

SCOPE OF SERVICES
ORLANDO HEALTH ADVANCED REHABILITATION
INSTITUTE
BRAIN INJURY PROGRAM
2023-2024

MISSION STATEMENT/PHILOSOPHY

The mission of Orlando Health and Orlando Health Advanced Rehabilitation Institute (ARI) is to improve the health and quality of life of the individuals and communities we serve. Our vision is to be a trusted leader inspiring hope through the advancement of health. IFAR's Purpose Statement is "Through interdisciplinary rehabilitation we will relieve, restore and reintegrate."

DEPARTMENT ORGANIZATION

Managers: The Manager of Rehabilitation and the Nursing Operations Manager oversee daily operational activities at the ARI, including staff supervision, scheduling, budgeting of resources, maintenance of a safe, therapeutic environment as well as incorporating and distributing relevant information to the department's affiliates, associates and customers. The ARI's Inpatient Therapy manager and the Nursing Operation Manager report to ORMC Ancillary Services Administrator who reports to the Orlando Health Orlando Regional Medical Center (ORMC) Chief Operating Officer. The Nursing Operation Manager also reports ORMC Patient Care Administrator.

Medical Supervision: The ARI's Medical Director is responsible for directing the assessment and medical/rehabilitation management of the program's inpatients and outpatients. Additional responsibilities of the Medical Director include maintaining a safe, therapeutic environment and incorporating/distributing relevant information to everyone affiliated with the program.

Compliance: The Therapy Managers of ARI participate in a Therapeutic Rehabilitation Council. The purpose of this council is to ensure the coordination of the delivery of rehabilitation services throughout the organization, to maintain the highest quality of care and to ensure compliance with Standards of Practice and Policies and Procedures. The Rehabilitation Council meets monthly and more frequently if necessary. Yearly at the IFAR Outcomes Advisory Meeting financial performance, efficiency and effectiveness of the program, access, customer service, outcome studies and patient satisfaction are reviewed with invited input from our stakeholders. IFAR leadership meets monthly. Financial statements and monthly operation review systems are used to evaluate trends and assist in the budgeting process.

Nursing: Daily nursing care is directed by a registered nurse skilled in rehabilitation care of specialized patients. The ARI nursing utilizes a matrix-staffing model to determine the number and mix of nursing personnel needed on a daily basis. Patient care needs are assessed at room placement and daily by the Nursing Operations Manager or designee, and staffing adjustments are made accordingly. Nursing productivity is monitored daily.

Methods to assess and meet care needs for therapy areas include:

- Daily assessment of patient volume and acuity.
- Collaborative patient care rounds.
- Productivity systems to monitor man-hours and units.
- Patient scheduling to ensure compliance with expectations.

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Therapy: Therapy staffing is determined by patient evaluations. Staff members are assigned to each patient by team to maintain consistency for the patient. Staffing deficits are addressed by using pool therapy staff, deploying therapy staff from other Orlando Health, Inc. facilities, or authorizing overtime. Staffing overage is addressed by canceling pool staff, floating core staff to another Orlando Health, Inc. facility or unit, or allowing use of paid time off (PTO). Staffing standards will allow for participation in in-services, committees, meetings, and educational opportunities.

Performance Improvement: Performance improvement projects are identified and monitored in accordance with the corporate performance improvement strategies. Unit specific performance improvement initiatives are developed based on needs identified through Outcomes Management, which identifies program results, and through Patient Satisfaction Surveys. Performance Improvement Plans, Outcome Management Information indicators and focus studies are compiled by the ARI Management or designees and are reported at the IFAR Quality Leadership Meeting, the community and to the Outcomes Advisory Meeting on a semiannual basis. Performance improvement and outcomes information is provided to the staff at unit meetings and posted in designated areas. Outcomes are shared with various affiliates, associates and customers through multiple modalities of communication.

SERVICES PROVIDED

The ARI provides rehabilitation care to inpatients with a diagnosis of brain injury (traumatic, non-traumatic, closed or open head injuries) on a 24-hour, 7 days a week basis. A Right Care philosophy is the foundation of all of our programs.

Rehabilitation nurses are an essential part of the interdisciplinary team and they are involved in all decisions regarding patient care and the rehabilitation program. Therapists and nurses work closely with other members of the team to develop and implement the plans of care for each patient. Our social workers play a key role as the coordinators of care for each patient by facilitating team conferences, meeting with patients/families, and communicating with insurance companies.

Patients are provided comprehensive, integrated services through the coordination with all hospital support departments. This may include, but is not limited to pharmacy, radiology, podiatry, dental, pathology, and audiology. Emergency medical services are available on campus since IFAR is part of an inpatient hospital system with a Level 1 Trauma Center.

Medical Supervision: All patients are medically supervised by a licensed doctor of medicine or osteopathy who is a member of the hospital staff. The medical management of the patients is provided by a physiatrist who is also known as a rehabilitation physician. The attending physician provides 24 hour, on call coverage and is responsible for completing admission orders and a history and physical for each patient. The physiatrist attends the team conferences to coordinate the care of the patients as well as leads the team in the completion of the plan of care. The Medical Director is responsible for determining the number of physiatrists that are required to properly manage the total number of patients admitted to the rehabilitation unit. All physician activities are governed by the hospital Medical Staff By-Laws and Rules and Regulations.

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In providing and discontinuing services, The ARI staff supports and adheres to:

1. The State of Florida Practice Standards
2. Professional organization's practice standards and code of ethics
3. Orlando Health, Inc. Code of Conduct and Standards of Care/Practice

Allegations of violations of ethical conduct are reported and investigated through the Orlando Health, Inc. Corporate Compliance Program.

The Program: An inclusive evaluation/assessment is conducted by each of the involved professional team members. A treatment plan is initiated by the rehabilitation nurse within four hours of admission. Services provided are based on the assessed needs of the patient including cultural, religious, and developmental considerations. The evaluation will assess impairments, assess and recommend activity limitations such as activities of daily living, and assess and recommend participation restrictions such as driving or return to work. Patient progress is assessed on an ongoing basis and changes in the treatment plan are discussed and agreed upon in team conferences weekly. Educational needs, if applicable, are addressed by the team with the school's integration coordinator.

Treatment plans are based on input provided from the evaluations of all the professional team members, including rehabilitation nursing. All team members are responsible for carrying out the interdisciplinary treatment plan. The patients and their families assist in the development and implementation of a person-centered treatment plan which is unique to the patient based on the individual's goals including the environmental factors that impact their lives after they transition from the inpatient rehabilitation facility.

