



*Pediatric
Scope of Services*

Pediatric Services at the Caro, MI Location



Caro, MI

OUR MISSION

*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 our fellow man with excellence.
- Do unto others as you would like them to do unto you.
- Honesty and Integrity in dealing with our families, payers, and employees

OUR TREATMENT PHILOSOPHY

The Lighthouse recognizes each client is a whole person made up of body, mind, and spirit. Through a comprehensive rehabilitation program by 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

Multi-disciplinary Team of Professionals
Strengths-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 of Service

24 hours a day 7 days a week
Services provided in frequency prescribed by treating physician

Fees and Funding Sources

Service fees are competitive with industry standard.
The Lighthouse participates with a variety of funding sources. Funding sources may include automobile insurance companies, HMOs, self-insured employer plans, or public payers such as State and local county payers.

PEDIATRIC ADMISSION CRITERIA

POLICY:

Admission to The Lighthouse Inc., Pediatric Program is contingent on the client's appropriateness for treatment.

PROCEDURE:

1. Persons Appropriate for Treatment:

- A. 17 years old or younger for pediatric program.
- B. In need of residential treatment with possibility of functional gains.
- C. Medically stable or with medical issues that can be managed in the residence as determined by the Registered Nurse.
- D. Able to participate in the program or tolerate the intensive rehabilitation process.
- E. Approval by administration/finance department.
- F. History of traumatic brain injury (accident, surgical, circulatory), orthopedic injury or impairment, neurological impairment, or be in need of other rehabilitation services.



Additional neuro-behavioral issues which may be included in residential assessment include cognitive impairment, and behavioral difficulties associated with traumatic brain injury (TBI) or other neurological disorder.

- G. Primary focus of treatment is for physical medicine, rehabilitation and/or behavioral management.
- H. Individuals with a support system involved who can assist in a realistic transition plan.
- I. Individuals who are willing to abide by the rules of the program including on and off campus privileges.
- J. The individual will be an appropriate personality match for the pediatric program. Attributes to be considered include but are not limited to: propensity for disruptive behavior, acuity of medical needs intensity of therapy services and need for coma stimulation programming as assessed by the Clinical Director or their designee.
- K. The individual does not require continual nursing care, isolation or medical restraints.
- L. An individual who has suffered a spinal cord injury (SCI) with a specified cause of the dysfunction.
 - a) All levels of SCI will be considered for admission.
 - b) All levels of SCI complete or incomplete dysfunction will be considered for admission.

c) Individuals with a spinal cord injury and a coexisting condition such as a traumatic brain injury will be considered for admission.

2. Prospective clients, guardians, and case managers are encouraged to tour The Lighthouse Inc. facility prior to admission to the program.

3. Prospective clients must show the financial resources and ability to meet the charges either by private pay, insurance, or other means.

4. The Clinical Director will annually review the admission criteria for continued appropriateness.

5. The Clinical Director will revise the admission criteria as needed and in accordance with the mission and the philosophy of The Lighthouse Inc. program.

6. The admission criteria will be documented for public disclosure.



PEDIATRIC ADMISSION POLICY

POLICY:

Prior to admission, an assessment of medical and rehabilitation needs is completed for each person.

PROCEDURE:

1. Individuals who are hospitalized and who have suffered a TBI or other diagnosis defined in the Lighthouse Admission criteria are evaluated by the Registered Nurse and assessed for the following:
 - Diagnosis and prognosis
 - Morbidity and co-morbidity
 - Pre-morbid level of functioning
 - Support system
 - Mental status
 - Ability to tolerate rehabilitation program
 - Infectious disease status
 - Eligibility within Lighthouse Admission Criteria Policy.
 - Medical History
 - Complications
 - Prognosis
 - Scope and intensity of recommended services
 - Estimated length of stay
 - Additional needs (i.e. equipment, dietary)
 - Behavioral patterns, such as agitation, aggression, impulsivity, self-injury, and sexually inappropriate behaviors
 - Funding
 - Potential of the person to benefit from services
2. Referrals to the Lighthouse programs are assessed on an individual basis. Referrals for individuals who have not suffered a TBI but meet admission criteria under different criteria may be approved by one of the staff psychologist as well as the management team.
3. Referrals (medical history and behavioral reports) may be reviewed by the Medical Director for his or her admission recommendation.
4. The referral source will be notified when the decision regarding admission is made.
5. If the individual meets the admission criteria for the Lighthouse, a written assessment plan, resident care agreement, and health care appraisal will be completed for all clients prior to or on the day of admission.
6. The Lighthouse encourages parents and guardians to visit the program prior to admission. This is promoted to allow the individual to become familiar with the program, personnel and outline the expectations of both the resident and the facility.

10 GREAT WAYS TO TREAT OTHERS

- 1 Use kind words.
- 2 Help when you can.
- 3 Share and take turns.
- 4 Listen to what others have to say.
- 5 Be honest and truthful.
- 6 Think before you speak or act.
- 7 Remember your manners.
- 8 Hold your temper.
- 9 Think about the feelings of others.
- 10 Work and play fairly.

