



# *2023 Outpatient Scope of Services*

*Caro & Traverse City*



4040 Beacon Street  
Kingsley MI, 49649

## *Traverse City Campus*



1655 East Caro Rd. Caro MI, 48723

## *Caro Campus*

Both locations provide services for residents throughout the state of Michigan. Geographic proximity for primary support systems includes the areas defined below:

Traverse City: servicing all of northern Michigan, including Grand Traverse, Leelanau, Manistee, Benzie, Wexford, Antrim, Missaukee, and Kalkaska counties

Caro: servicing the entire thumb region, including: Bay, Saginaw, Shiawassee, Genesee, Lapeer, Tuscola, Sanilac, and Huron counties

## *OUR MISSION*

*The Lighthouse provides phenomenal care, treating every resident as we wanted our son to be treated.*

## ***OUR CORE VALUES***

- Glorify God in all that we do.
- Serve every person with excellence.
- Do unto others as you would like them to do unto you.
- Honesty and integrity in dealing with our families, payors, and employees

## ***OUR TREATMENT PHILOSOPHY***

The Lighthouse recognizes that each client is a whole person made up of body, mind, and spirit. Through a comprehensive rehabilitation program with an interdisciplinary team of professionals, The Lighthouse gives assistance to individuals as they strive to achieve their highest level of independence in the least restrictive environment.

### ***Treatment Approach***

Multidisciplinary team of professionals  
Strength-based program  
Supportive environment

### ***Treatment Direction***

Maximize physical and psychological functioning  
Improve relationships with others  
Encourage family involvement  
Integrate physical and mental healing  
Address spiritual needs according to the individual's personal preference

### ***Hours and Frequency of Services***

Outpatient services are from 7am to 5:30pm Monday thru Friday  
Frequency of services provided in collaboration with treating physician.

### ***Fees and Funding Sources***

Service fees are competitive with industry standards.

The Lighthouse participates with a variety of funding sources. Funding sources may include automobile insurance companies, HMOs, self-insured employer plans, or public payors such as state and local county payors. The payor sources include insurances, auto no fault, workers compensation, private pay, Community Mental Health, Department of Health & Human Services, and any other agency approved by The Lighthouse Finance office. Information on the specific fees is provided upon request to The Lighthouse Finance office.



## *Referrals*

Referrals come to The Lighthouse from a wide variety of community and personal sources including hospitals, case managers, families, Community Mental Health Agencies, and Department of Health & Human Services.

### **Anti-Discrimination Policy:**

The Lighthouse does not discriminate in the provision of service to clients based on age, ethnicity, cultural backgrounds, religion, gender identity, sexual orientation or disability. The Lighthouse also accepts all impairments, activity limitations, participation restrictions, psychological statuses and can accommodate all cultural needs. Each person's individual needs are taken into consideration when designing their treatment program.

## *ADMISSION CRITERIA FOR OUTPATIENT*

### ***POLICY:***

Admission to The Lighthouse outpatient therapy program is contingent on the client's appropriateness for treatment.

### ***ADMISSION CRITERIA:***

1. Person appropriate for outpatient treatment
  - A. The Lighthouse outpatient program accepts clients 6 months of age or older.
  - B. Medically stable
  - C. Able to participate in the program and tolerate the intensive rehabilitation process.
  - D. History of neurological impairment including, but not limited to traumatic or non-traumatic brain injury (accident, surgical, circulatory, etc.), complete or incomplete spinal cord injury (tetraplegia or paraplegia)
  - E. History of an orthopedic injury
  - F. In need of other rehabilitation services as ordered by a prescribing physician
  - G. Neurobehavioral deficits appropriate for treatment
    - a. Cognitive impairment
    - b. Behavioral difficulties including, but not limited to depression, anxiety, social withdrawal, fears, feelings of hopelessness, severe mood swings, poor impulse control, eating and sleeping problems, lack of motivation, lack of insight and judgment and other adjustment concerns impacting social and vocational development.
2. Prospective clients are assessed for their ability to meet the financial obligation of treatment by either private pay, health, auto insurance, workers compensation, or Medicare.

