Outpatient, Home and Community Services provide a continuum of treatment to include comprehensive evaluation, intensive rehabilitation services, vocational services, and long term supports. Services can be provided solely in the outpatient clinic/office, solely in the client’s home, community, and/or work setting, or a combination of all settings to support generalization of skills and meaningful recovery. Treatment specialties include cognitive rehabilitation, neuropsychology, interactive metronome therapy, vestibular treatment and pain management. Services are typically provided up to five days a week during business hours. However, based on the client’s needs and identified treatment goals, additional evening or weekend services may be provided.

**Admission Criteria**

- Primary diagnosis of brain injury (other neurologic diagnosis may be considered on a case by case basis)
- Minimum Age: 18 years
- Must be able to walk or have independent use of a wheelchair for mobility
- May require minimum – moderate assistance with Activities of Daily Living
- Must be medically stable. The medical acuity of each client is determined as part of their intake evaluation and their subsequent admission is based on the outpatient staff’s skills and abilities to meet the identified need.
- Behavior: Clients generally demonstrate behaviors that are socially acceptable to the community at large, and any problematic behaviors are low intensity/low frequency. Clients who are actively suicidal, homicidal, a known history of sexual predatory or pedophile behaviors, or have been charged with a violent crime are not suited for these services. If living alone, clients must possess the necessary communication and behavioral skills to live or work in a community setting.
- Not actively engaged in substance use/abuse
- Commitment to consistent participation in services

Spinal cord injuries can only be a secondary diagnosis; the specific etiology, injury level, completeness and co-morbidities of the SCI will be determined during the intake evaluation process along with the individual’s ability to meet the program’s admission criteria.

ReMed does not deny admission to any individual because of his/her race, religion or creed, disability, ancestry, national origin, age, sexual orientation or identity or any other characteristic protected by law.
Financial approval for services must be confirmed prior to admission. Typical funding sources include worker’s compensation, auto insurance, limited medical health policies, commercial insurance policies, state trust and waiver programs, state vocational rehabilitation funding, and private funding. Typical referral sources include physicians, insurance companies, external case managers, discharge planners, social workers, individuals and their families.

For Outpatient, Home and Community Services, clients typically live within a two hour travel radius of the designated outpatient clinic. Exceptions may be made on a case by case basis. Involvement of a significant person (family or friend) in the client’s life is preferred. Schedules will consider the client’s participation restrictions and preferences.

**Discharge/Transition Criteria**

Outpatient, Home and Community Services may be provided on a long term basis to assist clients to maintain the structure and strategies necessary to support their functional skills and independence.

Outpatient, Home and Community Services which are therapy-based may be concluded as the client meets identified treatment goals and within the limits of their funding parameters.

Clients who demonstrate an inability to be maintained safely within their home/community will be referred to a more structured and supervised setting.