I’m On My Way

Kaiser Foundation Rehabilitation Center

Our Mission
Kaiser Foundation Rehabilitation Center is an international center of excellence that provides expert, transdisciplinary, culturally competent care and rehabilitation for people with disabling conditions. Through our care, education, training, and research, we improve function, expand human potential, and enhance quality of life for the communities we serve.

Our Goal
Our goal during your stay in the Rehabilitation Hospital is to help you relearn everyday tasks and gain an improved level of independence. We accomplish this goal together through active participation in therapy, education and “hands on” training to transition the responsibility of care from our staff to you and your caregivers.

Kaiser Foundation Rehabilitation Center
Kaiser Foundation Hospital
975 Sereno Drive
Vallejo, CA 94589
(707) 651-2313

kp.org/rehabilitationcenter
REHABILITATION AT
Kaiser Foundation Rehabilitation Center (KFRC)

The goal of rehabilitation is to restore an individual to an optimal level of well being after a disabling injury or illness. Our team is committed to assisting you in this process. You and your family are the most important part of our team. The treatment program acknowledges your uniqueness, considering your physical, psychological, social, leisure, cultural and vocational needs.

Rehabilitation begins with an evaluation. Members of the rehabilitation team will conduct a comprehensive assessment of your needs. This is completed within 48 hours of your admission. You, along with your family and/or significant other, play a vital role in assisting the team to meet your rehabilitation goals.

Within the first week, an initial team conference is held to share information, set realistic goals, and develop a comprehensive, individualized treatment plan. Subsequent weekly team conferences ensure coordination of efforts; progress is monitored and goals are reevaluated.

Counseling services are available to you and family members to address issues such as adjustment to disability, sexuality, and other emotional/personal issues.

Rehabilitation can be a long process; our program is the first phase of this process. Your rehabilitation will continue as needed after you leave the Center, for example, in home health or outpatient therapies which may be arranged at your local Kaiser.
THE REHABILITATION TEAM

Our delivery of care and services is through a team approach. You and your family are important members of the team, providing input about your goals and objectives. Your individual needs will determine who from the list of providers below are on your team. A brief description of our team members and their roles follows:

PATIENT:
• The most important team member
• Learn about injury or illness
• Attend 3 hours of scheduled therapies unless excused by physician for medical reasons
• Actively participate in therapies, decisions, and discharge preparations including home equipment and community resources
• Learn self-care and/or how to direct your care
• Communicate your needs

THE PATIENT’S FAMILY/CAREGIVER:
• Learn about injury or illness
• Attend family conference, as appropriate
• Discuss concerns with other team members
• Investigate community resources
• Personalize room with photos, posters, and other familiar objects
• Participate in individual treatment sessions
• Provide us with a home environment sketch or photos for any potential barriers using the form in Section 2 – Preparing for Discharge
• Observe and participate in discharge preparation activities
• Demonstrate aspects of care with “hands on” training in all aspects of care
• Participate in Behavior Management Program, if indicated
• Provide support

PHYSIATRIST:
• Physician who specializes in Physical Medicine and Rehabilitation
• Establish a medical diagnosis, identifies impairments and functional prognosis and provides medical management and rehabilitation program oversight
• Interpret results of radiological and laboratory findings and special testing results
• Prescribe treatments, therapies, medications and therapeutic aids
• Guide the progress of the treatment plan

**REHABILITATION NURSE:**

• Provide direct care
• Provide “hands on” education and training for you and your family/caregiver in the following:
  • Medications
  • Sleep, nutrition, and safety
  • Skin, bowel and bladder care
• Perform activities that maintain and restore function and prevent complications
• Direct carryover of skills taught and practiced during therapy
• Act as a patient and family advocate

**PHYSICAL THERAPIST:**

• Assist in improving functional mobility for everyday tasks such as moving in bed, getting in and out of bed, moving to and from surfaces such as your wheelchair, bed, toilet, etc, and walking (as appropriate).
• Transition motion into purposeful day to day activities
• Examine you strength, joint range of motion, balance, coordination, and sensation and analyze how they affect your function/mobility
• Develop a plan and use treatment techniques to promote your ability to move, reduce pain, restore function, and prevent long terms disability
• Educate your caregivers how to help you move and complete functional tasks with proper body mechanics to avoid injury
• Recommend and instruct you in the use of medical equipment such as walking devices, transfer equipment, braces, and bathroom equipment

