
10.18 Rehabilitation Outpatient Operational Procedures

Links to Policy

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| Applicable: | Sacred Heart Rehabilitation |
| Classification: | Continuum of Care |
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| Approved by: | Clinical Services Committee |
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| Responsible for Review: | Outpatient Administration Meeting |
| Key Words: | |

1. Objective:

- The purpose of the procedure is to formalise guidelines for the operation of outpatient therapy services within Sacred Heart Rehabilitation.
- The procedure is to ensure that the service runs efficiently and effectively with equality for all patients.

2. Principles:

- All patients that attend Sacred Heart Outpatient Rehabilitation Service are appropriate and are aware of the guidelines of this service.
- This procedure applies to all patients attending outpatient services at Sacred Heart Rehabilitation Service. It is applicable for physiotherapy, occupational therapy, clinical psychology, neuropsychology, speech pathology, dietetics and social work services.
- All outpatient therapists must comply with the operational procedures to ensure equality of treatment and access for all appropriate patients.

3. Definitions:

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| Appropriate patients: | Patients who fit the inclusion criteria (as per 5.1 in this document). |
| Compensable patients: | Patients that are covered under Workers compensation scheme, Compulsory Third Party Insurance (CTP), Lifetime Care and Support or overseas fee-paying patients (not covered by Medicare reciprocal agreement) |
| Treatment session: | One treatment session with one therapist (usually face to face intervention) although in the case of some disciplines this may include intervention via telephone call or tele-rehabilitation. This may or may not include group-based intervention. |
| Intake Meeting: | A fortnightly meeting held with the outpatient therapists as the quorum to process new referrals to the outpatient service. New referrals are reviewed and accepted or declined based on the inclusion criteria in 5.1 and ranked in order of priority for waiting lists as per 5.3. |
| St Vincent's Area: | Boundaries include: West- Haymarket to Harbour St North- Millers Point to Watsons Bay South- Cleveland St Surry Hills to Boundary St Clovelly East- Coastline extending from Watsons Bay to Clovelly |
| South Eastern Sydney and Illawarra Health Service (SESIAHS): | Formally known as South Eastern Sydney Area Health Service, provides health services for people living in Eastern and South Eastern Sydney and the Illawarra areas. The boundary extends from Sydney Harbour in the north, through Botany Bay and Port Hacking south to Wollongong and Shoalhaven in the south. 13 Local Government Areas are included: part of the City of Sydney, Randwick, Woollahra, Waverley, Botany, Rockdale, Kogarah, Hurstville, Sutherland, Wollongong, Shoalhaven and Shellharbour. |

4. Roles and Responsibilities:

4.1. All patients considered for outpatient therapy **MUST** be referred for services by a rehabilitation specialist employed by St Vincent's Public Hospital or accredited with St Vincent's Private Hospital or St Vincent's clinic who work with the outpatient Sacred Heart Rehabilitation Service.

4.2. All referring rehabilitation specialists are responsible for only referring patients that meet the inclusion criteria for outpatient treatment at Sacred Heart Rehabilitation. If they are outside the inclusion criteria the specialist should specify why the referral should be considered for inclusion in this service.

4.3. All referring rehabilitation specialists are responsible for finding and referring patients to a more appropriate service if a patient has been declined for service at the intake meeting should they do not meet the inclusion criteria.

4.4. The responsibility for the ongoing coordination of care rests with the referring rehabilitation specialist.

4.5. All therapists are responsible for assessing each referral according to the inclusion criteria to ensure all appropriate patients are able to access the service in a timely manner.

4.6. The outpatient administrative support person is responsible for sending the initial introductory letter to the patient, including outpatient guidelines and expectations for patients.

4.7. Each outpatient therapist is responsible for contacting the patient to commence therapy.

4.8. It is the responsibility of all team members, including rehabilitation specialists, to communicate relevant medical changes or changes in risk status to all appropriate team members in a clear and timely manner. This includes, and is not limited to, suicide risks, significant decline in function or threats to patient safety.

5. Process:

Patients receiving therapy in the outpatient service need to comply with the following steps:

5.1 Patient inclusion criteria:

- All patients must be referred by a Rehabilitation Specialist affiliated with the Outpatient Rehabilitation Service at St Vincents Hospital
- All patients being referred must have achievable, realistic rehabilitation goals and must be motivated and prepared to actively engage in their rehabilitation program.
- Aged 16-80 years of age.
- All outpatients must be continent or able to manage continence independently while attending outpatient therapy.
- Require only assistance of one person for transfers and mobility.
- Able to arrange own transport to and from therapy sessions.
- Residing in St Vincent's Catchment Area
- Unable to access more appropriate services, for example, aged-care facilities, or similar services closer to home; or compensable patients not able to access appropriate private services under Worker's Compensation etc.