The Rehabilitation Unit has 53 inpatient beds and is located on the tenth and twelfth floors of the ORMC North Tower. Currently the accredited programs include brain injury, spinal cord injury, stroke and comprehensive rehabilitation.

- The Care Coordinator/LCSW is responsible for coordinating the care for each patient and integrating patient and family goals.
- Team conferences are led by a psychiatrist and treatment changes are decided by the entire treatment team.
- Family conferences are held as frequently as requested by the team and/or the patient. All team members are responsible for orientation.
- Patients are reassessed by the treatment team at least weekly to evaluate progress. Input from the team will be utilized to update the Goals and Outcomes and Plan of Care and to establish and/or confirm the anticipated discharge date based on a person-centered philosophy.
- In order for patients, families, and caregivers to be capable of providing the necessary support, they must have an understanding of the disease process, the patient's functional disabilities, the rehabilitation process/goals and knowledge of resources available to them after discharge. Training and support for patients and others may occur on a one-on-one basis or in formalized groups and is the responsibility of every member of the team. Successful reintegration of the patient into the community requires the support of family members

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and/or significant others.

- Discharge planning begins during the intake and admissions phases and continues throughout the program. Responsibility for discharge planning is shared by all members of the treatment team. Referrals are made as indicated and follow up contacts are made to facilitate successful integration into the community.

Referral Process: Patients may be referred by physicians, discharge planners, allied health professionals, third party payers, patients or family members. Persons referred to the program will be screened according to admission criteria to determine their potential to participate in and benefit from a comprehensive inpatient rehabilitation program. The screening may be performed by the Referral/Admission Liaisons, Certified Rehabilitation Registered Nurses, (CRRN), physician, Program Director or designee.

Admission Process: Patients who are candidates for The ARI (IFAR) inpatient program are reviewed and approved by the Medical Director or his designee, the Manager of Rehabilitation or his designee, the External Case Manager, the Referral/Admission Liaisons (CRRN), and/or the Nursing Operations Manager. Funding sources often require authorization and include Medicare, Florida Worker's Compensation, Medicaid, Florida Brain and Spinal Cord Injury Program, insurance and other payers. Preadmission screenings are completed by the admission team and meet all regulatory requirements. The IFAR admitting physician reviews the preadmission screening and determines agreement with the results and signs the document within 48 hours prior to admission. A post-admission physician evaluation is completed within 24 hours of admission. Therapy evaluations begin within 36 hours of admission day and an individualized program plan of care is documented by the fourth day.

Patients are assigned to private or semi-private rooms according to medical necessity, infection control and the clinical needs of the patient. A semi-private room has benefits for some patients who have goals to increase socialization or to promote communication skills and it allows opportunities for sharing and coping. We do not admit patients to the inpatient rehabilitation if they require ventilator support.

Types of Patients/Population Served: Patients served are ages 12 and above who have been diagnosed with some type of brain injury or a neurological impairment. The patients must demonstrate a potential for rehabilitation and a need for an interdisciplinary team approach. They must also have a past medical history and present medical condition that can tolerate a comprehensive rehabilitation program.

Patients must also be able to participate in at least 3 hours of therapy 5 days a week or have the potential to reach that level of participation shortly after admission. If capable, the patients should exhibit the psychological status and behavioral status to allow them to participate in the rehabilitation process. Some patients will demonstrate confusion, agitation, and behavioral issues due to neurological trauma. Regardless, goals are directed towards a successful rehabilitation.

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The patient should have a potential for discharge to a community environment such as their own home or a family member's home. Patients are placed in the continuum or range of care according to their needs for medical supervision and 24 hour rehabilitation nursing care. Adolescent patients are assessed to determine their ability to participate in this program. Education and training of the patient and their families is an ongoing process and all team members are responsible for participating in this process.

Transition/Discharge Criteria:

- The patient has received maximum benefit from the program by achieving all of the rehabilitation goals.
- After comprehensive evaluation, the patient is determined to have no potential to benefit from and/or ability to tolerate our comprehensive inpatient rehabilitation program.
- The patient is unable to make further progress toward rehabilitation goals.
- The patient no longer requires inpatient services to achieve rehabilitation goals.
- The patient experiences a major intervening surgical, medical or psychological problem that precludes benefit from a continued intensive rehabilitation program.
- The patient and/or the family are no longer willing to be active participants in the program.
- The patient/family exercises legal rights and declines the services offered.
- The patient's needs demonstrate the ability to benefit from an extension or continuation of services at our comprehensive inpatient rehabilitation program.

Special Needs Addressed By Our Program:

Physical:

- Autoimmune disorders, (conditions that occurs when the immune system, the body's protection system, mistakenly attacks and destroys healthy body tissue), infectious disorders and immune suppression (a slowing or stopping of natural immune responses) are addressed through our corporate policies for infection control. We have infectious disease physicians available for consultation as appropriate.
- Dysphagia, swallowing difficulty, is addressed by the team and specifically by the speech language pathologist through swallow studies, modified diets, therapeutic strategies to improve function, and adaptive techniques. The team, patients and families are educated in the needs of the patients to ensure proper carry-over of the strategies.
- Skin integrity and any breakdown of the skin are addressed through regular skin checks performed by the medical team. We also address this issue through the care and education plans for our patients. The team addresses any issues that are identified and provides education to the patient to promote healing, prevention of further issues and to increase their level of independence. We also have wound care nurses, plastic surgeons and wound care specialist physicians to address any alterations in skin integrity.

Medical:

- Circulation issues are identified in the nursing assessments and addressed as needed. Deep

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vein thrombosis, DVT, is a clot of blood formed within a blood vessel that remains attached to the place it originated. Medications, training and preventative measures are used in attempt to avoid the occurrence of DVTs as they can be common when people become inactive after injuries or surgeries.

- Medication is ordered by physicians, dispensed and monitored by pharmacists, and administered by registered nurses and licensed practical nurses. Medications are administered per the corporate policies for medication administration. Education in indications, contraindications, precautions, and complications is provided for each patient.
- Musculoskeletal (involving muscles and bones) complications are addressed by the treating team and, if needed, orthopedic physicians are available.
- Nutritional needs are met by consulting the team registered dietitian and ongoing reassessment, as well as education are provided to the patients. These needs are communicated to the physicians and to the team to ensure that the proper diet is followed, expected outcomes are met and that any complications are prevented.
- Pain management is team focused with a goal of addressing causes and symptoms to meet expected outcomes.
- Respiratory issues must be stable to allow for the rehabilitation process. We have 24 hours a day/seven days a week respiratory therapists available providing treatments as indicated.
- Visual dysfunction is evaluated by Occupational Therapy, addressed by the treatment team/physician and ophthalmologists are available for consultation as needed.
- Spasticity (increased tone in muscles) management is addressed through medications, education and therapeutic techniques.

