



AQUATIC THERAPY PROGRAM
USE OF POOL GUIDELINES

I. WORKFLOW FOR INPATIENT OT/RT AQUATIC THERAPY PROGRAM

1. New Aquatics Staff Requirements

- General pool orientation competency
- Basic water safety training certification
- Backboard training optional

2. Workflow for Therapist referring patient to Inpatient Aquatics Program

- Review Rancho Occupational Therapy (OT) / Recreation Therapy (RT) Policy and Procedure No. 319 “**Aquatic Therapy Program**” on the OT/RT SharePoint under Operational Procedures to confirm appropriateness.
- OT/RT identifies that aquatic therapy will be beneficial to patient’s recovery.
- For inpatient: A physician’s order for Aquatic Therapy is proposed in ORCHID under Therapeutic Pass with a drop down indicating Aquatic Therapy.
- Plan of Care Program: Aquatic Therapy will be indicated in the Occupational Therapy (OT) / Recreation Therapy (RT) plan of care (check off during initial/interim evaluation), with physician signature.
- In addition to visit documentation, primary therapist completes OT/RT note in Orchid to communicate patient’s functional status and goals for the program.

3. Patient Scheduling:

- Therapist reserves time on SharePoint during allotted Inpatient/Outpatient Aquatic Therapy time (i.e.: Peds OT/RT- Tuesday and Thursday from 10:00-12:00 pm)
- OT coordinates with primary therapists and/or inpatient staff to schedule and complete Pre-Aquatic Therapy shower, as needed (shower may also be completed prior to entering pool with OT).
- OT/RT schedules patient on RECO schedule for Aquatic Therapy session.
- RECO staff schedules appointments for OT shower and Aquatic Therapy.
- Therapist coordinates transportation with Rehabilitation Assistant (RA) and/or transports the patient independently.

4. Day of the Appointment:

- OT/RT issues disposable bathing suit if patient’s family is unable to provide proper swim attire. **(A limited amount of swimwear may be available through the RT Dept.)**
- OT/RT confirms transportation with RA and receiving time. (15 min. prior to Aquatic therapy session)
- OT completes soapy shower with patient prior to Aquatic Therapy session and assists patient with donning of proper swim attire. OT assists patient with packing a small bag with dry clothes for post aquatic therapy.
- Patient utilizes restroom approximately 30 minutes prior to aquatic therapy.
- RA receives patient 15 minutes prior to Aquatic Therapy session and transports patient with dry clothes bag to wellness center.
- Patient and transporter enter the pool area through the locker room entrance.
- Therapist assists patient as needed to enter the pool. (Liko lift, chair lift, or stairs)
- Therapy session.
- Session ends 10-15 minutes prior to the top of the hour.



RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER Occupational Therapy (OT) and Recreation Therapy (RT) Department

Policy No. 319.1
ATTACHMENT A
Supersedes: February 12, 2018
Revised: August 2022

4. Day of the Appointment (Cont'd):

- At end of visit, therapist assists patient as needed to exit the pool and into wheelchair. (If necessary)
- Therapist provides patient with towel to dry off and utilize for post shower.
- Therapist assists patient with shower and changing into dry clothes prior to return to JPI*.
- Patient leaves used towels in wellness center to be cleaned. . Patient disposes of disposable bathing suit or places personal bathing suit in bag for family to clean.
- Transporter assists patient back to JPI for remaining scheduled appointments.

5. Appointment Completion:

- RA/volunteer gather all used towels to be cleaned and placed in appropriate linen receptacles.
- RA/volunteer clean and return all used equipment to respective places.
- Therapist completes daily documentation in Orchid.
- Therapist identifies if additional appointments are recommended and notifies primary OT/RT of recommendation to determine if additional aquatic therapy sessions can be coordinated during remainder of Inpatient rehab.
- Aquatic therapy equipment (flotation devices, weights, etc.) used in the pool are naturally disinfected by the chemicals in the pool. All equipment should be rinsed with clean water to remove residual chemicals at the end of every day and left to air dry on the drying racks provided.
- Dry equipment will then be relocated to cage storage.

