



ANNUAL REPORT 2022

Inpatient Rehabilitation

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

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Note from the Medical & Clinical Directors

Although we have continued to work in an environment with COVID restrictions, the Inpatient Rehabilitation Programs have remained strong with their commitment to the quality of services for the patients and families of Cincinnati Children's. In this past year, we participated in our ninth consecutive CARF Survey and received accreditations in Pediatric, Brain Injury, Cancer, and Pain Specialty Programs. The Inpatient Rehabilitation leadership and staff were resilient in their preparation and their hard work and efforts resulted in only one recommendation over thousands of standards reviewed. There were no recommendations for any of the Specialty Programs. Certainly, it would have been easy to excuse ourselves from being so tenacious about the details of the standards with all the outlier conditions and restrictions of COVID. But that did not happen. It's not hard to be proud of our team.

We have increased the annual number of patients in our Disorders of Consciousness Program. This has been an ongoing journey for our team to develop and execute services for a population that needs the specialization not offered by all rehabilitation centers. As well, our modified program has been well received by our referral sources who appreciate another piece in our continuum of care to address the needs of their patients. Other facilities have also been impressed by this forward thinking and are making this a consideration as another part of their inpatient rehab programming.

In Fiscal 22, we have kept moving forward with our programs. Each of the Specialty Teams have continued to work toward their strategic goals and keep stretching to ensure our program has a vision for the future. There have been a lot of accomplishments and accolades, but the staff who are a part these teams will tell you it is not the only reason they "do what they do".

Most importantly, we have found ways to adjust and be flexible for the benefit of our patients and families. Our outcomes have remained strong, and this is only possible due to the commitment and investment of our leadership and staff. They love what they do, and it shows.

Here's to a great FY23!

David Pruitt, MD
Medical Director
Inpatient Rehabilitation

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Clinical Director
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PEDIATRIC SPECIALTY PROGRAM FY22

Highlights

Patients Admitted	139
Average Length of Stay	18.6 days
Ages Served	1-18 years
Average Therapeutic Hours	4.03/day
Patients Discharged Home	91%
Patients Participating in Leisure Activities 90 Days Post Discharge	67%
Patients Maintaining or Improving Overall Function in Program	100%
Overall Favorable Responses by Families (8's, 9's & 10's)	100%

Accomplishments

The Pediatric Specialty Team was reorganized this year. The Brain Injury, FIRST and Cancer Specialty Programs have designated teams, a clinical director, quarterly meetings, and strategic goals developed by each group. Until this past year, the Pediatric Specialty Team was overseen by the Op Ex Team and the Coordinating Council reviewed and addressed any issues on the unit. This year, the Pediatric Specialty Team has its own clinical director and team members who meet on a quarterly basis, and function as the other specialty teams. Their primary focus will be regarding those patients with diagnosis that do not fall under the other specialty programs and to address more global issues within the programs.

FY23 Goals

FNSD

- Continue to meet with workgroup for FNSD to evaluate next steps in development of the IPR component of the program.

SEMLS

- Develop workgroup for SEMLS patients admitted to IPRU and establish care guidelines.

IPR Discharge Process

- Improve process for coordinating and communicating completion of discharge criteria, including training with key caregivers.
- Improve process of identifying contacts for families for information or concerns between time of discharge and first outpatient appointments.

SCI

- Determine the challenging issues for staff when treating those with SCI and action plans, next steps to address.

BRAIN INJURY SPECIALTY PROGRAM FY22

Highlights

Patients Admitted	59
Average Length of Stay	19.8 days
Ages Served	1-18 years
Average Therapeutic Hours	4.13/day
Patients Discharged Home	84%
Patients Participating in Leisure Activities 90 Days Post Discharge	58%
Patients Maintaining or Improving Overall Function in Program	100%
Overall Favorable Responses by Families (8's,9's & 10's)	100%

Accomplishments

- OT/PT are competent with PAMS, Pedi-Cat, Rappaport, and CRS. Some of the outcomes are crossing from inpatient to outpatient to assist with the actual improvement of the patient over time. Speech and Music therapy have more consistently been using an outcome measure for their brain injury patients.
- Multidisciplinary classroom has been reinstated after a hiatus due to COVID, allowing for a view of possible issues in the classroom prior to return to school.
- Brain Injury Family Education Group well received by families.
- Increased number of Disorders of Consciousness patients seen, and DOC Huddles have become more established with review of Rappaport scores, medications, environment, and sleep patterns on a weekly basis.

