

**CARF
Survey Report
for
Thomas Jefferson
University
Hospitals, Inc.
Comprehensive
Acute
Rehabilitation Unit**

Organization

Thomas Jefferson University Hospitals, Inc.
Comprehensive Acute Rehabilitation Unit
132 South Tenth Street
Philadelphia, PA 19107

Organizational Leadership

Ann D. Clark, M.S., OTR/L
Vice President, Clinical & Support Services

Richard Webster
President

Kristopher Feeko, M.D.
Medical Director

John Melvin
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Survey Dates

January 7-8, 2016

Survey Team

Patricia Samuel, RN, Administrative Surveyor

Marta Riquelme, M.S., RN, CNL, CRRN, CBIS, Program Surveyor

Programs/Services Surveyed

Inpatient Rehabilitation Programs - Hospital (Adults)

Inpatient Rehabilitation Programs - Hospital: Stroke Specialty Program (Adults)

Previous Survey

January 24-25, 2013

Three-Year Accreditation

Survey Outcome

Three-Year Accreditation

Expiration: February 28, 2019



Three-Year Accreditation

SURVEY SUMMARY

Thomas Jefferson University Hospitals, Inc. Comprehensive Acute Rehabilitation Unit has strengths in many areas.

- The organization has provided services to the community for over 50 years and is congratulated on its longevity and outstanding accomplishments.
- The complement of patient diagnoses on the Comprehensive Acute Rehabilitation Unit (CARU) is diverse, with patients demonstrating a high level of medically intensive needs and complexity of care. This includes patients on ventricular assist devices, on ventilators, who require oncology care, and with stroke and spinal cord injury diagnoses. Over one half of the patients treated are under 65 years of age.
- There is open, collaborative, and free-flowing communication demonstrated among hospital leadership, department management, staff members, and the medical team.
- It is apparent that ancillary and support departments are collaborative within the comprehensive integrated inpatient rehabilitation unit. They are seen by the CARU as valued and vital team members who contribute to an effective, efficient, safe, and healthy environment of care.
- The CARU utilizes a variety of mechanisms to gather input from patients served. This includes the patient forums held every two weeks on the unit, suggestion boxes, and post-discharge mail and phone surveys. This input is used to identify current patient needs, trends, performance improvement, and strategic planning opportunities.
- The research enterprise is highly valued by staff members and contributes to the team experience on the CARU. This unit is prolific in its activities. Staff members take pride in sharing their results with their colleagues, peers, and stakeholders.
- With a focus on environment of safety, when it is evaluated that a patient may be violent or combative to the point of doing harm to others, the hospital will place, at its expense, a uniformed officer at the patient's door as protection for staff on a 24/7 basis. This has allowed for continued treatment of patients and admission of patients that other facilities have not been able to manage. It has also resulted in a subsequent reduction of work-related injuries by 30 percent.
- The utilization of student nurses in nurse extern positions continues to serve as a strong recruitment strategy for the CARU.
- Thomas Jefferson University Hospitals and the CARU support and benefit from strong volunteer and student affiliation opportunities. Both the hospital and the unit have made investments to ensure that these experiences are beneficial and meaningful for the patients.
- The CARU leadership has “hardwired a culture of driven performance.” Performance improvement activities are grounded in history, impactful, and well defined. The unit can be proud of both operational and patient outcomes and trends.
- The clinical teams providing care demonstrate a strong commitment to providing evidence-based care. This is supported by extensive staff educational opportunities.
- The unit organizational leadership has been innovative and forward thinking in planning for programmatic changes.

- The interdisciplinary meeting demonstrates a holistic representation for patient-centered care that is concise but effective, with excellent time management.
- Advocacy is championed and integrated into the interdisciplinary holistic plan of care.
- The patient's communication plan is effective, supporting a 24/7 integration of services, family, and patients.
- The rehabilitation program supports a comprehensive patient and family education program, individualizing activities as needed, with a broad means of reaching the patient's needs such as cultural needs and communication barriers.

Thomas Jefferson University Hospitals, Inc. Comprehensive Acute Rehabilitation Unit received no recommendations from this accreditation survey. Consultation given does not indicate nonconformance to standards but is offered as a suggestion for further quality improvement.

On balance, Thomas Jefferson University Hospitals, Inc. Comprehensive Acute Rehabilitation Unit demonstrates a long history of commitment to delivering quality and highly valued inpatient rehabilitation services while implementing the CARF medical rehabilitation standards. Services are advanced by committed hospital and department leadership and by qualified rehabilitation staff and physician leadership. Collaborative support for their service and program efforts is offered and received from ancillary departments and appreciated by program staff and management. Referral sources and patients note exceptional treatment, active engagement as members of the team, and superior outcomes. The unit culture promotes research, learning, competency, safety, and community as well as personal responsibility.