Neurological: Involving the Nervous System:

- Neurological changes are addressed via the attending physicians. Neurologists and neurosurgeons are available through referral. Ongoing assessment of this is performed by the team to monitor the patient's progress and intervene if complications occur.
- Demyelinating disorders cause interruptions and/or slowing of the messages that are sent through the spinal cord. Educational resources, training and instructions for care are provided for staff and patients.

Household Management:

- Skills required to carry out functional tasks to manage a household are addressed by the team and focused on by the occupational therapist. These tasks include laundry, kitchen safety, cooking, money management, shopping, etc.
- Recommendations for environmental modifications are provided by the therapists and care coordinators and the patient is to meet expected outcomes with the discharge environment in mind. Assistance is provided to plan and coordinate the necessary modifications to ensure a safe and accessible discharge environment.

Personal:

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- Bowel and bladder needs are addressed through our education program and in our care plans if there is difficulty managing these issues. Training in the use of adaptive equipment occurs when needed to promote independence.
- Fertility needs are addressed through education with the team as well as by referral to specialty physicians such as Obstetrics/Gynecology and Urologists.
- Sexual function is addressed by interventions and education from our nurses, physicians, licensed clinical social workers/care coordinators, and therapists. We have available reference materials and equipment to educate our patients and staff.
- Sexuality is addressed by our unit educator and by our care coordinators. If referrals to specialists for medical intervention are needed we provide that through referral.

Mobility:

- Mobility (ability to move in an environment such as in bed or in the community) is addressed by the treating team and focused on by the physical therapist. The goals are focused on training and equipment prescriptions that are designed to meet the set goals to improve the patient's level of independence. Equipment needs are assessed by the treating team and communicated to vendors providing this equipment. Specific wheelchair evaluations are provided to each patient as needed.
- Seating needs are addressed by the treating team and focused on by the physical therapist.
- Seating assessments are included as a part of the wheelchair evaluation.

Social/Emotional/Intellectual:

- Cognitive and behavioral issues are addressed by the treating team and focused on by the occupational therapist, speech language pathologist, physician, and neuropsychologist, depending on the needs of the patient.
- Communication issues are addressed by the treating team and focused on by the speech language pathologist.
- Psychosocial (involving social and mental aspects) needs are addressed by the interdisciplinary team and coordinated by the licensed clinical social workers/care coordinators, neuropsychologists, and physicians. These services are extended to the families of our patients as well.
- Leisure and recreation needs are addressed by the treating team. Recreational therapy services are provided on the inpatient unit with a focus on assisting the patient in identifying, modifying and/or adapting leisure and recreation activities that can be continued after discharge. Recreational therapists are available for the outpatient program as needed.

Specialty:

- Assistive technology needs are addressed by the treating team. If rehabilitation engineering or customized equipment is indicated, these services are available through agreements with several state and private providers.
- Driving assessments and vehicle modifications are typically performed after discharge from

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the inpatient setting and are provided via community partners.

- Durable medical equipment (DME) is provided by home health coordinators based on the needs of the patient. The needs are communicated by the treatment team and the care coordinator. DME resources are established for patients with a wide range of resource availability.
- Emergency preparedness is addressed through patient and family/caregiver education.
- Orthotic and prosthetic (artificial device designed to provide support such as a brace or artificial limb) needs are addressed by the treating team. Devices are provided by either The ARI staff, orthotists/prosthetists, or approved providers depending on the nature of the recommended device.
- Transition planning is managed by our inpatient and outpatient care coordinators, and by external case managers. We assist the patient in planning the transition between the different stages of the continuum of care.

Prevention:

- Our team addresses prevention with education and training in both the outpatient and inpatient settings. Primary prevention topics include reducing personal risk factors, body mechanics, orthotic/prosthetic instructions, instruction and recommendations for transportation options for community mobility safety, options for safety devices, etc.
- Secondary complication prevention is provided through team intervention as well as our education process to instruct patients in common secondary complications and how to prevent them from occurring. This includes prevention related to potential risks and complications due to impairments, activity limitations, participation restrictions and the environment.

Self-Care:

- Activities of daily living (bathing, toileting, dressing, grooming, etc.) are addressed by the entire team and focused on by the occupational therapists. The goals are to provide the highest level of independence possible in performing or directing care. Caregiver education and identification of needed adaptive equipment are included. The goals are developed based on the assessment of each patient, expected results, resources, and the discharge environment.

Community:

- Community integration is addressed by the treating team including community outings, functional community tasks, peer support groups, group outings and functions depending on the needs of the patient.
- The ARI staff participates in peer support groups and facilitates functions in the community to encourage the integration of leisure and recreation activities into the lives of the patient.
- Resources for independent living and community integration include close association with the Brain and Spinal Cord Injury Program (BSCIP), BSCIP Med Waiver Program and

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Vocational Rehabilitation.

- Vocational rehabilitation is provided through specialists in our state vocational rehabilitation program. Prevocational and preparatory strategies for return to work are included in plans of care depending on the needs of the patient.
- Substance abuse, counseling, and mental health needs are addressed via external referral, and by our staff Licensed Clinical Social Workers and neuropsychologists, depending on the needs of the patient. These resources are also available via community referral as well depending on patient need.
- Case management is provided within the rehabilitation program as well as from the community. Our team works with our insurance case managers, the brain and spinal cord program and other programs as necessary to coordinate resources to meet the needs of the patient.

Education:

- Education and family training are an important component of our program. The treatment team educates the patients and their families in person continuously throughout their recovery.
- On admission they are provided with a comprehensive manual covering topics such as orientation to the program, wellness, aging, prevention, community resources, caregiver information, and much more. This manual is reviewed and referenced throughout their inpatient stay and it is taken home with them for their future reference.
- Family and caregiver support groups are led by our neuropsychology team to provide information and support.
- The ARI seeks opportunities to provide education and training to the general and professional communities to promote awareness, prevention and knowledge of traumatic brain injuries. The medical director pursues research prospects for our program to participate in as well.

