

reConnections

2016 JOURNAL FOR WAKEMED REHAB

Staying Active & Interactive the Club REACH Way

WakeMed 
Rehabilitation

// PLUS //

The Case for Case
Management

IRFs vs. SNFs: Which
You Choose Can
Change Your Life

Meet the Rehab
Admissions Team

Day Treatment
after Stroke

reConnections

JOURNAL FOR WAKEMED REHAB

Reconnections is published periodically for referring physicians and case managers as well as patients associated with WakeMed Rehabilitation.

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Raleigh, NC 27610

To Make a Referral to WakeMed Rehab

Inpatient: 919-350-7876

Outpatient: 919-350-7000

WakeMed Rehabilitation Locations

Inpatient Location

WakeMed Rehabilitation Hospital

3000 New Bern Avenue

Raleigh, NC 27610

919-350-7876

Outpatient Locations

WakeMed Raleigh Campus

Outpatient Rehab Program

3000 New Bern Avenue

Raleigh, NC 27610

WakeMed Healthworks

3000 New Bern Avenue

Raleigh, NC 27610

WakeMed Clayton Medical Park

555 Medical Park Place

Clayton, NC 27520

Alexander Family YMCA

1603 Hillsborough Street

Raleigh, NC 27605

Banks D. Kerr Family YMCA

2500 Wakefield Pines Drive

Raleigh, NC 27614

Cary Family YMCA

101 YMCA Drive

Cary, NC 27513

Kraft Family YMCA

8921 Holly Springs Road

Apex, NC 27539

WakeMed Wake Forest Road

Outpatient Rehab Center

3701 Wake Forest Road

Raleigh, NC 27609

WakeMed Physician Practices -

Physical Therapy

at Cambridge Village

10000 Cambridge Village Loop

Apex, NC 27502

919-350-1508

WakeMed Physician Practices -

Physical Therapy

at North Hospital

10010 Falls of Neuse Road

Suite 09

Raleigh, NC 27614

919-350-1508

Home Health

WakeMed Home Health

2920 Highwoods Boulevard

Raleigh, NC 27604

Wound Care

WakeMed Wound Care

3000 New Bern Avenue

Raleigh, NC 27610

919-350-4515

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Supporting WakeMed Rehab

The WakeMed Foundation welcomes contributions to benefit the programs and services of WakeMed Rehab. Please call 919-350-7656 or visit www.wakemed.org for information.

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WakeMed Clayton Medical Park, Wake Forest Road, Kerr Family YMCA and Alexander Family YMCA are operated by WakeMed Raleigh Campus. WakeMed Apex Healthplex, Kraft Family YMCA and Cary Family YMCA are operated by WakeMed Cary Hospital. The WPP practices operate as independent practices.

The Case for Case Management

How clinical case managers eliminate confusion through coordination



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“Our case managers have a genuine passion for patient care. Time and again, I’ve seen Clinical Case Managers extend themselves in multiple ways – finding churches to build ramps; running community support group meetings; advocating with landlords to make home modifications; searching in more remote counties for food donation sources; coordinating with pharmaceutical companies to reduce expensive medications to low/no cost; or organizing clothing drives for patients with no family or local resources,” says Jeanne Dibbert, LCSW, CCM, manager – WakeMed Rehabilitation Case Management. “They problem solve all day long!”

The right resources. That’s what many rehabilitation patients who have experienced a life-changing event and their families need to be as independent as possible and embrace their ‘new normal’. Enter WakeMed Rehabilitation’s Clinical Case Management. No day is the same for a WakeMed clinical case manager (CCM). That’s because no patient is the same.

A CCM is assigned to every patient who is admitted to the WakeMed Rehabilitation Hospital. The CCM then takes on the responsibility of advancing the patient in their health care journey. This includes:

- Serving as patient and family liaison, ensuring person-centered care
- Managing the patient’s plan of care to make sure that it’s purposeful and goal directed
- Functioning as team leader by facilitating team conferences, coordinating patients’ daily review meetings

- Re-certifying a patient's stay when private insurance is involved.
- Discharge planning, while ensuring plans are as safe as possible given financial and support limitations.
- Providing supportive counseling and education. All case managers are master's prepared social workers and use their skills to deal with a wide range of adjustment, grief, and coping skills.
- Educating patients and families to ensure continued support.
- Advocating for patients' needs and teaching patients and families to be their own advocates.
- Finding the right resources to fit the individual needs of each patient and their support persons.

