

ADMISSION PLANNING

- How do you make decisions about who to admit into the program?
- If I choose this program, what do you need to do prior to admission? How long will that take? What do you need me to do?
- After admission, how can I arrange to spend a half-day or day observing the program?

PROGRAM

- How long has the program been in existence? Why was it established?
- Is the treatment team experienced in working with brain injured individuals? How many licensed/certified staff does the program have?
- Who makes up the treatment team?
- How many hours of therapy are delivered daily? Who delivers the therapy?
- Does the staff seem to know the people being served by name and to genuinely care about the people in the program?
- How does the program accommodate special diets?
- How does the program handle medical emergencies? How are routine medical issues (i.e., regular dental and ophthalmology services) provided?
- How would the program manage the special medical needs which have resulted from the injury?
- Who is responsible for the overall supervision of the services rendered to people served? How often are they at the program? How much direct contact do they have with the individuals served?
- How is the need for specialized adaptive equipment identified? How is the equipment provided and paid for?
- How many people with brain injuries has the program served within the past year?
- How does the program integrate the individuals expressed desires and goals in service planning?
- What are the evening and weekend schedules like?
- Who monitors medications and medication interactions? How often is this reviewed? What steps are taken to assure that therapeutic levels of medications are maintained and not exceeded?
- Is the program licensed? By whom?
- Is the program CARF brain injury accredited? When was the last survey?

Cognitive services:

- What approaches does the program use to address cognitive strengths and limitations?
- Is neuropsychological testing done?
- If a "cognitive therapist" or "cognitive remediation specialist" is a member of the team?

Behavioral interventions:

- What approaches does the program use to address behavioral concerns?
- What role does medication play in "behavior management?"
- Is a "secure" or locked unit available? When does the program recommend the use of these? Who decides when a person is ready for an open unit after being on a secure unit? How?
- At what point is an individual's behavior deemed unacceptable to the program? What efforts are made by the program to assist in locating a comparable program that can better meet the needs of the person?

Vocational/Educational Services:

- How are vocational evaluations conducted? How are job trials, training or placement provided?
- What interface is there between the program and state vocational rehabilitation services?
- What educational services are offered?

Community Re-entry:

- What components of the program take place in the community? How frequently is the individual in the community?
- How is the person's ability to get around and to use community services and resources evaluated and addressed?
- How does the program accommodate an individual's request to participate in community activities (i.e., AA or league bowling, religious observances)?

Recreation:

- How does the program accommodate the individual's continued involvement in recreational interests and activities?
- What does the program do to support the individual's desires to become active in new recreational pursuits?

INVOLVEMENT OF FAMILY AND FRIENDS

- What is your policy about visitors?
- How does your program involve family members and friends?
- How frequently does the therapy team meet to discuss progress? Can I attend and/or participate?
- How will you schedule regular conference calls for me to speak with the team if I cannot personally attend the meeting?
- What do I need to do to get copies of written reports regularly? Who is responsible for sending me these?
- If I have a question about a particular area (i.e. physical therapy), what do I need to do to speak with that therapist directly?
- Since I live far away, what overnight amenities are available for me to visit for a few days?

DISCHARGE PLANNING

Planning for discharge begins at admission. It is imperative to have an understanding of what the next step is after discharge, as well as what kinds of services might be needed and their availability. Be clear about your intent to be involved in discharge decisions.

- How and who decides when the individual is ready for discharge? What would make the program extend or shorten the anticipated discharge date? If this is done, how much notice is given, and what is the role of the individual and their family in this decision?
- What is the average length of stay?

FINANCIAL RESPONSIBILITIES/ARRANGEMENTS

People with brain injuries have had to leave programs before they are ready because their funding has been exhausted. The best way to prevent these occurrences is to stay informed about your continuing financial strains both with the program and with your funding source.

- What is the daily cost of the program? b. What does this include?
- Who is billed for services if my funding source will not pay for?
- What sources of funding does the program accept?
- How do home visits or other leaves of absence affect payment? Is there a bed hold charge? If so, who is expected to pay if insurance will not?