

REHABILITATION (INPATIENT) ADMISSION CRITERIA: ST GEORGE HOSPITAL

<p>Cross references (including NSW Health/ SESAHS policy directives)</p>	<ul style="list-style-type: none"> • NSW Health PD2011_015 Care Coordination: Planning from Admission to Transfer of Care in NSW Public Hospitals. • SESIAHS PD107 Discharge and transfer planning for adults and children in acute facilities • SGSHHS CLIN076 Killara Rehabilitation – Fast track Orthopaedic • SGSHHS CLIN173 Killara Rehabilitation Beds - Admission to - TSH • St George Hospital Acute Rehabilitation Team (ART) Guidelines
<p>1. What it is</p>	<ul style="list-style-type: none"> • A guideline to inform the key clinicians (internal and external to St George Hospital) regarding the admission criteria and process for St George inpatient rehabilitation beds. • An outline of the correct referral process for St George inpatient rehabilitation beds.
<p>2. Employees it applies to</p>	<ul style="list-style-type: none"> • Staff Specialists • Medical Officers (MO) • Junior Medical Officers (JMO) • Nurse Managers (NM) • Nurse Unit Managers (NUM) • Registered Nurses (RN) • Allied Health • Patient Flow Managers • External organisations and referrers
<p>3. When to use it</p>	<ul style="list-style-type: none"> • When referring a patient to the St George inpatient rehabilitation service. • When requesting transfer to St George inpatient rehabilitation ward. • When reviewing and providing consultation on suitability for admission to the St George inpatient rehabilitation ward.
<p>4. Why the rule is necessary</p>	<ul style="list-style-type: none"> • To ensure appropriate usage and transfer of patients to the St George Hospital rehabilitation ward • To clearly outline the admission criteria and referral processes, for St George inpatient rehabilitation service
<p>5. Who is responsible</p>	<ul style="list-style-type: none"> • Nursing Unit Manager 6 West • Nurse Manager Aged and Extended Care (AEC) • Nursing Co-Director AEC • STG Medical Director Rehabilitation

6. Process

6.1 Referral and Assessment Process for St George Inpatient Rehabilitation

- Please see flow chart - *Appendix 1*.
- There are 22 inpatient rehabilitation wards at St George Hospital and these can only be accessed via a referral to the Rehabilitation Service and acceptance by a rehabilitation consultant. A rehabilitation referral may be made by medical and nursing staff.
- A referral is made using the accepted rehabilitation form - *Appendix 3* and faxed to number **9113 3952** (ext 33952) the Department of Rehabilitation for data entry.
- It is anticipated that consultation and assessment occurs within one working day of referral.
- The assessing rehabilitation registrar or consultant will consider the skills, equipment and environment required to facilitate the patient's rehabilitation program. If the patient is accepted the therapy will be commenced on the acute care ward by the Acute Rehabilitation Team (ART). Other patients may require therapy to be conducted within the rehabilitation ward environment.
- The outcome of the rehabilitation assessment will be documented in the patient's progress /clinical notes and / or consultation request form, a recommended rehabilitation pathway such as clearly stating if the patient is suitable for ART or inpatient rehabilitation programme. This will also be reflected on the LHD web-based rehabilitation referral and waiting list program in the notes section and this is updated throughout the day and is available as read only via the hospital information system. To access the rehabilitation system database, go direct to <http://ranapp12.lan.sesahs.nsw.gov.au/Rehab/default.aspx> or via the SESLHD intranet <http://seslhnweb/InformationSystems.asp#R> - *Appendix 2*.
- Any delays, issues or queries should be escalated to the Director of Rehabilitation St George Hospital **ph: 9113 2267**.