10 Work and play fairly.

9 Think about the feelings of others.

8 Hold your temper.

PEDIATRIC PROGRAM TRANSFER CRITERIA

POLICY:

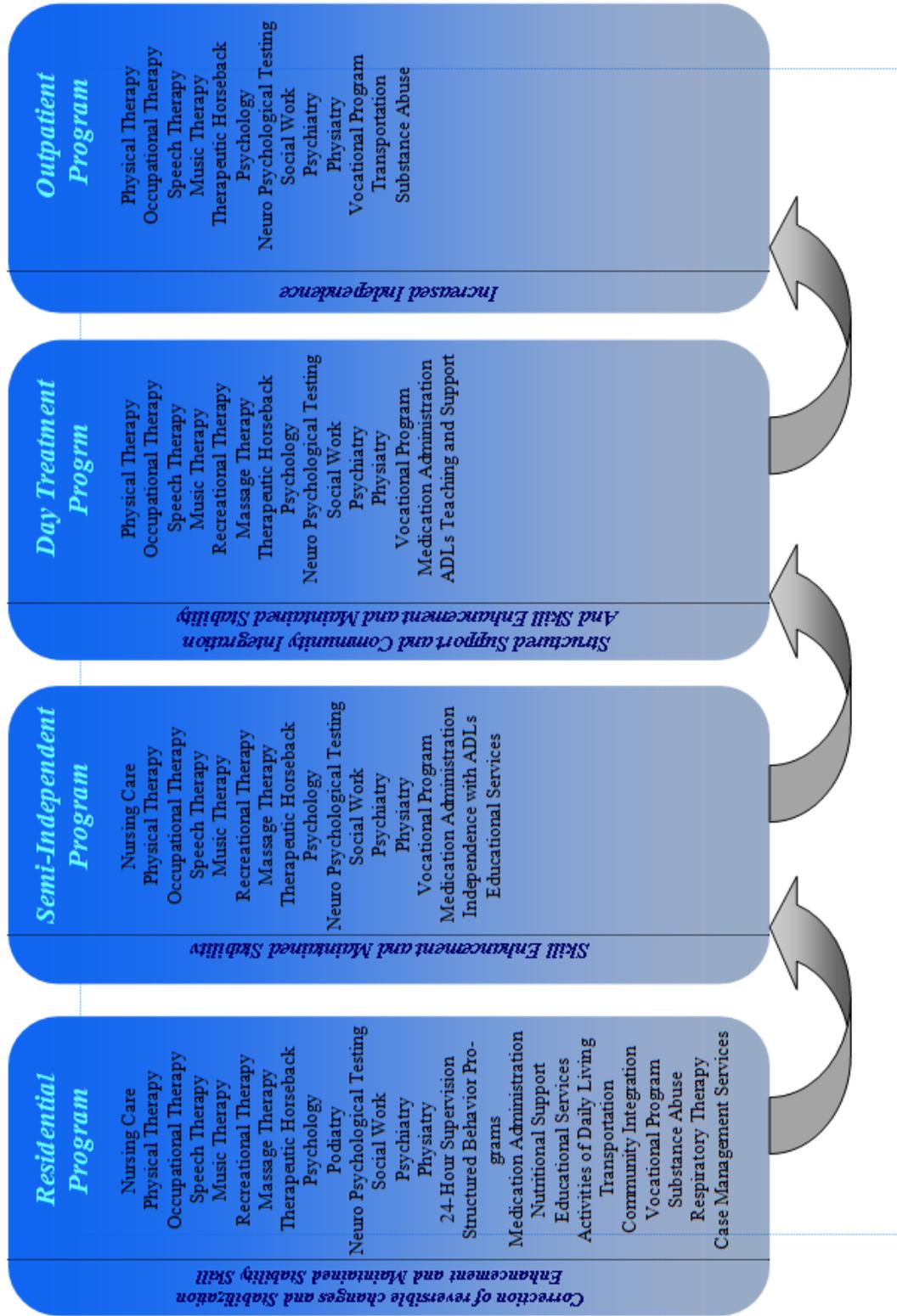
Transfer to a lesser or more restrictive level of care within the continuum of The Lighthouse, Inc. Program is contingent on the resident's age and appropriateness for treatment.

TRANSFER CRITERIA:

1. Individuals who have successfully completed the Pediatric Program or are aging out of the Pediatric Residential Program may be discharged home/community living arrangement, discharged to another facility, or transferred by discharge to the Lighthouse Adult Residential Program.
2. Transitioning an individual home is a multi-step process that provides for:
 - Family training
 - Coordination of school transition planning
 - Home visits: initially day visits and then over-night stays
 - Coordination of local resources
 - All individuals who have been discharged home or to a community living arrangement may be eligible to continue his or her treatment program with the Lighthouse on an outpatient basis or participate in our Day Program.
3. Individuals can transition to Outpatient programming when the following criteria are met:
 - a) The individual is able to complete their ADL's without staff assistance or they are accompanied by a support person who will attend the therapies with them provide the needed assistance in these areas.
 - b) The individual does not require supervision between therapies or has a support person who attend these therapies with them and who provides the needed level of supervision.
 - c) The individual is able to administer their own medication if it needs to be taken during therapy times or they are accompanied by a support person who is able to provide their medication for them.
 - d) The individual does not demonstrate significant maladaptive behaviors which will endanger themselves or others in the area. If the individual is prone to aggressive behaviors, they are accompanied by a support person who is able to address their behaviors in a manner which ensures the safety of all involved.
4. Residents who have achieved their treatment goals and who would benefit from additional structure and support during the day may be eligible for participation in the Day Programming.
 - a) The individual has achieved treatment goals and has the support of the treatment team regarding their ability to participate in the program.
 - b) The individual is discharged from residential to a community location, which is within traveling distance so that they are able to participate in the program without undue fatigue from the daily commute.
 - c) The individual does not demonstrate behaviors such as physical aggression or that prove to be a danger to themselves or others.