The CCM's creative side comes through when looking for the right resources to meet the unique needs of each patient. Some resources are available at WakeMed while others – particularly those needed by patients and families after the formal rehabilitation experience is complete – are accessible throughout the community. “The transition from hospital to home can be both emotionally and physically challenging,” says Dibbert. “Our CCMs work extremely hard to ensure patients and families have the right resources in place to make that transition as seamless as possible.”

Some of the common resources CCMs help patients and families access include:

- Peer mentors (individuals who have experienced the same illness or injury as the patient)
- Support groups (brain injury, spinal cord injury, amputee and stroke support group meetings for patients and their families are currently held at WakeMed locations)
- Home modifications
- Home medical equipment and follow-up therapy
- Medication
- Food
- Education
- Counseling
- Transportation

CCMs serve patients and their families in WakeMed Rehab's inpatient and outpatient specialty rehabilitation programs. In addition, there are multiple case managers and social workers who help start the process while the patient is still in acute care.

“Our case managers are heart driven, knowledgeable, dedicated, and masterful in the art of case management service delivery,” says Dibbert. “They do incredible work with a drive to improve the lives of our patients and their families.”





The Patient & Family Viewpoint

When Bob Rodrigues brought his wife Cathy to the WakeMed Rehabilitation Hospital, she could barely speak, focus or talk. She had suffered a stroke after a tricky surgery to remove a 2-inch, fast-growing meningioma (brain tumor) and required intensive occupational, physical and speech therapy. Cathy's complex needs would have been confusing for her and Bob to manage had it not been for a case manager like Melissa Mizelle, LCSW.

"Melissa came into Cathy's room, introduced herself and told us exactly what she was going to do for us," said Bob. "After that, she met with us every Tuesday or Wednesday to talk about Cathy's progress and answer our questions. We knew exactly what was going on all the time. It was so comforting."

Cathy spent 20 days in the WakeMed Rehab Hospital and then did outpatient therapy at WakeMed. "[The outpatient therapists] are so connected to the inpatient staff; they could bounce ideas off of each other. I was very impressed with the system," said Bob.

Cathy has completed outpatient rehabilitation and continues to make progress. "There is a level of care over and above the technical aspect at WakeMed," said Bob. "You just can't teach that. These people really cared about us."

In her nine years with WakeMed, Beth Soto has been preparing patients and families for life outside the hospital – from short-term hospital discharge to instances that may occur further down the road. Upon relocating to the Triangle from Connecticut, she built upon a background in gerontology and psychology by earning her MSW, an Interdisciplinary Certificate in Aging, and engaging in direct practice with the elderly.

Beth Soto, LCSW

*WakeMed Rehab Hospital –
Patient Case Management*

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With a primary focus of making life after stroke or amputation easier to manage, Beth is passionate about patient care. As part of the amputee committee to better coordinate care and improve outcomes, Beth has been key in coordinating efforts of a peer mentoring program and a growing Amputee Support Group that meets monthly. Their purpose is to help new amputees through the adjustment by meeting others who have been through the same experience. “Many of our amputee patients have understandably had difficulty seeing past the initial stage of healing and hospitalization. Meeting amputees who are driving, working, and back to living productive lives helps give them hope and

encouragement,” explains Beth. One of her most rewarding experiences has been watching a former amputee patient finish a 5K.

She dedicates much of her time to making resource referrals and helping patients navigate through the insurance system. “I try to partner with patients and their family members so that they know I am their advocate and am focused on achieving the things that are important to them.”

For more information about the case management team and programs at the WakeMed Rehabilitation Hospital, please call 919-350-2945. They welcome the involvement of family members and are eager to help with your needs or concerns.

WakeMed Rehab: Strategic Planning with Patients & Families in Focus



At WakeMed, patients and families come first. They are at the top of the pyramid that outlines the strategic plan for our entire health system, and they are at the center of all we do at WakeMed

Rehabilitation. Identifying ways to increase access to care for the community is our focus for the year. Some of our initiatives are described below:

Rehab Hospital: Financial Barriers

With health care expenses on the rise, insurance providers and organizations are seeking ways to reduce costs and increase efficiency. There are growing pains associated with these changes and sometimes an unintended consequence can be barriers to access to care. One way this is playing out is in insurance providers denying pre-authorization for Rehab Hospital services in exchange for a lesser expensive stay in an area skilled nursing facility.