### ***REVIEW PROCEDURE:***

The Outpatient Administrator will annually review the admission criteria for continued appropriateness and revise the admission criteria in accordance with the mission and philosophy of The Lighthouse program. The admission criteria will be documented for public disclosure.

# *ADMISSION PROCEDURE FOR OUTPATIENTS*

**Policy:** Prior to admission, The Lighthouse will follow the below procedure to ensure quality of treatment.

1. Once a prescription is received and verification for approved services is completed by The Lighthouse finance department, contact is made to the client/guardian informing them of any fees.
2. After approval is provided, the client is scheduled for evaluation(s).
3. During the comprehensive evaluation(s), the client, caregivers, and therapist identify treatment goals and planned treatment interventions based on the client's individual goals. Intensity, frequency of services and duration of treatments are all individualized based on a client's deficits and goals. The therapist(s) completes a plan of care with recommendations for the referring physician to sign.
4. Goals, frequency, and duration may change depending on the client's progress and requirements of funding source. Treatment is discussed with the client and any changes needed will be completed within the plan of care. Throughout treatments, progress, goals, and future discharge plans are discussed with the client. A discharge plan will be put into effect when it is evident a person will be discontinuing services provided by the outpatient therapy program.



# ***DISCHARGE CRITERIA FOR OUTPATIENTS***

## ***POLICY:***

It is the policy of The Lighthouse that discharge planning is addressed by the treating therapist(s). Every discharge plan is different and reflects a person's unique personal and social situation. The team provides comprehensive evaluation and treatment with the goal of maximizing client's function and independence.

## ***DISCHARGE CRITERIA:***

1. Successful discharge:
  - A. The client has received maximum benefit from the therapy.
  - B. The client has been evaluated by the treatment team and it has been determined that the individual no longer requires treatment services due to the achievement of goals or by consensus of the team that goals will not be achieved in this program.
2. Discharge with subsequent transfer:
  - A. The individual has been evaluated by the treatment team and determined to require more intensive care in a different setting such as a psychiatric hospital, home-based rehabilitation services, day program, or another facility. Alternatively, the individual, responsible party, or other stakeholders have determined transferring to a different treatment facility is needed due to client choice or financial limitations.
3. Discharge Against Medical Advice (AMA):
  - A. A client or their responsible party wishes to discharge the client from services against the advice of the treatment team and without adequate discharge planning. The client and/or the legal guardian acknowledge that they are leaving the program AMA and are aware of the potential adverse consequences.
4. Unsuccessful Discharge:
  - A. The client experienced a major medical or psychological problem that excludes their benefits from a continued outpatient program.
  - B. The client has not successfully attained treatment goals and/or the client or guardians were noncompliant with agency policies or treatment team recommendations.
  - C. The client demonstrates an inability to tolerate the program or modifications, and a different setting is needed.
  - D. The client and/or their support system are no longer confident in the program.
  - E. The overall goal of the client's program has changed so that outpatient therapy is no longer the best use of the person's resources.



# ***DISCHARGE NON-VOLUNTARY***

## **POLICY:**

The Lighthouse outpatient program shall endeavor to keep all discharges on a voluntary basis; however, specific circumstances have been identified that warrant the termination of outpatient services on an involuntary basis.

## **PROCEDURE:**

1. Outpatient personnel will be advised that the following circumstances may lead to involuntary discharge from the program:
  - A. Third party payor decision to not cover or authorize therapy services.
  - B. Disruptive client who presents a danger to self, others, or property
  - C. Client who is actively intoxicated or otherwise impaired by misuse/abuse of pharmacological agents.
  - D. Client who misses designated therapy appointments 3 times consecutively without calling to reschedule prior to the appointment, ex: not showing for scheduled appointments.
  - E. The physician's prescription has expired, and a new one has not been able to be obtained.
  - F. The medical condition(s) which the therapist(s) determines contraindicates the client's inability to participate in the therapy program safely.
  - G. Treating therapist(s) determine a contraindication would make therapy unsafe for the outpatient.
2. If any of the instances as defined above occurs, the treating therapist is to report to the Outpatient Administrator the reason for discharge from services.
3. The Outpatient Administrator will further investigate the circumstances, consult with the management team as needed, and decide regarding termination of services within 72 hours of receiving the report from the therapist.
4. If the Outpatient Administrator determines the client will be terminated from outpatient services, the Outpatient Administrator or designee shall notify the individual of the need for termination of services.
5. Any individual terminated from outpatient services on a non-voluntary basis has the right to appeal this decision to the management team of The Lighthouse. Such an appeal must be filed within 7 days of the involuntary discharge.