TYPE, NUMBER AND SKILL MIX OF STAFF

An interdisciplinary, (meaning involving multiple specialty areas), approach is used for providing care to the patients at the ARI. The staff or team members employed by the rehabilitation unit are competent, qualified, ethical, and licensed and/or certified where required. This interdisciplinary team communicates routinely throughout the day to provide quality integrative care.

The rehabilitation interdisciplinary team consists of the following members:

- Psychiatrists, Rehabilitation Physicians
- Certified Rehabilitation Registered Nurses
- Registered Nurses
- Licensed Practical Nurses

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- Clinical Technicians/Nursing
- Physical Therapists
- Physical Therapy Assistants
- Assistive Technology Practitioner
- Neurology Clinical Specialist
- Certified Brain Injury Specialist
- Proprioceptive Neuromuscular Facilitation Specialist
- Occupational Therapists
- Certified Occupational Therapist Assistants
- Speech Language Pathologists
- Certified Therapeutic Recreation Specialist/Recreational Therapists
- Neuropsychologists
- Case Managers
- Rehabilitation Aides
- Licensed Clinical Social Workers
- Registered Dietitians
- Respiratory Therapists
- Chaplains
- External Case Managers

STAFF ORIENTATION, EDUCATION AND COMPETENCIES

The ARI team members participate in hospital new employee orientation and educational activities. Department orientation is completed during the new employee's Introductory Appraisal period under the guidance and direction of an assigned preceptor/mentor, Unit Based Educator and the Rehabilitation Manager. Annual competencies are also assigned and completed annually to address high risk, low volume, or other important skills or concepts for team members.

"Coaching plans" or performance evaluations are completed annually providing an opportunity to assess the competencies and skills of the team members. Areas identified as "needs improvement" will have an associated action plan for improvement. Team members and supervisors work together to create goals to meet personal and/or departmental opportunities.

Orientation is comprehensive and individualized according to employee's specific needs and job description. New employees attend general orientation and are assigned to a preceptor who is skilled in the specialized care required for the agreed upon orientation period.

Staff Education is provided on an ongoing basis to include new equipment, new policies and procedures and other topics according to periodic needs assessments. Licensed therapy staff and

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nurses are granted an educational allowance to learn up-to-date techniques specific to the care of the rehabilitation patients. Rehabilitation Summits are scheduled quarterly to provide educational and team building opportunities for the IFAR inpatient teams. Information provided on an ongoing basis includes:

1. Annual Mandatory Education:
 - a. Patient's Rights
 - b. Fire Safety
 - c. Patient, employee and guest security
 - d. Infection Control & Prevention
 - e. Bloodborne Pathogens (Occupational Safety and Health Administration [O.S.H.A.] In-service)
 - f. Risk Management
2. In-services to include products, equipment, procedures, patient care issues, hospital policies and procedures

Staff Competency: Staff members are required to maintain competencies specific to the level of practice required at The ARI as part of Orlando Health, Inc., policy as demonstrated by current licenses and/or certifications, and competency assessments.

Coaching plans are completed annually with team members to allow for professional growth and to evaluate competencies.

INTERACTION WITH ALLIED HEALTH/SUPPORT DEPARTMENTS

- **Administrative Supervisors** have responsibilities on a 24-hour, 7-day a week basis. The department is physically located at Orlando Regional Medical Center. Responsibilities include:
 - Coordination of patient care and patient placement in collaboration with physicians, charge nurses, and administrators.
 - Serving as a resource for routine nursing policies and procedures, legal issues, patient rights and compliance with the standards of regulatory and accrediting agencies.
 - Serving as a clinical resource agent to nursing units and ancillary departments for problem solving.
 - Coordination of staffing of all nursing units in conjunction with nurse manager/designee.
- **Biomedical Engineering** provides support for the medical equipment at Orlando Health. They also support other electronic technologies such as cameras, audio/visual equipment and access control systems. Services are available either through on-site personnel or on-call 24 x 7 for all locations. The main department including the management team is housed in a corporation location on the downtown campus. All medical equipment in use within Orlando Health buildings, either leased or owned, falls under the Biomedical Engineering department's responsibilities regardless of ownership. Service on the equipment is performed with in-house personnel, third-party companies or OEM support under the direction of the Biomedical Engineering department.

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- **Central Supply** provides sterile, clean, one time use medical supplies 24/7 at ORMC. The Central Supply Department manages the distribution of supplies through the par level process for patient care and ancillary medical supply rooms. Central Supply also maintains backup inventory at each facilities for distribution of STAT orders. CS provides storage and inventory control, receiving of supplies and equipment, and monitoring of supply usage. Central Supply is a corporate department that shares knowledge, resource and supplies between facilities.
- **Engineering** provides service 7days a week, 24 hours a day for the Orlando Regional Medical Center, UF Health Cancer Center, Ambulatory Care Center, and Lucerne Pavilion. Primary maintenance and repair responsibilities include but are not limited to the following:
 - Normal and Emergency power distribution systems
 - Medical Gas delivery systems
 - Medical Vacuum
 - HVAC (including climate control and computerized building management)
 - Building domestic and chilled water systems
 - Building steam system
 - Piping systems (both domestic water and sanitary)
 - Tertiary equipment and systems supporting building operation
 - Physical building infrastructure (roofs, walls, windows, and floors)
 - Facelift and project management including painting and small build outs
 - Fire protection systems including immediate response to all fire alarms
 - Conducting periodic mandatory fire drills
 - Regulatory compliance oversight involving the physical facilities including: AHCA, TJC, OSHA, NFPA, EPA, and other Authorities Having Jurisdiction (AHJs) that have governance or mandate life safety requirements associated with the operation of hospital buildings
 - Oversight of grounds
 - Repair of all movable equipment not assigned to Biomedical Engineering or maintained under special service contracts
- **Environmental Services** provides housekeeping services at the ORMC/UFHCC/ACC/OHHI and other campus facilities. This includes cleaning occupied and discharged patient rooms, public restrooms, public waiting areas, ancillary procedure areas, common areas, office areas, as well as some grounds. Additional services include linen distribution, hard surface floor care, carpet care, and waste disposal services, as are required by all local, state and federal regulatory agencies. The department operates on a 24-hour, 7-day-a-week basis.
- **Finance Department** provides financial services to all of Orlando Health’s business units, departments, corporations, and related entities. Provides numerous services to all departments throughout the organization including:
 - Provides monthly financial and operating statements for each manager of that area.

