



Rancho Los Amigos National Rehabilitation Center
Occupational Therapy and Recreation Therapy Department

POLICY AND PROCEDURE

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PURPOSE:

To communicate departmental standards regarding the types, content, timing and frequency of recreation therapy documentation for patients' medical records.

POLICY:

The following procedure for medical documentation shall be followed to meet the requirements of patient care, licensing/certification, accreditation and reimbursement bodies. Only certified recreation therapists may document in the medical record. Recreation therapy intern students may document and have all documents co-signed by their unit preceptors (Certified Recreation Therapist Specialist).

PROCEDURE:

1. In-patient Documentation

a. Interdisciplinary Team Conference Note in ORCHID System

All team members document in the ORCHID System, which consists of five parts.

1. Discharge Planning: Established discharge goals and team member resources.
2. Short/Long Term Goals discipline specific weekly.
4. Barriers to Progress
5. Recreation Therapy Intervention

2. Recreation Therapy Assessment

Recreation Therapy Assessment Evaluation form must be entered into the ORCHID System within 72 hours of referral of physician's order. The Recreation Therapy Assessment form will be utilized as an initial assessment and as needed, as an interim assessment. An interim assessment should be done when

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there has been a significant change in a patient's status since the initial assessment, and the patient is not expected to be discharged within a short time.

All programming on Adult Brain Injury, Unified Stroke System of Care/ Neurology, Spinal Cord Injury and 900 units will facilitate RT groups and co-treatment groups targeting one or more of the following program plans: community re-integration, special event programming, community resources, aquatic therapy and leisure education. Pediatric and Pressure Ulcer Management units will provide both 1:1 and group interventions. No RT services will be provided on 102/102 units and 903 Unit.

3. Daily Record of Treatment

Each day that recreation therapy is provided, documentation of treatment provided is recorded in the Orchid System for each patient receiving individual or group treatment.

4. Weekly Progress Note for Pediatric and Pressure Ulcer Management only or if individual consults are completed on any service unit.

a. Progress notes are due within one day before, or on day of team conference, prior to start of conference.

b. Content should show continuity from week to week and must contain:

i. Major problems and status of each problem. Whenever possible, status should be stated as a change in functional level or, if not appropriate, as a measurable change in performance. Any problem that has been resolved should be so documented and deleted from subsequent notes. Any problem interfering with progress should be discussed and recorded in team conference report.

ii. Equipment issued/utilized during treatment, if any.

iii. Patient/caregiver education provided, if any, since the previous note.

5. Changes, if any, in overall RT goal will be reflected in ICP Flow Sheet.

6. Frequency and duration, if changed from initial evaluation, is noted in comment section, as well as any other information pertinent to week's progress.

7. Discharge Notes

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- a. Discharge notes are due by the end of the day on the day of the patient's discharge from the RT program and/or from the facility. On Units to where group only programming is indicated, RT staff must include current care grade in daily note to chart progress in group facilitated programming.
 - b. The discharge assessment should be completed as instructed in the "Guidelines for Completion of Recreation Therapy Assessment".
8. Consultation Requests
- a. Consultation requests from physicians for patients admitted to services not covered by a recreation therapist must be responded to within the following time requirements:
 1. Urgent: within 24 hours from receipt of consult.
 2. Routine: within 48 hours from receipt of consult.
 - b. Consultation requests are to be forwarded to the recreation therapy supervisor, who will delegate the consultation to the appropriate recreation therapy staff member.
 - c. The original Consult Request will be entered in the patient's medical record followed by findings, action taken, and recommendations.

Director, Occupational Therapy and Recreation Therapy Department
Signature(s) On File