

Welcome to the Rehabilitation (Rehab) Unit

How to contact the Rehab Unit

Page 2

**What to expect with
your child's care**

Page 3

Daily rounds

Page 5

**Staying overnight
and visiting hours**

Page 8

**Keeping your
child safe**

Page 9

**Other
hospital
resources**

Page 11



Welcome to the Rehab Unit

How to contact the Rehab Unit

Location:

Level 5, River zone

From inside the hospital:

Dial 7-2020

From outside the hospital:

Dial 206-987-2020

If you need an interpreter:

Call 1-866-583-1527. Tell the interpreter the name or extension you need.

To protect patient privacy:

The unit coordinator or your nurse will give you a 4-digit code. Your nurse will ask for the code before sharing information about your child over the phone.

So we can reach you:

Please give your nurse your contact information. If your child has surgery or is in the PICU for more than 24 hours, you can request a pager.

At the Rehab Unit, we are committed to providing the best possible care for your child. We are also committed to supporting you and your family. We know that helping your child go home can be a challenging task.

We encourage you to trust your instincts, ask questions and share your concerns. You are an important member of your child's healthcare team. Your involvement in your child's care makes a difference.

Preparing to go home

From the moment your child is admitted, we will talk with you about what we need to do before your child may go home. We will answer your questions and provide you with the resources you may need.

The specific requirements your child will need to meet before they may leave are called "discharge goals." Your healthcare team will work with you and your child each day to meet these goals.

Your child's discharge date depends on:

- Progress toward goals set by you, your child and the Rehab team
- Completion of family teaching or training
- Planning for outpatient therapy, if needed

As a part of discharge planning, the therapeutic recreation specialist may take your child on an outing into the community to look at safety, access and your child's need for supervision in preparation for going home.

Checklist for going home

- On the day you are leaving, allow time to do paperwork and complete the family experience survey.
- You will meet your outpatient clinic nurse before you are discharged. They will help coordinate your follow-up visits at Children's and answer questions you have after you go home.
- Pick up medicine from the pharmacy, if needed.
- Use a car seat. Children from birth to age 8 must ride in the correct, age-appropriate infant, car or booster seat. If you do not have one, talk with your child's nurse.
- Outpatient therapies will be coordinated, and you will get the schedule before you leave the hospital.
- The care coordinator will help you identify equipment needs and coordinate with the rehab therapists. You will have an equipment delivery plan and you will be trained on how to use the equipment before you leave the hospital.
- Plan how to get home. Call Guest Services at 7-7433 at least 1 business day before you need a ride to the airport, bus, train station or ferry.

What to expect with your child's care

We will work with you to make decisions and treatment plans for your child while they are on the unit. You help your child when you:

- Tell us things that will help us to know and care for your child.
- Speak up right away when you have a question or concern. We expect you to have questions about your child's care, and we want to hear them.
- Tell us if you notice your child is in pain.

Healthcare team members and roles

Children's is a teaching hospital. Your child will receive care from a team that may include many doctors and staff members:

- **Resident or fellow:** Licensed doctor who is in training in a pediatric specialty. They will have the most contact with you and your child. They give daily orders for care and update the attending doctor about your child's progress.
- **Medical student:** Studying to become a doctor. They may take part in rounds with residents or the attending doctor.
- **Attending doctor:** Directs your child's care and supervises the residents and fellows caring for your child.
- **Certified Nursing Assistant (CNA):** Will partner with you and may provide much of your child's daily care needs. They are a member of the nursing team.
- **Licensed Practical Nurse (LPN):** Licensed nurse who provides care for most of your child's daily care needs. They are a member of the nursing team.
- **Registered Nurse (RN):** Licensed nurse who provides and coordinates most of your child's daily care and education. They are your main contact with other members of the healthcare team.
- **Charge Nurse (CN):** Registered Nurse who plans, coordinates and delivers care for each shift. They can answer your questions or concerns if your nurse cannot.
- **Nursing Clinical Practice Manager:** Registered nurse who runs the patient care unit. They can answer your questions or concerns if your nurse or charge nurse cannot.
- **Clinical Nurse Specialist (CNS):** Registered nurse with advanced education and training. They oversee quality, safety and staff education. They are a clinical expert and consult on patients with complex care needs.
- **Nurse Practitioner (NP):** Registered nurse with advanced education and training. They practice independently and work closely with doctors. They diagnose, treat and teach patients and families about serious and chronic conditions. They also make referrals.
- **Occupational Therapist (OT):** Assesses how well your child can do tasks such as dressing, bathing, eating, playing and school activities. Through play and exercise, the OT will set therapy goals to help your child build upper-body strength and coordination to complete daily tasks.

