is receiving or solely on the person's:

- Severity of disability
- Orthopedic or neurological disabilities
- Sight or hearing impairments
- Lack of communication skills
- Physical disabilities
- Bathroom needs
- Behavioral disorders
- Past failures to make progress
- The type of residential services the participant receives.

In the event that services are not provided, a letter is written, and a copy is maintained.

The Case Coordinator and/or Program Manager will ensure that during the admission process the following will occur:

- Develop, document, and implement the *Individual Abuse Prevention Plan (IAPP)*, according to MN statutes, section 245A.65, subdivision for 245d services.
- Provide the written list of the rights of participants that identifies the participant's rights according to MN statutes, section 245D.04, subdivisions 2 and 3
- Explain what will be provided on the day of service initiation or within five (5) working days of service initiation and annually thereafter
- Make reasonable accommodations, when necessary, to provide this information in other formats or languages to facilitate understanding of the rights by the participant and/or legal representative.
- Explain and provide the following copies (may be provided within five [5] working days of service initiation) of the following policies and procedures to the participant and/or legal representative.
 - Policy and procedure on grievances
 - Policy and procedure on temporary service suspension.
 - Policy and procedure on service termination.
 - Policy and procedure on data privacy
 - Policy and procedure on emergency use of manual restraint
 - Policy and procedure on reporting and reviewing of maltreatment of vulnerable adults
 - Policy and procedure on reporting and reviewing of maltreatment of minors

Obtain written authorization (and annually thereafter) from the participant and/or legal representative for:

- Authorization for medication and treatment administration and assistance
- Authorization to act in an emergency
- Standard release of information
- Specific release of information (if applicable)
- Financial authorization (if applicable)

The referral application or appropriate forms are signed by the participant and/or legal representative that 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 participant or case manager.

During the admission/intake meeting, the support team or expanded support will discuss:

- ProAct's responsibilities regarding health service needs and the procedures related to meeting those needs as assigned in the *Support Plan* and/or *Support Plan Addendum* for 245d services.
- Frequency of progress reports and progress review meetings, at a minimum of annually
- The initial financial authorization. Also, the Case Coordinator and/or Program Manager will survey, document, and implement the preferences of the participant 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

Admission process follow up and timelines:

- The Case Coordinator and/or Program Manager or designee will ensure that the participant's service recipient record is assembled according to standards. Orientation will generally occur on the first day and no later than 72 hours after the participant starts.
- Within 15 calendar days of service initiation, the Case Coordinator and/or Program Manager will complete a preliminary Support Plan Addendum based upon the Support Plan for 245D participants. At this time, the participant's name and date of admission will be added to the admission and discharge register maintained by the Case Coordinator and/or Program Manager.
- When a participant requires a positive support transition plan for the emergency use or planned use of aversive and deprivation procedures prohibited under Minnesota statutes, chapter 245D; The positive support transition plan must be developed and implemented within 30 calendar days of service initiation. No later than 11 months after the implementation date, the plan must be phased out.

Within 60 calendar days of service initiation, the support team or expanded support team will meet for 245d services to assess and determine:

- The scope of services to be provided to support the participant's daily needs and activities
- Outcomes and necessary supports to accomplish the outcomes. The participant's preference for how services and supports are provided including how ProAct will support the participant to have control of his/her schedule.
- Whether the current service setting is the most integrated setting available and appropriate for the participant
- How services for this participant will be coordinated across 245D licensed providers to ensure continuity of care
- The participant's ability to, at a minimum and within the scope of services, self-manage health and medical needs, personal safety, symptoms, or behaviors by using the self-management assessment form.

Also, at the initial planning meeting, a discussion of how technology might be used to meet the person's desired outcomes will be included. The Support Plan or 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.

Within 10 working days of the initial planning meeting, the Case Coordinator and/or Program Manager will develop and document outcomes and supports for the participant, based upon the assessments completed at the initial planning meeting.

Within 20 working days of initial planning meeting, the Case Coordinator and/or Program Manager will obtain dated signatures from the participant and/or legal representative and case manager to document completion and approval of the assessment and SPA. ProAct staff will update the SPA, IAPP and SMA and other required paperwork annually thereafter.