**OCCUPATIONAL THERAPIST:**

• Assist you to restore function for optimal participation in activities of daily living, including work, school, family, community, and leisure activities.
• Address self-care and other activities of daily living
• Address and teach changes in movement, strength, sensation, coordination, and how these affect the use of arms and hands
• Address joint protection and function, endurance, body mechanics and positioning
• Recommend and train the use of adaptive equipment; designs, fabricates and applies splints
• Address appropriate seating systems including wheelchair cushions and laptray if applicable
• Evaluate home management, prevocational activities and social skills; address community reintegration
• Make recommendations on adaptation of physical and social environment

DURABLE MEDICAL EQUIPMENT COORDINATOR:
• Assist Case Managers and patients/family/caregivers to acquire equipment/supplies needed
• Work with patients’ insurance benefit
• Assist patients/families/caregivers to acquire private pay items

SPEECH LANGUAGE PATHOLOGIST:
• Assist you with communication disorders and dysphagia (swallowing problems) related to stroke, brain injury, and other neurological conditions or surgical procedures
• Evaluate and treat speech and language skills (listening, reading, talking, and writing)
• Evaluate and treat cognitive areas (concentration, problem-solving, and memory)
• Develop use of appropriate verbal and nonverbal communication systems
• Evaluate and treat individuals who have difficulty swallowing

REGISTERED NURSE CASE MANAGER:
• Ensure communication with all the members of your rehabilitation team; provide general orientation and education about physical rehabilitation and rehabilitation nursing
• Help you understand your medical equipment coverage with your Kaiser Health Plan Benefit
• Help you understand what equipment and supplies that are not a part of your Kaiser Health Plan Benefit
• Arrange for either continued therapies and or nursing services that may be required following your discharge from the rehabilitation center, at home, or
at your local Kaiser outpatient facility

**SOCIAL WORKER:**

- Assist you with personal issues affected by disability
- Assess coping history and current psychological adaptation to disability
- Assess availability of immediate or extended family members and support networks
- Provide counseling and support
- Address housing, living arrangements, education, and employment issues
- Discuss financial resources, and transportation issues
- Facilitate discharge planning and acts as liaison between the individual and the family and community resources

**NEUROPSYCHOLOGIST:**

- Assess and treat cognitive, emotional, social, and behavioral issues
- Assist in structuring the individual’s environment to minimize inappropriate behaviors and maximize the benefits of rehabilitation
- Perform an assessment of cognitive functioning if indicated
- Provide information for family members and caregivers about neurological conditions, signs and symptoms of psychological conditions and treatment options, strategies for coping with challenging behaviors, and recovery issues such as when an individual may begin to consider returning to work

**REGISTERED DIETICIAN**

- Screen each patient for nutritional risk
- Evaluate and provide diet therapy for nutritional risk factors and co-morbidities
- Provide education to patient and families on therapeutic diets
- Work with all rehabilitation team members to develop nutrition goals to optimize nutritional status
- Is available for nutrition intervention upon referral from all staff and family request

**RESPIRATORY THERAPIST:**

- Assist you in achieving maximum pulmonary function 24 hours per day, 7 days per week
• Provide respiratory care that maintain and/or restore function and prevent complications
• Monitor lung function and secretion clearance
• Provide direct care through varied respiratory medications and therapies
• Monitor carryover of skills taught and practiced during therapy
• Educate patient and family on various respiratory equipment and therapies

RECREATION THERAPIST:

• Assist you with individual or group activities that aids in improving cognitive and physical functioning and promote social skills and constructive use of leisure time
• Involve the individual in recreational and leisure activities appropriate for age, disability, and environment
• Provide community resources and assist with community re-entry to enhance independent living and quality of life

ADAPTIVE SPORTS CONSULTANT

• Provide information and resources on sports and recreational programs that have an on-going activities available for anyone with a physical limitation
• Coordinate on-site and community outings with adapted sports and recreation organizations for anyone who is going through or has gone through the rehabilitation process
• Provide on-going information via email on upcoming adapted sports and recreational events
• Available to provide information on how to access the resources in your community to maintain a healthy active lifestyle through Adapted PE programs at your local community college
THERAPY SCHEDULES

You will receive a schedule with the times of your individual and group therapies, classes and recreational activities. You will receive at least 3 hours of therapy five days per week.