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- Coordinates the annual operating and capital budgeting processes with each Manager through their designated finance liaison.
 - Payroll provides compensation payments to all employed team members.
 - Accounts payable processes vendor invoices approved by appropriate management team members, and coordinates the P-card program
 - Budget management and expenditure reports are made available on a monthly basis and assistance is offered for annual budget development.
- ***Food and Nutrition*** provides meal service at a minimum of three meals a day. Patients are provided meals via a traditional meal service. Patients are visited by a menu specialist to obtain their meal orders. Meal orders are obtained for the same day for lunch and dinner and the following day for breakfast. The CBord system is used for menu entry, tallies, tray tickets, and diet compliance. Floor stock food items are also available on each unit if needed. These items are ordered and delivered to each unit by the Food & Nutrition staff. The individual units are charged for their floor stock items. There are several options for cafeteria service at ORMC. The Kuhl cafeteria is open 5:00 am – 3:00 am 7 days a week, with a wide variety of menu options. The UF Health Cancer Center Café is open 7:00 am – 2:00 pm Monday – Friday offering a variety of food options. ORMC provides services to adult and geriatric patients of various disease states. IFAR patients have the opportunity for group dining to reinforce rehabilitation goals.
- ***Health Information Management*** operates in a paperless environment. The Health Information Management Department is responsible for the following functions: Record Access, Record Completion, Coding, Cancer Registry, Birth Registry, Medical Transcription, Document Management, Practice Management, Master Patient Index Verification, Content Analysis and other functions as applied.
- ***Record Access*** maintains a complete and accurate medical record for all inpatients, recurring outpatients, endoscopic, surgical, emergency department, urgent care, and observation patients. This area also maintains the death log. The Record Access area includes the Release of Information section that is responsible for complying with patient, insurance, legal, and other external requests for medical records. This function is conducted in accordance with established policies to include state and federal legislation to ensure that patient confidentiality is maintained.
 - ***Record Completion*** is composed of analysis, and physician completion of the medical record for inpatients, observation, short stay, outpatients, recurring endoscopic, surgical, emergency and urgent care patients. Monitoring of incomplete medical records is done in this area.
 - ***Regulatory Compliance***: Assists in compliance with those standards set forth by the Joint Commission, CMS and other regulatory agencies, as well as the Rules and Regulations of the Medical Staff. Auditing and reporting of the National Patient Safety Goals indicators is performed in this area.
 - ***Birth and Death Registry***: Is responsible for recording all births by preparing birth

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certificates required by the office of Vital Statistics. Fetal Deaths are also recorded and filed to the office of Vital Statistics. This is performed through an electronic data reporting system provided by The Department of Health.

- *Document Imaging/Document Management* is a centralized function responsible for transforming all the discharged paper medical records from all Orlando Health hospitals as well as some of the practices that are transitioning to the EMR and making them available through an electronic health *record* Sovera and Allscripts. Duties include preparing the charts for scanning; scanning the charts into the optical imaging systems and indexing the documents in the applications deemed our legal health record. This area has transitioned into the Document Management Center of Excellence by expanding the imaging of business records (Patient Accounting, CBO,) as well as being the expert for all Document Management Services at Orlando Health. Master patient index is maintained in this area by a team that reviews possible duplicate medical records number ensuring that each patient has one unique medical record number at Orlando Health. It also ensures the validity of the Community Master Paint Index. Participation in the HIEs is also one of the major components in this area.
- *Coding* is responsible for reviewing all medical records at each facility and accurately assigning the principal diagnosis and procedure codes as well as secondary codes for reimbursement as well as for reporting. Coding *also* performs concurrent record reviews alerting the medical staff to complete accurate documentation allowing for accurate code assignments (Clinical Documentation Improvement Program). This area is responsible for the case mix index. Coding for the Practice Management area has transitioned ensuring that the subject matter expertise exists.
- *Medical Transcription* is responsible for accurate transcription and verification of all medical record dictation by physicians, *physician* assistants, residents, and nurse practitioners. Auditing for compliance of physician dictation is performed in this area.
- **Human Resources** is a corporate department serving over 14,000 team members, physicians and volunteers in the organization. Most of the services are a hybrid of decentralized and centralized functions. The Human Resources Department has local offices in each of the hospital sites and one off site office where we have more than 1,300 team members located.
 - *Benefits* is responsible for developing and administering comprehensive yet cost-effective benefit programs, including but not limited to Health & Welfare, Retirement and Workers' Compensation, for all levels of the organization. This includes educating team members about the various core and elective benefits available to them and their families, assisting them in making appropriate selections, and plan interpretation. In keeping with Orlando Health's strategic business plan, this department also recommends plan design and selects the most appropriate vendors of benefit products and services.
 - *Prevention & Wellness*: It is our vision to be a model and national leader in healthy practices that support prevention and wellness as a part of our engaged workforce. Healthy U is the team member wellness program. It includes incentives for healthy behaviors and outcomes, health fairs, and other events aimed at promoting prevention and

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wellness.

- *Sniffles Ouches and Sneezes:* S.O.S. is our sick childcare center that is staffed by a nurse. We can accommodate the mildly ill child of a team member during the day, Monday through Friday. The cost to team members is \$5 per hour, subsidized by the organization for the additional \$5 per hour charged to outside contracts.
- *Compensation:* The compensation team is responsible for developing and administering base pay, variable pay, the annual merit program and a variety of group and individual incentive programs. This includes the ongoing review, analysis and evaluation of external market data, internal pay equity, performance measurement and compliance with federal wage and hour laws. This also includes the review of new and ongoing documentation and analysis of job descriptions, minimum hiring requirements, job-specific competencies and job attributes used for classification and regulatory compliance purposes. The team is also called upon to assist management with job redesign, operational improvements and change initiatives. Staff training is coordinated when necessary as it applies to organizational initiatives.
- *Talent Management:* The Talent Management team provides assessment, performance consulting and training for business needs, performance needs and workforce operational needs. A special emphasis is placed on maximizing the effectiveness of individuals, work groups and teams, and facilitating change. The leadership development curriculum provides leadership with the opportunity to gain skills to lead and inspire team members for organizational and personal success.
- *Team Member Engagement:* This team is responsible for programs that impact team member engagement, including, internal communications, new hire orientation and corporate-wide team member recognition programs and strategies.
- *Site Human Resources Directors* direct and lead the initiatives of the site Human Resources Department to ensure successful strategic partnerships and to provide professional support to operational leadership. They ensure that leadership practices are compliant with federal, state and local laws and regulations. Site Human Resources advises managers and team members on general organization and HR policies and procedures to meet legal requirements and provide consistent, fair treatment. Site Human Resources is responsible for supporting Corporate Human Resource functions for all team members at each site, corporately and in the physician practices throughout the organization.
- *Corporate Employee Relations:* The goal of Corporate Employee Relations is to create a working environment where team members can focus on the patient. We do this by effectively communicating with team members, treating them with dignity and respect, and asking for their input on processes that impact their areas. Our policies and processes support the patient-first culture and are compliant with federal, state and local laws and regulations, including the Joint Commission.
- *Talent Acquisition Team* is responsible for the sourcing, recruitment and hiring process at

