

Making the Right Decision for Rehabilitation Care

Determining the best place for you or your family member to transition to after being hospitalized for a traumatic injury or illness requires a thorough understanding of the wide variety of rehabilitation services provided in different healthcare settings. The purpose of rehabilitation care is to maximize recovery and meet individual goals.

Patients often are discharged to one place or another without a clear understanding of why a particular setting was chosen. Rehabilitation care* is provided in a variety of healthcare facilities that often have similar names and services, which can cause confusion.

There are distinct differences in the level of care and the expertise of the healthcare staff in the many rehabilitation care options. This brochure clarifies the types of care provided in each and which healthcare team member provides it.

We encourage you to work with a rehabilitation nurse, who is uniquely qualified with the knowledge and understanding of care management for people with acute or chronic illness and conditions that cause disability. The rehabilitation nurse can help you review your goals and prescribed care plan and advocate for the next best step in your recovery process.

**Rehabilitation care refers to a range of medical care services that support an individual's continued recovery following a hospitalization for injury, illness, or joint replacement surgery.*

INPATIENT REHABILITATION CARE Options



Inpatient Rehabilitation Facility

Provides 24-hour nursing care and medical management when you are unable to care for yourself after hospitalization

Skilled Nursing Facility

Provides 24-hour nursing care when you are unable to care for yourself after hospitalization

Long-Term Acute Care Hospital

Provides high-need medical care for medically complex conditions

Activities of Daily Living (ADLs)

(e.g., feeding, bathing, dressing, hygiene, toileting, and mobility)

ADLs are difficult for you, but you have the potential to gain significant improvement in a short period of time. Nursing staff help with ADLs and will work with you so you can perform them independently.

You have difficulty performing ADLs but also have the potential for improvement.

Medical staff provides care for ADLs when you are too sick to take care of yourself.

Nursing and Medical Services Required

A registered nurse will provide medical and safety needs on a 24-hour basis to promote your recovery. A rehabilitation physician or physiatrist will also visit you daily.

Skilled registered nurses or licensed practical nurses meet your medical and safety needs to promote recovery. A physician typically will visit you at least once per month.

Physicians and registered nurses (RNs) provide 24-hour care because your condition is more complex; there is a high ratio of RNs to patients.

Therapy

(includes physical, occupational, speech, and medical management for diabetes, hypertension, wounds, edema, etc.)

You need two or more therapies, and you must be able to participate in therapy for a total of 3 hours per day.

One or more therapies are available if needed.

Physical, occupational, or speech therapy is available. Your condition determines how much time is spent in therapy.

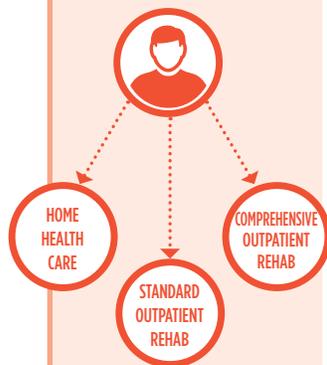
Discharge Plan and Community Support

You should have the ability to care for yourself with the involvement of family or other resources in a community setting such as a home or independent or assisted-living facility (ALF).

You may have the ability to care for yourself at home or with the help of family or other resources, or you may go to an inpatient rehabilitation facility for more intensive therapy.

You may be transferred to an inpatient rehabilitation facility for care and therapy and to learn how to care for yourself.

HOME-BASED REHABILITATION CARE Options



Home Health Care

A variety of health services you receive in your home for an illness or injury. This type of care is usually convenient, effective, and less expensive.

Standard Outpatient Rehabilitation

An outpatient facility that is determined by your physiatrist when you are discharged from the hospital

Comprehensive Outpatient Rehabilitation

A center for when you are able to live at home but also still need the services of nurses or therapists to recover and reach optimal independence

Activities of Daily Living (ADLs)

(e.g., feeding, bathing, dressing, hygiene, toileting, and mobility)

You are homebound and have difficulty performing ADLs.

You have a condition that requires a caregiver to monitor you or provide help with daily care, walking, or mobility.

You have difficulty performing ADLs but also are able to practice exercises at home.

Nursing and Medical Services Required

Your physiatrist will work with your registered nurse to develop a care plan, which will require home health nursing services.

You may have an outpatient rehabilitation registered nurse, case manager, or social worker if needed.

Rehabilitation staff, including nurses, therapists and caregivers, work together to meet your safety needs, promote recovery, and provide medical management.

Therapy

(includes physical, occupational, speech, and medical management for diabetes, hypertension, wounds, edema, etc.)

You need one or more therapies. You also may receive medical management therapies. You must be able to participate for 30 minutes per day with a goal of good functional improvement.

You need one or more therapies and should be able to follow directions to work with the therapists.

You need two or more therapies. You also may receive medical management therapies. You must be able to tolerate 2 hours of therapy a day with a goal of good functional improvement.

Discharge Plan and Community Support

You are unable to travel to and from outpatient rehabilitation. Your home setting is accessible, and necessary equipment is available. You have support to continue exercise and activity programs at home.

You have the ability to move around your home using medical equipment. You are able to get to and from outpatient therapy with assistance.

You are able to get to and from outpatient therapy. Your home setting is accessible, and all necessary equipment is available. You have support to continue exercise and activity programs at home.

LONG-TERM/CUSTODIAL CARE

Care provided by nursing home personnel who may or may not be registered nurses.

This setting becomes a residence, usually for a long period of time.

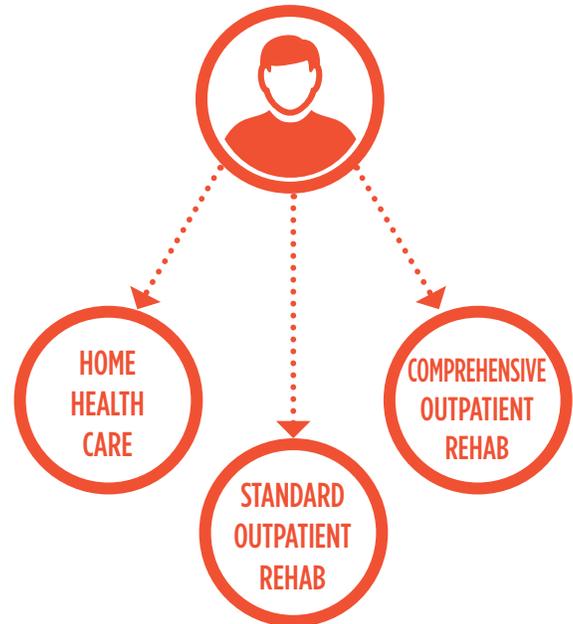
INPATIENT REHABILITATION CARE Options

You or your loved one may experience more than one inpatient setting on the road to recovery.



HOME-BASED REHABILITATION CARE Options

When you or your loved one is heading home after discharge, determining which outpatient option is best can be confusing.



This tool will help you understand the level of care provided in each setting.

“Experiencing a disabling condition can be very stressful and scary. You want the best care to help you or your loved one recover. Being in the right setting and getting the right level of care can be the most important decision you have to make. The purpose of this tool is to help you understand the different types of settings and the care they provide. Our [rehabilitation nurses’] goal is to help you make the best decision.”

*Kathy G. Clark, MSN RN CRRN
associate nurse executive*

www.rehabnurse.org

This information is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Please check with your healthcare provider to determine the best care for you or your family member.