

Acute Pediatric Rehabilitation Admission Criteria

Sunny Hill Health Centre at BC Children's Hospital

Sunny Hill Acute Rehabilitation Program is a Tier 6 level service providing acute rehabilitation service and specialized medical care for the children and families of the province of British Columbia. We provide 2 streams of service within our program: inpatient and outpatient day program which collectively allow us to support up to **12 rehabilitation patients** at any one time.

The program is child and family focused, goal oriented, intensive, and time limited for children and families who require the unique services of a specialized interdisciplinary team and rehabilitation specialists.

Acute Rehabilitation admission criteria

Entry into our program starts with referral to our program and medical consultation by our pediatric developmental and rehabilitation specialist. Each admission is reviewed by our intake team. Questions to determine appropriateness of referral / admission are welcome at any time.

General

- For children and adolescents between 0 and 19 years of age
- Has sustained significant loss of function as a result of brain injury, spinal cord injury, stroke or other disabling condition or disease process.
- Has a limitation in multiple functional areas such as: development, mobility/motor, activities of daily living, home/community management, respiratory, bowel/ bladder control, cognition, swallowing and communication.
- Has probable rehabilitation potential within a reasonable time frame with the expectation for clinical/functional improvement through identifiable rehabilitation goals.
- active/acute medical treatments are not limiting the child's participation in the comprehensive rehabilitation program.
- Requires specialized therapeutic skills/equipment.
- Is clinically stable ≥ 24 hours and is at a lower risk for medical instability.
- Requires the intervention of at least ≥ 2 or more of the following disciplines: Physiotherapy, Occupational Therapy, Recreation Therapists, Aquatic therapy, and Speech & Language Pathology.
- Requires and is able to eventually tolerate ≥ 3 hours of therapy per day 5 days/week.
- Requires active participation of family and/or care givers during the rehabilitation program to enable appropriate outcomes and transition/ discharge planning.

Inpatient Specific

- Requires 24-hour nursing availability to assist with care and education/training.

- Requires ongoing physician assessment/oversight, program coordination, and medical specialty services.
- Requires comprehensive education and training directed towards self, one's family and/or care givers for a safe community discharge with appropriate equipment and services in place upon discharge.

Team members (alphabetical order)

- Aquatic Therapy
- Child Life
- Dietitians
- Music therapy
- Nursing
- Occupational Therapy
- Physician (Developmental Pediatrics and Rehabilitation)
- Physical Therapy
- Psychology
- School Teachers
- Social Work
- Speech Language Pathology
- Therapeutic Recreation

(not all patients require or receive all services)

Other services that can be accessed as needed for care while in the acute pediatric rehabilitation program are:

- Indigenous Health support
- Gait lab
- Orthotics and Prosthetics
- Seating specialist
- Volunteers

Day-patient and Out-patient Day Program

The goal of this rehabilitation program is to transition children to ongoing community supports and resources. It is typical that children will move from inpatient to day patient to outpatient rehabilitation care. We view this as a typical path for our patients and their families to expand and use new and returning skills into a community setting.

If a child/youth is participating as an outpatient, they must be accompanied and cared for (medication, feeding, toileting, etc) by family/caregiver at all times during the outpatient program unless otherwise established by the Physician, family and child.

Children and youth continue in our program until they can be safely discharged to ongoing community providers. Transition planning begins early in the rehabilitation program.

Exclusion Criteria:

- Appropriate rehabilitation services and intensity are available in the child's local health region.
- There is not a goal to achieve higher function or the need does not require intensive interventions
- The child has received a course of outpatient therapy for the same issues/goals and whose status remains unchanged.

Discharge Criteria:

- The child has met their rehabilitation goals
- The child and family needs can now be met by another agency or service in their local community
- The need for therapy is less than 3 times a week
- The child has not demonstrated evidence of improvement in functional abilities after a period of intervention
- The child becomes medically unstable and moves to acute care
- The child and family are not able to attend the program at an intensive level.

Inpatient Sub-Acute Specialized Medical Management and Nursing Care including respite following orthopedic surgery

SHHC supports limited **medical beds** for a child who requires hospitalization for specialized daily medical care and/or nursing care resulting from an acute health related event (elective or non-elective) that is not duplicating services at BCCH, but is either:

- i. appropriate and specific to the expertise of other Sunny Hill programs' mandate/care; and/or
- ii. in support of continuity and transition care for patients and families that are known to SHHC.

Typical patients that fit into this category are:

- Post operative patients that are known and followed by SHHC's Neuromotor Program; typically GT placement.
- The medical management of post –operative implantation of intrathecal baclofen devices.

Specific Post-operative Orthopedic Respite Criteria

All possible options for supporting the child/family safely in their home community must be explored and planned for including setting up of equipment, home nursing support, transportation, home access etc, before an inpatient bed is requested. After these options have been explored, an inpatient bed could be requested if the request meets the following criteria:

- home safety or access/transportation issues
- medical complexity and/or high care needs greater than a family/community can manage, OR
- complex ADL needing special equipment that cannot be accessed in community

There is **limited respite capacity** on the inpatient unit at SHHC.

Exceptional Admissions

There are times when extenuating circumstances create the need for an inpatient bed to be accessed to support crucial service delivery within SHHC and BCCH. For BCCH patient overflow situations, we ask that both SHHC's Program Manager and Medical Director be contacted directly. For situations whereby there are access or safety issues for a patient (ie. alternate safe accommodations considered & not found), the referring program's Medical and Operational Leaders should be informed who will in turn, contact SHHC's Program Manager and Medical Director for planning and support.

Nancy Lanphear MD SHHC Senior Medical Director
Leeann Taylor RN, Acute Rehabilitation Program Manager
Shelley Woodman RN, Acute Rehabilitation CNC
Unit phone number = 604-875-2345 ext 458311
Referrals to: **AcuteRehabReferrals@cw.bc.ca**