

Quality Report Card



Volume 18, Issue 11

NOVEMBER 2017

REHABILITATIVE CARE – INPATIENT AND HOME CARE

Planning for Post-Acute Care

A hospital stay for an acute illness, surgery or an injury may require some patients to seek post-acute care – commonly referred to as rehabilitation services, or rehab. During the hospital stay, if such care is warranted, a case manager will visit the patient and/or a caregiver to discuss the type of rehab needed and the different levels of care available after discharge. The goal of rehabilitative services is to improve the patient's mobility and ability to perform normal daily activities required to meet basic needs so they may return home and live as independently as possible. It is important to begin planning for post-acute care as soon as the patient learns that rehab is needed.

Acute care begins during the hospital stay and the rehabilitation process can begin as soon as the patient is physically able. The physician in charge of the patient's care may ask a physical, occupational or speech therapist to work with the patient at the bedside. A therapist can instruct the patient on basic functions such as transferring from the bed to a chair or wheelchair, using assistive devices, exercise or wound care. Generally, a physical therapist creates an individual exercise program to assist the patient to increase strength and mobility while an occupational therapist focuses on function, such as bathing, dressing and safety. As the patient gains strength and function, the case manager can discuss discharge options.

If further care is needed after discharge, the patient can be transferred or referred to a post-acute care provider. Options for post-acute care can be selected based on multiple factors, including a patient's activity tolerance, specialty services required, the amount of direct physician oversight medically necessary, support structures in place at home, and insurance qualifications.

Post-acute care providers include:

- Outpatient services
- Home health care
- Skilled nursing facility
- Inpatient rehabilitation

Outpatient services are provided at a physician's office or in a clinic setting. The patient travels to the location and returns home the same day. The facilities have advanced equipment and highly trained staff to provide specialized services including physical therapy, occupational therapy, speech therapy, and wound care. Outpatient programs are for patients who are doing well enough to be home and can complete the course of therapy needed for recovery.

Home health care is available for patients who are unsafe to leave the home without assistance and continue to require medical care. Staff members – including nurses, aides, therapists and support staff – can continue rehabilitation at the patient's house. The specially trained staff can help with medication management, home exercise programs and personal care.

A skilled nursing facility, otherwise known as a nursing home, offers care for patients staying at the facility. Many believe a nursing home is a permanent residence for someone who is unable to care for themselves; however, that is not always the case. A patient can receive therapy or other services from professionally trained staff including nurses, social workers, physicians, dietitians, and physical, occupational and speech therapists. The goal is to return the patient home to live as independently as possible.

An inpatient rehabilitation program is a specialized care center staffed by trained professionals, including nurses, social

workers, physicians, dietitians, and physical, occupational and speech therapists. Therapy often is very intense and the patient must be able to tolerate at least three hours of therapy, five days per week and achieve rehabilitation goals in a reasonable time period. At Licking Memorial Hospital, the Acute Inpatient Rehabilitation Unit is located inside the Hospital. To be admitted into the program, a patient must meet certain criteria dependent on many factors including medical necessity and ability to return home once discharged from the unit.

Caretakers and patients should begin researching all facilities and options as soon as possible to ensure an informed choice is made. A case manager can assist with this decision making. While researching and working to make decisions about rehabilitative care, keep in mind the cost of each service and how much will be paid for by insurance. If a patient with Medicare meets specific requirements, Medicare will pay the full cost of services provided by a skilled nursing facility for the first 20 days. The requirements include:

- Physician or nurse practitioner certification of the need for skilled nursing care or rehab services
- Admittance to a hospital for at least three consecutive days – not counting the discharge day or time spent in observation
- Admittance to a rehab facility for the same illness or injury that was the reason for the hospital stay
- Assessment by rehab staff at least once a week

Most health insurance plans follow the same guidelines as Medicare, but many require more frequent assessments on admission and throughout the rehab stay. Check with the insurer for more information.

Patient Story – Flora Walker



In January 2015, Flora Walker was suffering from chronic right hip pain and visited her primary care physician. After an X-ray, she was diagnosed with arthritis and her physician recommended ibuprofen and physical therapy. Her pain eventually became so intense she could not walk and had to stop working. Flora previously had undergone a left knee replacement and returned to the specialist who had cared for her to receive a cortisone injection in her hip. They also discussed the possibility of a hip replacement.

Unfortunately, during this same time, Flora learned she had Stage 4 renal cell carcinoma (kidney cancer) and was referred to The James Cancer Hospital at The Ohio State University to have her right kidney removed. The cancer had metastasized to her bones and just one day after being released following surgery, she fractured her left femur, while simply sitting down. Flora was rushed to emergency surgery, then discharged to a nursing home to recover for approximately one month. Shortly thereafter, physicians determined she had a fractured right hip, also related to the cancer, and she returned to The James for a right total hip replacement.