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Orlando Health. A strategic hiring plan has been developed to address workforce needs for the organization. The Talent Acquisition Team works in conjunction with management to identify advertising strategies, training or education needs and market forces, which affect workforce needs. Staff facilitates the internal transfer process. The recruitment strategy supports the mission of Orlando Health to hire the highest quality team members.

- *Workforce Planning* focuses on identifying the future workforce needs of the organization. The goal of workforce planning is: right people/right skills/right jobs/right time.
- *HR Information Systems (HRIS)* team is responsible for managing, maintaining and coordinating the Human Resources Information Systems, including the system of record for team member information. HRIS is responsible for identifying, tracking and reporting issues, trends and problems that can become improvement opportunities. This team audits the electronic information of team members and works to maintain and enhance the system to meet the needs of the organization at all levels.
- *HR Solutions Center* is the primary point of contact for team member transactions and questions regarding benefits, compensation, recruitment, education, tuition reimbursement, transfers and policy interpretations.
- *Healthchoice* provides a comprehensive network of physicians (over 1,700 physicians) and ancillary providers for our Orlando Health team members and other local employer groups – covering 13 hospitals. Healthchoice provides comprehensive care management and disease management to improve the quality and cost of care; as well as, a workers' compensation network and management services to the Orlando Health team members. **Network Development** is responsible for provider credentialing and re-credentialing, provider contracting and service, claims research, fee schedule development, database support and reporting, acting as payer liaison and maintaining the Healthchoice website. **Care Management** is responsible for pre-certification, concurrent case review, case management, catastrophic case management, disease management and workers' compensation.
- *Learning & Development*: This department provides corporate-wide education for team members with emphasis on regulatory/statutory, clinical orientation, and advancement in clinical competence and professional practice. All team members are provided mandatory education as required by federal, state and regulatory mandates. System-wide clinical education is provided for all caregivers of specialty patient populations. The educational focus is standardization and consistent curriculum to support quality patient care. It involves assessing learning needs, planning educational opportunities, implementing programs and learning tools, and evaluating overall effectiveness of education. Simulation learning utilizing human patient simulators has been added to the learning modalities offered through Learning & Development. Over 90% of the courses offered contain an application component using human simulators. The development and

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enhancement of critical thinking skills in clinical practitioners supports early recognition in patient condition changes and appropriate actions to improve patient outcomes. Multidisciplinary simulation sessions have offered the opportunity to enhance communication between the healthcare teams. This education modality supports the organization's journey to a Right Care culture. The department structure is based on major clinical groupings with ability to resource system-wide. Education is provided at a variety of times and locations and addresses multiple learning styles.

- *E Learning* develops products to provide online learning experiences for Orlando Health team members. Products include computer assisted instruction interactive programs, E Info presentations, and on- line testing. Services provided include instructional design, programming, media development, technical writing and support/maintenance of on-line products.
 - *Education Programs:* The department develops and maintains positive relationships with academic institutions to support new program development, student clinical affiliations, and to increase student educational opportunities within the organization that will enhance student loyalty to Orlando Health. The department provides student coordination for a variety of disciplines as well as collaborates with regional workforce development and educational organizations to communicate workforce needs and identify student training opportunities.
 - *RN Residency Program* includes a team of graduate nurse coordinators who develop programs to promote recruitment and retention of new graduate nurses. This team provides support and guidance in professional development, problem solving and transition from student to team members through the first year of employment. The graduate nurse orientation process is facilitated in conjunction with unit Learning Specialists and nursing leaders and career pathing opportunities are provided within the organization for future growth.
 - *Corporate Library Services (CLS)* provides information access and expertise to team members, patients, families and the community through four libraries: Health Sciences and South Seminole Medical Library for team members, and Clifford E. Graese and MCRG Patient & Family Learning Center for patients, family members and the community. The E-library site is a gateway to multiple clinical databases including MEDLINE and CINAHL (nursing and allied health database) and over 500 electronic full text journals and textbooks. CLS has an extensive book collection of over 3500 titles and more than 400 journal subscriptions. CLS staff conducts topical searches of the medical literature for clinical staff and provides instruction for students and team members. Twenty-four hour access to the Health Sciences Library is provided to physicians and residents, as well as to other Orlando Health team members upon request.
- *Infection Prevention and Control* provides the following services:
- Performing the annual risk assessment and developing the Infection Control Plan with the Infection Prevention and Control Committee and committee co-chairs.

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- Developing or assisting with the development of activities and strategies to prevent infections in patients, team members, medical staff, and visitors
 - Surveillance and reporting for targeted infections
 - Outbreak investigations
 - Investigating and conforming exposure to infectious diseases
 - Trending and reporting for multidrug resistant organisms of interest
 - Public health reporting
 - Infection prevention and Bloodborne pathogen education: Provides inservices and informal education during unit rounds to all inpatient nursing units, focused education for outpatient units and ancillary based on need. Bloodborne pathogen education and content for annual mandatory education is done with Corporate Education and Development.
 - Consultation and guidance on transmission based precautions (isolation)
 - Supporting and reporting to the National Safety Healthcare Network (NHSN) to meet regulatory requirements
 - Review design plans for new or existing facilities to ensure infection prevention needs are met. Develop containment procedures with Facilities, Engineering, and other project managers during construction and renovation.
 - Perform Environment of Care walks with Corporate Safety in clinical areas.
- **Information Services (IS)** provides comprehensive technology services 24 hours per day, seven days per week, and 365 days per year to the entire Orlando Health enterprise, including all hospitals, outpatient services, physician practices, and business operation locations. IS maintains two primary corporate data centers; one located in downtown Orlando (SunTrust Building) and the other approximately eight miles west of the downtown campus on Mercy Drive. Both data centers are managed by system and network administrators and other technical staff 24x7. Health Central and Physician Associates maintain their own data centers, and there is a small data center on the first floor of the Thorsen Corporate Building, which provides data and voice network integration for the downtown campus and assists with load balancing. Services provided by IS include project management, software application development/support/maintenance, clinical informatics, configuration deployment and support, reports, system interface development and integration, biomedical engineering, electronic services, telecommunications, network engineering, data center operations, data and network security, disaster recovery testing, problem management, service desk, field support, desktop administration, and customer liaison (relationship management) functions.
- **Laboratory Services** provide both Clinical and Anatomical Pathology services for inpatients, outpatients and outreach customers. In addition, services are also provided at the Point-of-Care (bedside testing) and alternate testing sites. Laboratory patient service centers are located in the community. Orlando Health Clinical Laboratories has seven laboratory testing site locations serving the system hospitals and community. These Laboratories provide a

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comprehensive testing menu. Any testing not offered at any Orlando Health Laboratory is sent to approve reference laboratories. Blood products are supplied by One Blood.