6.2 Admission Criteria

- St George Inpatient Rehabilitation Unit is a specialised tertiary referral rehabilitation service that provides rehabilitation support to patients accessing the tertiary services of St George Hospital as well as local rehabilitation services to patients within the local region.
- St George Inpatient Rehabilitation Unit has particular expertise in treating patients that have suffered trauma, are complex in presentation, need dialysis, had an amputation or a neurological syndrome (e.g. Stroke or spinal impairment) that has resulted in a decline in their functional status or conditioning.
- Patients requiring rehabilitation due to orthopaedic conditions (e.g. Fractured NOF) should be referred to Calvary Hospital inpatient rehabilitation services. If referrers are unsure of the correct rehabilitation service to refer a patient to, a referral should be made as per 6.1 and/or as the information at the bottom of the referral forms see Appendix 3. As well the rehabilitation consultation will be able to provide advice of the correct service path.
- Patient's referred for rehabilitation must demonstrate the cognitive capacity and motivation to participate in a rehabilitation program.
- Patient's accepted will be those that have prospects for functional gain within a reasonable timeframe and where there is reasonable expectation that they will return home or to an appropriate level of supported accommodation or care that may be higher than the pre-admission accommodation.

- Patients accepted will be medically stable and able to be managed in a subacute environment. If patients are required to return to the acute ward area due to a decline in condition a new referral will need to be made to the St George Rehabilitation Services, as per 6.1, to facilitate re-admission.

6.3 Assessment Outcomes

- The outcome of the consultation will be written in the patient's progress /clinical notes and / or on the Medical Consultation form.
- The rehabilitation consultant may request that certain investigations be performed, or other medical opinions sought, prior to acceptance for a rehabilitation programme. Please ensure that these investigations are attended to, which will avoid unnecessary delays.
- If the patient is deemed **not suitable** for a Rehabilitation programme at the time of consultation, the rehabilitation Consultant (or registrar) may either **close** the consultation, or advise that they will **return to review** the patient at a later date, this should be recorded on the consultation form and in the progress /clinical notes.
- If the patient is **deemed suitable** this will also be clearly documented and the patient placed on the appropriate list (Issues Pending List, Referral Waiting Transfers ART, Referral Waiting Transfers Other LHD and Referral Waiting Transfers are patient waiting for an inpatient bed).
- The rehabilitation list is updated through out the day and also clearly outlines what list the patient is on i.e. waiting for consultation, issues pending, being treated by the Acute Rehabilitation Team or accepted and awaiting a bed vacancy for transfer.
- If you have any questions about any aspect of the Rehabilitation Consultation, including the patient's suitability for rehabilitation, Director of Rehabilitation St George Hospital **ph: 91132267**. Inquiries regarding predicted transfer date can also be made with the NUM of 6 West **ph: 9113 3621**.

6.4 Out of Zone Referrals

- Due to a finite allocation of inpatient rehabilitation beds, patients that reside within the ST George and Sutherland Hospitals and Health Services (SGSHHS) sector will be prioritised for acceptance into the St George Inpatient Rehabilitation Unit.
- Prioritisation of patients for rehabilitation beds at St George Hospital will be based initially on clinical need, however the decision to admit a patient to a rehabilitation bed will also depend on multiple other factors.
- Patients requiring specialised brain injury rehabilitation services will need to be referred out of area, as St George Hospital does not have a Brain Injury Unit. The current Brain Injury Unit that services The St George patients is Liverpool Brain Injury Unit.
- Where possible patients from out of the St George zone requiring rehabilitation should be referred to their corresponding local rehabilitation service, to ensure seamless community transition. The St George Rehabilitation Department will however provide consultation regarding suitability and advice for these patients when requested.

There may be extreme clinical cases whereby transfer to another facility is not feasible and in these cases the treating consultant should contact The Director of Rehabilitation St George Hospital directly on **ph: 9113 2267** to discuss the case. Special exception may be granted for valid cases.

7. Compliance evaluation	<p>Q1. How do I refer a patient to the STG Rehabilitation Unit? A1. Refer to 6.1</p> <p>Q2. What is the admission criterion for the STG Rehabilitation Service A2. Refer to 6.2</p> <p>Q3. How will I know what the assessment outcome is? A3. Refer to 6.3</p> <p>Q4. What happens for patients that do not live in the STG catchment zone A4. Refer to 6.4</p> <p>The number of patients not accepted to STG rehabilitation that are referred will be monitored and should demonstrate a decline in numbers through the clarification provided within this business rule.</p>
8. Keywords	Rehabilitation, Admission
9. External references	Policy 1.6 Admission Criteria Inpatient Rehabilitation Unit Calvary Healthcare Sydney

I, *Nicole Wedell, Nursing Co-Director, Aged & Extended Care of St George / Sutherland Hospitals and Health Services* attest that this business rule is not in contravention of any legislation, industrial award or policy directive.

