



Acute Rehabilitation Unit
Patient Information Guide

Admission Requirements

Our comprehensive inpatient rehabilitation program is for individuals who have suffered a loss in ability to function as a result of accident, injury, illness, or surgery.

To be eligible for admission, you must:

- Have a physician referral
- Be able and willing to participate in the rehabilitation program
- Be aware of your environment
- Be in need of two or more forms of therapy (physical, occupational, and/or speech)
- Have an identified discharge plan

Criteria for admission include impairment of:

- Mobility
- Self-care activities
- Cognitive function
- Communication
- Perceptual motor function
- Swallowing

When you are referred to the Acute Rehabilitation Unit, an Admissions Coordinator will visit with you and conduct an assessment to determine if you meet the above criteria. If you do, you will be accepted for admission into the program. You and your caregivers are encouraged to tour the Acute Rehabilitation Unit prior to admission.



An Introduction to the Acute Rehabilitation Unit

The Acute Rehabilitation Unit (ARU) is a 26-bed unit located on the third floor of Peterson Regional Medical Center. Our comprehensive



Inpatient Rehabilitation Program and Stroke Specialty Program are CARF Accredited. The Commission on Accreditation of Rehabilitation Facilities is an independent, non-profit organization that reviews and grants accreditation nationally. Our rehab programs and serves meet rigorous standards, assuring the highest quality.

Special amenities include:

- **Private** patient rooms
- Large dining/activity room for meals and social activities
- Well-equipped gym for physical and occupational therapy
- Transitional Living Apartments
- Outdoor Therapeutic Walking Path

As a patient in this setting, you will participate in a comprehensive inpatient rehabilitation program for people who have suffered a loss in ability to function as a result of injury, illness, or surgery. Our patients have a variety of diagnoses including stroke, multiple trauma, fracture of the hip or femur, amputation, brain or spinal cord injuries, or other neurological disorders. While the typical stay in the rehabilitation unit is longer than acute hospital care, the goal and focus of the rehabilitation program is for you to return home and to the community as independent as possible.

In the ARU, patients and caregivers are a part of a team, with everyone working hard to achieve the best possible outcomes for the patient. You will receive care in a therapeutic environment, 24 hours a day, seven days a week. Active participation in therapy three hours a day, at least five days a week, is required. The program offers training and education for the caregivers, home visits and community outings.

The ARU treatment team is directed by a physician specializing in rehabilitation medicine. Rehabilitation nurses, social workers, and therapists (physical, occupational, and speech), are an integral part of the team. Registered dietitians, psychologists, and other physicians are consulted as needed. All team members are experts in rehabilitation, and focus on helping you regain ability to function and achieve the highest possible level of independence and return to the least restrictive environment in the community.

The Acute Rehabilitation Treatment Team



Mirellé J. Foster, MD

*Medical Director,
Acute Rehabilitation Unit*

830.258.7824

Thomas Shaw, MD

*Medical Director,
Outpatient Rehabilitation*

830.258.7383

Medical Director: Mirellé Foster, MD, provides overall management for care of patients who are in the Acute Rehabilitation Unit. Dr. Foster is Board Certified in Physical Medicine and Rehabilitation, and will be your attending physician during your stay.

Consulting Physician: Responsible for assisting the Medical Director with any special medical issues while you are here. This may be your primary care physician or a hospital based physician.

Rehabilitation Clinical Nursing Supervisor: Provides information concerning the rehabilitation program and answers any questions you may have. After admission, the Rehabilitation Clinical Nursing Supervisor will be coordinating your care and providing overall supervision to the nursing care you will receive.

Case Manager/Social Worker: Helps patients and family members cope with the rehabilitation process and understand the program. In addition to education and counseling, the Case Manager/Social Worker serves as your liaison with community resources at time of discharge.

Rehabilitation Nursing Staff: Specially trained in rehabilitation and assist patients in practicing the skills they have learned in therapy. They provide care around the clock and are responsible for educating both you and your family/caregivers in promoting your independence and ability to take care of yourself. They will require that you do as much for yourself as possible so that you can continue to make progress in your program.