Orlando Health Laboratories has a Cerner Millennium laboratory information system (LIS) which includes Discern Expert software; rules based system to support technology, and electronic fax to provide patient results to laboratory customers. The LIS is interfaced with the hospital clinical information system and billing systems to link patient demographics, orders, and results for on- line availability. The laboratories perform testing using standardized technical procedures, normal test ranges and laboratory practices. The laboratory quality management program uses the framework from the Clinical and Laboratory Standards Institute (CLSI). There are quality systems essentials (QSEs) which are the fundamental components used to establish the quality management system. Our Clinical Laboratories evaluate quality and the continuum of patient care through quality improvement indicator results and interaction with our customers to ensure positive patient outcomes. Process improvements are accomplished through multidisciplinary teams consisting of ancillary partners.

- ***Outside/Contract Services*** will be utilized if it is cost effective and appropriate. Services must be coordinated through the appropriate departments in order to ensure compliance to Orlando Health, Inc. and State/Federal guidelines.
- ***Strategic Communications:*** The team is responsible for developing and managing the Corporate Identity for Orlando Health and its sub brands, brand extensions, and partnership brands. This includes but is not limited to:
 - Development and management of the brand promise/philosophy
 - Development of all logo designs including registering all service marks and trademarks.
 - Naming and registration of all programs, centers, institutes, hospitals, etc.
 - Development and maintenance of the writing and graphic standards guide (online tool)
 - Development of internal and external way finding (signage) standards
 - Ensuring consistency among brand elements at each entry into Orlando Health, including patient educational materials - improving the patient experience.
 - Development and creation of any brand campaigns (advertising/promotion)
 - Approval of all Brochure/Packaging Development
 - Staying current with any and all brand marketing/management trends and changes in healthcare as well as other industries. In addition, the team is responsible for providing timely, accurate, accessible communications to key targets (Board, Executive Leaders, Management, Team Members, Physicians, Community Leaders (in collaboration with the Community Relation’s team), Media (in collaboration with Media Relations team) Consumers (women), regarding corporate messaging, promotion of services, wellness and prevention messages, patient communication/education, etc.
 - Strategy – Right Care/Clinically Integrated Strategy, Quality/Safety, Financial,

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Structure/Org Changes, Etc.

- Patient/Visitor Information -available on the Orlando Health website (orlandohealth.com) Educational and Informational Materials (Road to Recovery, Discharge Instructions, Materials Concerning Procedure/Disease Mgt., Etc.)
 - Internal and External Promotions Content Management/Development of Product Offerings, Cross Marketing/Upselling (printed and online)
 - Issues Management/reactive media – work with media relations to for messaging and post where and when appropriate.
- ***Supply Chain/Materials Management*** provides corporate-wide services and site-specific services. Corporate-wide Services:
- Purchasing
 - Contract Administration
 - Pharmacy Contracting including oversight of the Pharmacotherapy Committee
 - Retail Pharmacy Services
 - Capital Equipment selection, negotiation and acquisition
 - Clinical Resource Services (including new product introduction)
 - Materials Information System support (e.g. Lawson)
 - Fleet Management, Courier Services, Mail Services and downtown warehousing services (under Corporate Services Scope of Service)
 - Consolidated Service Center (CSC) for warehousing and distribution of medical surgical supplies and non-medical supplies to Orlando Health facilities.
 - Site-specific Services: (under Central Supply Scope of Service)
 - Central Supply at each Orlando Health hospital (medical supply distribution)
- ***Spiritual Care Services*** are available on request by physician, staff, family or patient. At all Orlando Health sites, chaplains are available 24/7 for:
- Code Blue 90/45 and all other clinical codes (e.g. Code STEMI, Stroke Code)
 - Crisis interventions
 - Disaster response
 - Life-support withdrawals
 - Deaths
 - End of life care
 - Bereavement support
 - Advance directive consultations
 - Bio-ethics consults
 - Team member crisis support

Chaplains, as clinical members of the interdisciplinary healthcare team:

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- Provide spiritual care interventions and services for patients, guests and team members at all Orlando Health sites.
- Provide spiritual care interventions through Transition Services for discharged patients including home health, skilled nursing, and rehabilitation facilities.
- Document spiritual care assessments, interventions and plan of care in the medical record.
- Provide rites, sacraments, sacred services and spiritually-centered programs for patients, guests and team members, working collaboratively with community clergy and faith groups as applicable
- Participate in interdisciplinary clinical rounds and case reviews.
- Maintain standing membership(s) on the hospital Bioethics Committee(s), the Institutional Review Board(s) and Unit Practice Councils.
- Utilize available integrative therapies and practices which promote the beneficial relationship between spirituality and healing.

Chaplains provide interventions and resources to address cultural and other diversity needs of patients and team members.