- d) The individual has the propensity to benefit from the structured programming and support offered by the day program.
 - e) The individual has appropriate support in their home setting which allows them to remain in that setting during weekends, and evenings.
5. Housing placement within the Lighthouse Adult Residential Program is dependent on, but not limited to:
- a) Age-appropriateness
 - b) Medical and rehabilitative needs
 - c) Behavior patterns
6. The supervised Adult Residential Treatment Program is the first step in the continuum of care. To transition from this program, the resident must meet the following criteria:
- a) Demonstrate behavioral or medical stability on all shifts, which allows for a reduction of enhanced staffing.
 - b) Recommendation from treating psychologist and/or Registered Nurse (RN) that the individual has reached a level of stability to receive reduction in enhanced staffing.
 - c) No significant aggression, other maladaptive behavior or medical decompensation within one week of the reduction in staffing.
8. Any individual who demonstrates a significant regression in maladaptive behaviors or medical instability may be returned to a more structured treatment status contingent on the recommendations of the individual's treatment team.

THE LIGHTHOUSE CONTINUUM OF CARE



CONTINUUM AND REFERRALS

POLICY:

It is the policy of The Lighthouse that each resident shall have access to all needed programming which shall be provided directly by the facility or through a coordinated referral to an external agency.

PROCEDURE:

1. The Lighthouse Continuum of Care allows for the provision of the following services internally:
 - Nursing Care
 - Physical Therapy
 - Occupational Therapy
 - Speech Therapy
 - Music Therapy
 - Recreational Therapy
 - Massage Therapy
 - Therapeutic Horseback
 - Psychology
 - Podiatry
 - Neuro Psychological Testing
 - Social Work
 - Psychiatry
 - Psychiatrist
 - 24-hour Supervision
 - Structured Behavior Programs
 - Medication Administration
 - Nutritional Support
 - Educational Services
 - Activities of Daily Living
 - Transportation
 - Community Integration
 - Vocational Program
 - Substance Abuse
 - Respiratory Therapy
 - Case Management Services
 - Chaplain Services
 - Independence with ADLs
 - ADLs Teaching and Support

Other Services Include:

- Inpatient Rehabilitation
 - Outpatient Program
 - Day Programming
 - On site primary care services
 - On site Psychiatry services
 - Long term care
 - Respite services
 - Assessment and Evaluation
 - 24-hour Trained Staff
 - Room and Board
 - 24/7 Nursing Availability
 - Pediatric Program
 - Pharmaceutical Services
 - Certified Job Coaches
 - Neuropsychological Testing
 - Individual Therapeutic Activities Program Services (ITAPS)
 - Supported Employment
 - Volunteer Employment in the Community and within the Campus
 - Recreational Activities
 - Coma Stimulation Program
2. The Lighthouse works closely with the following hospitals for emergent care and acute hospitalization services:
 - a. Caro Community Hospital
 - b. Hills and Dales
 - c. St. Mary's Saginaw

- d. Covenant Healthcare
 - e. Hurley Hospital
 - f. McLaren Bay Region
 - g. McLaren Lapeer Hospital
 - h. University of Michigan Ann Arbor
 - i. Veterans Administration Ann Arbor
3. The Lighthouse refers to Covenant HealthCare, Hills and Dales, and St. Mary's of Michigan for the provision of hospitalization care.
 4. The Lighthouse provides referral services to Heartland Home Health and Hospice Home Advantage for the provision of home health or hospice services when needed.
 5. Referrals for neuropsychological services are made with Dr. Pintar, Dr. MacInnis, or Dr. Stucky with whom The Lighthouse has a close working relationship. Referrals for other neuropsychological services are set up upon request by residents, guardians and/or case managers.
 6. The Lighthouse nursing personnel and the internal case manager are responsible for facilitating communication between external service providers and the facility. PIN numbers are obtained for residents who are hospitalized and Lighthouse nurses remain in close communication with hospital nurses regarding resident progress and needs.
 7. The Lighthouse provides staffing for residents who are hospitalized and provide education for personnel providing treatment regarding each individual's needs and preferences. Lighthouse staff accompanies all residents to medical appointments internally and outside of the facility. The accompanying staff is responsible for providing education to the medical providers regarding the client's injury, preferences and possible behavioral concerns.

Referrals come to the Lighthouse from a wide variety of community and personal sources, including hospitals, case managers, families, Community Mental Health Groups, and Department of Human Services. Each inquiry is evaluated by the administration with recommendations based on the individual's specific needs. Referrals to other agencies or community support services are suggested if admission is not deemed appropriate to the Lighthouse.

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.

The Lighthouse does not discriminate in the provision of service to clients based on race, cultural backgrounds, religion, gender, or sexual orientation. Cultural factors are taken into consideration when designing the Lighthouse program to meet specific cultural needs.

PEDIATRIC DISCHARGE CRITERIA

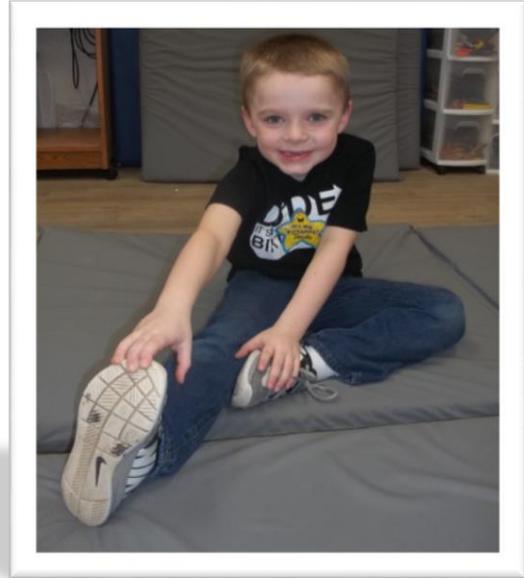
POLICY:

It is the policy of The Lighthouse that discharge planning is addressed by the interdisciplinary treatment team. The team provides comprehensive evaluation and treatment with the goal of facilitating the resident's reintegration into the community.