WakeMed Rehab is committed to ensuring patients who need our care will have an opportunity to receive our care. This year, our focus has been on advocating with several third-party payer groups regarding the benefits associated with an inpatient rehabilitation environment. We have met with leadership decision makers and have shared outcomes and research that proves a short-term rehabilitation stay in an inpatient rehabilitation facility often results in greater outcomes than a longer (and ultimately more expensive stay) in a lower level of care.

One thing most patients have in common is the goal to be as independent as possible. For those who need inpatient rehabilitation to achieve that goal, we want to make sure our doors are open to provide that care. This education and advocacy is one way we are knocking down barriers that can stand in the way.

The WakeMed Rehab Admissions team welcomes questions about the financial, cognitive and physical benefits of inpatient rehabilitation versus alternatives. They can be reached at 919-350-7876 (fax: 919-350-8791).

Outpatient Rehabilitation: Creative Programming

The cost of rehabilitation can be a huge barrier for people with impairments and disabilities. With yearly changes to insurance benefit plans, which include rising premiums, limitations on covered services, visit limits, and increasing out-of-pocket expenses, WakeMed Outpatient Rehab is striving to meet overwhelming rehab needs in traditional and nontraditional ways in our outpatient settings. Over the past year, we have strategically created and expanded several programs to address financial access barriers to care for patients.

In addition to traditional one-on-one outpatient therapy care, we have developed several class/group offerings which include components of skilled therapy, fitness, and population health factor management. These programs allow patients to continue their progress after initial skilled care in cost-effective and evidence-based programs. These programs are designed to increase user-friendly access, and offer preventive options in group settings and community venues. Several programs offered in our outpatient areas include, ReGain, Lift, aquatic exercise, Tai Chi, OTAGO, and Personal Training Plus. For more information about these programs please call 919-350-8347.

The WakeMed Rehabilitation Hospital Admissions Team

The Rehab Admissions team welcomes questions about our specialty inpatient rehabilitation programs, criteria to qualify for an inpatient rehab stay and other important information about accessing the right rehabilitative care for children and adults. The main number for Rehab Admissions is 919-350-7876.

Melanie Boyette, RN

Supervisor



Melanie ensures that she and the entire Admissions team work to fulfill the vision of the department, which is to provide the highest level of services and efficiency to referring customers and to all patients and families seeking information related to IRF services in North Carolina.

She is a resource for customers to help navigate the process of choosing the next level of care and understand the layers including regulations, criteria, and costs. Melanie also manages the referrals for UNC and other areas as needed. Contact Melanie at mboyette@wakemed.org or 919-350-8877.

Gina Ayscue, RN

Admissions Representative



Gina has many years of experience in cardiovascular health and pathologies. She has extensive knowledge in cardiac rehab, stroke rehab and support groups for patients and families affected by heart and vascular disease. Gina manages the referrals from Duke University Hospital,

which include patients with CVA, multiple trauma, severe neurologic injuries, and other complex conditions. She routinely meets patients and families face to face, easing their anxieties with her extensive knowledge and information about our specialty rehab programs. Contact Gina at gayscue@wakemed.org or 919-350-7448.

Crane Cooke

Administrative Assistant/Office Coordinator



Crane manages the intake line and receives referrals for the WakeMed Rehabilitation Hospital and Neuro Care. She educates our customers on the services that are provided in the Rehab Hospital and works closely with the Admissions representatives to process referrals from beginning to

end. She provides tours to prospective patients, their families, and referral sources, giving them the opportunity to explore patient rooms, gym areas, and common space. Crane is always eager to assist in meeting our customers' needs with a warm smile and friendly voice. Contact Crane at ccooke@wakemed.org or 919-350-7876.

Amy Corbett, RN

Admissions Representative



Amy has extensive experience in caring for patients with brain injuries and other neurological issues. She also has expertise in post-acute care with previous roles in rehab and home health. Amy manages the referrals from Duke Raleigh Hospital and Johnston Memorial Hospital

in Smithfield. She paves the way for patients in rural Johnston County to benefit from the state-of-the-art services provided at the WakeMed Rehabilitation Hospital and has helped to further enhance the rehabilitation program for workers injured on the job. Contact Amy at acorbett@wakemed.org or 919-350-8863.

