



ANNUAL REPORT 2023

Inpatient Rehabilitation

<https://www.cincinnatichildrens.org/service/p/physical-medicine-rehab/inpatient-rehabilitation>

<https://www.facebook.com/ChildrensInpatientrehab?ref=hl>



Note from the Medical & Clinical Directors

Over the years, we have highlighted our various CARF accredited programs, the success of our surveys, and some of the challenges we have faced - particularly during the pandemic years. We realize, though, the development and success of our programs is highly contingent upon the efforts of our staff. Although this year, we have seen some of our staff head west to pursue some pretty exciting, professional opportunities, we have experienced good staff retention for our programs. This has been particularly helpful in maintaining the momentum of our specialty programs.

Our specialty teams continue to meet on a quarterly basis, with specific goals created to help keep their focus on what is important, as well as maintain CARF standards for their own areas. Clinical directors (rehab attendings) continue to lead each of these teams, and are responsible for quarterly report outcomes, action plans and strategic goals to our Operational Excellence Team. As a result, our teams continue to develop and work on projects which make a difference to the quality of our services. As you will see in our report, they truly have many accomplishments, and significant goals for the coming year.

On a more personal level, some of our staff have also sought out certifications in pediatric nursing and in brain injury certifications. Also, our FIRST program continues to develop professional papers and make presentations within the community and across the nation.

As a result of our efforts, we believe we have raised the level of our overall family satisfaction scores....98% of all 9's and 10's.....an amazing accomplishment! In the coming year, we will continue to monitor and assess the specific needs of each of our programs, so we challenge the norm and continually reach for greater things. Our patients and families deserve that.

Please take a few moments to take a look at our year in review, and we think you will agree we have much to celebrate.

David Pruitt, MD
Medical Director
Inpatient Rehabilitation

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Clinical Director
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PEDIATRIC SPECIALTY PROGRAM FY23

Highlights

Patients Admitted	128
Average Length of Stay	19.5 days
Ages Served	1-18 years
Average Therapeutic Hours	4.15 /day
Patients Discharged Home	92%
Patients Participating in Leisure Activities 90 Days Post Discharge	82%
Patients Maintaining or Improving Overall Function in Program	100%
Overall Favorable Responses by Families (9's & 10's)	98%

Accomplishments

- A task force involving both inpatient rehab and outpatient cerebral palsy team members was formed to optimize care of children with CP following SEMLS who stay on the inpatient rehab unit.
- A SWOT analysis was performed by the pediatric specialty team to establish our initial goals for improving inpatient rehab care for individuals with spinal cord injury.
- Through collaboration among Child Life, our two new recreation therapists, rehab nursing, and others, a new team routine was established to offer a certificate of completion and discharge celebration to all patients who complete an inpatient rehab stay.
- With addition of our outpatient rehab social worker, a process was developed to ease the transition from inpatient rehab to home through additional documentation and communication about their outpatient specialists and follow up visits.
- Community outings have been resumed since a hiatus during the pandemic.

FY24 Goals

SEMLS

1. Finalize the guidelines for admission following SEMLS and therapy needed.
2. Monitor how admissions proceed when having a clear process.

Discharge Process

1. Begin development of SCI Journey Map.
2. Monitor use of discharge document with OP Social Worker.
3. Explore needs of the patients transferred off Inpatient Rehab to an acute care service.
Begin with discussions among attendings about follow-up via consult service.

Spinal Cord Injury

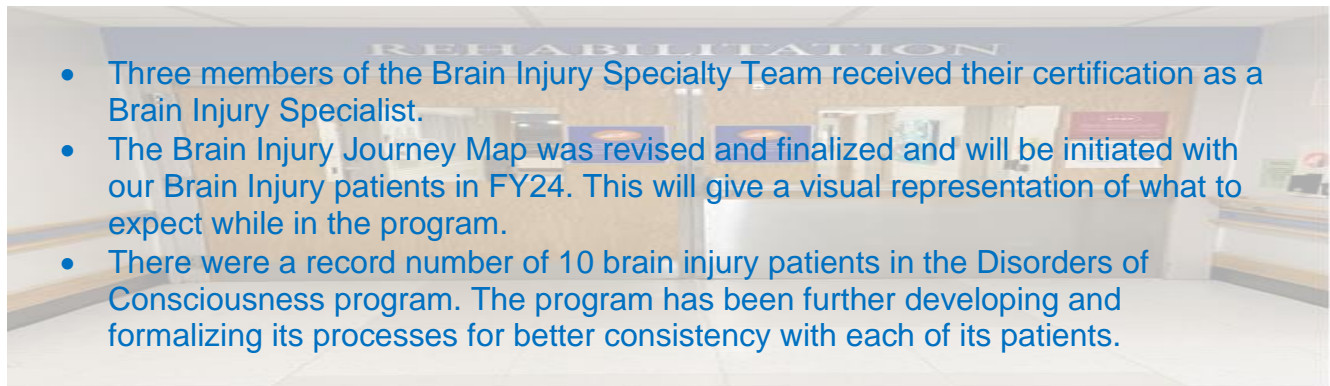
1. Create a modified criteria for the TCC regarding SCI patients to include the transition and discharge of these patients.
2. Review and revise SCI patient/family education on inpatient rehab.
3. Review SCI Model systems to increase staff awareness of possible discharge placements for higher level SCI injuries and when to suggest to families.