Thomas Jefferson University Hospitals, Inc. Comprehensive Acute Rehabilitation Unit has earned a Three-Year Accreditation. The organization has demonstrated a clear commitment to the CARF accreditation process and the CARF standards, which is pervasive in the rehabilitation team and physician leadership members who were found to be highly engaged and knowledgeable related to all aspects of implementation of the standards. They are encouraged to remain current with the CARF standards in their ongoing pursuit of excellence.

SECTION 1. ASPIRE TO EXCELLENCE®

A. Leadership

Description

CARF-accredited organizations identify leadership that embraces the values of accountability and responsibility to the individual organization's stated mission. The leadership demonstrates corporate social responsibility.

Key Areas Addressed

- Leadership structure
 - Leadership guidance
 - Commitment to diversity
 - Corporate responsibility
 - Corporate compliance
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Recommendations

There are no recommendations in this area.

C. Strategic Planning

Description

CARF-accredited organizations establish a foundation for success through strategic planning focused on taking advantage of strengths and opportunities and addressing weaknesses and threats.

Key Areas Addressed

- Strategic planning considers stakeholder expectations and environmental impacts
 - Written strategic plan sets goals
 - Plan is implemented, shared, and kept relevant
-

Recommendations

There are no recommendations in this area.

Consultation

- The organization is encouraged to be vigilant in actively accessing the rehabilitation continuum of care partners and competitors as the healthcare environment is continually shifting. This could be due to changes in payer sources, capitated rates, staffing shortages, and other external environmental factors that could negatively impact the high-cost, lower volume services.
 - The CARU has a unique opportunity to expand services. The surgeon who performs transplants and his patients are requesting the rehabilitation unit and would be interested in expanding referrals if more private inpatient beds were available. The CARU is reported as a highly valued resource for this inpatient rehabilitation population and has reportedly been successful in managing care and customer satisfaction with unit services.
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D. Input from Persons Served and Other Stakeholders

Description

CARF-accredited organizations continually focus on the expectations of the persons served and other stakeholders. The standards in this subsection direct the organization's focus to soliciting, collecting, analyzing, and using input from all stakeholders to create services that meet or exceed the expectations of the persons served, the community, and other stakeholders.

Key Areas Addressed

- Ongoing collection of information from a variety of sources
 - Analysis and integration into business practices
 - Leadership response to information collected
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Recommendations

There are no recommendations in this area.

E. Legal Requirements

Description

CARF-accredited organizations comply with all legal and regulatory requirements.

Key Areas Addressed

- Compliance with all legal/regulatory requirements
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Recommendations

There are no recommendations in this area.

F. Financial Planning and Management

Description

CARF-accredited organizations strive to be financially responsible and solvent, conducting fiscal management in a manner that supports their mission, values, and annual performance objectives. Fiscal practices adhere to established accounting principles and business practices. Fiscal management covers daily operational cost management and incorporates plans for long-term solvency.

Key Areas Addressed

- Budget(s) prepared, shared, and reflective of strategic planning
 - Financial results reported/compared to budgeted performance
 - Organization review
 - Fiscal policies and procedures
 - Review of service billing records and fee structure
 - Financial review/audit
 - Safeguarding funds of persons served
-

Recommendations

There are no recommendations in this area.

G. Risk Management

Description

CARF-accredited organizations engage in a coordinated set of activities designed to control threats to their people, property, income, goodwill, and ability to accomplish goals.

Key Areas Addressed

- Identification of loss exposures
 - Development of risk management plan
 - Adequate insurance coverage
-

Recommendations

There are no recommendations in this area.

H. Health and Safety

Description

CARF-accredited organizations maintain healthy, safe, and clean environments that support quality services and minimize risk of harm to persons served, personnel, and other stakeholders.

Key Areas Addressed

- Inspections
 - Emergency procedures
 - Access to emergency first aid
 - Competency of personnel in safety procedures
 - Reporting/reviewing critical incidents
 - Infection control
-

Recommendations

There are no recommendations in this area.

I. Human Resources

Description

CARF-accredited organizations demonstrate that they value their human resources. It should be evident that personnel are involved and engaged in the success of the organization and the persons they serve.

Key Areas Addressed

- Adequate staffing
 - Verification of background/credentials
 - Recruitment/retention efforts
 - Personnel skills/characteristics
 - Annual review of job descriptions/performance
 - Policies regarding students/volunteers, if applicable
-

Recommendations

There are no recommendations in this area.

Consultation

- A procedure for job posting was available and utilized for training that addressed promotion and announcement of open positions. The hospital has moved this procedure into policy, making it immediately available to employees. The organization is encouraged to make the policy available to all staff members beyond the level of managers and leadership.
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J. Technology

Description

CARF-accredited organizations plan for the use of technology to support and advance effective and efficient service and business practices.