Occupational Therapist: Focuses on strengthening and re-educating the muscles of the upper body, re-learning cognitive skills and helping you to perform activities necessary for daily living. By teaching special skills and using adaptive equipment, the Occupational Therapist will help to improve your sensation, coordination, balance, thinking, visual perception, and activities of daily life.

Physical Therapist: Concentrates on mobility and improving your strength and endurance. You will work with the Physical Therapist to become more independent in how you move whether that is in a wheelchair, walking, or transferring from one surface to another. They will also work on other functional activities that improve posture and body mechanics.

Speech/Language Pathologist: Addresses communication, thinking and swallowing, and important skills that can affect all other areas of rehabilitation. In speech therapy, you will learn new techniques that help to compensate for newly acquired deficits.

Psychologist: Helps you better understand the type of condition you may have relating to behavioral or cognitive changes. This professional will work with you to understand and adjust to these changes.

Dietitian: Nutrition is an extremely important part of the rehabilitation process. The ARU dietitian is responsible for evaluating and developing programs to meet the nutritional requirements for each patient who has been identified as having special needs. They may also work with you and your caregiver to ensure that your nutritional needs are met after discharge.



What to Expect as a Patient

It is important to remember that rehabilitation is different, unique, and challenging. Patients do not come to the Acute Rehabilitation Unit to rest; instead, they come to be actively involved in their rehabilitation.

You should expect to work hard and be tired at the end of the day. You and your caregivers can also expect to build strong relationships with staff members. In addition, friendships between patients and families/caregivers usually develop. Encouragement and support are often valuable when coming from your peers and new friends in the ARU.

Following admission to the ARU, you and your caregivers will receive an orientation to the unit and the program by the Admitting Nurse to help you understand the goals of the rehabilitation program, your rights, and the daily routines.

A typical day will include:

- Waking up, getting ready for the day, and getting dressed in regular daily attire.
- Eating in the dining room with other Acute Rehabilitation patients.
- Active involvement in your therapy for at least three hours per day, including physical, occupational, and/or speech therapy. Psychology may also be part of the day.
- Learning about medical issues, dietary issues, etc., as well as how the lives of you and your caregivers will be impacted by the change that has brought you to the Rehabilitation Unit.
- Getting ready for bed.

During Your First Day of Admission

During your first day of admission, you are usually involved in an initial evaluation by the members of the treatment team. As part of the assessment process, you will have the opportunity to discuss personal goals and participate in the development of an individualized treatment plan that leads toward a targeted date for discharge.

On a routine basis, the treatment team will discuss your progress and modify goals as appropriate. As the key member of the team, your input is vital to this process. The team meets regularly to coordinate efforts and ensure progress continues until (a) all goals for discharge have been met, (b) there has been a significant medical change, or (c) you are no longer making progress toward the goals established for discharge.

The Role of the Family / Caregiver

There are many ways in which the caregiver is expected to be involved in the rehabilitation process. Active participation is very important to the success of your progress and helps to ensure that you receive the maximum benefit from rehabilitation. Here are some of the ways caregivers become involved:

- Providing information to the treatment team about the patient's personality, lifestyle, preferences, and previous medical history
- Encouraging the patient to work hard in therapy
- Bringing clean clothing on a regular basis
- Providing emotional support
- Helping the patient adjust to life changes that may be necessary. Assist the patient in incorporating techniques learned during therapy into their daily routine.
- Observing therapy and participating in training to be able to assist the patient in meeting their needs at home
- Participating in family education and conferences with the rehabilitation team
- Participating in discharge planning so the patient can make a smooth transition out of rehabilitation and receive any services and/or equipment needed after discharge

What to Bring with You to the ARU

A family member/caregiver should accompany patients who are being admitted to the Acute Rehabilitation Unit. Below is a list of items that you should bring with you.