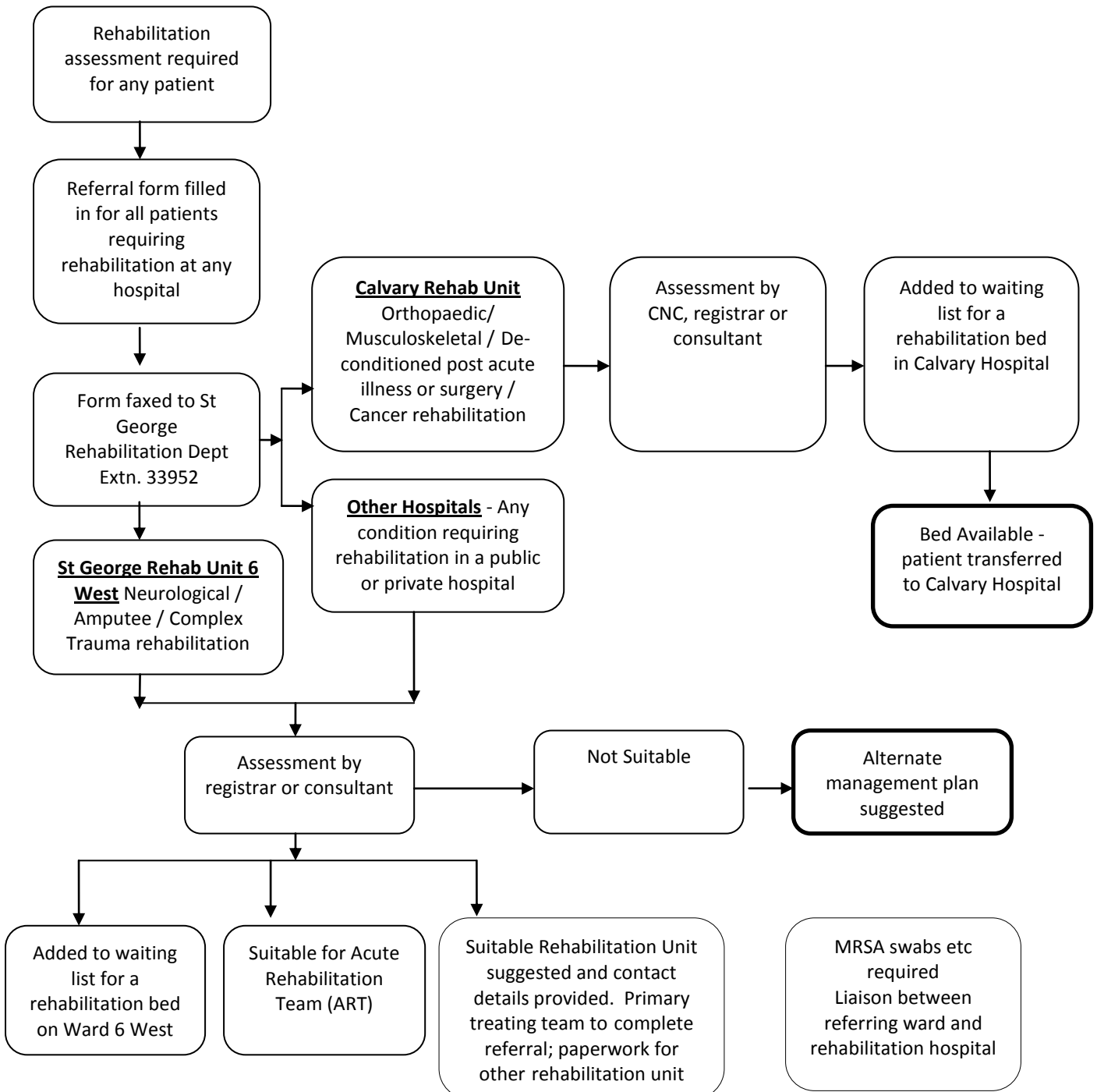
Revision and approval history

Date	Revision number	Contact Officer (Position)	Date for revision
June 2012	0	Nurse Manager, Aged and Extended Care	June 2015