Key Areas Addressed

- Written technology and system plan
 - Written procedures for the use of information and communication technologies (ICT) in service delivery, if applicable
 - Training for personnel, persons served, and others on ICT equipment, if applicable
 - Provision of information relevant to the ICT session, if applicable
 - Maintenance of ICT equipment in accordance with manufacturer recommendations, if applicable
 - Emergency procedures that address unique aspects of service delivery via ICT, if applicable
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Recommendations

There are no recommendations in this area.

K. Rights of Persons Served

Description

CARF-accredited organizations protect and promote the rights of all persons served. This commitment guides the delivery of services and ongoing interactions with the persons served.

Key Areas Addressed

- Communication of rights
 - Policies that promote rights
 - Complaint, grievance, and appeals policy
 - Annual review of complaints
-

Recommendations

There are no recommendations in this area.

L. Accessibility

Description

CARF-accredited organizations promote accessibility and the removal of barriers for the persons served and other stakeholders.

Key Areas Addressed

- Written accessibility plan(s)
 - Requests for reasonable accommodations
-

Recommendations

There are no recommendations in this area.

M. Performance Measurement and Management

Description

CARF-accredited organizations are committed to continually improving their organizations and service delivery to the persons served. Data are collected and analyzed, and information is used to manage and improve service delivery.

Key Areas Addressed

- Information collection, use, and management
 - Setting and measuring performance indicators
-

Recommendations

There are no recommendations in this area.

N. Performance Improvement

Description

The dynamic nature of continuous improvement in a CARF-accredited organization sets it apart from other organizations providing similar services. CARF-accredited organizations share and provide the persons served and other interested stakeholders with ongoing information about their actual performance as a business entity and their ability to achieve optimal outcomes for the persons served through their programs and services.

Key Areas Addressed

- Proactive performance improvement
 - Performance information shared with all stakeholders
-

Recommendations

There are no recommendations in this area.

SECTION 2. THE REHABILITATION AND SERVICE PROCESS FOR THE PERSONS SERVED

A. Program/Service Structure for all Medical Rehabilitation Programs

Key Areas Addressed

- Scope of the program and services
 - Admission and transition/exit criteria
 - Team communication
 - Provision of services to any persons who require ventilatory assistance
-

Recommendations

There are no recommendations in this area.

Consultation

- The unit has collected and developed an effective and reliable interdisciplinary outcomes database. It is suggested that the specific information shared with stakeholders and shared on the unit bulletin boards be a larger font size in order to improve access for this important information.
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B. The Rehabilitation and Service Process for the Persons Served

Key Areas Addressed

- Scope of the program services
 - Appropriate placement in and movement through the continuum of services
 - Admission and ongoing assessments
 - Information provided to persons served for decision making
 - Team composition
 - Team responsibilities and communication
 - Medical director/physician providing medical input qualifications and responsibilities
 - Discharge/transition planning and recommendations
 - Family/support system involvement
 - Education and training of persons served and families/support systems
 - Sharing of outcomes information with the persons served
 - Physical plant
 - Records of the persons served
-

Recommendations

There are no recommendations in this area.

D. The Rehabilitation and Service Process for Specific Diagnostic Categories

Key Areas Addressed

- Provision of services to any persons with limb loss, acquired brain injury, or spinal cord dysfunction
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Recommendations

There are no recommendations in this area.

SECTION 3. PROGRAM STANDARDS

A. Comprehensive Integrated Inpatient Rehabilitation Program

Inpatient Rehabilitation Program - Hospital (Adults)

Key Areas Addressed

- Preadmission assessment
- Privileging process
- Appropriate placement in the continuum of services
- Secondary prevention
- Rehabilitation nursing services
- Rehabilitation physician/medical services and management
- Program-specific information-gathering requirements
- Information gathering regarding durability of outcomes

Note: Recommendations, consultation, and exemplary conformance in this section of the report do not include those specific to specialty programs included in the survey. If specialty program accreditation was sought, the relevant specialty program section of the report includes recommendations, consultation, and areas of exemplary conformance for all portions of Section 3 of the standards manual that were applied to the specialty program.

Recommendations

There are no recommendations in this area.

K. Stroke Specialty Program

Inpatient Rehabilitation Program - Hospital: Stroke Specialty Program (Adults)

- Standards in Section 3.A. Comprehensive Integrated Inpatient Rehabilitation Program have been applied to this program.

Key Areas Addressed

- Intervention services provided for persons served and their families/support systems
- Prevention of recurrent stroke and the complications of stroke
- Reducing activity limitations and decreasing environmental barriers
- Continuum of services

- Health assessments and promotion of wellness
- Education for persons served and their families/support systems
- Maximizing participation and quality of life
- Discharge/transition recommendations
- Data collection regarding the effectiveness of the program

***Note:** Recommendations, consultation, and exemplary conformance in this section of the report include all portions of Section 3 of the standards manual that were applied to the specialty program.*

Recommendations

There are no recommendations in this area.