Therapy Schedule example:

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00am</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:30am</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9:00am</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9:30am</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10:00am</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10:30am</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11:00am</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11:30am</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12:00pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12:30pm-1:30pm</td>
<td>LUNCH</td>
<td></td>
</tr>
<tr>
<td>1:30pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2:00pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2:30pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3:00pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3:30pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4:00/4:30pm</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

BRING TO CLASS
- Glasses
- AFO
- Memory Book/Communication Book
- Arm trough/tray
- Must wear positioning belt
- See back of card

KEY

**OT** = Occupational Therapy

**OTD** = Occupational Therapy Dressing

**SP** = Speech Therapy

**PT** = Physical Therapy

**RME** = Resisted Mat Exercise to improve strength, flexibility, endurance, and coordination

**GAIT** = to improve standing, walking & balance

**SC** = Self Care to improve bed mobility and transfers

**Weekend Group classes** to improve strength, flexibility, endurance, and coordination

**TRUNK**

**MAT**
GENERAL INFORMATION

Main hospital: (707) 651-1000
Nursing station phone numbers
• 3 South: (707) 651-1350  (rooms 320-325)

New hospital:
• 3 West:
  • (707) 651-1328 (rooms H3001-H3014)
  • (707) 651-1329 (rooms H3015-H3028)

Personal phone calls:
• Incoming calls are only to be received between 8:00 a.m. - 9:00 p.m.
• Outside calls may be made at any time

Local calls (Vallejo or Benicia) from the room: dial “9” and “1” followed by the number
Long distance calls from the room: dial "9" and then "0" and follow the options for collect or calling card billing

Engineering department:
• Must check all electrical equipment that is brought in from the outside for safety
• Inform the nurse of any personal electrical equipment brought to the center

Meals:
• Served in the dining room at approximately 7:30am-8:00am, 12:30pm-1:30 p.m. and 5:00pm
• Additional nourishment is available, diet permitting
• Because dietary issues can seriously impact a patient’s health, please check with the nurse before providing any food or drink other than that which is served on the meal trays

Medication:
• Upon admission the physician will order your medications
• Inform the nurse and physician of any prescription and over the counter drugs you are taking
• If you have any questions about medications, please feel free to ask the
nurse or physician about them

**Cigarette smoking** is not allowed at Vallejo Medical Center. Use of alcohol and illicit drugs is strictly prohibited.

**Televisions** may be played quietly between 7:00am-9:00pm. Ear phones are available at the nurses station for use after 9:00pm.

**Recreational activities**, such as canine therapy, music therapy, games, movies and presenters from the community are offered on selected days and evenings. Patients are encouraged to participate.

**Visiting** is encouraged. In some instances, when needed to promote recovery, the number of visitors may be restricted.

**Posting of bedside signs:**
- It is the policy of this facility to ensure that your dignity is respected
- On occasion, ensuring the quality of your care and/or safety requires the posting of informational care signs
- This policy does not apply to regulatory signs for the Infection Prevention Program
- If you or your representative disagree with the posting of the sign, the team will discuss alternative methods of informing care givers of information needed to render safe and effective patient care

**Valuables** should be taken home by the family or placed in the safe in our Business Office. We do not assume responsibility for lost or misplaced valuables. Money should not be kept in patient’s possession, except change for newspaper, etc. Personal television sets or radios are not allowed.

**Equipment**
You and your family are advised not to purchase wheelchairs, braces, crutches or other appliances before admission to the Rehabilitation Center until prescribed by the attending physician. However, any wheelchairs, braces, supports, prostheses or other special equipment already in the patient’s possession should be brought to the Center for evaluation by the therapist and/or attending physician.
CLOTHING AND LAUNDRY

Clothing List

Patients are dressed in their own clothes daily. The following clothing items are recommended for each patient in Kaiser Foundation Rehabilitation Center.

