

## **ADMISSIONS CRITERIA**

The admissions process takes time to complete. The time spent is well worth the effort to match residents with a cohesive, healthy environment. Family and close friends are welcome to help encourage the resident to adjust to their new and exciting lifestyle. To assist you in this process, we encourage you to use the useful list below.

Prior to your appointn following documents:	nent with our Director of Healthcare Services or RN, you will need to fill out the
ioliowing documents.	Residency Application
	Pre-Admission Health Examination Form
	Initial Health Assessment (from your own physician)
	Pre-Admission Comprehensive Assessment completed by our RN
	Financial Documents (when applicable)
	Risk Agreement
	Service Agreement
	Resident Release of Information Form
	Lease Agreement/Rental Agreement
	Reservation and Deposit Check
	ven a Residency Application Package and a Resident Handbook, some of the can be found in there. The day of your appointment for residency, please bring
	Copy of Power of Attorney documents, durable & healthcare
	Consent & Resident Release of Information Documents
	Resident's Rights & Grievance Acknowledgement
	Resuscitation/Hospitalization Status Memo
	Copy of Insurance Card(s) – Medicare, Medicaid (T19), Blue Cross, AARP, etc.
	Medication Listing, Dosage and Administration Requirement
	Emergency Contact Information / Family & Friends (phones and addresses)
	New suite Phone#:

Autumn Fields will not consider residents who demonstrate or require the following:

- Mental, physical, psychiatric or social needs that are not compatible with Autumn Fields (staff, residents, policies and procedures).
- Destructive behavior of property or self, or uncontrollable physical or mental abuse to others
- Medically unstable or requiring a tube feeding system
- Anyone with a trachea
- 24 Hour supervision by a RN or an LPN
- Chronic personal care needs that cannot be met by Autumn Fields or a community agency
- Confined to bed by illness or infirmities