**If nursing is agreeable to completing shower post aquatic therapy this part of workflow will change.*

II. WORKFLOW FOR OUTPATIENT OT/RT AQUATIC THERAPY PROGRAM

1. New Aquatics Staff Requirements

- General pool orientation competency
- Basic water safety training certification
- Backboard training optional

2. Workflow for Therapist referring patient to Outpatient Aquatics Program

- Review Rancho OT/RT Policy and Procedure No. 319 “**Aquatic Therapy Program**” on the OT/RT SharePoint under Operational Procedures to confirm appropriateness.
- OT identifies that aquatic therapy will be beneficial to patient’s recovery.
- Plan of Care Program: Aquatic Therapy will be indicated in the OT/RT plan of care (check off during initial/interim evaluation), with physician signature.
- Plan of Care Frequency and Duration: Primary therapist determines total number of OT/RT Aquatic Therapy visits. The total number of visits in the plan of care will need to include **BOTH** the care provided in the outpatient area and care provided in aquatics area.
- In addition to visit documentation, primary therapist completes OT/RT note in Orchid to communicate patient’s functional status and goals for the program.
- Complete Appointment Request Form
 - Identify “OT/RT Return Aquatics” appointment type.
 - Specify frequency for scheduling.
 - Include comments as appropriate.
- Therapists may not request to schedule appointments for more than 2 weeks. The Aquatics therapist will arrange for scheduling additional appointments as appropriate.



RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER Occupational Therapy (OT) and Recreation Therapy (RT) Department

Policy No. 319.1
ATTACHMENT A
Supersedes: February 12, 2018
Revised: August 2022

3. Workflow for Therapist referring patient to RT Aquatic Therapy Program

- Criteria: Patients with no PT/OT therapy need is referred by physician, PT/OT may consult with physician to request an order for RT Aquatics for overall health maintenance, strengthening, endurance, swimming or leisure exploration use for community pool settings.
- Physician will place an order request in ORCHID for Outpatient Recreation Therapy Aquatics under order type.
- Once approved, the clerk or designated RT will receive the order in the order cue and schedule the patient under Rec Therapy Aquatics for evaluation.
- Once the patient is scheduled for evaluation, they will be placed in 1 of 5 slots available per half hour from 1:00 pm-4:00 pm on the designated day in the Wellness Center Recreation Therapy, Room 104.
- Once eval is completed it will be documented in ORCHID and forward to the RT Aquatic Therapist for review. The clerk or RT evaluator will place the appropriate patient in a time slot for the 45-minute aquatic session on the established RT outpatient aquatic therapy.
- Each outpatient will have a total 4 sessions including the initial evaluation.

4. OT Patient Scheduling

- Patient schedules appointment with scheduling clerks according to the instructions on the Appointment Request form.
- Clerical staff schedules appointments and returns appointment sheet to therapist with comments as appropriate.
- Therapists review list of scheduled appointments to ensure that frequency/duration of scheduling is consistent with patient's therapy needs.

5. Day of the Appointment:

- Patient should arrive at least 30 minutes early to register and allow time to change and be ready for treatment.
- Wellness Center reception uses Nurse Call System or phone to announce patient arrival to the pool therapist
- Pool therapist or support staff member comes to greet patient in the reception area.
- Pool therapist or support staff will escort the patient to the pool area to check-in the patient.
- Pool therapist or support staff will show the patient the locker room area.
- Patient changes into swimwear in the locker room. Patients who are unable to change on their own will need to bring a caregiver to assist. A patient lift is available in the family locker room. Competency training check-off is required for the caregiver prior to use.
- Patient enters the pool area through the locker room entrance.
- Patient rinses off in the pool area on their own prior to entering the pool. Therapist may assist with transfer and with rinsing as needed.
- Therapist assists patient as needed to enter the pool (Liko lift, chair lift, or stairs)
- Therapy session.
- At end of visit, therapist assists patient as needed to exit the pool and into wheelchair. (If necessary)
- Patients who are unable to change on their own will need to bring a caregiver to assist. Therapist contacts reception area to advise caregiver that patient is ready for pick-up.