PROCEDURE:

1. Successful Discharge:

- A. The Resident has received maximum benefit from the program.
- B. The client has been evaluated by the treatment team and it has been determined that the individual no longer requires residential services due to the completion of treatment goals or by consensus of the team that goals will not be achieved in this program.
- C. The resident has improved to a level that allows discharge to a different environment, supervised or non-supervised.



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 or the individual, responsible party or other stakeholders have determined transfer to a different treatment facility is needed due to client choice or financial limitations.

3. Discharge Against Medical Advice (AMA):

- A. A client and/or their responsible party wishes to discharge the client from services against the advice of the treatment team and without adequate discharge planning.
- B. 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 resident experience a major medical or psychological problem that excludes resident benefits from a continued intensive rehabilitation program.
- B. The resident has not successfully attained treatment goals and the client or guardians were noncompliant with agency policies or treatment team recommendations.
- C. The resident ability to tolerate the program has been modified and a different setting is needed.
- D. The resident and/or their support system are no longer confident in the program.
- E. The overall goal of the person's program has changed so that residential program is no longer the best use of a person's resources.

5. The Clinical Director will annually review the discharge criteria for continued appropriateness.
6. The Clinical Director will revise the discharge criteria in accordance with the mission and philosophy of the Lighthouse Inc. program.
7. Individuals who are diagnosed with a spinal cord injury will be assessed for specific discharge needs related to their level of injury and completeness of spinal cord dysfunction.
8. The discharge criteria will be documented for public disclosure.

PEDIATRIC DISCHARGE CRITERIA

Spinal Cord Injury (SCI)

POLICY:

Every discharge plan is different and reflects a resident's unique personal and social situation. Recovery from a Spinal Cord Injury often requires people to receive ongoing therapy after discharge.

Discharge plans fall into one of four (4) categories:

- a) Discharge home with a referral for home-based rehabilitation services
- b) Discharge home with a referral for outpatient therapy or Day Program services, or
- c) Discharge to another facility.
- d) Unsuccessful discharge

The Lighthouse Interdisciplinary treatment team will address discharge criteria and document discharge recommendations which include each resident's etiology of injury, level of spinal cord injury, and completeness of spinal cord dysfunction.



PROCEDURE:

1. Discharge home:
 - A) The resident has met the goals established on admission or during the course of rehabilitation.
 - B) The resident has reached his/her maximum potential benefits for residential rehabilitation or his/her clinical status has improved. Discharge to home is appropriate, as the resident's needs may be safely met by another agency or service in the local community.
 - C) Completion of discharge planning may include: providing necessary durable medical equipment and prosthetics; establishing a safe discharge destination and support system; preparing the person served and significant others through education; scheduling follow-up appointments and communicating with other providers for medical, therapeutic, or other required services.
 - D) Documentation completed by the treatment team will include: the etiology of the injury, the level of spinal cord injury, and the completeness of spinal cord dysfunction.
2. Discharge with subsequent transfer:
 - A) The resident experienced a significant medical, surgical, or psychological problem requiring acute medical care or another service.

- B) Transfer facilitated by appropriate personnel in coordination with the treatment team.
3. Discharge against Medical Advice (AMA):
 - A) A resident or their responsible party wishes to discharge the resident from services against the advice of the treatment team and without adequate discharge planning.
 - B) The resident 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) Treatment team has reached a group consensus that the resident is unwilling or unable to participate in the rehabilitation program.
 - B) The Lighthouse Inc. reserves the right to discharge individuals who violate organizational policies and procedures or who decline to participate in the agreed upon plan of care.
 - C) The resident has not demonstrated evidence of improvement in functional abilities or his/her clinical status.
 - D) The overall personal goal of the resident's program has changed so that residential program is no longer the best use of a person's resources.

 - E) The resident's guardian or support system act in a manner which demonstrates a lack of trust in the treatment program, thus impeding the ability of the resident to benefit from the program.
 5. The Clinical Director will annually review the discharge criteria for continued appropriateness.
 6. The Clinical Director will revise the discharge criteria in accordance with the mission and philosophy of the Lighthouse Inc. program.
 7. Individuals who are diagnosed with a spinal cord injury will be assessed for specific discharge needs related to their etiology of injury, level of injury, and completeness of spinal cord dysfunction.
 8. The discharge criteria will be documented for public disclosure.

INDIVIDUALIZED EDUCATIONAL PROGRAMMING



We have five schooling options for our residents:

1. Highland Pines
2. The Lighthouse On-Site School
3. Caro Community Schools
4. Grand Traverse Community Schools
5. In-Home Schooling



1. Highland Pines

Highland Pines is part of the Tuscola Intermediate School District. This is a center based program for clients with cognitive, behavioral, and/or multiple physical impairments which prevent them from participation in the local school district



2. Lighthouse On-Site School

The Lighthouse on-site school is part of the Tuscola ISD and is located on Lighthouse grounds. The school day is Monday through Friday, 8:30am-2:30pm; transportation is provided by the Lighthouse. A structured visual schedule is followed and Lighthouse employees are classroom aides to promote a consistent transition from residential homes to school.