BRAIN INJURY SPECIALTY PROGRAM FY23

Highlights

Patients Admitted	55
Average Length of Stay	21.4 days
Ages Served	1-18 years
Average Therapeutic Hours	4.3/day
Patients Discharged Home	95%
Patients Participating in Leisure Activities 90 Days Post Discharge	67%
Patients Maintaining or Improving Overall Function in Program	100%
Overall Favorable Responses by Families (9's & 10's)	94%

Accomplishments



- Three members of the Brain Injury Specialty Team received their certification as a Brain Injury Specialist.
- The Brain Injury Journey Map was revised and finalized and will be initiated with our Brain Injury patients in FY24. This will give a visual representation of what to expect while in the program.
- There were a record number of 10 brain injury patients in the Disorders of Consciousness program. The program has been further developing and formalizing its processes for better consistency with each of its patients.

FY24 GOALS

Disorder of Consciousness

1. Evaluate the effectiveness of the program through making this an agenda item in BI Quarterly Meetings and reviewing each DOC patient.
2. Develop a template for the DOC rounds to remind staff of the goals and expectations for the rounds.
3. Consider/explore other interventions such FAST or other discipline specific interventions. when patient may not be progressing.

Outcomes

1. Implement the COPM by OT for all BI patients as an outcome measure.
2. Implement the CALS for DOC patients by Speech.
3. Continue analysis of the PAMS with brain injury patients.

Return to Leisure

Monitor post IPRU discharge when returning to OP Clinic to identify & address patient/family needs.

Family Education

Develop ways to support families with more organized educational materials for transition to home.

CANCER SPECIALTY PROGRAM FY23

Highlights

Patients Admitted	21
Average Length of Stay	16.3 days
Ages Served	1-18 years
Average Therapeutic Hours	3.97/day
Patients Discharged Home	76%
(Note: Many patients move to acute for other cancer treatments before/after rehab stay)	
Patients Participating in Leisure Activities 90 Days Post Discharge	100%
Patients Maintaining or Improving Overall Function in Program	100%
Overall Favorable Responses by Families (9's & 10's)	100%

Accomplishments

- Finalized an informational fact sheet for the Modified Inpatient Rehabilitation Program (MIRP) to share with physician and therapy colleagues within the Bone Marrow Transplant Unit in G5 in an effort to improve identification of appropriate patient candidates for the MIRP.
- Established an order set for patients being admitted through the MIRP to improve communication with staffing on G6 to allow an improved understanding of the scheduling and coordination of inpatient rehabilitation services and weekly meetings.
- Initiated standardization of outcome measures for patients admitted to the Cancer Rehabilitation Specialty Program, including the PAMS, COAT and COPM.

FY24 Goals

- Will monitor cancer education for the nurses to ensure the cancer education needs of the nurses are met.
- Ensure distribution of the modified rehab fact sheet and determine next steps in the further education of the nurses, therapy staff to ensure optimal benefit of the modified program to the patients admitted to this program.
- Improve consistency in the use of outcome measures for all therapies for measures of PAMS, COAT and COPM.
- Review various cancer rehab programs to determine any next steps for our program to improve our effectiveness and services for our patients and families.

FIRST SPECIALTY PROGRAM FY23

Highlights

Patients Admitted	24
Average Length of Stay	21.6 days
Ages Served	10-18 years
Average Therapeutic Hours	4.5 /day
Patients Discharged Home	100%
Patients Participating in Leisure Activities 90 Days Post Discharge	88%
Patients Maintaining or Improving Overall Function in Program	100%
Overall Favorable Responses by Families (9's & 10's)	100%

Accomplishments

- The FIRST Evaluation Clinic has been successfully up and running for over a year and has resulted in an increased rate of successful FIRST program admissions and a decreased rates of early dismissals from the program as compared to the previous year.
- The FIRST program has responded on the increased rates of FNSD among chronic pain populations and, when appropriate, adapted treatment to better serve this population.
- The team established standardized daily expectations that can be individualized establish consistency between providers and streamline handoffs.
- The FIRST team was invited to present at several grand rounds and IIPT programs across the country to share the unique aspects of the FIRST program that contribute to the program's continued success in treating the most severely disabled patients in the country.

FY24 Goals

- Implement and evaluate formal psychosocial assessment for those who have not had success with prior IIPT program.
- Optimize utilization of daily expectations.
- Keep up to date on any progress being made with a day treatment program, until we are able to be actively involved with the process.
- Ensure the follow through and return to leisure activities for patients post discharge from the FIRST Program.
- Complete research focusing on PT/OT measures, virtual reality, and a novel behavioral intervention for patients with chronic pain and comorbid FNSD for future publications.