JoAnn Hennessy, RN

Admissions Representative



JoAnn has extensive experience in workers' compensation case management. She serves as a valuable resource to our region's injured workers and their families, helping them secure the rehab services they need. JoAnn manages the referrals from Rex Healthcare

with electronic access providing them with an effortless referral process and quick response times. Contact JoAnn at jhennessy@wakemed.org or 919-350-7876.

Lynn Mangretta, RN

**Admissions Representative/
Pediatric Referral Specialist**



Lynn manages pediatric referrals to ensure a seamless, outstanding experience for our smallest to teenage patients and their families. She serves on a multidisciplinary team that aims to deliver the best pediatric rehab program in the region. Lynn also manages the referrals for WakeMed Cary

Hospital, paving the way for easy access and quick response time for our friends in the western part of Wake County. Contact Lynn at lmangretta@wakemed.org or 919-350-7930.

Maria Meyer, RN

Admissions Representative



Maria has a great interest and passion in helping patients and families affected by spinal cord injury. She is an active member of the multidisciplinary WakeMed Spinal Cord Injury Team, which works with every patient who has suffered a spinal cord injury. Maria

ensures that patients and their families smoothly transition throughout the continuum of spinal cord

injury care to achieve the best possible outcomes. Maria also manages many other referrals at WakeMed including neuro, cardiac, amputee, trauma and orthopaedics. Contact Maria at mmeyer@wakemed.org or 919-350-7876.

Denny Powell, OTL

Referral Development Specialist



In his 16 years at WakeMed, Denny has worked as an OT in several areas of the Rehab Hospital. He is passionate about WakeMed and the patients we serve. Denny is sharing this passion by focusing on referral development for WakeMed Rehab. In this role, he is a key

player in making sure all patients served by our region have access to rehab services at WakeMed. He uses his expertise to break down barriers to care by educating, informing, collaborating, and networking. Contact Denny at dpowell@wakemed.org or 919-350-5108.

Kira Van Ooteghem, OTR/L

Admissions Representative



Kira has a special interest in working with patients who have suffered a major trauma and/or spinal cord injury. She works closely with the WakeMed Spinal Cord Injury Team to assure that every patient in the WakeMed Rehabilitation Hospital who has experienced a spinal cord

injury benefits from early mobilization, teaching, and specialty equipment. Kira has also served on the Amputee Committee to help refine the Amputee Program and improve outcomes for these patients. Contact Kira at kvanooteghem@wakemed.org or 919-350-7876.

WakeMed Rehab Hospital Admissions

Phone: 919-350-7876

Fax: 919-350-8791



Club REACH

Staying Active & Interactive

Recreation, education, advocacy, community, health – REACH. Club REACH. “We came up with the acronym and the full name of our program during the car ride back to Raleigh after visiting a similar program in Virginia,” explains Portia Walton, a licensed recreational therapist with WakeMed Rehabilitation and one of the founders of Club REACH.

Some 15 years ago, a committee made up of members of the community and WakeMed Rehab leaders and therapists convened to discuss the needs of individuals who have permanent physical and/or cognitive limitations. “We realized there wasn’t anything in our community for these individuals after they completed day treatment,” recalls Walton. “More importantly, there weren’t any opportunities for them to interact with others and be a part of the community.”

Walton, her recreational therapist colleague Elizabeth Penny and then Rehab Manager Kathy Thompson took on the effort to create a program for these individuals to help them stay engaged in the community, physically and mentally active and involved with others. After our site visit, we planned the program, obtained a grant from the WakeMed Foundation and went from there,” Walton said.

WakeMed Club REACH officially launched in 2002 and it has been a success ever since. “We are bringing together people of vastly different ages and ethnic backgrounds. At first, we really didn’t know how well the group would mix. We were so pleased to see our members – whether they have been with us for 10 years or four weeks -- become family to each other,” says Walton.



Members agree with Walton. Chris Johnson had a stroke 11 years ago and has been a member of Club REACH, on and off, for about 10 years. “I love the people and the activity,” he says. “You can get isolated at home.”

Fred Davis, a Club REACH member for four years, was surprised how much he has enjoyed the program. “The doctor at Duke who took care of me after my stroke said I should go to rehab at WakeMed,” says Davis. “At first I didn’t care about camaraderie and being around a lot of people. After a while, I started to look forward to it. Being here makes you appreciate what you’ve got. [The therapists] also help you do some stuff that you didn’t think you could do.” Fred shared that he can now stand up from his wheelchair – something he didn’t think he would ever be able to do.