TV and movies

Ask your nurse about how to watch TV and movies in the room.

Welcome to the Rehabilitation (Rehab) Unit

- **Physical Therapist (PT):** Assesses how well your child can sit, stand and move. They will help your child build strength, balance and coordination. If needed, they also will teach your child to use equipment like crutches or a wheelchair. They will set therapy goals to help your child with overall mobility.
- **Speech and language therapist (SLP):** Assesses how well your child can speak, understand, read, write and swallow. They will set therapy goals to help your child communicate or swallow better.
- **Rehabilitation psychologist/neuropsychologist:** Provides strategies and resources to help your child cope with illness or injury and being in the hospital. They will assess how well your child can think, remember and solve problems. They will help your child with plans for returning to school and home.
- **Certified therapeutic recreation specialist (CTRS):** Evaluates your child's recreation and leisure skills, interests and needs. They will teach your child leisure and play skills. They also will assess your child's social skills and review community reintegration skills to help your child return to home and school.
- **Social worker (SW):** Skilled counselor who will meet and work with you to provide emotional support and get the resources you need like financial aid, lodging, and assistance in caring for your child when you go home.
- **Care coordinator/Case manager:** Registered Nurse who participates in weekday rounds. They will meet with you and help track and coordinate details for discharge to ensure you have the equipment, supplies, and training needed to care for your child when you go home.
- **School teacher:** Evaluates your child's school skills while in the hospital. They help your child keep up with their current courses and work closely with your child's school when your child is ready to go back to school.
- **Unit coordinator (UC):** This person may be at the front desk on your unit. They direct families to resources within the hospital, route calls, and support patient care staff on the unit.

Depending on your child's situation, your care team may also include:

- Consulting doctors and nurse practitioners
- Child Life specialist
- Dietitian
- Pharmacist
- Pain Medicine Team
- PACT Team
- Respiratory therapist

Daily rounds and plan of care

Each day, your child's healthcare team of doctors, nurses and specialists will come to the bedside to talk with you about your child's plan of care. This is called "rounds."

Rehab unit rounds are Monday through Friday between 8 a.m. and 10 a.m. Rounding times are listed on your child's daily schedule, posted in your room each evening by 4:30 p.m.

We have two types of rounds:

Daily rounds: This is an early-morning check-in with your doctors. It is a good time to ask questions.

During rounds we will:

- Check on your child.
- Talk with you about how your child is doing and answer your questions.
- Talk with you about when your child will be ready to go home. This is called a "discharge plan."

Rounds are used to teach medical students, residents and specialists in training. Sometimes other healthcare providers will take part in rounds.

Weekly family team meetings: When your child is admitted, the Rehab Team will assess your child's function and work with you and your child to develop goals for the hospital stay. Each Thursday, you and the team will meet for 15 minutes to review your child's progress. If you have questions, please bring them with you.



Your role in rounds

Because you know your child best, we hope you will take part in rounds and use this time to:

- Share your insights, questions and concerns with the care team
- Ask us to explain any terms that are not clear.

Using the whiteboard in your child's room

We use the board on the wall:

- To write your child's daily plan of care and schedule
- As a place for you to write down your questions
- To provide information about preventing falls for your child

What to expect each day

Rehabilitation is a full-time process. Everything your child does, like waking up, eating, participating in therapy and play activities, helps them reach their treatment goals.

During the first few days:

- You will meet the members of your team.
- We will give you an orientation to the unit and the hospital.
- Depending on your child's needs, therapists will spend time with your child to assess their:
 - Mobility, self-help (dressing, bathing)
 - Communication (speaking/listening)
 - Cognition (thinking/reasoning) and adjustment to their situation and being in the hospital
 - Academic and school-related skills

These assessments help identify how your child is doing now so that we can measure your child's progress during treatment. It also lets us set goals to work on while your child is in the hospital.

We have worked with many children with medical conditions like your child's, so we know the skills your child will need to learn and the methods to use. We will work with you to meet the unique needs and goals of your child and family.

Schedule

- Breakfast and morning care take place from 7:45 a.m. to 9 a.m.
- Rounds take place between 8 a.m. and 10 a.m.
- Lunch break is typically noon to 1 p.m.
- Dinner is typically after 5 p.m.
- Bedtime or quiet time is at 9 p.m. After 10 p.m., we will dim lights and make the unit quiet.