There are two classrooms:

- One classroom is for Cognitively Impaired students that are behaviorally unable to attend Highland Pines.
- The second classroom is Emotionally Impaired for students that are cognitively appropriate for the local school district (Caro Community Schools), but behaviorally are unable to be successful in the public school setting.



The Lighthouse School cannot award diplomas; however, they can make recommendations for credit upon transfer to a public school setting. In addition to pen and paper tasks, individualized online learning paths are created to promote credit recovery, when appropriate, by using the Compass Learning program. These credits are accepted by our local school district, Caro.

The Lighthouse School has a focus on GED prep, for students who are appropriate for this educational path. If a student is cognitively appropriate for Caro Schools, but struggles behaviorally, our goal at the Lighthouse School is to work on behaviors so that academics can be focused on. When behavioral stability is achieved, the goal is to transition the student into Caro Schools on a slow and gradual

basis to better ensure success in that setting.

The Lighthouse individualized behavior plans are utilized in this setting. These programs are enhanced by the MIBLISI positive behavior program in the school setting which encourage students to be safe, be a friend, and be responsible. The purpose of the MIBLISI program is to promote learning through the use of positive reinforcement throughout the student's day while at school and in the community.

Students participate in swimming and gym classes at a local center-based school on a weekly basis. In order to promote independence, the students have the



opportunity to participate in cooking, cleaning, grocery shopping, meal preparation, and visiting community buildings.

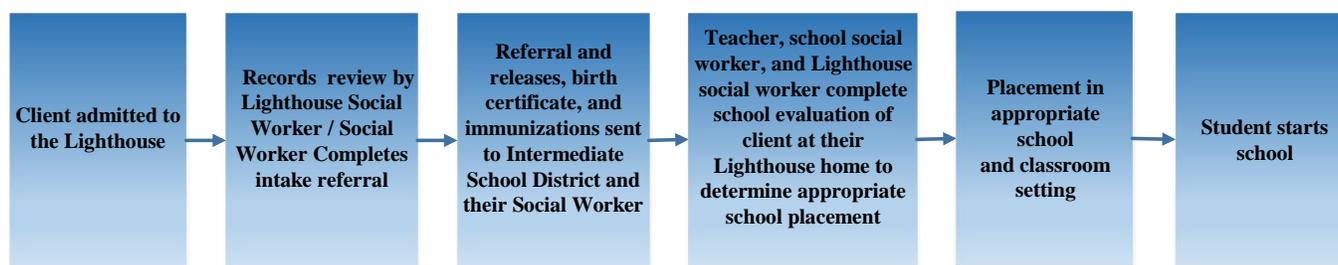
3. Caro Community Schools

This local public school district is for our residents who are cognitively appropriate to work on a high school diploma, and are behaviorally stable to be successful in this setting.

4. In-Home Schooling

Tuscola ISD also provides 2 non-consecutive hours of schooling at the resident's home for clients that are unable to participate in any of the above schooling options behavioral, medical, or other identified reasons.

Student Referral Process



ADDITIONAL PROGRAMS AND SERVICES

The Lighthouse Therapeutic Riding, Hippo-Therapy Program And Equine Facilitated Therapy Program

At the Lighthouse, we offer Therapeutic Riding, Hippo-therapy and Equine Facilitated therapy to residents of many different needs and abilities. The Lighthouse owns four horses, all of whom are housed and cared for by a full time barn manager at our facility. The program is organized and overseen by a Certified Recreation Therapy Specialist, who is pursuing Professional Certification as a member of the Professional Association of Therapeutic Horsemanship International (PATH certified). PATH



International is the credentialing organization for accrediting centers and certifying instructors and equine specialists.

There are several therapists at the Lighthouse who work with the Equestrian program, including Physical Therapy and Occupational Therapy therapists who are Hippo-therapy certified. The Lighthouse also employs an occupational therapist certified in Hippo-therapy. Our psychology and social work departments also hold sessions at the barn, where bonding with the horses assists in building confidence and enhancing communication skills. During therapeutic riding sessions with Recreation Therapy (CTRS), residents learn skills to become more independent while working with and riding horses, which will aid them towards continual progress of their individual goals and objectives.



In order 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. Waivers are updated annually. The program has adaptive equipment for riding; each participant is fitted for a helmet and gait belt. At the Lighthouse, we are committed to finding the equipment and horse that the best fit for the resident and will facilitate positive therapy outcomes.

The equestrian program is offered to residents all year long. The riding season is May 1st through October 31st of each year.

Many of the therapists take advantage of the “grooming” portion of the program, and bring residents to the barn in the off season for some time outside of the therapy center. Grooming sessions create a unique opportunity for our residents to get up close and personal with a horse, while learning about equine care and creating a special bond.

Orthotics and Prosthetics

Prosthetics and Orthotics is the assessment, production, and custom fitting of artificial limbs and orthopedic braces. The Physical and Occupational Therapists manage the comprehensive training and education of Orthotic and/or Prosthetic devices for resident care by using the following plan of care:

Resident Assessment

- Perform a comprehensive assessment of the resident
- Obtain an understanding of resident's orthotic/prosthetic needs

Form/Manage Treatment Plan

- Consult with orthotist/prosthetist
- Create a comprehensive orthotic/prosthetic treatment plan to increase stabilization and function
- Diagnostic fitting
- Assessment of intervention

- Functional exercise plan
- Gait training
- Functional training for daily living
- Patient education and instruction

The Lighthouse’s network of providers includes an Orthotist and Prosthetist. An Orthotist is sent a list of weekly needs from the Lighthouse and a prosthetist comes out to our campuses on an as needed basis.