Club REACH Goal

Provide opportunity for physical and mental activity as well as interaction with others for those with permanent physical and/or cognitive limitations from brain or spinal cord injury, illness (multiple sclerosis, etc.) or stroke.

Age Range of Members

Currently ages 24 to 82

Meeting Days

Tuesdays and Thursdays

Location

WakeMed Rehab Health Park – WakeMed Raleigh Campus

Cost \$30 full day; \$15 half day

Funding

Primarily self pay. In some instances, workers’ compensation will cover the cost.

Members can choose to do a half day or a full day of activities. Some schedule their therapy session on a Club REACH day and join in Club REACH activities before or after therapy. For more information about how you can stay active and interactive with WakeMed Club REACH, call 919-350-2997.

Activities

8:30 to 9:30 am

Coffee Connections – Members arriving (transportation provided by family member or friend) and enjoying coffee and chatting with other members as well as inpatients.

9:30 to 10 am

Cognitive activities

10 to 11 am

Craft or other group project

11 am to noon

Seated yoga or Zumba®

Noon to 1 pm

Lunch

1 to 4 pm

May work on gross motor skills through modified hockey, bocce or other activity; may go on a community trip to a museum, the farmer’s market, the mall or other location.



“I’ve Been There.”

The Power of Peer Mentoring

There is no question that a major injury or illness can change the course of your life. Along with the physical challenges come new emotions, too. Feeling isolated, depressed and overwhelmed is not uncommon. Many patients at WakeMed Rehabilitation have found peer mentors – former patients who have had a similar experience with a life-changing illness or injury – to be a special source of support. “Patients will ask peer mentors questions that they don’t even think to ask us, like how to navigate a grocery store or the bus,” says Maja-Lisa Pressley, LCSWA, a WakeMed Rehabilitation case manager who works with patients with spinal cord injuries. “They connect with peer mentors on a personal level to learn how to manage day-to-day living from someone who has been there.”

Vernon Novak, who had a stroke at age 51 in March, recalls the compassionate support he received from fellow stroke survivor Shawn Fleck. “I felt really down when I realized I wasn’t going to walk out of the Rehab Hospital,” says Novak. Karen Sprung, SLP, Novak’s speech therapist, and Kelly Kucin, OT, his occupational therapist, encouraged Novak to speak with Fleck, who had suffered similar, significant

paralysis after a stroke several years before. “It was great for me to see and talk to Shawn. He told me that he didn’t walk out of the hospital either, but he is walking now, which gave me hope and something to work toward. He also gave me great advice. He told me to own my therapy – to do what I need to do to get better. I haven’t forgotten that.”

What Makes a Good Peer Mentor?

In the Rehab setting at WakeMed, peer mentors are typically former patients who can relate to current patients because of their shared experience with a stroke, amputation or other life-changing issue. “Our peer mentors have been there,” says Beth Soto, LCSW, a case manager with WakeMed Rehabilitation. “They have been through the difficult

emotions, the shift in body image, the therapy and now they are living positive lives despite their disability.” Being a good, objective listener is also a key attribute of a peer mentor in the rehabilitation setting, as are sense of humor, flexibility, kindness and openness.

When you meet Earl Dunn, a peer mentor in WakeMed Rehabilitation, you see many of the attributes Soto describes above. Dunn worked for 35 years as a driver and mover with moving companies. Diabetes and resulting peripheral arterial disease forced the amputation of both of Earl’s lower legs. After the second amputation, Earl recalls being uncertain about his future until motivation ‘walked by’. “I remember lying in bed, not sure what to do next when I saw a guy walking [with prosthetics]. I said to myself ‘What do I have to do to get those?’ and that got me moving in the right direction.”

Earl’s positive attitude brought him to the attention of Soto and Portia Walton, a WakeMed Rehabilitation recreation therapist. “Beth would say ‘Hey, I’ve got someone who’s feeling down. Do you think you could talk



(Pictured l to r) Former patients Earl Dunn and Anthony Thompson benefited from peer mentors and now do the same for current patients who have had amputations.

Welcome, Dr. Downs

WakeMed Rehabilitation welcomes Jairon D. Downs, MD, to the team of providers serving our patients.