- Pair of casual shoes (tennis shoes preferred). No slip-on shoes. Please do not purchase new shoes. Recommendations for shoes will be made during the rehabilitation stay.
- Loose fitting slacks, either with elastic waistband or drawstring
- Underpants/under shorts and for women sports bras or camisole tops
- T-shirts or sweatshirts or front button blouses
- Loose, soft, stretch socks
- Sweater or light jacket
- Optional - Pajamas, nightgowns, bathrobe for night time wear only

NECESSARY TOILET ARTICLES INCLUDE

- shaving equipment
- toothbrush
- toothpaste/denture paste
- shampoo
- deodorant
- brush/comb
- cosmetics
- small mirror on stand
- laundry soap
- shoe horn
- eyeglasses, hearing aids and dentures if applicable
- "special" soap of yours in plastic container (optional item)

Family is responsible for doing the patient’s laundry. Clothing should be marked with permanent ink or name tag prior to admission. The patient or family/caregiver may use the washer and dryer located on the unit. Patients may use laundry facilities independently only after clearance from the therapist. The laundry room is available between the hours of 8:00a.m. - 7:00p.m.
PATIENT / FAMILY EDUCATION

Active participation and “hands on” involvement of both you and your caregivers throughout your stay are essential for successful rehabilitation. Rehabilitation is a transdisciplinary process that moves patients to a maximum level of independence. Patient and family education is a key part of that recovery. Education begins prior to admission and continues throughout the rehabilitation continuum even after discharge from our rehabilitation hospital.

On a daily basis, our team members are teaching patients how to adapt to their limitations, as they continue to make gains physically, cognitively, and emotionally. As well, we are sharing with their families/caregivers how to assist in this process. Through our weekly transdisciplinary team meetings, we develop and review weekly and discharge goals with your input, discuss how the education is progressing, and reinforce information and skills that are being taught by all the disciplines.

We take into consideration our patients’ preferred learning styles but also utilize various approaches to patient and family education to enhance retention. One-on-one sessions, written materials, videos/CD’s, family training, family conferences, and support groups are just some of the ways we provide information. For many of our patients, depending on what is best for their individual situations, they may go on an overnight therapeutic pass which allows the patient and family to practice skills in either their home setting or in our ADL Apartment. By utilizing a community outing/day pass with the patient and family, Speech, Occupational, Recreation or Physical Therapists can increase awareness of environmental accessibility and as well as improve physical, cognitive and functional skills.

Group classes are another means of providing education.

Spinal Cord Injury Classes
• Series of nine classes that include
  – Spinal Cord Basics
  – Autonomic Dysreflexia
  – Skin Care
  – Bowel Management
  – Bladder Management
  – Nutrition
  – Pain and Medications
  – Sexual Function, Fertility, and Reproductive Health (Male and Female
Family/Caregiver Training Days
We welcome your family/caregivers to start coming often and actively participate in your rehabilitation program to participate in treatment sessions, learn about your injury/illness, and become knowledgeable and comfortable with how they may need to assist you at home as you continue to recover. In addition, if necessary, we will schedule one or more required Family/Caregiver Training Days before you are discharged or before going on pass.
• Arranged by the case manager for family/caregivers who will be assisting the patient after discharge
• Provides a full day of teaching as the family/caregivers accompanies the patient to therapies and meets with the nursing staff on aspects of care at home

Spinal Cord Injury Forum/Discussion Group
Spinal cord injury patients and family members/caregivers can attend this group on Wednesdays at 4:00 in the Lounge. Facilitated by the Adaptive Sports Consultant, topics include advocacy, tips on everyday activities, equipment, coping, other topics the group wants to discuss

Emergency Preparedness Class
On the 2nd and 4th Tuesdays of the month, the Adaptive Sports Consultant will provide a class to address the importance of being prepared for a variety of disasters including how to assemble your survival kit.

Family Conferences
• Your treatment team may decide a Family Conference is needed to further discuss special aspects of your care or behavior management
• Case Manager will inform the family in advance of the time and place
PLANNING FOR DISCHARGE

Discharge planning is a very important part of the rehabilitation process and begins on admission.

- The case manager begins to discuss discharge plans shortly after admission and coordinate the final plans as discharge approaches.
- The goal of planning for discharge is to decide what you will need for a smooth move to the next level of care.

GRADUATION DAY

Graduation Day is the day prior to the day you go home. This is a day when you can celebrate your progress with your family and the rehabilitation team.

You will be provided with a THRIVE t-shirt to wear on Graduation Day. When you are wearing this shirt we want to see you doing your best at everything you do all day long.