# *SERVICE DENIAL APPEAL PROCESS FOR OUTPATIENT SERVICES*

## **POLICY:**

It is the policy of The Lighthouse to provide a fair appeal process for all potential outpatient clients who may be denied access to admission due to not meeting the admission criteria and/or funding issues or other factors.

## **PROCEDURE:**

1. When a determination is made that a potential client will be denied access to services due to funding, not meeting admission criteria, or other factors, notification will be provided by phone and in writing (letter or email) to the client and/or referral source.
2. If the client and/or responsible party or referral source believes that the denial was made in error, they will be given the opportunity to follow The Lighthouse appeals process.
3. The first step of the appeals process is for the client or responsible party or referral source to notify the Clinical Director either in writing or by phone of their desire to appeal the denial.
4. Information to be gathered by the Clinical Director will include reason denial was made, appellant's reason for appeal including extenuating circumstances, and correction of any inaccurate information or misperceptions regarding client's appropriateness for outpatient services.
5. The Clinical Director will then meet with the finance department or therapy department, depending on basis for denial, to review the additional or corrected information and decide regarding the appeal.
6. The Clinical Director will notify the client, and the appellant of the decision about the appeal within 72 hours of receiving the request for appeal. Notification will be provided by phone and in writing, either through mail or email.
7. If the appellant is not satisfied with the results of the initial appeal, they will be provided with the opportunity to appeal to the Chief Executive Director of The Lighthouse.
8. The same process is applicable for denials for specific therapies for an outpatient or their responsible party who wishes to appeal a denial for specific therapy services.



# *The Lighthouse's Programs and Services*

## ***Adaptive Sports Program***

The Lighthouse Adaptive Sports Program is led by Recreational Therapists, who strive to provide opportunities for individuals of all abilities to experience cycling and paddling with the use of adaptive equipment and modifications, as needed. Our clinics provide an opportunity to exercise, connect with people, socialize, and experience something new and fun! Through the provision of adaptive sports clinics, the program aims to improve self-esteem, confidence, health and wellness, and overall quality of life. We currently offer adaptive kayaking and paddleboarding clinics and partner with the community to offer adaptive cycling and skiing for our residents, outpatients, and the community.



## ***Return to Hunting***

Recreational Therapists, who are State of Michigan Certified Hunter Safety Instructors, help sportsmen/sportswomen return to hunting and/or make recommendations for safety. They may help with providing knowledge on adaptive hunting equipment, adaptive hunting opportunities, and rules/regulations surrounding hunters with disabilities. Participants of this program are encouraged to have been hunters before their injuries or acquired medical condition.



## ***Vocational Program***

The Lighthouse aims to provide person centered planning for everyone's needs when considered for supportive employment services. The vocational program assists each person in exploring individual career opportunities by identifying each client's interests, skills, and abilities. The program also takes limitations and develops alternate ways to perform each job task as needed.

The purpose of the vocational program is to assist in developing realistic vocational goals, as well as helping the individual understand their limitations as it relates to their current level of functioning. The goal is to help the individuals understand the meaning, value, and demands of the workforce. A wide range of provided supports include pre-vocational workshop, on-site job training with a variety of job-related tasks, community volunteering opportunities, job coaching to assist in community employment, development of resumes and cover letters, and interview preparedness.

