

Welcome to Pediatric Acute Inpatient Rehabilitation

Primary Children's is excited to work with you and your child in our Acute Inpatient Rehabilitation (Rehab) Program.

_____ was contacted regarding your benefit for acute rehab.

Inpatient Rehab: _____

Outpatient Therapy: _____

Preauthorization was obtained. Your insurance company authorized _____ initial days of rehab coverage. Preauthorization is not a guarantee of payment. The case manager will work with your insurance company during your child's inpatient rehab stay.

Your child's estimated combination of daily therapy:

PT _____ **hours**

OT _____ **hours**

SLP _____ **hours**

Length of Stay: Your child's length of stay is determined by many things. The rehab team decides how long your child will benefit from an intensive inpatient rehab program. Every week, the team will discuss your child's long- and short-term needs.

At this time, your child's **estimated** length of stay is _____ weeks. After your child's stay, your child will discharge to a less intensive outpatient therapy program.

What can I expect after my child is admitted to Acute Inpatient Rehab?

Monitoring: The focus will be on your child's ability to function. The nurses will monitor your child's vital signs once each shift or twice each day, unless there is a medical reason to check them more often.

Therapy: Your child will receive 3 hours of therapy from PT, OT, and/or speech therapy each weekday. On Saturdays, your child will receive between 1½ and 3 hours of therapy in the morning. On Sundays, no therapy will be provided.

WeeFIM™ scoring: Therapists and nurses use a measurement tool called WeeFIM™ to measure the functional abilities of your child. The WeeFIM™ provides a fair way to measure your child's progress. Your child will be observed participating in daily activities. The score is given based on how much assistance your child needs to complete these tasks. Primary Children's collects your child's WeeFIM™ observations and scores upon admission to the acute rehab program, once per week, and upon discharge. These scores are submitted to a national database. Scores from Primary Children's rehab program are compared with other children's rehab programs. The information is used to help improve care.

The WeeFIM™ trained nurse will watch your child doing the following activities:

- Feeding themselves
- Getting into and out of the bathtub or shower
- Getting onto/off the toilet

They will also watch your child doing the following hygiene skills:

- Brushing teeth
- Combing hair
- Washing their body in the bath
- Cleaning themselves after using the toilet

Rounding: The attending rehab doctor and resident or nurse practitioner will see your child every day. They usually see all of the rehab patients between 7-10 am. On weekends, the times may vary slightly. The case manager and bedside nurse are often included in these visits to answer questions and address concerns. During the visit, the plan for the day will be discussed. You will be updated about your child's medical condition and any changes in medications or treatments.

Rehab Conference: There are many care providers on your child's team. The team meets every Tuesday to discuss your child's progress, goals, barriers, and concerns. The case manager and rehab RN will provide updates from the conference on Tuesday afternoon or evening. Team goals will be reviewed and written on the white board in your child's room. You will share how you feel your child is doing with rehab. You will have the opportunity to make goals and provide feedback for the team at this time.

Treatment Plan: The treatment plan is a summary of your child's rehab plan. It is created when your child is admitted to the program. Goals are set by each therapist and the nurse team. Each week the goals are updated to show the progress your child has made. Your input is important in setting these goals. Please feel free to discuss the goals set with your therapist, nurse, doctor, and case manager. You will receive a copy of your child's treatment plan each Wednesday or Thursday.

Care Conference: A care conference is a meeting scheduled for the family and care providers. It can be confusing when there are many different members on the team. It is helpful if the members of the team and the family meet together to discuss the child's rehab plan. These meetings also are used to coordinate complicated discharges and transitions of care. You may request a care conference at any time. The social worker will help to set up this conference.

Family Pass: It is important to practice what you and your child have learned in the rehab program. The hospital is a safe environment. To help prepare you and your child to go home, Primary Children's provides the opportunity for you and your child to leave the hospital for short periods of time. This is called a Family Pass. The rehab team determines eligibility for Family Passes during the Rehab Conference. You may need to pass off some skills before using a Family Pass. These skills may include transferring your child into/out of the car, administering medication, and managing your child's medical condition. You may go on a pass for 2-8 hours on Saturday after therapies and/or on Sunday. The passes are not for overnight visits. You and your child will be given goals to work on while you are on the pass. The nurse will review how the pass went upon your return. Family passes help determine areas of focus that may not be seen in the hospital environment.

How can I help my child be successful with acute rehabilitation?

- Go to therapies with your child, unless your child does better in therapy when you are away.
- Practice the skills learned in therapy with your child.
- Bring loose-fitting clothing from home for your child. Have a different set of clothing for daytime and for nighttime.
- Bring shoes for your child that can give your child the support needed in therapy. Your physical therapist can help you decide the best type of shoes.
- Decorate your child’s hospital room in a way that will help your child feel more at home.

- Write down questions and concerns you have so you will remember them when the doctors round.
- Give honest and open feedback to the rehab team. The rehab program needs to work for you and your child. Please help the care providers know what they can do to meet your expectations.

Your child’s care providers look forward to working with you and your child during this difficult time. Acute inpatient rehab is the time to find your child’s full potential and to celebrate your child’s progress towards recovery.

Questions for my doctor