APPENDIX 1

SESLHD Rehabilitation Referral Protocol for Patients in St George Hospital

Referral form filled in for all patients requiring rehabilitation at any hospital



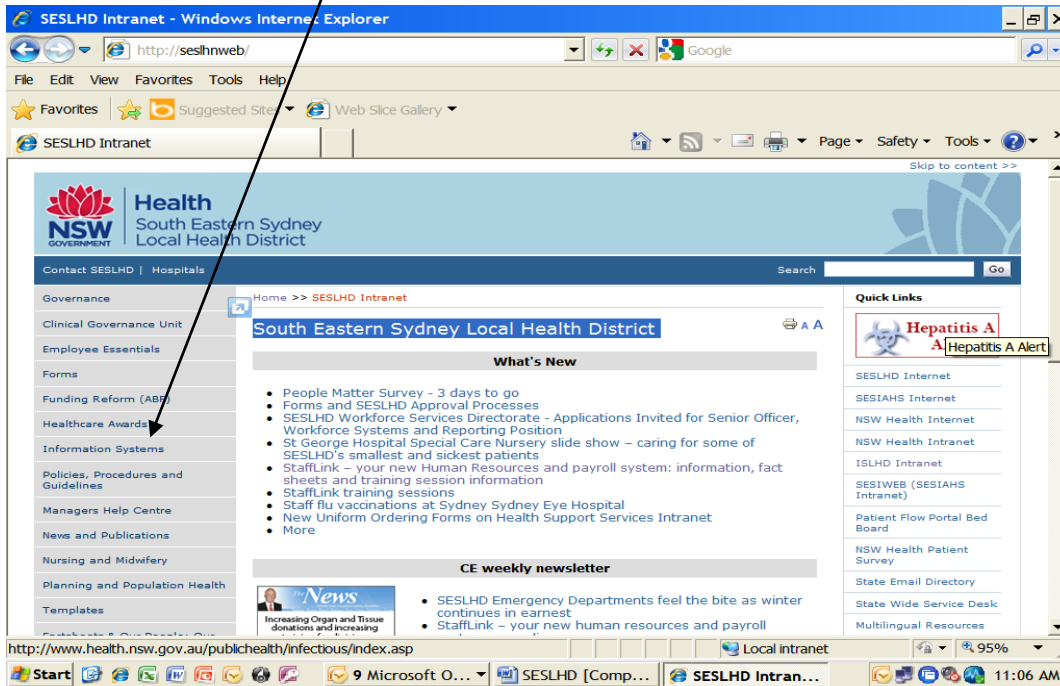
**St George/Sutherland Hospitals
And Health Services (SGSHHS)**