### **Pre-Vocational Workshop**

The pre-vocational workshop provides life skills, projects, and activities that enhance the quality of leisure time, promotes social skills, and addresses pre-vocational abilities. The focus of the workshop is to aid the individual in developing skills such as: punctuality, responsibility, efficiency, attention to task, and follow through.

### **The Enclave Program**

The on-site work program, called Enclave, provides intensive training and support to perform job tasks. Trained job coaches assist clients in learning and maintaining new job-related skills in a sheltered work setting. Job tasks may include janitorial work, landscaping, gardening, car washing and detailing, as well as painting. After successful completion of Enclave, some clients may transition to community-based employment.

## ***VitalStim Therapy using Neuromuscular Electrical Stimulation (NMES)***

Dysphagia is the medical term used to describe difficulty swallowing. Dysphagia includes difficulty starting a swallow and the sensation of food being stuck in the neck or chest. Dysphagia is common with clients who have suffered a traumatic brain injury, stroke, or normal aging.

Licensed Speech and Language Pathologists are trained to identify and treat dysphagia. The Speech and Language Pathologist, who is certified in VitalStim Therapy, may administer neuromuscular electrical stimulation (NMES). NMES is the use of electrical stimulation to aid muscle strength and function, activate the nerves, and rehabilitate the process of swallowing. A typical VitalStim treatment plan begins with an evaluation and an individualized treatment plan that is approximately 4-8 weeks in duration.



## ***Vision Therapy***

Often visual deficits resulting from brain injuries are overlooked during initial treatment of the injury. Frequently these deficits are hidden and neglected, lengthening and impairing rehabilitation. Because there is a close relationship between vision and the brain, brain injuries can disrupt the visual process interfering with the flow and processing of information. An occupational therapist will complete a visual screening to develop a targeted treatment plan to address the visual deficits. Most often the client will be referred to an optometrist for further evaluation. The occupational therapist will also collaborate with the client's multidisciplinary team to address vision deficits that may limit their balance, vestibular, cognition, or comprehension. Symptoms indicating a vision problem are:

- Blurred vision
- Sensitivity to light
- Reading difficulties
- Comprehension difficulty
- Attention and concentration difficulty.
- Double vision
- Aching, tired eyes
- Headaches with visual tasks
- Loss of visual field



## ***LSVT-BIG & LOUD***

The Lee Silverman Voice Training (LSVT) was initially created as a treatment to help people with Parkinson's disease (PD) talk with a louder volume, helping them retrain their perception of normal loudness. These principles were then utilized in a physical exercise program to help people with PD and other neurological conditions produce larger movements, separating the treatment into LSVT Loud and LSVT Big.

There is substantial research supporting both LSVT Loud and LSVT Big. LSVT Loud is the gold standard treatment globally for people with PD, with strong evidence that participants increase loudness and variation in pitch, changes which are maintained for at least 2 years. There is also evidence that many individuals who undergo LSVT Loud will experience better articulation, improvements in swallowing, and improved facial expressions, all of which help improve communication. Research has shown that the LSVT Big program can increase walking speed and step length, improve gait, increase balance, and increase the ability to rotate. All these improvements carry over into real life changes that have a direct impact on a person's life and relationships. Loved ones can hear their partner with PD better and individuals with PD can engage in conversations more. Increased walking speed means individuals with PD can keep up with their partner better and participate in more community activities such as grocery shopping. Improved balance decreases the risk of falling and subsequent injuries. All these things help increase a person's health, safety, and quality of life.

The Lighthouse offers both the LSVT Loud and LSVT Big programs. Both treatment programs consist of one-hour sessions four days a week for four weeks, a total of 16 sessions, and can be extended if additional treatment is needed. Daily exercises are given to carryover skills learned in sessions. Both programs encourage lifelong exercise routines following graduation from the program to maintain improvements.

## ***Aquatic Therapy***

Aquatic therapy utilizes the therapeutic benefits of water to provide a safe, gentle, and effective environment to address therapy goals. There are many properties of water that help make exercising easier than on land including buoyancy, hydrostatic pressure, viscosity, and temperature.

