Enhancing Community–Based Therapy for Stroke Survivors in LTC

Protocols for Stakeholders
Case Managers (or designate)

Clients Discharged to the LTC Setting

The case managers make the decision regarding client eligibility for CCAC service upon the client's discharge from the inpatient setting to the LTC setting.

Hospital Case Manager Role (these may vary to meet the administrative procedures of different settings).

1. Potential clients are identified by Rehab Therapist if following ALC-LTC client or by Placement Case Manager/ Discharge Planners if being discharged to LTC from hospital.
2. Hospital case manager will determine if client meets criteria for enhanced therapy in LTC / perform assessment / determine eligibility for CCAC services / complete appropriate assessment.
3. If eligible the hospital case manager will authorize one OT visit in the LTC home for the initial assessment. When contacting the service provider with the service offer, the case manager will identify that the referral is for enhanced therapy in the LTC home.
4. The case manager will advise Gwen Brown, Regional Stroke Community & Long Term Care Coordinator, of any new patients transitioning to LTC under the enhanced program. Gwen's contact information is as follows:

   Telephone: (613) 549-6666. ext. 6867
   Email: browng2@kgh.kari.net
   Facsimile: (613) 548-2454

5. The case manager will follow the CHRIS BP when completing this referral

Eligibility Criteria for Enhanced Services

Clients will:

- Be 16 years of age or older and live in Southeastern Ontario
- Have had a recent stroke or a diagnosis of stroke
- Will be eligible for CCAC follow up therapy in a LTC facility or nursing home

Community Case Manager Role

1. The OT in collaboration with the client/case manager will establish the first 4 week plan of care. The CM will use the baseline/enhanced guidelines to help establish the plan. This plan could include OT/ SW/ SLP. PT will not be authorized as this service is already provided by LTC homes. The overall service plan could include OT visits for the authorizing of wheelchairs and adaptive equipment (ADP) if part of the overall treatment plan and goals for the client.
2. The OT will attempt to arrange a care plan meeting date in the LTC home. The planning meeting will include the LTC home PT, DOC or designate, client and family when possible and other care providers as deemed appropriate by the DOC/designate. The OT will communicate to the community case manager if she was able to arrange
3. The service providers will communicate to the community case managers any changes to the service plan
4. The community case manager will be responsible for establishing the second 4 week block in collaboration with the therapist. They will look to the baseline/ enhanced services when establishing the plan and will authorize the second 4 weeks based on the guidelines.

Guidelines for the Enhanced Therapy

The Project provides funding for increased therapy that is **above and beyond** the level of therapy that the CCAC would normally provide. The amount of increased therapy will be determined by the client's therapy goals within a maximum funding envelope. This funding covers the following activities:

a) The initial OT assessment
b) The care plan meeting
c) Provider visits (per the guidelines below)

First 4 weeks:	Up to:	2 extra visits/wk of OT
		1 extra visit/wk of SLP and SW *
4-8 weeks:	Up to:	1 extra visit/wk of OT
		1 extra visit/2 wks of SLP and SW *

CCAC Baseline Guidelines for Therapy Services/ Application of Enhanced Services

For this initiative we have provided standard baselines for therapy services and the enhanced services will be above these baselines. The Pre-discharge link will be considered enhanced services if able to be arranged.

- **OT is normally weekly for 3 weeks (maximum visits -3 visits for teaching). Enhanced services could be increased up to 3 visits per week for the first 4 weeks and up to 2 visits per week for the next 4 weeks.**
- **PT is provided by the LTC home**
- **Social Work is not normally provided in LTC. Enhanced services could be up to weekly for the first 4 weeks and up to bi-weekly for the next 4 weeks – See SW Note * below**
- **Speech-Language is normally weekly for 3 weeks (maximum visits- 3 visits for teaching). Enhanced services could be increased up to 2 visits per week for the first 4 weeks and up to weekly for the next 4 weeks.**

	CCAC Baseline Services	Enhanced Services Initial 4 Weeks	Enhanced Services Second 4 Weeks
OT	**Weekly for 3 weeks**	**Up to: 2 extra visits/wk of OT** CM could therefore authorize in the service plan up to 3 visits per week for the first 4 weeks	**Up to: 1 extra visit/wk of OT** CM could therefore authorize in the service plan up to 2 visits per week for the next 4 weeks
PT	**LTC home provides**	**LTC to provide**	**LTC home to provide**
SW	**Social Work is not normally provided**	**Up to: 1 extra visit/wk of SW** CM could therefore authorize in the service plan up to weekly visits for the first 4 weeks	**Up to: 1 extra visit/2wks of SW** CM could therefore authorize in the service plan up to bi-weekly for the next 4 weeks
		SW NOTE: * On a case-by-case basis if deemed appropriate, the service plan can be extended over 12 weeks (rather than 8) for **Social Work** services.	
SLP	**Weekly for 3 weeks**	**Up to: 1 extra visit/wk of SLP** CM could therefore authorize in the service plan up to 2 visits per week for the first 4 weeks	**Up to: Up to: 1 extra visit/2wks of SLP** CM could therefore authorize in the service plan up to weekly for the next 4 weeks

The guidelines for the enhanced therapy visits are identified for each discipline and the expectation is that the service plan should occur as authorized. The focus for this initiative is that clients receive enhanced services as identified in the service plan. However, if there is a client situation that occurs where visits might need to occur differently than the proposed plan, the therapy providers will need to dialogue with the case manager.

For Further Information Contact:

Caryn Langstaff
Regional Stroke Rehab Coordinator SEO
613-549-6666 x 6841
langstac@kgh.kari.net

Jo Mather
Manager, Client Services SE CCAC
613-544-8200 x 4112
jo.mather@se.ccac-ont.ca

Rev. June 2011