Board certified in physical medicine and rehabilitation, Dr. Downs received his medical degree from Chicago Medical School at Rosalind Franklin University of Medicine and Science in Chicago and completed a residency in physical medicine and rehabilitation at

The University of North Carolina at Chapel Hill School of Medicine. He specializes in the treatment of spasticity and pain secondary to brain injuries, spinal cord injuries and congenital diseases such as cerebral palsy and multiple sclerosis. He performs Botox® injections for migraine and spasticity, manages intrathecal baclofen pumps for spasticity and pain, and evaluates and manages musculoskeletal impairments in addition to his work in inpatient and subacute rehabilitation.

Scully Turns 10!

Scully, WakeMed’s only four-legged employee, recently celebrated his 10th birthday and his retirement from his role as a Canines for Independence trained assistance dog. Now, he is



focused on being a pet with his handler Elizabeth Penny, LRT/CTRS, a WakeMed recreation therapist, and her family. Scully helped WakeMed Rehab patients for more than eight years.

OT Comes to Cambridge Village

Occupational therapy services, provided by WakeMed Rehab’s Lisa Lysik, OTR/L, are now available at



WakeMed Physician Practices – Physical Therapy at Cambridge Village of Apex. Like her physical therapy counterpart, Kris Jolley, PT, at Cambridge Village, Lisa provides services to both children and adults at the practice, which is located on the lower level of the main

building. Please call 919-350-1508 to schedule an appointment. Referrals can be faxed to 919-350-1475.

Cardiac Rehab Recognized for Service Excellence

WakeMed’s two cardiac rehab locations – Raleigh Campus and Kraft Family Y – received a five-star rating from Professional Research Consultants, Inc. (PRC), the company that conducts patient satisfaction surveys for WakeMed. The two locations scored in the top 10 percent among like services in the PRC database. Congratulations to the WakeMed Cardiac Rehab teams for consistently providing an excellent experience to patients and families!



Dry Needling to Manage Pain

Trigger point dry needling (TPDN) is now available at WakeMed Outpatient Rehabilitation at the Raleigh Campus. TPDN is typically used in conjunction with physical therapy to relieve pain, improve range of motion and normalize the function of the neuromuscular system.

The therapist inserts a dry (no medication) acupuncture needle into a patient's trigger point to deactivate it and loosen the tight muscle. Relief is often immediate.

If you are currently being treated on an outpatient basis for musculoskeletal pain and are interested in dry needling, talk to your therapist about it or call WakeMed Rehabilitation at 919-350-7000 for information. WakeMed representatives can also help you find out if your health insurance plan covers the procedure.

Two Rehab Practices Address Urinary Incontinence & Pain Relief during Pregnancy

Physical therapists at WakeMed Outpatient Rehab at Wake Forest Road and WakeMed Physician Practices – Physical Therapy (next to WakeMed North Hospital) offer therapies for expectant moms and women who are not pregnant and are looking for solutions to urinary incontinence, pelvic organ prolapse, bladder spasms, round ligament pain, sciatica, back and joint pain and other issues. Call 919-350-7000 for more information and to schedule an appointment. Please note that the Wake Forest Road practice is hospital owned while the practice at WakeMed North is private. Health insurance plans cover costs differently for these two types of practices. The WakeMed representative you talk to when calling 919-350-7000 can help you choose the practice that best meets your needs and budget.

The Power of Peer Mentoring *continued from page 13*

to him?" and I would make a point to stop by when I was at the hospital for therapy," says Earl.

"I was in shock," says Anthony Thompson about how he felt when he learned he had to have his lower leg amputated as a result of peripheral arterial disease. "After I saw the MRI, though, I came to realize I was getting rid of something that was killing me." That realization and conversations with peer mentors helped Thompson cope. "I was at peace with it," he recalls.

Six months after his amputation, Thompson was working with his prosthetist who asked him to speak with someone who had a more recent amputation. "I remembered how helpful it was to talk to someone who was in the same boat I was in, so I said yes." After completing therapy at WakeMed, he was asked to be a peer mentor. Since then, he has spoken to about 12 individuals and is a staple at WakeMed Amputee Support Group monthly meetings.

"Earl and Anthony have been there," says Soto. "They have that shared experience with patients and they are also living examples of the fact that you can live a good life despite disability."

WakeMed Rehabilitation Inpatient & Outpatient Data

The entire WakeMed Rehab team thanks the providers, patients and families who support our efforts to provide high-quality care and service across our care continuum. The following data is derived from WakeMed Outpatient Rehabilitation admission and discharge information from October 1, 2014 through September 30, 2015, and WakeMed Rehabilitation Hospital data from January 1, 2015 through December 31, 2015.

Rehabilitation Hospital

Admission Diagnosis

Cerebrovascular Accident (CVA)	30%
Orthopaedic	15%
Spinal Cord Injury	12%
Brain Injury	10%
Debility	8%
Multiple Trauma	7%
Amputee	5%

Our Patients with CVA

Total Discharges	481
Average Age	66
Average Length of Stay	21 days

Our Patients with Orthopaedic Conditions

Total Discharges	241
Average Age	67
Average Length of Stay	14 days

Our Patients with Spinal Cord Injury

Total Discharges	192
Average Age	60
Average Length of Stay	22 days

Our Patients with Brain Injury

Total Discharges	156
Average Age	57
Average Length of Stay	17 days

Our Patients with Debility

Total Discharges	128
Average Age	67
Average Length of Stay	14 days

Our Patients with Multiple Trauma

Total Discharges	109
Average Age	46
Average Length of Stay	20 days

Our Patients with Amputations

Total Discharges	87
Average Age	60
Average Length of Stay	15 days

Pediatric Patients (ages 4-17)

Total Number	30
Average Age	14
Average Length of Stay	20 days

Outpatient Rehabilitation

Day Treatment

Total Day Treatment Discharges	140
Total Visits	8,281
Overall Patient Satisfaction	98%

Admission Diagnosis

Cerebrovascular Accident (CVA)	56%
Brain Injury	24%
Spinal Cord Injury	16%
Other Neuro Conditions	2%
Cardiac Debility	1%

Our Patients with CVA

Total Discharges	78
Average Age	59
Average Length of Service	115 days

Our Patients with Spinal Cord Injury

Total Discharges	22
Average Age	48
Average Length of Service	195 days

Our Patients with Brain Injury

Total Discharges	34
Average Age	43
Average Length of Service	103 days

Pediatric Neuro Rehab Patients

(ages 4-17)	
Total Number	5
Average Age	14
Average Length of Service	75 days

For additional information about the WakeMed Day Treatment Program, please call 919-350-1711.

[calendar]



Support Groups

WakeMed Amputee Support Group

4 to 5 pm

Third Wednesday of each month

WakeMed Raleigh Campus

Rehabilitation Hospital

3000 New Bern Avenue, Raleigh

For information, call 919-350-8903

Spinal Cord Injury or Disease (SCI/D) Support Group

WakeMed Raleigh Campus

Rehabilitation Hospital

3000 New Bern Avenue, Raleigh

For information, call 919-350-8137 or
e-mail kvasquez@wakemed.org

Triangle Brain Injury Support Group

Third Tuesday of each month

7 pm

A separate caregiver support group

meets at the same time

WakeMed Raleigh Campus

Conference Dining

3000 New Bern Avenue, Raleigh

For information, call 1-800-377-1464
or 919-618-3003

Cary Brain Injury Support Group

First Monday of each month

6:30 to 8 pm

WakeMed Cary Hospital

Conference Center

1900 Kildaire Farm Road, Cary

For information, call 919-460-9094

Stroke Support Groups

WakeMed Rehabilitation Hospital Health Park Classroom

Second Tuesday of each month

Noon to 1 pm

WakeMed Raleigh Campus

3000 New Bern Avenue, Raleigh

For information, call 919-350-4163

WakeMed Cary Hospital Conference Center

First Monday of each month

6:30 to 8 pm

1900 Kildaire Farm Road, Cary

For information, call 919-460-9094

WakeMed Clayton Medical Park

Noon to 1 pm

Third Wednesday of each month

555 Medical Park Place, Clayton

(off Highway 70 West between

Guy & Shotwell roads)

For information, call 919-350-4174



Stroke Community Education

You're never too young or too old to know the signs and symptoms of a stroke. Learning them can help save your life and the lives of others. WakeMed stroke specialists are often available to provide this life-saving information as well as blood pressure checks to school, church and other community groups. Please call 919-350-5240 or email bscolio@wakemed.org to schedule.