Vocational Program

The Lighthouse, Inc. provides a full continuum of vocational services to residential and day programming participants. These services include a pre-vocational workshop, Level I and Level II (paid, on-site, enclave services), and community based paid employment. In addition, the Lighthouse facilitates volunteer employment for residents who demonstrate an interest in working within a specific realm where paid employment may not be available. The Vocational Program provides educational support for completing applications, writing resumes, and interview skills. The following levels of the Vocational Program assist each resident’s needs in exploring individual career opportunities by identifying interests, skills, abilities, limitations, and alternate ways to perform each job task given to them.

The Lighthouse Pre-Workshop

The Lighthouse has a pre-vocational workshop. This program offers training and the opportunity to develop the skills needed to return to community based employment.

This level works on:

1. Life training skills
2. Projects, crafts, and activities to enhance the quality of leisure time and promotes social skills
3. Attendance and motivation to complete simple tasks and individual projects

The Lighthouse Enclave Program

If a resident completes the pre-vocational workshop, they are then able to move to the Enclave Program. Advancement to the Enclave Program is decided by the Lighthouse team. The Enclave program provides the resident with the opportunity to participate in several different jobs around the Lighthouse campus. These jobs include landscaping, car wash, janitorial work, and animal care. Residents are able to be trained by experienced staff and learn new skills, while being paid. Level I and Level II offer different supervision with the goal of successfully achieving the skills needed for the resident to advance to the next step of employment. Enclave training includes:

1. Attendance
2. Decreasing amount of verbal and physical cues needed to finish a job task thoroughly
3. Motivation
4. Time management
5. Initiative
6. Good work ethic such as appropriate social interaction when working with peers and their supervisors
7. Appropriate dress
8. Individual needs for support



9. Decrease amount of supervision needed
10. Provide job description and set goals
11. Problem solving skills

Assistance Seeking Employment

Once a resident has met the requirements from the Vocational Enclave program, the team will assess each resident individually to decide when it is appropriate to begin the community job search process. The Lighthouse Supportive Employment Services assists each individual in seeking community based employment by supporting accommodations needed for the individual, helping to expand their professional skills, and continuing to set and meet personal goals. Provide support include:

1. Proficiency in compiling needed information to complete a resume
2. Resume writing
3. Gathering, completing, and turning in job applications
4. Interview needs
 - A. Appropriate dress
 - B. Practice interview questions and answers
 - C. How to present yourself as an individual
5. Compile a profile appropriate to a resident's needs and interest

Volunteer and Community Employment

The Lighthouse offers the support residents need to be successful in maintaining employment. Some placements are independent, with the resident performing their duties under normal supervision. Other jobs require a job coach to be assigned to work with the employee, to train, prompt, and supervise the resident/employee. Job coaches will recommend and promote alternative methods to complete difficult tasks and duties. At this level of employment, support is continued in all areas of the job, with the goal for residents to be successful in community based employment

Vision Therapy

The Lighthouse Rehabilitation Center offers a Vision Therapy Program. Often visual problems resulting from Traumatic Brain Injury are overlooked during initial treatment of the injury. Frequently these problems are hidden, lengthening and impairing rehabilitation. Vision is the most important source of sensory information. Consisting of a sophisticated complex of subsystems, the visual process involves the flow and processing of information to the brain. Because there is a close relationship between vision and the brain, Traumatic Brain Injury can disrupt the visual process, interfering with the flow and processing of information. The result is a vision problem. Symptoms indicating a vision problem are:

- | | | | |
|--------------------------|--------------------------|--------------------------|----------------|
| <input type="checkbox"/> | Blurred vision | <input type="checkbox"/> | Double vision |
| <input type="checkbox"/> | Sensitivity to light | <input type="checkbox"/> | Aching eyes |
| <input type="checkbox"/> | Reading difficulties; | <input type="checkbox"/> | Headaches |
| <input type="checkbox"/> | words appear to move | <input type="checkbox"/> | with visual |
| <input type="checkbox"/> | Comprehension | <input type="checkbox"/> | tasks |
| <input type="checkbox"/> | difficulty | | Loss of visual |
| <input type="checkbox"/> | Attention and | | field |
| | concentration difficulty | | |
| | Memory difficulty | | |

Good visual skills are necessary for efficient information processing. When processing visual information is difficult, one may "try harder," straining without even knowing it because the effort is subconscious. If the visual system is inefficient, every task can seem difficult, using more energy than required. Visual skills affected by Traumatic Brain Injury include but are not limited to: tracking, fixation, focus change, depth perception, peripheral vision, binocularity, maintaining attention, visualization, near vision acuity, distance acuity, and vision perception (The Optometric Extension Program, 2013).

Vision therapy can develop and/or improve basic visual skills and abilities, as well as the comfort, ease, and efficiency of eyesight, enjoyment of reading and visual thinking as well as many other activities in daily living.

Initially an occupational therapist will complete a visual screening. If necessary the resident will be referred to an optometrist for further evaluation. Once seen by the optometrist, the occupational therapist and optometrist will collaborate together and treat the visual deficit.

Vision Therapy Modalities:

- Prescription lenses
- Therapeutic lenses
- Prisms
- Optical filters
- Eye patches or occludes
- Electronic targets with timing mechanisms
- Computer software
- Vestibular equipment
- Structured activities that enhance visual perception



The occupational therapist will work with a multidisciplinary team including physical, speech, recreational, and music therapists in order to address the visual perceptual and visual motor components, including but not limited to balance; vestibular, cognition, and comprehension. The occupational therapist will develop a treatment plan targeting visual deficits and formulate measurable goals in order to achieve functional outcomes. The treatment plan will be evaluated approximately every 12 weeks in order to measure progress and to adjust the treatment plan to meet resident's goals. Residents will typically be seen for 30 to 60 minute sessions 1-3 times per week, with flexibility to meet each resident's specific needs.

