

ST. JOHN'S ADULT DAY PROGRAM
A program of St. John's Healing Community Board
A division of St. John Evangelical United Church of Christ
222 GOETHE AVENUE, COLLINSVILLE, IL 62234-3306
618-344-5008

ENROLLMENT AGREEMENT AND POLICIES

Program Objectives: The goal of St. John's Adult Day Program is to enhance the quality and meaning of life for persons with dementia while providing respite and support for family caregivers. This program will create opportunities for participants to engage in social activities in supportive settings that utilize the skills and sensitivity of professional staff with the support of trained volunteers. The focus will be to offer flexible programming which will give participants choices on types of activity, enhance their sense of belonging and well-being, provide successful experiences, and emphasize their value as one of God's children.

Eligibility for Participation: St. John's Adult Day Program is designed to offer services to a wide range of individuals who should not or would rather not be home alone during the day. St. John's Adult Day Program serves individuals with Alzheimer's disease or other memory impairments, arthritis, Parkinson's disease and other diseases, as well as people who have brain or spinal injuries and conditions such as multiple sclerosis. We also serve those who would like more socialization. We serve such individuals and their caregivers regardless of race, color, national origin, ancestry, religion or sex and will make no determination regarding admission or discharge based upon such factors.

The program has the right to discharge or choose not to enroll a participant if:

- A. The participant presents a threat to him/herself, the staff, and/or another participant.
- B. The participant requires personal care beyond the capability of the staff and volunteers, as determined by the Program Director.
- C. The program guidelines are not followed (financial obligations, repeated late pick-up, provision of required information, etc.)

Payment of Fees/Billing Procedure: Fees are charges on half-day (4 hours) or full-day (8 hours) basis. Checks should be made out to St. John's Adult Day Program. Billing will be done on a bi-weekly basis. Payment is due upon receipt of the bill. Payment in advance is welcome and appreciated.

If a participant cannot afford to pay the full fee, his/her caregiver should discuss the situation with the Program Director and/or Executive Director. If scholarship funds are available, the caregiver will be asked to provide basic financial information so that the participant may be considered for a scholarship. Please ask the Program Director for an Application for Reduced Charges.

Late Pick-Up Charge: A late fee of \$4.00 for each 15 minutes will be charged if a participant is not picked up by the program's official closing time. Repeated late pick-ups may jeopardize a participant's enrollment in the program.

Attendance Policy: Caregivers of participants are required to call St. John's administrative office (344-5008) if the participant will not be attending on a day previously scheduled. Notification as early

as possible will be appreciated. The receptionist's hours are 8:30 a.m. to 5:00 p.m. weekdays. Caregivers may leave a message at 344-5008 anytime.

Authorization for Emergency Treatment: An authorization form must be completed and signed no later than the first day of participation. If the participant has a legal document which requests that some medical procedures be avoided (such as living will or "do not resuscitate" order), a copy must be provided to the program.

Physical Health Status: A medical form must be completed by the family caregiver and signed by the participant's physician. If the participant has not been examined by a physician within the past six months, he/she must schedule an exam as soon as possible and have the physician complete the form at that time. A TB test may be requested.

If a participant is ill, feels as if he/she is coming down with a cold or flu, or is known or suspected to have a contagious infection, the participant is expected to remain at home. The caregiver must notify the program in a timely manner as specified in the above attendance policy.

If a participant becomes ill after arriving at the program, the caregiver will be contacted as soon as possible and will be responsible to pick the participant up from the program. To the extent possible, the participant will be isolated from the rest of the group until the caregiver arrives. This is to protect the health of all participants, staff, volunteers, and caregivers involved with the program.

Medications: A list of medications will be requested during the initial assessment. It is of utmost importance that the family caregiver notifies the Program Director of any new medications or changes to medications, even if it is not to be administered by program staff. In an emergency, knowledge of medication status is extremely important to medical personnel. Whenever possible, family caregivers are expected to give participants medications before or after the session. If it is essential that a medication be given during the session time, the medication should be given directly to the Program Director in a pill keeper clearly marked with the participant's name. The Program Director will record the time and dose of the medication to be given and have the family caregiver initial that instruction. The family is responsible for refilling the pill keeper and notifying the Program Director of all changes to the medication regimen.

Communication: Open communication between family and program staff is vital to assuring the program meets each participant's needs. Family members are encouraged to share concerns, observations, and/or suggestions with the Program Director or other staff members. If you need more than a few minutes to discuss your concern, please call the program Director at 344-5008 to set up an appointment. The more our staff understands about your family member's personality and preferences, the better we are able to make their experience with us a positive one.

Confidentiality: Information contained in the participant's records is confidential. Disclosure to unauthorized persons will not be made without written consent, except as required or permitted by law.

Holidays: The program will be closed on major holidays. The program will also close due to adverse weather conditions. The closing of the program will be at the discretion of the Program Director and Executive Director. Families will be notified the night before to give adequate notice to make other arrangements for their participant. A message will also be left on the recorder at 344-5008.

Name of Participant's Health Care Power of Attorney

Signature of Health Care POA

Date

Mailing Address

Phone

Copy of POA provided Yes No

Copy of living will/do not resuscitate order provided Yes No

If Participant has a court-appointed Legal Guardian, this person must sign below:

Name of Participant's Legal Guardian

Signature of Participant's Legal Guardian

Date

Mailing Address

Phone