5.2 Referrals:

- Patients can be referred for one therapy OR a combination of the following therapies: Physiotherapy, occupational therapy, speech pathology, clinical psychology, neuropsychology, social work and dietetics.
- Patients must be referred by a St Vincent's Rehabilitation Specialist

5.3 Priority will be given in order to:

- 1) A) Patients discharged from Sacred Heart Rehabilitation Inpatient Service, St Vincent's Hospital Acute or another inpatient acute or subacute facility and residing in the area serviced by St Vincent's Hospital
- 2) Patients referred by a St Vincent's Rehabilitation Specialist from the community and residing in the area serviced by St Vincent's Hospital. Consideration for priority may be given to patients referred to three or more therapies to ensure a coordinated team approach to treatment.
- 3) Patients who have been accepted to the service but are outside the referral criteria such as: over the age limit, living out of the St Vincent's catchment area, ,Compensable patients (including workers compensation, CTP) and Overseas fee paying patients - these patients should generally be referred to a private clinic where they can access appropriate services.

Please note that within the service priority categories listed above there is discretion with the therapist to expedite a lower category referral based on clinical need.

5.4 There may be a waiting period for services which may vary between disciplines and according to the priority listing.

5.5 Referrals to the Outpatient service will be collected and processed fortnightly at the multidisciplinary Intake Meeting to review each referral and decide if the referral will be accepted based on the inclusion criteria in 5.1 and to decide on each patient's priority ranking as per 5.3.

5.6 Referrals which have been declined from the service at the Intake Meeting, based on the inclusion criteria in 5.1, will be processed and recorded in the minutes. A letter will be sent promptly back to the referring Rehabilitation Specialist indicating the reason why services have been declined according to the inclusion criteria in 5.1. It is the referring doctor's responsibility to find and refer the patient to a more appropriate service for therapy.

5.7 All patients who are accepted into the outpatient service via the Intake Meeting will promptly be sent a letter by the outpatient administrative support person informing them they have been accepted into the service and that there may be a waiting period which may vary between therapies. The letter will also outline the guidelines of the service and the patient's responsibilities and expectations for treatment.

5.8 On the patients first session with the service, regardless of which discipline they have contact with first, another copy of the document outlining patient

responsibilities and expectations will be given to the patient and a copy placed in the patient notes to indicate that it has been received. This is to ensure smooth communication regarding the service procedure on cancellations, failure to attend and continuation of therapy.

5.9 Initial appointments will be 40-60 minutes in duration so that appropriate assessments can be completed. Subsequent appointments may be up to 60 minutes.

5.10 If a patient is 10 or more minutes late for their appointment it may result in their appointment being rescheduled or their appointment time may be shortened.

5.11 Therapy will consist of a maximum of 12 occasions of service per discipline of one to one therapy. Additional group therapy sessions may be offered at the discretion of the treating therapist. Patients are expected to actively participate in all aspects of their therapy program.

5.12 If further therapy sessions are recommended at the conclusion of the 12 occasions of service this will be discussed with the treating team/referring specialist. If further sessions are deemed necessary and appropriate a new referral will be required from the Rehabilitation Specialist and the patient will be processed via the Intake Meeting and go back onto the waiting list.

5.13 At the completion of treatment at Sacred Heart Rehabilitation Outpatient Service, if deemed appropriate the patient will be given various follow up options these may include: home exercise programs, private providers, another public outpatient service or vocational provider. However the final decision remains the right of the patient.

5.14 Patients who fail to attend an appointment without contacting their treating therapist (s) will be placed back on the waiting list. The therapist will attempt to call the patient up to 3 times and then the patient will be notified in writing of their position on the waiting list and will be given a 2 week period in which to contact the appropriate therapist (s), in order to remain on the waiting list. Patients who fail to make contact by the end of the two week period/ or date indicated in the letter, will be discharged from the service. The patient will be notified in writing of their discharge by the relevant therapist.

5.15 Repeated cancellations should result in a verbal warning being given and it may also result in discharge from the Sacred Heart Outpatient Service at the discretion of the treating therapist and in consultation with the treating rehabilitation specialist. Patients will be notified in writing of their discharge.

5.16 There is no fee for the service in the Sacred Heart Rehabilitation Outpatient Service. Compensable patients will however be charged directly to their insurance provider for services. Overseas chargeable patients will also be billed according to the scheduled fee.

5.17 If purchasing of equipment is required, the patient will incur the purchase cost of the equipment.

6 Compliance:

6.1 Sacred Heart Rehabilitation Outpatient Business Meeting is responsible for monitoring compliance of the Outpatient Operational Procedure. This

includes: occupational therapist, physiotherapist, clinical psychologist, neuro-psychologist, speech pathologist, social worker, Rehabilitation Specialists and Director of Rehabilitation.

6.2 Compliance of the Operational Procedure can be monitored through the Intake Meeting and through the outpatient service key performance indicators.

7 References:

- **ACHS EQUIP/Aged Care Standards:**
 - 2.1 Access Consumers/patients/communities have access to health service and care appropriate to their needs.