- ***Patient Financial Services/Revenue Management*** consists of five departments:
 - Patient Business is responsible for facilitating the arrival of patients to their service destination. Demographic and financial data is obtained to process patient claims.
 - Patient Accounting is responsible for expediting the claims process and hospital accounts receivable resolution.
 - Professional Services is responsible for managing the physician revenue cycle for all employed physicians. It is also responsible for facilitating the arrival of patients and obtaining demographic and financial data at UF Health Cancer Center Orlando, in order to process patient claims.
 - Revenue Management Training Team & Quality Assurance Team are each respectively responsible for the training/ongoing education and quality assurance reviews of Patient Financial Services/Revenue Management team members and other appropriate Orlando Health departments, including Point-Of-Service registration areas.
 - Revenue Management Application Teams are responsible for implementation, support, and maintenance of all Patient Financial Services/Revenue Management software applications.
- ***Pharmacy*** is open 24 hours a day, seven days a week in ORMC and provides the following services:
 - Procurement and storage of medications
 - IV admixture services
 - Review of the new medical order,
 - Evaluation of appropriateness of medication
 - Evaluation of dose, route, and frequency of medication

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- Monitoring for drug-drug interactions
- Monitoring for allergies, intervening when necessary
- Profiling patient demographics and pharmacist interventions
- Dispensing medications
- Drug Therapy Management services
- Charge Management of Pharmaceuticals
- Drug Information
- Parenteral Nutrition Consultative Services
- Clinical Antimicrobial Review/Monitoring
- Pharmacokinetic Services
- Adverse Drug Reaction Monitoring and Reporting
- Intravenous to oral conversion program
- Targeted Drug Review program

All hospitals may also provide clinical pharmacy services which include rounding with the medical staff, nutrition support services, medication histories, discharge medication counseling, and pharmaceutical review of the medically needy and critically ill patients. ORMC, DPH and APMC also provide retail pharmacy services through their Orlando Health Scripts, DPH Scripts, and APMC Scripts Pharmacies. Orlando Health Scripts at UF Health is open M-F from 0830-1900. Orlando Health Scripts at the Heart Institute is open M-F from 0900-1730. DPH Scripts is open M-F from 0900-2300 and 0900-1900 on the weekends. APMC Scripts is open M-F from 0900-2100 and 0900-1700 on the weekends.

- **Regulatory Department** integrates safety, best practices, continuous learning, improvement, and survey readiness into daily practice to facilitate long-term regulatory-compliance and solutions to related complex opportunities by:
 - Focusing on application of health care standards within the organization
 - Working collaboratively with Education, Risk Management, Infection Control, Quality, Safety, Communications, Organizational Development and other departments to implement novel methods to improve the knowledge of staff regarding compliance with regulations
 - Providing educational sessions for specific disciplines or job positions via InTouch, Manager Bulletin Board articles, authoring information posted on SWIFT (e.g., J-Mail), and digital screens and utilizing principles of adult learning in all education settings
 - Being a resource and coach for regulatory and accreditation issues, establishing supportive and collaborative relationships and providing timely feedback and communication as appropriate for team members, physicians, and volunteers at Orlando Health
 - Developing an easily accessible library of resources and SharePoint sites to engage team

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members and staff

- Assisting in teaching monthly GN Classes
 - Developing “Joint Commission Chapter Experts” who become very well versed with specific topics (HR, Med Staff, Records, Home Care, etc.) and departments (OR, ED, Imaging, Information Management, etc.) or regulations (CAP, CARF, Baker Act, etc.)
 - Conducting mock surveys in all inpatient and outpatient areas of Orlando Health
 - Using electronic collection systems to generate and disseminate reports of survey findings
 - Utilizing data, data mining, decision support systems, and other technology based information and evidence based knowledge to improve processes and align efforts toward compliance and quality care
 - Considering standards, best practice, and patient safety to reflect in ongoing policy improvement, adjustments to documentation processes, and staff education, thereby influencing routine practice, and ultimately patient outcome.
- ***Orlando Regional Medical Center Imaging Services*** is an American College of Radiology accredited (ACR) facility for Mammography, Ultrasound and MRI. ORMC Imaging Services offers Diagnostic Imaging services twenty-four hours a day to inpatients of all ages, and outpatients as scheduled, of all ages. The diagnostic services provided utilize ionizing radiation and non-ionizing radiation with and without the use of contrast media. Overall services include Diagnostic X-ray procedures including fluoroscopy, tomography, general radiography, portable radiography, and surgical procedures. Ultrasound, Mammography, MRI, CT, and Angiography procedures are also provided. Other services related to diagnostic imaging provided include interpretation, dictation, transcription, film and report filing/management within the RIS system and PACs system, patient billing, marketing, equipment purchasing, quality assurance monitoring and compliance as required by the state of Florida, radiation protection to patients and team members, quality control, and continuing education.
- ***Rehabilitation Engineering*** is available under agreement with external agencies including state supported agencies such as the Brain and Spinal Cord Injury Program (BSCIP).
- ***Respiratory Care*** provides comprehensive care on a 24-hour, 7-day a week basis. Clinical activities include hemodynamic monitoring, inpatient and outpatient pulmonary function testing, bedside bronchoscopy, cardiopulmonary resuscitation, airway maintenance including insertion of artificial airways, monitoring and set-up of intra-aortic balloon pumps, indirect calorimetry studies, adult mechanical ventilation, high frequency oscillatory ventilation, arterial blood gas analysis and arterial cannulation, aerosolized medication and administration, oxygen administration and transport, end-tidal CO₂ monitoring, tracheostomy tube changes, initiating and maintaining specialty gases, blood gas laboratory proficiency testing, utilizing various therapist driven protocols, charge management and reconciliation, and patient and family education. The blood gas laboratory is licensed by the

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State of Florida and inspected by The Joint Commission every two years. Respiratory Therapists are licensed by the Florida Department of Health, Board of Respiratory Care.

- **Risk Management** establishes a risk prevention and insurance program that promotes the delivery of quality care, safety and security. Risk Prevention is a proactive program that identifies, analyzes, and manages situations within the organization that involve patient care and or visitor, volunteer, employee or medical staff events so as to prevent financial instability of the corporation. The goals are the identification of underlying factors that contribute to injuries or other financial risk and the modification or elimination of processes or behaviors that contribute to adverse occurrences. The program utilizes event reports, peer review, claims history, patient grievances and the on-site presence of Licensed Healthcare Risk Managers.
- **Safety Department:** Conducts Environment of Care and Life Safety surveillance inspections. Coordinates Disaster Response Procedures.
- **Security** provides security for a safe workplace, on a 7-day a week basis. It has a manager and security officers at Orlando Regional Medical Center, Arnold Palmer Medical Center, and Dr. P. Phillips Hospital and South Seminole Hospital. Security activities include staffing the metal detector at each hospital emergency department, patrol of the interior and exterior of each hospital, parking management and enforcement, emergency preparedness planning, access control management, locksmith, and access control identification badges.

SCOPES OF SERVICE

The ARI Scopes of Service are reviewed annually and updated as necessary. This information is made available to our persons served, payers/funding sources, referral sources, the general public, etc. through our website. The Scopes are also referenced in the patient orientation and education manual provided to each patient on admission.