- Loose, comfortable clothing (enough for several days) to wear during the day. (It is recommended that you label your clothing with your name.) Personal laundry services are not available, please exchange clothing regularly.
- Socks and comfortable shoes with non-skid soles
- Underwear and sleepwear
- Personal items from home that will make your hospital room less 'clinical' and help you focus on returning home (family pictures, favorite housecoat, blanket, etc.)
- Personal toiletries
- Dentures and supplies
- Eyeglasses and/or contact lenses
- Hearing aids and batteries
- Medical insurance/Medicare cards
- A copy of your Advance Directives

General Information

Visiting Hours: Caregiver involvement and support is vital to your success in the rehabilitation program, your caregivers may be asked to attend therapy sessions during the day to participate in training so that they can acquire the skills necessary to assist you after discharge. However, it is important to remember that the reason you are in rehabilitation is to participate in the daily therapy and nursing treatments. We ask that your visitors be sensitive to your needs and schedule their visits after daily activities are completed.

Valuables: Peterson Health cannot be responsible for valuables during your stay at the Acute Rehabilitation Unit or any other part of the hospital. Valuables should be left at home or in the hospital safe to ensure their protection. Nursing staff can make arrangements to have your valuable items stored in a safe. These valuables can be accessed at any time during your stay.

Chaplain: Our chaplain visits all patients at Peterson Health. At your request, the Chaplain's office will contact the religious denomination of your choice to arrange for a visit, or the Chaplain will continue to visit you during your stay if you desire.

Smoking: Peterson Health is a smoke-free facility. Smoking is prohibited inside all buildings, including the ARU and on all Peterson Health grounds.

Meals: You will be provided with a menu for meal selection based on your dietary needs and possible restrictions. Visitor trays are available and can be purchased in the cafeteria.



Our Unique Facilities

Private Patient Rooms

The Acute Rehabilitation Unit features 26 private patient rooms specifically designed to accommodate the needs of our qualified patients. Each room is equipped with a bed, a reading chair, closet space, bathroom, and most importantly, a view of the beautiful Hill Country.



Therapeutic Walking Path

Designed and constructed by our Medical Director, Mirellé Foster, MD, the outdoor walking path is used to test and strengthen mobility skills. The path includes various types of even and uneven surfaces that represent the wide array of terrain found in the Hill Country community.



Transitional Living Apartments

Two apartments simulate a real home environment with living area, kitchen, laundry, bedroom, and bathroom. You and your family/caregiver may be asked to stay in the apartment overnight as part of discharge planning to assess your ability to care for yourself at home.



Financial Arrangements for Inpatient Rehabilitation

Insurance coverage will be verified prior to admission and will be reviewed with you and your family/caregiver so that all responsibility is understood. Most insurance companies and Medicare provide coverage for comprehensive inpatient rehabilitation services. Medicare has a list of specific diagnosis/conditions that are acceptable for admission to Inpatient Rehabilitation facilities. For more information concerning your specific insurance coverage, please contact your insurance provider.

If you are being admitted to the Acute Rehabilitation Unit from a facility other than Peterson Health, you will need your insurance identification cards with you during the admission process.

After your discharge from the Acute Rehabilitation Unit, you will receive a bill for your stay. This bill will be separate from the bill you received if you also had an acute care stay at Peterson Regional Medical Center (the hospital). Billing for services provided by the physicians or other health care professionals are separate and distinct from the hospital bill, so you will most likely receive additional bills for those individual services. Questions about these charges should be directed to the office of each provider/physician whose phone number will appear on the bill.

Discharge planning begins prior to the admission to the ARU and continues throughout your stay. The social worker will coordinate the date and time of discharge with you and your family/caregivers to assess your post-discharge needs (i.e., continued therapy, nursing, equipment, home health care). It is essential that your family/caregivers participate in patient education and training throughout your stay, especially prior to discharge.

If a concern arises at any point during your stay at the ARU, you are encouraged to voice that concern to the Medical Director, the Director of Rehabilitation, the Clinical Nursing Supervisor, or any other staff member. You may also contact Peterson Health Patient Relations at 830.258.7630.

After your discharge, you will receive a patient satisfaction survey in the mail. Please take a few minutes to complete the survey and mail it in the provided envelope. The survey provides us with valuable information concerning your perceptions about the rehab program. Your feedback will help us continually improve our program.

After discharge, you will be contacted to ensure that all of your discharge needs have been met and to address any additional questions or concerns you may have.



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Rehabilitation

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