The pool's temperature of 92-96 degrees provides a warm environment to enhance muscle relaxation and allow for improved range of motion and flexibility, while also providing pain relief and a reduction in spasticity. The pool's ability to unweigh allows the person to focus on balance and gait, while reducing the fear of falling.

The most common populations that utilize aquatic therapy are clients who may have arthritis or who are rehabbing after orthopedic surgery. Others may utilize the pool to address acute or chronic pain, or balance, muscle or walking deficits.



## ***Functional Electrical Stimulation (FES)***

### ***Ergometer***

The FES ergometer is a stationary arm or leg cycling system which can be used with a wide range of clients: individuals with and without the ability to move their arms or legs on their own, those with weakness or difficulty walking from a neurological condition, and with individuals who use a wheelchair for mobility and want on-going exercise.

The computer-generated ergometer uses adhesive surface electrodes to provide electrical stimulation to a client's peripheral nerves on either the trunk, arms or legs to generate muscle contractions. The ergometer uses repetitive cycling motions with the ability to electrically stimulate up to twelve muscle groups at one time to increase muscle activation. During a cycling session, the ergometer is continually tailoring the session based on the individual's needs. It aids if the client becomes fatigued or provides increased resistance if the client needs a challenge.

At The Lighthouse, the ergometer is most often utilized with individuals with spinal cord injuries, strokes and brain injuries, but it can be used with anyone who has an intact peripheral nervous system. Researched health benefits with consistent use of the FES ergometer in the neurological population include relaxation of muscle spasms, prevention or slowing of disuse atrophy or muscle wasting, increasing local blood circulation, maintaining or increasing range of motion, prevention of skin breakdown, and improved cardiovascular function.



## ***Concussion Program***

The Lighthouse provides treatment to those impacted by concussions, whether the concussion be from a sports related injury, fall, a motor vehicle accident, or another incident. Effective concussion care through a multidisciplinary approach provides individuals with research-based treatments that address physical, cognitive, and emotional symptoms. From pre-injury multimodal baseline testing for athletes to post injury treatments to include whiplash therapy, vestibular rehab, visual rehab, exercise therapy, and education, The Lighthouse's concussion program is here to help address an individual's unique needs as they recover from a concussion.

## ***Hippotherapy, Therapeutic Horseback Riding and Equine Facilitated Therapy (Caro)***

At The Caro Lighthouse, we offer Therapeutic Riding, Hippotherapy and Equine Facilitated therapy to residents and outpatients. The Lighthouse in Caro owns horses, all of whom are housed and cared for by a full-time barn manager at our facility. To take part in the riding portion of the equestrian program, each resident must have a waiver signed by their legal guardian on file and must also be deemed physically fit to ride by their doctor. The program has adaptive equipment to accommodate each rider's needs, and specific horses are utilized to find the best fit for each resident to facilitate positive therapy outcomes.

Hippotherapy is provided under the discretion of a trained Speech, Occupational or Physical Therapist in conjunction with a physician referral. Hippotherapy means "treatment with the help of the horse" from the Greek word "hippos". The rhythmic, repetitive movement of the horse helps improve muscle tone, balance, posture, coordination, strength, flexibility, and cognitive skills for the rider to achieve functional goals. A horse's gait is like the mechanics of a human's walking pattern with the horse's movements translating to the rider, therefore simulating the pelvic movements needed during walking. Therapists address various therapeutic goals by having a client ride in different positions such as: sitting or lying forwards, backwards or sideways, standing in the stirrups, and riding without holding on. In addition, the therapist may have the client stretch, reach, or play games while on the horse to achieve both physical and cognitive goals. Clients who are successful with Hippotherapy often progress to therapeutic riding.

Therapeutic Riding is a supervised riding activity for the purpose of contributing to the cognitive, physical, emotional, and social well-being of people with disabilities. The goals of therapeutic riding are recreation, sport, and overall well-being. Sessions could be led by a licensed therapist or by a certified therapeutic riding instructor.

The Equine Facilitated Therapy program is offered to residents all year long in Caro. This unique opportunity allows residents to learn about and perform equine care while creating a special, therapeutic bond.