Other Services

Phlebotomy services are provided by the Lighthouse. With the convenience of on-site phlebotomy, residents are able to follow doctor orders for lab work efficiently.

OUR TREATMENT TEAM

Executive Director

Our Executive Director has over 30 years of experience with Traumatic Brain Injury, first as mother and the 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.

Clinical Directors

Our Clinical Directors oversee the clinical therapeutic environment and consult on various professional issues. The Clinical Directors work in conjunction with other team members on developing and maintaining treatment plans. Clinical Directors assist the Executive Director in the decision-making processes of the Lighthouse.



Medical Directors

The Medical Directors provide leadership in establishing a basis for medical treatments for inpatients, outpatients, and day programmers. They oversee each client's medical regimen, providing guidance in the development of a comprehensive medication utilizing the least amount of medications possible. The Medical Director advocates

for individuals with activity and other limitations. They provide psychiatric consultation services and involves persons served, families, and/or significant others in education regarding identified diagnosis and treatment recommendations. They also help the organization's adherence to the ethical conduct by assisting the nurses, psychologists and social workers.

Rehabilitation Directors

The Rehabilitation Directors collaborate with the treatment team, and define the composition and duration of the individual's treatment program. They ensure the plan of service is consistent with individual predicted outcome.

Psychologists

The Psychologists provide individual psychotherapy dealing with such issues as social-emotional adjustment, frustration tolerance, anger management, brain injury education, coping skills, and deficit awareness. They help design and monitor individual behavior programs. Supportive counseling to families as well as consultation to staff is also made available from the Psychologists.

Social Workers

The Social Workers provide supportive therapies, including individual and group, to the client and family to facilitate social and emotional adjustment. Social Workers provide education on TBI to residents and families. They work with the psychologist and therapists to formulate, coordinate, and implement individual plans of



services and provide a link that ensures the involvement of family members and/or responsible parties. They also provide school liaison services to ensure a comprehensive educational program is established for every child and adolescent.

Registered Nurses



The Registered Nurses are responsible for all administration and supervision of the medical aspects of the Lighthouse program. They provide nursing assessment and care, participate in treatment planning, and work directly with clients. The Nurses provide and coordinate the medical and psychiatric services for the residents by consulting with the Executive Director, Clinical Director, Medical Director, and the Psychologists. They oversee the administration of daily medications as well as manage the medical services for residents by administering and/or supervising special medical procedures as directed by the physician.

Physical Therapists

The Physical Therapists use a variety of evaluative and treatment approaches to help clients achieve the fullest potential possible. Emphasis is placed on function, strength and quality of movement. Assistive device evaluation is also provided.

Our Physical Therapists evaluate each client and design a treatment program which may include the following:

Aquatic Therapy in the Rehab Pool

- Individual Therapy Session

Manual Therapy

- Mobilization of the spinal, extremity, soft tissue, and myofascial release techniques

Exercise Programs

- Therapeutic, postural, progressive resistive exercises
- Neuro muscular reeducation
- Stabilization programs

Modalities

- Ultrasound
- Muscle and Low Voltage Stimulation
- High Voltage Galvanic Stimulation
- TENS



- Moist Heat/Ice Pack
- Traction
- Muscle Reeducation
- Wheelchair Management and Training
- Therapeutic Massage
- Phonophoresis
- Combo therapy (Ultrasound & Electrical)
- Paraffin Wash Bath

Gait Training

- Non-weight Bearing
- Partial Weight Bearing
- Weight Bearing as Tolerated
- Orthotics
- Prosthetics
- Pedorthic

Balance Training

- Standing
- Sitting
- Dynamic Balance

Physical Therapist Assistants

Our Physical Therapist Assistants work closely with the Physical Therapists to assist the clients in increasing independence with movement of extremities. Focus is placed on balance, posture, function, strength and quality of movement.

Occupational Therapists

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 client obtain maximum potential.

Our Occupational Therapists assist individuals with the task of improving 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-Perceptual Retraining

- Visual-perceptual and visual-motor skills such as eye hand coordination



- Visual scanning and localization
- Cognitive skills such as Organization & planning, gathering & processing information, functional math and money management, reasoning and problem solving for real life situations.

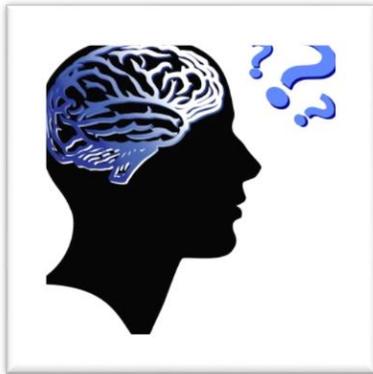
Activities of Daily Living Skills

- Relearning daily activities such as eating, bathing, dressing, grooming, home management, community living skills, adaptive equipment
- Compensatory strategies for Physical and Cognitive dysfunction
- Transfer training from chair, bed, tub, shower, and car

Neuro Re-education

- Balance, head, neck, trunk control coordination, range of motion and strengthening for impairments in upper extremity function,
- Endurance
- Cranio-Sacral/Myofascial release techniques
- Sensory Interpretative techniques