Clinical Business Rule SGSHHS CLIN203

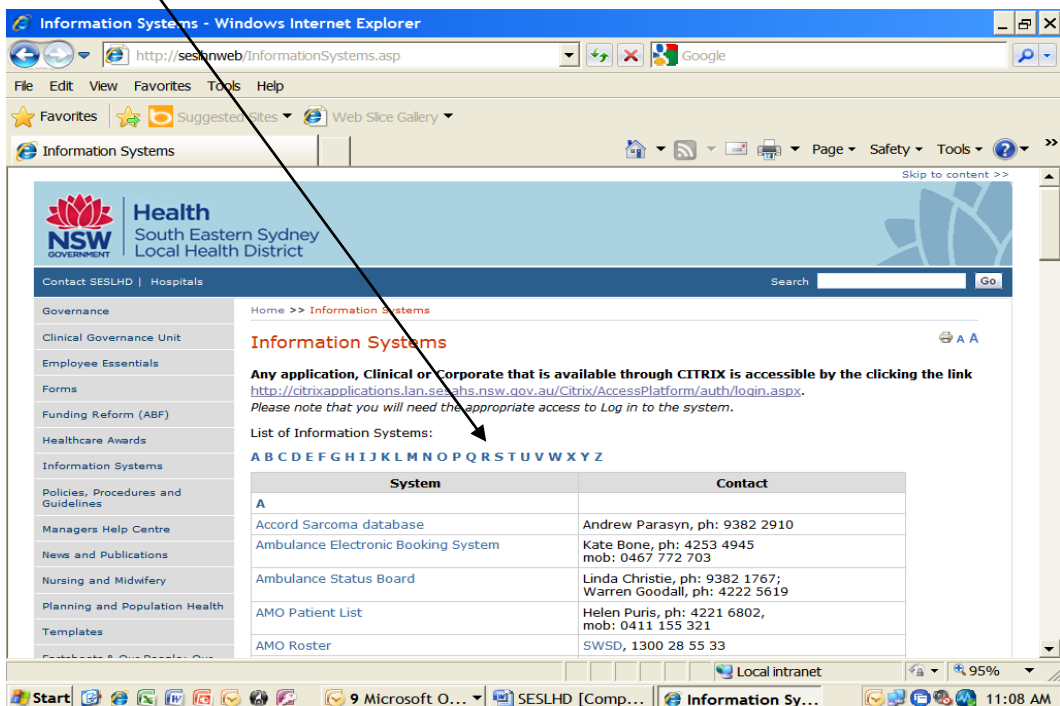
APPENDIX 2

To access the Rehab System database via the SESLHD Intranet:

- Select the 'Internet Explorer Browser' in the bottom tool bar on your computer.
- Then select the 'SESLHD Intranet' for South Eastern Sydney Local Health District.
- You then select the 'Information Systems' in the Left-side Menu



- Press the Letter R (you will find a contact person and link to the Rehab System.)



- Click on Rehab System
- Enter your user name and password

APPENDIX 3

REHABILITATION SERVICES REFERRAL

St George Hospital 6 West Calvary Rehab Unit Other Hospital (Public / Private)
 If not sure, see below for triage guidelines (22.07.09)

Please FAX this form to 33952 (Department of Rehabilitation The St George Hospital)		
Addressograph label		Referring Consultant:
		Referring Hospital:
Referring Ward :		Outside Hospital and Ward Referring To: (e.g. Metro Rehab, Balmain, Liverpool)
Referring Ward Contact Number:		
Admission Date :	Preferred Language Spoken:	Interpreter Required: Yes <input type="checkbox"/> No <input type="checkbox"/>
Principal Diagnosis:		
Significant Co morbidities:		
Active Medical Issues:		
Reason for Rehabilitation Consult:		Date patient is ready to leave acute care:
Any Swallowing and / or dietary restrictions?		
Weight Bearing Restrictions: FWB / PWB / NWB Duration: Current Mobility Status:		
Does the patient require assistance of staff ? with:		Falls Risk:
Does the patient have any communication difficulty?		Continence Status: Faeces: Cont <input type="checkbox"/> Incont <input type="checkbox"/> Urine: Cont <input type="checkbox"/> Incont <input type="checkbox"/> IDC <input type="checkbox"/>
Alert? (e.g. MRSA, VRE,etc)		
Outline any cognitive and /or behavioural issues: Mini Mental Score (for pt > 65 yrs or confused)		
Other Relevant Information: (e.g. social issues etc)		
Referrer's Name & Designation: (CC / NUM / Reg / RMO / Intern):		
NAME:		
SIGNATURE: PAGE NUMBER:		

The **Calvary Inpatient Rehabilitation Unit** specialises in orthopaedic rehabilitation, geriatric rehabilitation, reconditioning post acute medical and surgical illness, and cancer rehabilitation. Patients **must** be medically stable prior to transfer.

The **St George Hospital (6W) Inpatient Rehabilitation Unit** specialises in neuro-rehabilitation, multi-trauma and amputee rehabilitation. Complex spinal and head injuries may be accepted prior to transfer to the tertiary specialist units. The St George Unit also takes patients on haemodialysis or whose medical status requires ongoing acute involvement in their care.