## ***Tai Chi (Caro)***

Tai Chi is a non-impact exercise that helps to improve strength, flexibility, coordination, dynamic balance, postural alignment, body awareness, and neuropsychological functions (memory and attention), with minimal stress to the joints. Tai Chi also facilitates mindfulness and a state of relaxation. Both Physical and Occupational Therapists in Caro have attended courses and are trained in practicing Tai Chi in the clinical setting.

## ***Zero-G (Caro)***

The implementation of the Zero-G into the Caro Physical Therapy practice has provided therapists with the opportunity to advance the treatment of patients with various conditions including but not limited to TBI, stroke, orthopedic, balance or walking deficits. This system allows the therapist to unweight the resident to reduce the pressure in the lower extremities, while providing a “catching” mechanism to completely unweight the client in the event of a fall. Therefore, it provides a safe and controlled environment for progressing the client’s gait pattern, standing tolerance, and balance.



## ***Trauma and EMDR Therapy (Caro)***

Eye Movement Desensitization and Reprocessing (EMDR) therapy is an extensively researched, effective psychotherapy method proven to help people recover from trauma and other distressing life experiences, including PTSD, anxiety, depression, and panic disorders. The Caro Lighthouse psychology department employs a Level 2 EMDR therapist for additional therapeutic services.

## ***Dry Needling (Caro)***

Caro therapists, who have completed continuing education in Dry Needling, provide this as a case-based service for clients who may benefit from this technique as a treatment option. Dry needling utilizes integration of systemic, segmental, and symptomatic needling techniques to help with pain physiology of the nervous system and soft tissue dysfunction that are often interconnected. Dry needling can be done at homeostatic neuro-trigger points, to muscle bellies, and to tendons to help decrease tension as well as to areas of swelling to decrease the prevalence of edema. Dry needling creates small micro lesions to pathological tissue to help by breaking up shortened tissue, inhibiting reflex arcs involving the nervous system, and normalizing the inflammatory response and results in pain reduction.

## ***Communication Technology for Delivery of Services***

Depending on each client’s individual needs, The Lighthouse utilizes audio/video conferencing technologies including, but not limited to Zoom, FaceTime, and audio conferences, as well as phone calls to deliver services and ensure the best quality of care.

## ***Continuum of Care***

To improve the continuity of care while also meeting the needs of everyone, The Lighthouse may refer to a wide network of outside providers to include Orthotists, Prosthetists, Urology, Dietician, Palliative Care, wound care, durable medical equipment companies, and others. The therapists may work in collaboration with these healthcare professionals to empower the client to execute their recommendations, such as implementing wear schedules for orthotics or prosthetics, monitoring wound healing, or identifying the most appropriate assistive device, etc.

# ***OUR TREATMENT TEAM***

## ***Founder***

Our Founder has over 30 years of experience with brain injury, initially as the mother and primary caregiver of a behaviorally challenged brain injured son. She oversees the treatment team and is ultimately responsible for ensuring each resident receives proper treatment.



## ***Outpatient Administrator***

Our Outpatient Administrator oversees the clinical therapeutic environment and consults on various professional issues. The Outpatient Administrator works in conjunction with other team members on developing and maintaining treatment plans. The Outpatient Administrator assists in the decision-making processes of The Lighthouse.

## ***Medical Director***

The Medical Director is responsible for overseeing all services. In the event of an emergency, the medical director can provide guidance for medical management, psychiatric consult, advocate for client's needs, and provide education to client and family. They also help The Lighthouse adhere to ethical conduct by assisting the Outpatient Administrator, nurses, psychologists, social workers and/or counselors as needed.

## ***Rehabilitation Director***

The Rehabilitation Director provides consultation with the treatment team and defines the composition and duration of the individual's treatment program. They ensure the plan of service is consistent with individual predicted outcomes.

## ***Psychologist/Social Worker/Licensed Professional Counselor***

Mental health professionals provide supportive therapies, including individual and group, to the client and family to facilitate social and emotional adjustment. These therapists formulate, coordinate, and implement plans of service as prescribed by physicians. Education is provided to family members or responsible parties as needed.