- Your child's daily therapy schedule will be posted on the large white schedule board in the unit, and a copy will be posted on the white board in your child's room.
- A special note about mealtimes: You may order your child's meals and snacks every day from 6 a.m. to 9 p.m. Please consider mealtimes around your child's therapy schedule. To order meals, call 7-MENU (7-6368) from a hospital phone to place your order. Ask your nurse or unit coordinator if you need a menu. Allow 45 minutes for food delivery.

Other things you can expect:

- Vital signs and nurse handoff
- We may check your child's vital signs (temperature, breathing and heart rate, and blood pressure) about every 4 to 12 hours depending on your child's condition.
- At the end of their shift your nurse will "handoff" in your child's room. They will take about 10 minutes to pass important information to the next nurse and do safety checks.
- Handoff times are at 7 a.m., 3 p.m., 7 p.m. and 11 p.m. Please give non-urgent requests to your nurse before or after these times.
- During handoff you will meet your new nurse. They will set a time to talk with you about your child's care plan.

Treatment

- You may have other appointments throughout the day based on your child's daily care plan.
- Your nurse will tell you what your child's medication schedule will be.
- Your child will have individual and group therapy sessions throughout the day, 6 days a week. The amount and type of therapy is based on your child's needs to meet their discharge goals.
- Therapy may include all or part of the services listed on the care team page.
- Besides individual and group therapy sessions, your child will have chances to interact with other children on the unit.
- You will talk with members of the team, watch treatment sessions, participate in weekly Family Team meetings, and learn the information and skills you need to take your child home.

Taking your child out for an activity

Day or overnight passes may be granted based on how your child is doing and training that has been completed. We must have consent from your child's doctor. The goal is to practice skills that your child has been working on in therapy and with the nursing staff. It is also a good time to socialize as a family outside of the hospital. We usually arrange a practice outing with a therapist before your child goes on a pass with you.

Staying overnight and visiting hours

Parents and caregivers

- **You may be with your child anytime day or night.** There may be a rare time we ask you to step out depending on your child's medical condition, like if we need to do a surgical procedure.
- **We have room for 2 parents or guardians to sleep at the bedside.** Ask your nurse.
- For you and your child's safety, do not sleep on the floor. Do not sleep with your child in their bed or allow them to sleep with you in your sleeper chair or couch.
- Siblings and visitors may not stay overnight.
- For other lodging options, see the blue book in your child's room, "Your Guide to Seattle Children's."

Siblings and visitors

- **Siblings, friends and family may visit between 8 a.m. and 8 p.m.**
- **Everyone must wear their photo name badges at all times.** All family members and visitors must check in at the unit coordinator's desk each time they enter the unit.
- **Plan visits from brothers and sisters** with your child's nurse.
- **Siblings and children** younger than 12 must always be with an adult.
- **When a patient is in an isolation room due to contagious disease:** Visitors must be age 10 or older. Siblings younger than 10 may be able to visit. Ask your nurse. We encourage limiting visits to only parents or caregivers.
- Visitors who are sick or have been exposed to an illness are not allowed in the unit.
- Sometimes only parents or guardians are allowed to be with their child. This might happen during cold and flu season or when infection risk is high.
- As a parent or guardian, you must give consent for someone else to take your child from the unit.



Protect your child from infection

To keep your child and other patients safe from infection:

- **Wash your hands or use hand-sanitizer gel** each time you enter and leave your child's room. Clean your hands after sneezing, coughing or blowing your nose, using the bathroom, and after wiping your child's nose, changing their diaper or helping them use the bathroom.
- **Avoid spreading illness to your child.** If you are sick and must be at your child's bedside, ask your child's nurse about how to be with your child safely.
- **Do not visit other patients or families** in their room or in the unit.
- **If your child needs formula, talk with the medical team about ordering it. Do not mix formula in your child's room. This puts your child at risk for foodborne illness.**
- **Ask your nurse before bringing food for your child.** Please store food in the family lounge "Day room" refrigerator on your unit.
- **Only Mylar (foil-type) balloons are allowed** in the unit.
- **If your child is at risk for infection,** ask your nurse where your child may go on and off the unit. They may not be able to visit the playroom or other common areas.
- **Do not leave opened food or drinks in the room.** Throw them away if they have not been used for 1 to 2 hours.

