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Policy Area Rehabilitation

Center

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Center

UNC Rehabilitation Center Spinal Cord Injury Program Scope

I. Description

Describes the scope of the Spinal Cord Injury (SCI) Rehabilitation Program of UNC Hospitals.

II. Rationale

The Spinal Cord Injury (SCI) Rehabilitation Program at UNC Hospitals is designed to meet the inpatient rehabilitation needs of patients with temporary or permanent disabilities from SCI. The SCI Rehabilitation Program is medically supervised by a physiatrist who has expertise in the medical management and rehabilitation of people with SCI. Services are provided by highly qualified professional staff designated specifically for SCI rehabilitation. Team composition consists of representatives of each discipline based on the clinical needs of the person served. Staff that treat patients in the SCI Rehabilitation Program have access to additional SCI education to further develop expertise in SCI rehabilitation. The totality of care spans the rehabilitation continuum to optimize the functionality and quality of life, and prevent and/or treat persons who have had a SCI.

III. Policy

A. Setting for the SCI Rehabilitation Program

The SCI Rehabilitation Program is located on the third and fourth floors of the second bed tower in the UNC Hospitals Hillsborough Campus. It can be accessed by entering the hospital through the main entrance and taking the elevator to the third or fourth floor. The unit has 40 private beds. Treatment areas include: a transitional living apartment, individual treatment rooms, family lounge, access to hospital grounds for community integration, and several treatment gyms for

group and individual treatment.

B. Patients Served

Patients who have had a diagnosis of any type of injury to the spinal cord, whether traumatic or non-traumatic, complete or incomplete, are candidates for the inpatient SCI Rehabilitation Program. We take levels of SCI from C4 - L5/S1, and all patients must be ventilator-free. Service to our patients is provided without regard to race, creed, national origin, sexual orientation, gender identity, socioeconomic status, disability or nature of payment source as long as the criteria for admission are met.

- Payer Sources: Primary payers include Medicaid, Medicare, commercial insurance, workers compensation, private pay and charity care. Patients without means for payment have access to financial counselors to assist with checking eligibility for Medicaid/Medicare and to make payment arrangements.
- Referral Sources: Referral sources include the UNC Hospitals physicians and case
 managers. Additional referrals are generated by community and academic health care
 systems both in the local area and the greater region of North Carolina.
- Fees: The SCI Rehabilitation Program fees are determined by rehabilitation
 administration on an annual basis during the fiscal budget process. The charge
 description masters are compared within the market on an annual basis to ensure that
 fees are competitive with similar facilities within the region.

C. Admission, Continued Stay, and Discharge Criteria

The physiatrist uses the following criteria to evaluate each person referred for potential admission to the SCI Rehabilitation Program. This criterion, along with the physician's clinical judgment, ensures that the patient requires care, has the potential to benefit, and that the environment of the rehabilitation unit is the most appropriate environment for that care to be delivered.

1. Criteria

Determination to admit patients is based first upon patient characteristics that are related to their needs for both medical management and rehabilitation programs. These characteristics apply to patients with physical and cognitive impairments for all diagnostic conditions. The patient must:

- Have significant functional deficits and medical and nursing needs that require close medical supervision by a physician specialized in rehabilitation and 24-hour rehabilitation nursing.
- Be able to tolerate at least 3 hours of therapy 5 days per week.

- Require treatment by at least two other licensed rehabilitation professionals, one of which must be physical or occupational therapy.
- Be medically stable such that management of medical or surgical comorbidities can be managed in the rehabilitation unit and are sufficiently under control so as to permit simultaneous participation in the rehabilitation program.
- Have the physical and or mental potential to achieve rehabilitation goals in a reasonable amount of time.
- Have adequate social support so that discharge to the home or a communitybased environment is likely.
- · Be an adolescent of adult weight.
- · Ventilator free.

Persons admitted to the SCI Rehabilitation Program must meet the above criteria and be able to benefit from intensive therapy, must have reasonable goals, and there must be an expectation that they will demonstrate significant practical improvement. Though our tetraplegic patients may not make significant functional gains, they and their family/caregiver benefit from education provided in directing their own care and advocating for their needs. Continued stay in the SCI Rehabilitation Program requires that these criteria continue to be met, that the rehabilitation hospitalization continues to be medically necessary, and that the rehabilitative care in process can only be provided in an inpatient setting. Patients are discharged from the SCI Rehabilitation Program once they have met their established goals or have reached maximum benefit from an inpatient rehabilitation level of care. When the person served meets the discharge criteria, an appropriate alternative level of care within the rehabilitation continuum is recommended.