At the end of June, nearly six months after her ordeal began, Flora was admitted to the Licking Memorial Acute Inpatient Rehabilitation Unit for fourteen days to assist with her hip replacement recovery. She had learned of the Unit through a friend whose daughter is a Hospital employee. "I received the best care I could have ever imagined," Flora commented. "It was so comforting to

be close to home and convenient for my family members. I just recently transferred to Licking Memorial Hospital (LMH) for my cancer care as well," she continued.

"My first day in the Unit, I could not walk, but by day two, they had me up and moving," explained Flora. I walked the hallways and exercised in the morning and afternoon. The therapists were very patient, re-teaching me how to do so many daily actions, such as reaching, showering and folding clothes." Staff also helped to educate Flora's family. Her husband built a ramp at their home and both daughters assisted with her care.

By Thanksgiving, Flora had learned to walk steadily again and was able to get into the shower and stand up on her own. She continued her therapy, receiving outpatient rehabilitation treatment at Licking Memorial Physical Therapy once a week and now exercises twice a week at the LMH Wellness Center. "All the nurses and assistants are really great. The small size of the unit allows the staff to provide such good care and attention to the patients," Flora noted. "Their team approach to my rehabilitation proved very successful."

"Working out at the Wellness Center is fantastic – I love it," said Flora. "Staff provide blood pressure checks upon arrival and before departure. They also oversee patients as they exercise to ensure they are using the machines safely and performing proper movements." At every visit, Flora utilizes three machines, each for twenty minutes.

Flora has been able to resume many daily activities, such as driving. She enjoys many family functions, including cookouts with her children and grandchildren. After using a walker, she is now able to move about with just a

cane. "I have such a better attitude after my rehabilitation at LMH," she shared. "I am determined to walk on my own one day." Flora is very grateful for her family's support. "My husband is so supportive and inspiring. He accompanied me to rehab and also attends my oncology treatments with me."

A lifelong resident of Licking County, Flora lives in Heath with her husband of 39 years, Harry. The couple has two daughters, Marlene and Krista, three grandchildren and are expecting a fourth grandchild in February, a girl. Flora graduated from Newark High School and the Licking County Vocational School in 1976 and worked for Big Bear for 18 years. She and her husband also like to travel, especially to Tennessee.

The Acute Rehabilitation Unit opened on the LMH's sixth floor in 2012. The department is staffed by a dedicated team comprised of a medical director, nurses, physical therapists, occupational therapists, speech therapists, social workers, psychologists and other Hospital personnel.

Rehabilitative Care – Inpatient and Home Care – *How do we compare?*

At Licking Memorial Health Systems (LMHS), we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare them to benchmark measures. Then, we publish them so you can draw your own conclusions regarding your healthcare choices.

- Inpatients' level of satisfaction with their healthcare experience is affected by many factors, such as achievement of therapy goals, staff communication skills, nurse response times, and facility cleanliness. To monitor the quality of care, the Acute Inpatient Rehabilitation Unit (ARU) at Licking Memorial Hospital (LMH) offers patients an opportunity to offer feedback through a post-discharge survey.

	LMH 2014	LMH 2015	LMH 2016	LMH Goal
Overall patient satisfaction with ARU experience	97%	97%	97%	98%

- Patients who are undergoing rehabilitation are at increased risk for falls due to factors such as the expectation of increased independence, weakness and, possibly, pain medication. Falls can result in injuries and potentially delay a patient's rehabilitation. All ARU patients receive daily assessments for their level of fall risk and are advised of precautionary measures.

	LMH 2014	LMH 2015	LMH 2016	LMH Goal
Unassisted patient falls in the ARU that resulted in injury	0	0	1	0

- Painful bedsores (also known as pressure sores) can occur when the skin is damaged by prolonged pressure to one area of the body and can be difficult to heal and even lead to infection. ARU patients receive daily skin assessments and participate in therapy at least three hours each day, which increases mobility and reduces the risk of bedsores.

	LMH 2014	LMH 2015	LMH 2016	National ⁽¹⁾
ARU patients who developed new or worsened stage 2, 3 or 4 pressure sores during their stay	N/A	0.5%	0.0%	0.7%

- Upon admission to the ARU, patients receive a standardized Functional Independence Measure (FIM) assessment, scoring their ability to perform daily skills. The FIM is composed of 18 measures to capture the improvement in an individual's function. The FIM skills are reassessed before discharge. A few of the key FIM skills are listed below.