6. Appointment Completion:

- Therapist confirms that patient check in completed.
- Therapist completes patient check out.
- Therapist completes daily documentation in ORCHID.
 - Use OT/RT note to identify visit number and intention to continue Aquatic treatment.



RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER Occupational Therapy (OT) and Recreation Therapy (RT) Department

Policy No. 319.1
ATTACHMENT A
Supersedes: February 12, 2018
Revised: August 2022

6. Appointment Completion (Cont'd):

- Use OT/RT Daily Documentation for documentation of treatment received and billing and or productivity.
- Therapist identifies if additional appointments are needed and communicates with primary therapist/ patient to get scheduled with Aquatics clerical support staff or RT.

7. Coordination of Aquatic Therapy Program:

- Aquatic Therapy is a Shared Program:
 - Patient is being seen in the outpatient location and in the pool to meet goals established by the outpatient therapist.
 - Primary therapist continues to follow the patient.
 - Aquatics OT/RT will communicate to primary OT/RT when patient has completed aquatic program.
 - Primary OT/RT will discharge the patient.
- Communication between therapists will be primarily through documentation in the medical record (daily/progress/interim notes).
- Direct communication (in person/telephone) between Primary and Aquatic therapist is required in the following instances. Therapist may also use message center in addition to a call or in person:
 - Patient experiences a medical complication during a therapy session or has developed a new medical problem.
 - Continued treatment in aquatic therapy is no longer indicated.
 - When in doubt...

8. Students:

- Students are not required to complete all trainings.
- The Primary therapist is responsible for reviewing workflow and room orientation with the students.

9. Last visit in Aquatics:

- Aquatics OT/RT will communicate with Primary OT/RT when program is completed.
- Primary OT/RT will determine when patient's therapy program is concluded and will discharge the patient.

III. DOCUMENTATION:

1. Create Auto Text Message for Occupational Therapy, Aquatic Therapy participation note in Orchid.
2. Select and "copy" all of the the content including the title in the text box below:
3. Left-click once in the open text area and use keyboard command **Ctrl+V** to paste the text.
4. Highlight all of the text that is now in the text area of the message.
 - Right-click anywhere in the open text area
 - Choose "**Save as Auto Text**"
 - In the **abbreviation** prompt, type: **OTAquaParticInfo**
 - In the **description** prompt, type: **Occupational Therapy Aquatic Therapy Participation note**
 - Click "Save" and then "Close"



OCCUPATIONAL THERAPY AQUATIC THERAPY PARTICIPATION INFORMATION:

Diagnosis: _
Precautions: _
Language Spoken: _
Total Aquatic Visits Requested: _
"Aquatic Therapy" is included in Plan of Care on OT Eval (Date): _

NOTE TO PRIMARY THERAPIST:

In order for your patient to be able to participate in this activity, Aquatic Therapy must be specifically included in your physical therapy Plan of Care in your initial evaluation or interim evaluation prior to the patient starting the program. If it is not, please complete an AdHoc OT Interim Evaluation/Progress Note and send for MD signature.

REVIEW CONTRAINDICATIONS TO PARTICIPATION IN POOL THERAPY:

1. open wounds or wounds with sutures/staples that are not fully healed/closed
2. colostomy bag
3. Foley catheter
4. PICC line
5. tracheostomy
6. bowel or bladder incontinence, diarrhea within 2 weeks, vomiting within 24 hours
7. any isolation precautions
8. febrile conditions
9. menstruation without internal protection
10. infectious or unidentifiable skin rashes or any active infection
11. DVT without anticoagulant
12. uncontrolled seizures
13. Active Eczema; Psoriasis; Sensitivity to pool chemical
14. Communicable Diseases: Hep A/B/C (intact skin); Cryptosporidium; E. coli; Giardia; Shigella; MRSA; HIV (not immunocompromised); Athletes Feet (wear shoes)

Patient is appropriate to participate in aquatic therapy (Y/N)? _

PATIENT LEVEL OF ASSISTANCE/EQUIPMENT FOR:

Grooming: _
UB Dressing: _
LB Dressing: _
Bathing: _
Toileting: _
Transfers: _
Mobility: _

GOALS SPECIFIC FOR AQUATIC THERAPY:

Other information relevant to pool treatment: