

## **Stroke Specialty Program Scope of Service**

### **Introduction:**

The University of Rochester Medical Center's Acute Rehabilitation Unit serves people in Monroe and surrounding counties who are in need of rehabilitation services after surgery or illness, which causes a decrease in function and requires 3 hours a day of therapy services. Patient must also require medical interventions necessitating care in an acute hospital setting.

### **Stroke Population Served:**

The Stroke Specialty Program accepts all types of strokes including thrombotic, embolic, hemorrhagic, and subarachnoid hemorrhage. The rehab unit accepts patients 6 years of age and over. A pre-admission assessment is conducted on all admissions to determine whether the patient meets admission criteria and the patient is able and willing to participate in an intensive rehabilitation program (5 days per week for 3 hours per day).

The Stroke Specialty Program is designed to:

- Build strength, improve function and build skills needed to complete daily activities
- Improve balance, mobility and safety awareness
- Improve speech, cognition and swallowing
- Prevent future stroke by promoting lifestyle changes to reduce modifiable risk factors and secondary complications
- Facilitate community inclusion and participation in life roles and interests
- Introduce resources for assistive technology, community support, advocacy, aging with disability, wellness, driving, etc.
- Promote healthy coping and adaptation skills.

### **Location/Setting and Hours of Operation:**

The rehab unit is located on the 5<sup>th</sup> floor of Strong Memorial Hospital. The rehab unit is open every day, 365 days per year. Therapy services are offered 7 days per week. Patients will receive physical, occupational, and speech therapy as ordered by the physician for a total of a minimum of 3 hours per day five days per week. Therapy hours of operation are from approximately 8am to 4pm.

### **Payer Sources:**

The rehab unit accepts most insurance, Medicare, Medicaid, Workers' Compensation, MVA, commercial plans and self-pay. If the patient does not have the ability to pay, they can meet with a financial counselor and make payment arrangements. More information is available at [URMC Insurances accepted](#)

### **Referral Information:**

Patients can be referred by physicians, case managers, discharge planners and should call 585-275-1544

### **Services Available directly Include:**

- 24-hour Nursing Care
- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Recreation Therapy
- Orthotics/Prosthetics
- Psychology
- Diagnostic Imaging-available 24 hours per day. Routine results will be returned the same day, urgent orders will be returned within 2 hours and stat orders will be completed within with 60 minutes.
- Laboratory-available 24 hours per day-routine results will be returned the same day, urgent orders will be returned within 2 hours and stat orders will be completed within with 60 minutes.
- Respiratory Therapy-available 24 hours per day
- Pharmacy Services-available 24 hours per day
- Nutritional Services
- Chaplain
- Wound Care
- Social Services/Case Management
- Activities/wellness
- [All Medical and Surgical specialties](#) available at Strong Memorial Hospital

### **Services Available to the Family and Caregivers:**

- Family/caregiver conferences are held as needed for the family/caregiver by the rehab team.
- Family/caregiver training is completed by nurses and therapists during 1:1 sessions.
- Resources and discounts for local hotels are made available.
- The hospital offers a family business and information center with a 'contact a

live librarian' option.

- Families and caregivers as well as patients are provided with resources for local stroke support groups.

### **Goal and Practice Guidelines:**

The scope and intensity of services is related to each person's unique:

- cultural needs
- behavioral status
- intended transition/discharge environment
- medical status and co-morbidities
- medical stability
- participation restrictions
- activity limitations
- psychological status
- cognitive and learning ability

The goal of the program is to enable each individual to achieve maximum functional potential through a patient-centered care model thereby making it possible for the patient to live their best quality of life.

### **Admission Criteria:**

All patients must be evaluated prior to admission and must meet the specific admission criteria listed below to be approved for admission. The criteria are uniformly applied to all patients, regardless of payer source.

Patients must:

1. Demonstrate the need for close medical supervision by physiatrist or other physician qualified by training and experience in rehabilitation.
2. Require the 24-hour availability and involvement of nurses skilled in rehabilitation.
3. Require the intensity of an inpatient rehabilitation program, generally defined by the ability to endure and receive a minimum of three hours/day of combined, appropriate therapy for five to seven days/week.
4. Require the involvement of an interdisciplinary team (physical therapy, occupational therapy, speech therapy, and orthotics/prosthetics) in the delivery of care.
5. Demonstrate the cognitive skills to be able to benefit from instruction and training/retraining of functional skills.
6. Demonstrate medical stability to be able to participate in an intensive rehabilitation program.

#### **Continued Stay Criteria:**

For continued stay in the rehab unit, the patient must:

1. Exhibit the ability to make improvements/functional gains during their stay.
2. Be able and willing to participate in the program.
3. Demonstrate ongoing progress toward appropriate functional goals and objectives established by the interdisciplinary team, in conjunction with the patient/family/caregiver. Goals will be focused on the patient achieving the highest level of function possible.
4. Demonstrate the ability to benefit from intense therapy treatment of at least three hours/day for five to seven days per week.

#### **Discharge/Transition Criteria:**

A patient will be discharged from the rehab unit when:

1. The patient's goals have been met and the patient is ready to transition to the next level of care.
2. The patient's progress plateaus and the rehab team notes no functional improvement.
3. The patient is unable to tolerate or participate in the three hours of therapy per day required by the program.
4. The patient becomes medically unstable and requires a different level of care.
5. Patient is non-compliant with the program despite coaching, counseling and education.