

## **CENTRAL CARE POLICY ACUTE AND CHRONIC MEDICAL ISSUES AS THEY RELATE TO CONSUMER PROGRAMMING**

<b>SUBJECT:</b>	<b>ACCUTE AND CHRONIC MEDICAL ISSUES AS THEY RELATE TO CONSUMER PROGRAMMING</b>
<b>ANNUAL REVIEW MONTH:</b>	June
<b>RESPONSIBLE FOR REVIEW:</b>	Director of Central Care
<b>LAST REVISION DATE:</b>	August 2010

**Policy:** The purpose of this policy is to manage acute and chronic medical issues as they relate to consumer programming.

1. Unless contraindicated as a result of acute or chronic medical conditions, consumers shall be actively involved in programming as dictated by the individual needs of each client.
2. Interruptions to programming necessitated by acute or chronic medical or psychiatric issues shall be kept to a minimum consistent with the medical and health needs of involved consumers.
3. Responsibilities for review of consumers withheld from programming for medical/physical reasons are as follows:
  - Interdisciplinary Team (IDT) may approve withholding of consumers from programming for up to one week.
  - Personal physician may approve withholding of consumers from programming for as long as necessary to allow for improvement of medical/physical condition.
4. The IDT will implement alternate programming and will update the ISP to reflect new services being provided due to the medical/physical condition.
5. Should the condition of the consumer require another level of care that cannot be provided in the home, the consumer should be referred to the appropriate source for placement.

**Reference:** **Central State Hospital Policies and Procedures**  
**Developmental Disabilities Division Procedures**  
*Standards for Community Mental Health, Mental Retardation and Substance Abuse Services*

**Procedure:**

<b>Responsible Person (s)</b>	<b>Action</b>
<p><b>Alternate Programming</b></p> <p>Appropriate staff member</p> <p>QMRP</p>	<ol style="list-style-type: none"> <li>1. Identify consumers who have medical issues which might interfere with programming and refer them to their physician.</li> <li>2. Documents physician's recommendations concerning the consumer's inability to participate in regular programming.</li> <li>3. Notifies Central Care Community Services Director and CEO of consumer's condition.</li> <li>4. Develops and implements alternate programming appropriate to consumer's condition.</li> <li>5. Amends ISP to include alternate programming.</li> <li>6. Documents evaluation of consumer's level of care needs at least weekly in consumer's records.</li> <li>7. If consumer requires a more intensive level of care that cannot be provided in the home then the consumer should be referred to the appropriate resource for alternate placement.</li> <li>8. Notifies Central Care Community Services Director, CEO and Family/Guardian of change in the level of care of the consumer.</li> </ol>
<p><b>Consumers Who Develop Medical Issues During Programming</b></p> <p>Onsite Manager</p> <p>QMRP</p>	<ol style="list-style-type: none"> <li>1. Notifies QMRP immediately.</li> <li>2. Discusses with the reason for suspecting consumer may have a medical issue.</li> <li>3. Documents events in consumer's record.</li> <li>4. Schedules medical appointment with consumer's personal physician.</li> <li>5. If consumer's personal physician is unavailable, contacts backup staff in ER at Medical Surgical Hospital.</li> <li>6. Notifies family/guardian and documents in consumer's record.</li> <li>7. Follows recommendation of physician and documents services in consumer's records.</li> </ol>

**APPROVED:**

\_\_\_\_\_ **TITLE:** Director of Central Care **DATE:** \_\_\_\_\_  
George Harris, LCSW