**Specialized Rehabilitation**

**Competency**

Leader’s Guide

**Specialized Rehabilitation Aligned with the Facility Assessment Leader’s Guide**

**Leaders Guide**

Providing Specialized Rehabilitation Programs identified for appropriate individualized care will be instrumental for many residents in order to attain their highest level of functioning for both quality and for resident satisfaction. The intent of the facility assessment is for the facility to evaluate its resident population and identify the resources needed to provide the necessary care and services the residents require.

Facility data is the heart of strategic decision making in healthcare operations.

The facility assessment includes the following per requirements:

1. The facility’s resident population
	* Number of residents and resident capacity
	* Care required by the resident population which considers:
		+ Types of diseases
		+ Conditions
		+ Physical and cognitive disabilities
		+ Overall acuity
		+ Other pertinent facts that are present within the facility population
2. The facility’s resources, including but not limited to:
	* All buildings and/or other physical structures and vehicles
	* Equipment (medical and non- medical)
	* Services provided, such as physical therapy, pharmacy, and specific rehabilitation therapies
	* All personnel, including managers, staff (both employees and those who provide services under contract), and volunteers, as well as their education and/or training and any competencies related to resident care
	* Contracts, memorandums of understanding, or other agreements with third parties to provide services or equipment to the facility during both normal operations and emergencies; and
	* Health information technology resources, such as systems for electronically managing patient records and electronically sharing information with other organizations.
3. A facility-based and community-based risk assessment, utilizing an all-hazards approach.1

F825 Specialized Rehabilitative Services indicates, “If specialized rehabilitative services such as but not limited to physical therapy, speech-language pathology, occupational therapy, respiratory therapy, and rehabilitative services for mental illness and intellectual disability or services of a lesser intensity as set forth at §483.120(c), are required in the resident’s comprehensive plan of care, the facility must—

§483.65(a)(1) Provide the required services; or

§483.65(a)(2) In accordance with §483.70(g), obtain the required services from an outside resource that is a provider of specialized rehabilitative services and is not excluded from participating in any federal or state health care programs pursuant to section 1128 and 1156 of the Act.”1

The intent is clear: “to ensure that every resident receives specialized rehabilitative services as determined by their comprehensive plan of care to assist them to attain, maintain or restore their highest practicable level of physical, mental, functional and psycho-social well-being.”1

Numerous data sources are available to the facility and knowing how and where to obtain the necessary information is key for the successful evaluation of services and resources needed to provide care to the resident population

Regulators/surveyors will review records. observe and determine if services are provided as written and if provided by qualified personnel. The facility assessment should reflect specialized rehabilitation services either directly or by contract. Ensure Qualified Specialized Rehabilitation Personnel meet specific *competency requirements as part of their license and certification requirements* defined under State law or regulation during your facility review.

Organizational Leaders will need to ensure competency of all staff members and those involved Specialized Rehabilitation Services. Adequate resources for the program will need to be evaluated including:

* Staff
	+ RN Nurse
	+ Licensed Nurses
	+ Therapists: PT, OT Speech therapy, Respiratory therapy OTA, PTA, physician. Clinical nurse specialist NP. PA
	+ CNA’s
	+ Interdisciplinary Staff per facility specific policy (employee under contract, volunteers)
* Documentation Considerations
	+ Paper vs. Electronic Health Record
	+ Assessment/Evaluation Forms
	+ Care Planning
	+ Implementation and documentation of interventions
	+ Documentation
* Education
	+ RN Nurse
	+ Licensed Nurses
	+ CNA’s
	+ Interdisciplinary Staff per facility specific policy (employee under contract, volunteers)
* Evaluation and Monitoring
	+ Identification of Responsibility
	+ System to Evaluate
	+ QAPI Considerations
* Supplies and Equipment
* Pharmacy Services

**References and Resources:**

* 1Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17) Advance Copy 6/29/22: <https://www.cms.gov/files/document/appendix-pp-guidance-surveyor-long-term-care-facilities.pdf>
* Centers for Medicare & Medicaid Services Long-Term Care Facility Resident Assessment Instrument 3.0 User’s Manual: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/MDS30RAIManual.html>
* Centers for Medicare and Medicaid Services: Specialized Rehabilitative or Restorative Services Critical Element Pathway, Form CMS 20080 (5/2017): <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Nursing-Homes.html>