



COHESIVE HEALTHCARE MANAGEMENT & CONSULTING

Mangum Regional Medical Center

| | | | |
|---------------------------------|----------------|-------------|--|
| TITLE: | | POLICY: 100 | |
| Rehabilitation Standards | | | |
| MANUAL | EFFECTIVE DATE | REVIEW DATE | |
| Rehabilitation | | | |
| DEPARTMENT | REFERENCE | | |
| Rehabilitation Services | | | |

SCOPE: Standards of practice relating to Rehabilitation Services.

PURPOSE: To outline and maintain the Rehabilitation Services policy as it relates to standards of practice.

POLICY: Rehabilitation Services will adhere to specific standards in order to provide guidance to therapy services within each rehabilitation department.

PROCEDURE:

1. Rehabilitation Services consists of professional, paraprofessional and support staff whose qualifications are determined by discipline specific practice acts and State and Federal regulations/guidelines.
2. The goal of Rehabilitation Services is to help patients reach their maximum functional level. This is done through evaluation and patient specific plans of treatment/care.
 - a. The therapist determines if services are reasonable and necessary under accepted standards of practice; and are specific and effective treatment for each individual patient’s needs and conditions.
 - b. There is interdisciplinary collaboration with other care providers for the integration of the comprehensive treatment or care plan. The plan of care is communicated through direct and indirect systems (e.g. team meetings, report writing, in-servicers, family education, and discharge planning, etc.)
 - c. Rehabilitation programs provide education to patients, families, and staff. There is an expectation that the condition of the patient will improve within a reasonable and predictable period of time (i.e. specified number of treatments). Under accepted standards of practice, treatment programs will be specific, effective, and reasonable for the patient’s condition, including the amount, frequency, duration, and type of treatment provided. In addition, the rehabilitation staff participates in equipment selection and supplies and systems that facilitate the attainment of the rehabilitation goals.

3. Services are provided based on receipt of physician orders/prescription from an individual holding a license authorized to prescribe therapy services for evaluation and treatment if indicated. Furthermore, treatment clarification orders will be obtained from the referring physician/providers for all patients served by rehabilitation, under the following conditions.
 - a. Any time the therapist has questions regarding diagnosis, precautions and/or treatment, or the reason for referral is unclear to the therapist.
 - b. Orders are not legible
 - c. Prescription is not dated
 - d. Prescription is not signed by referring physician/provider
4. Rehabilitation Services will participate in the facility's quality improvement program to monitor the quality of important aspects of patient care. Scope of review can include, but is not limited to, clinical supervision, technical documentation, and quality treatment plans. After identification of problem areas and trends are made, necessary changes in service delivery are planned and implemented by rehabilitation staff.
5. Guidelines for utilizing rehabilitation staff is based on the following:
 - a. Therapy services require clinical diagnosis, patient care plans, formal evaluation process, active treatment plans and collaboration within the inter-disciplinary team.
 - b. Rehabilitation personnel with appropriate licensure, certification, education, knowledge, experience, competence, technical skill and motivation will be utilized.
 - c. The rehabilitation staff must have the experience and knowledge to meet the needs and expectations of the patient.
6. All clinical rehabilitation staff are licensed or certified by the appropriate state licensure board (PT, PTA, OT, COTA, SLP, ATC, and Kinesiologist). Records of current licensure, certifications, and registrations are maintained on file in the rehabilitation department or with human resources. All rehabilitation staff are employed based on individual qualification and abilities without regard to race, creed, social-economic status, culture, background, political belief, national origin, gender, or age.
7. Rehabilitation services provide limited representation at appropriate committee meetings based on the potential and need for contribution. Involvement may include, but is not limited to:
 - a. Quality improvement
 - b. Safety

- c. Infection control
 - d. Accidents, incidents, and falls
 - e. Restraint reduction
 - f. Wound care
8. Rehabilitation services endeavors to provide:
- a. Clinical staff to evaluate and/or screen all admissions; and if appropriate, to initiate a plan of treatment
 - b. A clean, safe, healthy environment. Utilization of appropriate infection control procedures, including universal/standard precautions.
 - c. Functional level assessment using appropriate evidence-based evaluation assessments/techniques.
 - d. Adherence to standards of privacy, confidentiality, and patient’s rights.
 - e. Ongoing assessment to the patient’s responsiveness to treatment, and modification of plan of care as needed and necessary.
 - f. Patient, family, caregiver, and staff training/education as indicated by the plan of care.
 - g. Discharge planning as an integrated, interdisciplinary process.
 - h. Family conferences, staffing, care planning, and scheduled therapy in-services.
 - i. Patient involvement in the rehabilitation process including, but not limited to evaluation, assessment, planning, and goal setting for implementation of their rehabilitation treatment plan to the fullest extent of their capabilities.
9. The staff of rehabilitation services is expected to be able to exercise judgment based on training, education, and experience in deciding what is appropriate for the individual patient, following each individual discipline’s code of ethics and practice acts/standards.
10. The rehabilitation staff acknowledges and support Resident’s Rights and are proactive promoters of that policy within the facility.

ATTACHMENTS

REVISIONS/UPDATES

| Date | Brief Description of Revision/Change |
|------|--------------------------------------|
| | |