

### General Rehabilitation Management Service Matrix

\* Note - medical conditions must be stable, managed in an RN/RPN scope, not require daily MD assessment

		WRHN @ Chicopee	St. Joseph Health Centre	Cambridge Memorial Hospital	Comments
Medical Procedures	Blood Transfusion	Yes*	Yes*	Yes*	*Able to perform blood transfusion if necessary but needs planning. Transfusion cannot be provided on day of admission. Patient needs to be stable (could otherwise be managed in community as an outpatient). Should have a stable hemoglobin level (ideally 80+) prior to Rehab transfer. No platelets.
	Blood work /Lab	Yes*	Yes*	Yes* In house Lab 24/7	*Can manage daily bloodwork such as I&R, weekly electrolytes. Other bloodwork provide information and rationale for ongoing management.
	Catheters (CBI if needed)	Yes*	Yes*	Yes*	*Referring source to start teaching
	Colostomy/ Ileostomy	Yes*	Yes*	Yes*	*Referring source to start teaching
	Feed Tube	Yes*	Yes*	Yes*	*Feeding plan needs to be established. No NG tubes (ie no Kao feed tubes, etc.)
	Hemodialysis	Yes* WRHN @ Chicopee Satellite site available and should be considered	Yes* only if already supported at GGH satellite site	No	*Hemodialysis should not interfere with participation and therapy
	IV (Hydration /Antibiotics)	Yes*	Yes*	Yes*	*Able to manage IV medications (primarily antibiotics). Able to manage PICC lines. Can recite IVs only. Port-a-cath access needs to be maintained at time of transfer. Preplanning and education may be required
	O2	Yes* limited number of rooms.	Yes* all rooms	Yes* all rooms	*Piped in high flow. Patient needs to be stable. No BiPap.
	Oncology Patients	Yes*	Yes* Travel to chemo/radiation excluded	Yes*	*Needs to be medically stable with treatment plan and minimal MD oversight necessary. Any treatment should not interfere with participation in the program
	Peritoneal Dialysis	Yes*	Yes**only if chronic and self-managed.	Yes* only stable and self-managed.	*Requires preplanning. Call before accepting to waiting list. ** Chronic refers to a patient who has been doing PD in an ambulatory clinic for at least 30 days. A change to PD treatment does not indicate "acute". Patients need to be able to self-manage these changes. Peritoneal dialysis should not interfere with participation.
	Total Parenteral Nutrition (TPN)	No	No	No	
	Tracheostomy	Yes*	Yes* (RT Mon & Thurs only)	Yes* Pre-planning with RT	*Well established and highly independent only. No cuffed trachs. Requires pre-planning, call before accepting to wait list. High humidity available.
	Wound Care	Yes* Dedicated wound care resources shared between WRHN @ Midtown and WRHN @ Chicopee. Able to manage negative pressure within 24 hrs	Yes* Able to manage negative pressure within 24 hrs	Yes*	*Wounds should not limit the ability to participate. Able to manage Negative Pressure Wound Care and referral to wound care team if necessary.

### General Rehabilitation Management Service Matrix

\* Note - medical conditions must be stable, managed in an RN/RPN scope, not require daily MD assessment

Medical Professional	<b>Occupational Therapy (OT)</b>	Yes*	Yes*	Yes*	Refer to 555 Rehabilitative Care Framework
	<b>Pharmacy Services</b>	Yes: Mon-Friday (with limited extended hrs)	Yes* 7 day/week access to entire formulary.	Yes: 7 Days a Week - Business Hours	*Special orders with 24 hrs notice.
	<b>Physician</b>	Yes*	Yes*	Yes*	*24h coverage and rounds 2-3 times a week
	<b>Physiotherapy (PT)</b>	Yes*	Yes*	Yes*	Refer to 555 Rehabilitative Care Framework
	<b>RN/RPN</b>	Daily	Daily	Daily	
	<b>Respiratory Therapist (RT)</b>	Yes* Mon-Fri business hours.	Yes* Mon and Thurs only.	Mon-Fri business hours	*Limited amount only, preplanning needed.
	<b>Speech Language Pathology (SLP)</b>	Yes* or CDA as required	Yes*	Yes* or CDA as required	*Communication/ swallowing follow up only, not diagnosis. Not for urgent issues. Model is based on up to 30 min per day Mon-Fri with SLP.
	<b>Social Work</b>	3-4 times a week	Mon-Friday limited (not daily, as no S.W. on weekends).	Daily	