Keep your child safe

Keeping your child safe is our main priority, but we also need your help. For your child's health and safety:

- **Keep ID bands and name badges on** at all times. We will check your child's ID before giving each medicine and doing tests or procedures.
- **Participate in daily team rounds.**
- **Ask your nurse before taking your child from their room.**
- **Tell your child's nurse if you see that another child needs help** instead of helping the child yourself.
- **Raise and lock the side rails or crib rails of your child's bed** when they are in bed.
- **Protect your child from falls.** Your rehab team members will talk with you if your child is at risk.
- **Keep cell phones, tablets and related devices quiet.** They should not be used at all near EEG equipment. Ask your nurse before taking pictures, video or audio recordings of your child or care provider.

Medicine safety

- We will ask you about medicines, vitamins and herbs your child is taking when you come into the hospital and again when you leave.
- We will ask about known allergies. If your child has any, we will place a special band on them that identifies the allergy.
- Do not give your child any medicines, vitamins or herbs from your home supply.
- Your nurse will talk with you about each medicine we give to your child.
- Keep all medicines, diaper creams and other lotions away from small children.

Protect your child from falls

If your child is sick, injured, taking certain medicines or getting certain treatments, their chance of falling is greater. Your nurse and therapy team will talk about how to prevent falls.

When your child is in bed, make sure the side rails or crib rails are raised and locked into place.

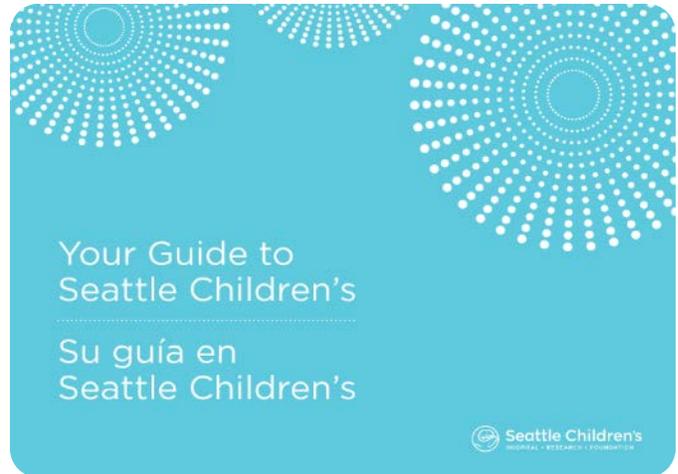
- Have your child wear non-skid slippers or shoes when they are out of bed.
- Always use seat belts on wheelchairs, strollers and highchairs.
- Ask your nurse for help if your child needs to get up to use the restroom or go for a stroll.
- There may be special instructions and information for you to provide safe transfers or walking. It is important that you and your child receive this training before doing this on your own.
- Fall prevention strategies for your child are posted on the white board in their room. If you have any questions, please talk with your child's physical therapist or nurse.



Other resources for your child's care

Look inside Your Guide to Seattle Children's, the blue book in your child's room, for more information about hospital services, including:

- Social work, counseling, financial support and spiritual care
- Getting around the hospital
- Where to get food
- Places to stay
- Showers, laundry and other amenities at the Family Resource Center
- Phones, computers and Internet access
- Transportation
- Activities for your family



Welcome to the Rehabilitation (Rehab) Unit

To Learn More

- Rehabilitation Unit
206-987-2020
- Ask your child's
healthcare provider
- www.seattlechildrens.org

Free Interpreter Services

- In the hospital, ask
your child's nurse.
- From outside the
hospital, call the
toll-free Family
Interpreting Line
1-866-583-1527.
Tell the interpreter
the name or
extension you need.



4800 Sand Point Way NE
PO Box 5371
Seattle, WA 98145-5005

206-987-2000
866-987-2000 (Toll-free for business use only)

www.seattlechildrens.org

Seattle Children's provides healthcare for the special needs of children regardless of race, sex, creed, ethnicity or disability. Financial assistance for medically necessary services is based on family income and hospital resources and is provided to children under age 21 whose primary residence is in Washington, Alaska, Montana or Idaho.

Seattle Children's offers interpreter services for Deaf, hard of hearing or non-English speaking patients, family members and legal representatives free of charge. Seattle Children's will make this information available in alternate formats upon request. Call the Family Resource Center at 206-987-2201.

This handout has been reviewed by clinical staff at Seattle Children's. However, your child's needs are unique. Before you act or rely upon this information, please talk with your child's healthcare provider.

7/20
PE081

© 2019 Seattle Children's, Seattle, Washington. All rights reserved.