FY23 Goals

- Determine plan for OT, TR and Music to formally utilize outcomes measures with each patient and collect data. TR to determine best assessment for brain injury that is standardized. ST to use COAT more consistently or other standardized assessments; Music Therapy to develop scoring system and data collection methods and explore other assessments with general brain injury population. PT to become more consistent with use of the PAMS
- Implement and evaluate the effectiveness of program plans when disorders of consciousness patients are admitted, and make changes as needed. Determine if we are seeing improvements in the patients, and any clinical changes needed.
- Determine means to educate staff outside of the Brain Injury Specialty Team so that they may be ready to fully participate in DOC rounds, as well as having an awareness of programs, projects, and updates to the Brain Injury Specialty Program.
- Continue with Development and implementation of inpatient education group and determine better ways to provide information to the families.
- Determine best ways to provide patients and families with education and other information they may need in a more organized fashion

CANCER SPECIALTY PROGRAM FY22

Highlights

Patients Admitted	14
Average Length of Stay	19.9 days
Ages Served	1-18 years
Average Therapeutic Hours	3.85/day
Patients Discharged Home	77%
Patients Participating in Leisure Activities 90 Days Post Discharge	88%
Patients Maintaining or Improving Overall Function in Program	67%
Overall Favorable Responses by Families (8's, 9's & 10's)	100%

Accomplishments

- Outcomes continue to be developed per discipline and focus to flow from acute to inpatient rehab to outpatient.
- Developing fact sheet for modified program for better understanding of services and expectation.

FY23 Goals

- Determine any further gaps in education from Rehab therapy/nursing, and Acute therapies in Oncology, and address through Inpatient Education Team and/or discipline specific areas.
- Finalize modified document for use on the Oncology/BMT nursing units and determine process to give to patients, families, and staff for their education of this program.
- For each therapy (OT,PT, ST), determine the outcome measure that will be used for oncology/BMT, communicate and educate staff, and begin use as well as collection of data

FIRST SPECIALTY PROGRAM FY22

Highlights

Patients Admitted	28
Average Length of Stay	19.1 days
Ages Served	10 - 18 years
Average Therapeutic Hours	4.32/day
Patients Discharged Home	100%
Patients Participating in Leisure Activities 90 Days Post Discharge	100%
Patients Maintaining or Improving Overall Function in Program	79%
Overall Favorable Responses by Families (9's & 10's)	100%

Accomplishments

- Significant decline in denials due to collaboration with insurance provider and establishment of information needed for approval to the program.
- Award: Fourth Annual Dr. Curtis Sheldon Schwartz Center Rounds Compassionate Caregiver Award Finalist for the Functional Independence Restoration (FIRST) Program Team, Cincinnati Children's Hospital Medical Center, Cincinnati, Ohio
- Award: Abbi John recipient of University of Cincinnati Torch Award for Clinical Excellence
- Presentation: FIRST Team: Functional Independence ReSToration Program: A case study and panel discussion. Lecture and discussion presented at the Cincinnati Children's Hospital Medical Center Interdisciplinary Pain Management: Foundational Tools for the Clinician. Cincinnati, OH.
- Presentation: Kendra Homan & Debbie South: *Understanding chronic pain: A guide for working with schools*. Paper presented at the 2022 Hospital Educator and Academic Liaisons (HEAL) National Conference.

FY23 Goals

- Implement measures that predict how persons will participate and complete in the program.
- Investigate the need and possibility of FIRST Day Hospital Program
- Investigate and develop methods to improve success for follow through and return to leisure activities for patients post discharge from FIRST program
- Complete research and draft manuscript about patient outcomes – focusing on PT/OT measures, for future publication