MAKING THE BEST CHOICE: Rehabilitation Hospital Care vs. Nursing Home Care

To regain independence and quality of life – these are the priorities for you or a loved one after a stroke, or spinal cord, brain or orthopaedic injury. For those who qualify, research proves that individuals treated in acute inpatient rehabilitation facilities (IRFs), like the WakeMed Rehabilitation Hospital, have better long-term clinical outcomes than those treated in nursing homes (SNFs).

The following information will help you and your family understand the benefits of rehab hospital care over nursing home care and the right questions to ask your doctor, case manager and/or discharge planner. If you need help or wonder if you qualify, call WakeMed Admissions at 919-350-7876.



WAKEMED REHABILITATION HOSPITAL

Feels like a hospital unit, but it is an acute inpatient rehabilitation facility (IRF) that is licensed as a hospital.

A physiatrist (doctor specializing in rehabilitation) sees patients every day and directs patient care.

Nurses specialize in treating patients of all ages with multiple physical and medical issues.

The day shift, nurse-to-patient ratio is 1:6 to ensure nurses can provide complex care.

Patients receive intensive therapy from 2 or more disciplines for a minimum of 15 hours per week, which helps build strength, endurance, mobility and balance.

Patients are admitted to an IRF from different locations such as hospital units, observation units, emergency departments or even home.

Physicians, nurses, therapists, case managers, patients and their family members work together in a coordinated manner.

NURSING HOME

Also called skilled nursing facilities (SNFs), they are licensed as long-term care facilities.

An internal medicine doctor must see patients every 30 days.

Nurses specialize in care for elderly patients.

Nurses provide care to more patients per day than IRF nurses do – patient care is not as complex.

Patients may receive 1 or more therapies not considered intensive from as little as 45 minutes per week to a maximum of 12 hours per week.

Patients can qualify for admission to a nursing home after they have spent at least three days in a hospital.

Coordinated care is not a feature that defines nursing home care.

Advocating for the best rehabilitative care: requesting a referral and evaluation

“I would like a referral to and evaluation by the WakeMed Rehab Hospital.” The Admissions Department number is 919-350-7876 and the fax is 919-350-8791. This request and information can prompt the evaluation you need to see if IRF care is right for you.

An evaluation is the only way the WakeMed Rehab team can determine if a patient qualifies for IRF care. For patients who do qualify, there is no better level of care available. The intensity of services – physical, occupational and/or speech therapy – they receive at an IRF maximizes recovery, independence and quality of life.

WakeMed Rehab Admissions welcomes the opportunity to do an evaluation to determine your eligibility for our program or to answer any questions about your post-acute care needs. Please call them at 919-350-7876.

It's Person-centered Care at WakeMed Rehab

Patients and their families will experience person-centered care throughout the WakeMed Rehabilitation Hospital and our many outpatient rehab settings. Patient and family involvement in a rehabilitation program begins during the preadmission and assessment phases and continues throughout the program. Ways we demonstrate to person-centered care include:

- Identifying individual outcome goals and incorporating them into the initial evaluation and plan of care.
 - Modifying a patient's goals and treatment program with the patient and/or family.
 - Tailoring therapy sessions and activities to the personal interests, preferences, cultural background, hobbies, habits and occupation of the patient.
- Weekly patient and family conferences with the clinical case manager. Special family conferences are also scheduled as needed.
 - Planned and unplanned family training.
 - Service excellence program to gather feedback from patients and families during and after receiving services. Their input is used in performance and improvement and strategic planning.
 - Peer mentoring.
 - Patient and family education and training.
 - Case management process.

Physicians, discharge planners, case managers and all care providers, as well as patients and families, are welcome to call WakeMed Rehab Admissions at 919-350-7876 with any questions about our processes and care plans.



**To Make a Referral
to WakeMed Rehab**

Inpatient: 919-350-7876
Outpatient: 919-350-7000

**Day Treatment for Stroke Recovery:
When You Need More than Just PT**

The WakeMed Day Treatment Rehab program is an excellent and highly effective option for individuals who have had a stroke and need physical, occupational and speech therapy. The program is designed to provide coordinated care that includes outpatient nursing and physician support.

“Patients, particularly those who did not have a stay in an inpatient rehabilitation facility like WakeMed Rehab Hospital, may not have had access to the multiple therapies they needed to maximize their recovery after stroke. If you would like to learn more about the WakeMed Day Treatment program for stroke, please call 919-350-7000. Intensive day treatment program for brain injury, spinal cord injury and other conditions are also available.

