

ELIGIBILITY CRITERIA – ST. JOSEPH’S HOSPITAL (2023)

MISSION:

St. Joseph's Care Group is a Catholic organization that identifies and responds to the unmet needs of the people of Northwestern Ontario, as a way of continuing the healing mission of Jesus in the tradition of the Sisters of St. Joseph of Sault Ste. Marie.

VALUES:

Care: St. Joseph's Care Group will provide quality care for our clients, body, mind and spirit, in a trusting environment that embraces diversity.

Compassion: St. Joseph's Care Group will demonstrate dignity and respect for those in need, accepting people as they are, to foster healing and wholeness

Commitment: St. Joseph's Care Group is committed to our community, the people we serve, the people we employ, and our faith-based mission through a continued pursuit of excellence.

Inpatient Complex Care and Rehabilitative Services include 250 hospital-based post-acute inpatient beds that occupy the 2nd through 5th floors at the 35 N. Algoma site. Clients are admitted to these programs for complex medical management, rehabilitative care and palliative or end-of-life care. IP Complex Care and Rehabilitative Services also provide ongoing care to clients who have completed treatment, no longer require hospitalized care and are awaiting placement in another care setting.

To assist those who wish to make a referral to St. Joseph’s Hospital’s Inpatient Complex Care and Rehabilitative Services, the following eligibility criteria have been established. Referrals either follow a clinical pathway directly from acute care to an inpatient unit or are processed through the Client Flow Coordinator, who will decide whether a potential client meets eligibility criteria and which unit is the best placement for the client.

To be eligible for admission to Inpatient Complex Care and Rehabilitative Service (excluding clients admitted for palliative care only), clients need to have restorative potential. In other words, there is reason to believe, based on clinical expertise and evidence in the literature where available, the client’s condition will undergo functional improvement and benefit from rehabilitative care. The degree of restorative potential and benefit from rehabilitative care will take into consideration:

- Premorbid level of functioning
- Medical diagnosis/prognosis and co-morbidities (i.e. is there a maximum level of functioning that can be expected owing to the medical diagnosis/prognosis)

Level of cognitive impairment, mental health status and discharge destination will not be considered in isolation to determine restorative potential but will impact decisions regarding the most appropriate unit for the client.

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*Clients need to be rehab ready-able to actively participate in therapy

* Potential to show sustainable functional gains

Service	Beds	Age	Purpose	Client Profile	Therapy Tolerance	ADL Ability	Cognitive Status
<p>2nd Floor</p> <p>Medically Complex Services</p>	60	18+	<p>To provide medically complex and specialized services to avoid further loss of function, increase activity tolerance and progress with the goal the client may be able to go home OR may be able to be discharged to another level of rehabilitative care (i.e. to Physical Rehabilitation on 3rd floor).</p>	<ul style="list-style-type: none"> • Medically stable • Medically complex, with possibility of multiple co-morbidities • Requires skilled nursing and medical care that cannot be met on an ongoing basis in any other level of rehabilitative care <p>This unit includes the following services:</p> <ul style="list-style-type: none"> • Chronic Vent Program • Long Term IV Antibiotics- reviewed on a case by case basis • Peritoneal Dialysis-where clients require assistance to manage • Chronic Wound Program 	<p>Potential to participate in therapy up to 30 minutes once per day</p>	<p>Independent to maximum assist</p>	<p>Not applicable</p>

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Service	Beds	Age	Purpose	Client Profile	Therapy Tolerance	ADL Ability	Cognitive Status
3 rd Floor Physical Rehabilitation	50	15+	To provide high intensity, time limited, interprofessional rehabilitation.	<p>Medically stable clients who have a neurological condition, with priority placement of clients who have recently experienced a stroke, spinal cord injury, and/or an acquired brain injury OR who have orthopedic conditions. Clients may or may not have multiple co-morbidities.</p> <p>For clients who have experienced a stroke, those with an Alpha FIM score between 40 and 80 will be admitted via the stroke pathway. Appropriateness of this unit for clients with FIM scores outside this range will be evaluated on a case by case basis.</p>	Potential to participate in therapy up to 3 hours per day , with the expectation therapy tolerance will increase over time.	Independent to maximum assist; able to weight bear in order to participate in therapy for those with orthopaedic conditions.	Not applicable

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4 th Floor Hospice/ Palliative Care	10 private	18+	To provide pain and/or symptom management or to facilitate end-of-life care with the goal of ensuring the best possible quality of life for dying Clients and their families.	<p>Adult clients who have advanced disease, are experiencing functional decline and require end of life care.</p> <p>Palliative clients who have advanced disease, are experiencing functional decline and require end of life care</p> <p>Palliative clients who have complex pain and symptom management issues that are not controlled</p> <p>Palliative clients with an unstable condition requiring close medical monitoring and extensive services</p> <p>Long term Palliative clients are assessed on an individual case by case basis.</p> <p>Decision guidelines include:</p> <ul style="list-style-type: none"> • Cannot be supported in the community and all services have been explored, • No family or formal home supports, • Pain and symptom management issues cannot be supported in the community. • A PCAT will be completed in addition to clinical indicators. 	Not applicable	Independent to maximum assist	Not applicable
Palliative Care	22						

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4th Floor Transitional Services	28		To cohort SJCG clients who are waiting Alternate Level of Care (ALC) and provide the most appropriate possible programming for this clientele in a hospital setting.	Clients who no longer require the treatment programs of St. Joseph’s Hospital and are awaiting placement in another setting are considered clients of our transitional services on the 4 th floor.	3X/week for 15 minutes	Independent to total assist	Not applicable

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Service	Beds	Age	Purpose	Client Profile	Therapy Tolerance	ADL Ability	Cognitive Status
<p>5th Floor</p> <p>Geriatric Assessment And Rehabilitative Care</p>	54	<p>65+</p> <p>Clients under 65 years will be considered on an individual basis</p>	<p>To provide low to medium intensity, time limited, coordinated interprofessional rehabilitative care with the goal of helping older clients improve their ability to live in the community with or without services</p>	<p>Medically stable older adults who have experienced a recent decline in independent functioning, who require and are willing and able to participate in a comprehensive interprofessional rehabilitation program</p>	<p>Ability to tolerate two 15-30 minute sessions daily to start, with intent to increase as client progresses</p>	<p>Independent to maximum assist</p>	<p>Cognitive ability to follow directions, willing to participate and has the potential to make functional gains.</p> <p>This information is attained using assessment tools and descriptive information including pre-morbid-state.</p>