## ***Physical Therapy***

Physical Therapy can address a variety of deficits including increased pain, balance difficulties, decreased function, increased weakness, and poor quality of movement. These deficits can be a result of a chronic disease such as arthritis, an orthopedic injury, or a neurological diagnosis such as a brain injury or stroke, to name a few.

Our Physical Therapists evaluate each client using a variety of tests and measures, designing an individualized treatment program with appropriate treatment techniques. Physical Therapists (PT) may work closely with a Physical Therapist Assistant (PTA) to execute the client's treatment program. Some of the treatments executed by the PT or PTA may include the following: aquatic therapy, manual therapy (mobilization or myofascial techniques), therapeutic exercises, modalities, equipment management, gait training, posture, dynamic and static balance. Therapists might also recommend adaptive equipment to aid with function, independence, and increased safety.

## ***Occupational Therapy***

Occupational Therapists work closely with clients to increase independence in activities of daily living, including personal hygiene, bathing, dressing, cooking, feeding, and use of adaptive equipment. Skills such

as money and time management, work skills and behaviors, problem solving, community safety issues, and memory are also addressed to help the clients obtain maximum potential.

Our Occupational Therapy staff assists individuals to improve their cognitive and physical skills in preparation for independence at home, school, and the workplace. The treatments are individual and may include the following: cognitive retraining, visual-motor exercises, activities of daily living, sensory integration, strength and functional abilities.

### ***Speech Language Pathology (SLP)***

Speech Pathologists work with clients with impaired cognitive and communication skills impaired by brain injury or other diagnoses. They help restore or compensate for an individual's lost speech, language, cognition, and swallow functioning. When oral communication is unattainable, the SLP helps the client learn to use alternative communication methods. The Speech Pathologist may also use various treatment exercises to assist with improving client function: oral motor, verbal expression, receptive language, executive functioning, memory or problem reasoning.

### ***Recreational Therapy***

Recreational Therapists utilize a wide range of activity and community-based interventions and techniques to improve or maintain the physical, cognitive, emotional, social, and leisure needs of their clients. Recreational Therapists assist clients to develop skills, knowledge, and behaviors for daily living and community involvement. The therapist works with the client and their family to incorporate their specific interests and community resources into therapy to achieve optimal outcomes. Some examples of activities that Recreational Therapists provide include but are not limited to fishing, kayaking, cycling, hunting, skiing, equestrian riding, bowling, aquatics, volunteering, yoga, stress management through leisure participation, dining out, and various activities to work on cognition.

### ***Massage Therapy***

A Massage Therapist is someone who is trained and skilled in massage therapy for medicinal benefits. Massage therapy is the manipulation of the soft-tissue and muscles of the body, and it is used to relax overworked and tired muscles, to treat pain that results from any number of ailments, to aid in the rehabilitation of athletic injuries, and to support overall good health.

### ***Music Therapy***

Music therapy, an allied health profession, is the clinical and evidence-based use of music interventions to accomplish individualized therapeutic goals. The credentialed music therapist addresses client goals in all domains: physical, emotional, cognitive, communication, and social. Music therapists use various interventions to include therapeutic singing, therapeutic instrument playing, movement to music, song writing, music performance, and music listening. Since music is a versatile tool, it allows the therapist to empower the client to achieve their therapeutic goals at any stage of their recovery.

### ***Vocational/Workshop Directors***

Vocational and Workshop Directors are specially trained in vocational and pre-vocational development, supportive employment, and job coaching. Clients are individually evaluated for strengths, weaknesses, and abilities, as related to their employment potential. The Directors





participate with the interdisciplinary team to provide insight into the functional work skills of each client, with goal of each client achieving their highest level of work.

### ***Community-Based Services***

Community-based services are encouraged for outpatients to allow them to remain as independent as possible. This may include programs such as: Meals on Wheels, Area Agency on Aging, Disability Network and other resources. A resource guide is made available to outpatients in their Health Information Folder with more community services.



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