Speech Therapists



Speech Therapists work with residents with impaired cognitive and communication skills impaired by brain injury or other disorder. The Speech Therapist help to restore or compensate for lost speech, language, cognitive, and swallow functioning. When oral communication is unattainable, the speech therapist helps the client learn to use alternative communication methods. Speech Therapists assist individuals with difficulties in swallowing, speech, thinking, understanding, cognition and communicating effectively in the following techniques:

Treatment Techniques

- Articulation
- Dysarthria/apraxia
- Voice/fluency
- Oral motor exercises

Language Therapy

- Verbal expression
- Receptive language
- Programming skills

Attention/Augmentative

- Setting up communication device and management

Cognitive Therapy

- Memory,

- Problem solving and reasoning
- Executive functioning
- Mental flexibility
- Planning and organization
- Attention to task
- Information processing
- Orientation
- Dysphasia treatment

Recreational Therapists

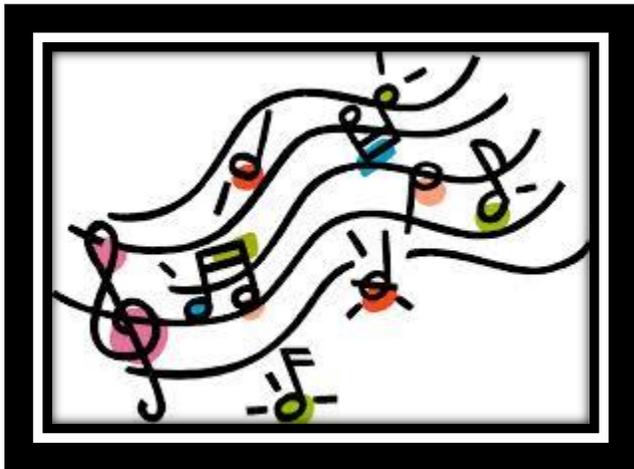
Recreational Therapists strive to meet rehabilitative and leisure needs of all persons limited in opportunities by training and equipping the client to achieve his/her optimum level of abilities. They provide opportunities for success by engaging in activities of creative self-expression, social development, self-awareness, and learning intellectual development essential to the rehabilitation process and community reintegration



Massage Therapist

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 for many different reasons. Among the reasons for massage therapy is 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 Therapists



Music is an ideal therapeutic tool because of the special place it holds in our day-to-day lives. We all use many forms of musical experience (listening, playing instruments, singing, moving to music, creating and discussing music to relax or energize) to teach, to express feeling, to stimulate memories and to bring us closer to one another. The Music Therapists are trained to structure all these aspects of music experience to improve communication and to promote social, emotional, motor and cognitive development.

Vocational/Workshop Directors

Vocational and Workshop Directors are specially trained in vocational development, supportive employment, job coaching, and time management studies. The Lighthouse has a Vocational program that addresses vocational development, supportive employment, job coaching, and time management studies. Clients are individually evaluated for strengths, weaknesses, and abilities as related to employment

potential. The Vocational and Workshop Directors participate in interdisciplinary team with insights into the functional areas of the clients.

Rehabilitation Aids

The Rehabilitation aides provide quality personal care, implement behavior plans, structure activities, attend medical appointments, assist in the completion of therapeutic activities and provide ongoing supervision and support. Based on the client's medical acuity the Rehabilitation Aids who receive additional training provide extra care for trachea, IV antibiotics, bowel and bladder training, ensuring client follow the dietary and dysphasia guidelines.

Home Managers

The Home Managers work with the interdisciplinary team to effectively manage the residential homes to oversee all resident care needs. They ensure the provision of quality personal care, implement behavior plans, oversee activity schedules, attend medical appointments, manage medication administration, assist in the completion of therapeutic activities, and provide ongoing supervision and support to motivate staff to do their best. Home Managers effectively oversee the day to day operation of the home on a variety of different ways including in keeping the homes clean and orderly as well as coordinating the transportation needs of the residents.

Medication Technicians

The Medication Technicians work with the interdisciplinary team to effectively administer medications appropriately and accurately. Medication Technicians assist the Home Managers in the day to day operations of the home. They provide quality personal care, implement behavior plans, structured activities, attend medical appointments, assist in the completion of therapeutic activities, and provide ongoing supervision and support. Medical Technicians follow all doctor orders pertaining to medication needs for residents. They oversee all relevant documentation of medication distribution to each resident. Based on the client's medical need the Medication Technicians will receive additional training to provide extra care for trachea, IV antibiotics, bowel and bladder training, as well as dietary and dysphasia guidelines.

Rehab Specialists

Our Rehab Specialists provide leadership in coordinating the complex rehabilitation services of inpatients, outpatients and day programmers. They are responsible for the assessment of rehabilitation needs for identified residents and present findings in a manner understandable to the person served for prognosis and discharge. They work in collaboration with the treatment team in defining the duration of the individual's treatment program to help ensure the plan of service is consistent with the individual's predicted outcomes. The Rehab Specialists also provide medical care directly or through arrangements with other physicians. This includes care for continuing, unstable or complex medical conditions.

Community-based Services

Community-based services aid our aging community and individuals with physical and cognitive deficits to maintain independence, to the fullest extent possible. Maintaining one's independence may mean remaining in the comfort of one's own home or residing in a semi-independent living arrangement. Community-based services may be provided by a number of service providers.

Region VII Area Agency on Aging: Partner with local organizations to provide....

- Access Services
- Community Services
- In-Home Services

Thumbody: Public transportation providing service to....

- Caro
- Indianfields Township
- Almer Township
- Limited service to Cass City, Mayville, and Vassar

Fresenius Medical Care: Offers dialysis treatment and support for individuals living with chronic kidney disease and ESRD.

- Caro