	LMH 2014	LMH 2015	LMH 2016	National ⁽¹⁾
Average amount of ARU patients' functional improvement at discharge				
Overall	23.5%	26.5%	26.8%	29.5%
Locomotion (walking or using wheelchair)	2.86%	2.87%	2.90%	2.90%
Bathing	1.84%	1.74%	1.70%	1.80%
Eating	0.88%	1.15%	1.00%	1.10%

- The goal of the ARU is to help patients who have experienced an illness or injury improve their functional status and mobility so that they may return home rather than a nursing care center.

	LMH 2014	LMH 2015	LMH 2016	National ⁽¹⁾
ARU patients discharged directly to home	84%	81%	78%	83%

- LMH Home Care provides skilled professional care to patients at home. Services are based on the individual's needs and include a wide range of support, such as therapy, nursing care, medication instruction, pain management, home management, financial needs assistance, emotional support, as well as others. LMH surveys Home Care patients regarding their level of satisfaction to evaluate how well their needs are being met.

	LMH 2014	LMH 2015	LMH 2016	National ⁽²⁾
Home Care patients' overall satisfaction	79th percentile (top 21% nationally)	89th percentile (top 11% nationally)	95th percentile (top 5% nationally)	50th percentile

- LMH Home Care patients often have some degree of physical deficit which can interfere with their ability to walk and quality of life. The Home Care staff provides physical therapy and other support to help patients improve their walking function. In 2015, LMH began tracking patients' improvement to evaluate the effectiveness of the program.

	LMH 2014	LMH 2015	LMH 2016	LMH Goal
Home Care patients with improved walking function	N/A	79%	80%	73%

8. Studies have shown that patients are more likely to take their medications properly in the correct dosage and at the correct intervals if they are informed about the importance and purpose of the drugs. LMH Home Care nurses provide medication education to patients and their caregivers. The nurses and therapists also perform medication reconciliation to check for possible adverse interactions or out-of-date drugs.

	LMH 2014	LMH 2015	LMH 2016	LMH Goal
Home Care patients receiving medication education	100%	100%	98%	100%
Home Care patients receiving medication reconciliation	100%	87%	97%	90%

9. Patients who have physical impairments due to illness, surgery or injury may not recognize fall hazards in their homes. Items such as throw rugs, stairs without railings, extension cords across floors and slippery bathtubs are particularly dangerous to recovering patients. The LMH Home Care staff offers a safety evaluation of the patient’s home, as well as an assessment of the patient’s own physical abilities in the home environment.

	LMH 2014	LMH 2015	LMH 2016	LMH Goal
Fall risk assessment completed for every Home Care patient	100%	100%	99%	100%

10. Pain is commonly associated with acute injury and illness. LMH Home Care implements pain interventions to facilitate the patient’s healing and recovery. Pain intervention methods may include medication, exercise, behavioral strategies and other modalities.

	LMH 2014	LMH 2015	LMH 2016	LMH Goal
Pain interventions implemented	99%	100%	100%	100%

Data Footnotes: (1) Rehab Metrics Report. (2) Press Ganey Associates, “Home Health Care Consumer Assessment of Healthcare Providers and Systems (HHCAHPS) survey results.

Check out our Quality Report Cards online at www.LMHealth.org.



Health Tips – Caring for a Family Member Receiving Rehabilitative Services

A patient who has suffered an acute illness, serious injury or has had surgery will likely require rehabilitative services after discharge from a hospital. A family member may have to assume the role of caregiver. It may be overwhelming to think about the responsibilities of providing day-to-day care, but it is important to remember, caregivers are an essential partner in the healthcare team. Physicians and therapists may rely on the caregiver to help explain the programs, provide care, assist with medications and help with other medical needs. They also turn to the caregiver for information about the patient’s history and home environment. Take these steps when considering caring for a loved one:

- Learn about the medical condition – research risks and treatment choices
- Determine insurance coverage and whether or not the family member is eligible for public programs
- Review or create legal documents including an advance directive, health care proxy and power of attorney
- Consult other family members for input and support

At Licking Memorial Hospital, the staff includes families in the rehabilitative process so that appropriate training can take place to ensure a safe transition to home. Be sure to discuss the family member’s needs before leaving the Hospital. Ask the staff about special care techniques needed for changing dressings, giving injections or using special equipment.



Licking Memorial Health Systems
1320 West Main Street
Newark, Ohio 43055

Visit us at www.LMHealth.org.

Please take a few minutes to read this month’s report on **Rehabilitative Care – Inpatient and Home Care**. You’ll soon discover why Licking Memorial Health Systems is measurably different ... for your health!

The Quality Report Card is a publication of the LMHS Public Relations Department. Please contact the Public Relations Department at (220) 564-1572 to receive future mailings.

The articles contained in this publication should not be considered specific medical advice as each individual circumstance is different. Should you need medical advice, consult your physician. Entire publication copyrighted 2017 Licking Memorial Health Systems. All rights reserved.