D. SCI Rehabilitation Services

- Physiatrist Services: Every patient's medical and rehabilitative care is provided under
 the direction of a physician specializing in rehabilitative medicine. The Physical
 Medicine and Rehabilitation (PM&R) attending physicians are also faculty members in
 the Department of Physical Medicine and Rehabilitation, an academic department of
 the School of Medicine of the University of North Carolina. The attending physiatrists
 serve as clinical instructors to residents in PM&R. Rehabilitation physician coverage is
 available 24 hours daily, seven days per week.
- Specialty and Sub-Specialty Medical and Surgical Services: Services are provided by consultation from within the UNC Health Care system.
- Rehabilitation Nurses: Nurses provide care for patients 24 hours daily, seven days per
 week. Primary interventional areas for the rehabilitation nurse include assisting with
 activities of daily living, safety, nutrition, maintaining skin integrity, elimination,
 medication management and counseling, and instructing both the person served and
 family or primary caregivers in preparation for discharge. The nurse provides a

- supportive environment in which the person served may maximize his/her functional abilities and, to the extent possible, regain self-sufficiency.
- Respiratory Therapy, Radiology, and Clinical Lab Services: These services are available 24 hours daily, seven days per week from within the UNC Health Care system.
- Emergency Care: A Rapid Response Team approach has been implemented to manage medical events before they escalate to a crisis situation. The Behavioral Response Team can be implemented for aggression, agitation, or combativeness that requires immediate assistance. Code Blue support is provided for medical emergencies.
- Physical Therapy, Occupational Therapy, and Speech Therapy: Depending on the
 patient's clinical needs, a combination of these services are provided for at least three
 hours daily for five days out of seven days for each patient's stay. Therapists work as
 an integral part of the interdisciplinary team and work seven days a week to facilitate
 the functional recovery of their patients.
- Recreational Therapists: These therapists are part of the interdisciplinary team and provide individual and group activities to help with community re-entry and to improve independence with recreation and leisure participation and access after discharge.
- Neuropsychological and or Psychological Services: These services are provided for all patients who clinically require their services based on a referral from the physiatrist. Rehabilitation psychologists are responsible for neuropsychological evaluation, the development and coordination of interventional programs designed to guide cognitive retraining, behavioral modification, and psychological adaptation and support.
- Rehabilitation Counseling Services: Counseling services are provided upon physician referral for patient and family support.
- Care Management Services: Care management is provided to all persons served through referral and consultation. Care managers provide support to the patient and family during the patient's stay, facilitate family involvement and education, and assist with the coordination of the team's plan and the discharge process.
- **SCI Support Group:** The SCI support group meets monthly. Our patients are educated about our support group prior to being discharged.
- Nutritional Services: These services are provided by clinical dietitians and include, but
 are not limited to, conducting a comprehensive nutritional assessment; development,
 implementation, and monitoring of nutritional care plans; provision of nutritional
 education to persons served, their families and to other health care professionals; and,
 when indicated, attendance and participation in team and family conferences.
- Pharmacy Services: A registered pharmacist is available 24 hours daily, seven days
 per week and serves as a consultant to the rehabilitation team in medication
 management and recommendations. As part of the interdisciplinary team, the

pharmacist attends team conferences as necessary to provide appropriate input to the team about the patient's medication management.

- Prosthetic and Orthotic Services: These services are provided on-site through a
 contract with Atlantic Prosthetics and Orthotics. Upon physician referral, prosthetic
 and or orthotic needs are assessed and provided to patients. The prosthetic or
 orthotic specialist is part of the interdisciplinary team.
- North Carolina Division of Vocational Rehabilitation Services: This service is provided
 on a consultation basis accessed via the Neuropsychologist or Care Manager through
 an off-site counselor. Upon discharge, each person referred to the agency is followed
 by a local counselor for determination of eligibility and provision of services.
- Other services available by consultation on-site include: Pastoral Care, Audiology, Wound Care, and Dialysis.

E. Summary

Rehabilitative services are specifically designed to create a therapeutic milieu within which functional recovery is nurtured so that each person served is assisted to achieve maximal functional independence within the constraints of disability and medical conditions. Members of the interdisciplinary team, the persons served, and the families are mutually accountable for effectively communicating and collaborating together in the pursuit of goal attainment. The uniqueness and complexity of each person served is recognized and supported by the rehabilitation team through a myriad of treatment modalities that optimize physical recovery, psychological adaptation, and timely community re-entry.

Approval Signatures

Step Description	Approver	Date
Policy Stat Administrator	Kimberly Novak-Jones: Nurse Educator	06/2022
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