

## Scope of Services

Kessler Institute for Rehabilitation - Marlton Campus is committed to providing the highest level of safe, quality care to all those we serve. Our teams of medical rehabilitation specialists deliver carefully coordinated, comprehensive treatment to advance individual recovery. We embrace industry-recognized standards of excellence and strive for continuous quality improvement to optimize patient outcomes. These efforts have helped us earn the trust of patients, families and colleagues across our communities.

Kessler Institute for Rehabilitation - Marlton is accredited by The Joint Commission and the Commission on Accreditation of Rehabilitation Facilities (CARF) for comprehensive, integrated inpatient rehabilitation and our specialty programs for cancer, stroke, amputation and brain injury.

## Who we serve

### Patient profile

Comprehensive inpatient rehabilitation services are provided to adults 18 years and older who have experienced an injury or illness that resulted in the loss of function (abilities) in activities of daily living (ADLs), mobility, cognition and/or communication. Persons aged 16-17 should first be considered for admission to a hospital that specializes in the care of children/ adolescents. However, if they are deemed appropriate for admission to our hospital as an adult, services can be modified to ensure that family, education and community re-integration needs are met as warranted.

### Diagnoses treated

Our patients' diagnoses include, but are not limited to, stroke, brain injury, spinal cord injury, neurological diseases (e.g., multiple sclerosis, ALS, polyneuropathy, Guillain-Barre syndrome, motor neuron disease), amputation, orthopedic injuries including complex fractures and joint replacement, major multiple trauma, cardiac conditions and cancer.

### Admission guidelines

To be considered for admission, patients must be medically stable yet still require care by rehabilitation physicians and nurses. They must also have physical and/or functional needs that require highly coordinated physical, occupational and/or speech therapies and the capacity to benefit from such services.

We are committed to providing an inclusive rehabilitation environment respectful of all individuals' race, color, religion, creed and/or national origin, ethnicity/cultural background, gender identity/expression, sexual orientation, marital status, mental or physical disability and military/veteran status.

Patients who do not meet our hospital's admission criteria include those who are under the age of 16, actively require psychiatric services, present with behavioral limitations that pose an imminent risk to themselves or others and/or limit participating in an acute rehabilitation program or have medical needs beyond the scope of services offered.

### **Referrals**

Referrals for admission are accepted from private physicians, hospitals, other post-acute providers, insurance companies and agencies serving persons with disabilities. Patients may be admitted from a hospital, surgery center, clinic, skilled nursing and long-term care facilities, as well as from home.

### **Insurance**

Our hospital participates with Medicare, Medicaid and most managed care plans as well as workers' compensation, no-fault and other insurance providers. Fee schedules are available upon request.

### **Assessing patient needs**

All patients are evaluated prior to admission to determine their potential to participate in and benefit from inpatient rehabilitation. This includes a review of their medical, physical and cognitive condition, previous and current levels of function, and psychosocial and cultural background.

Once admitted, patients are assessed by the rehabilitation team including a physiatrist (a doctor specializing in physical medicine and rehabilitation); nurses, physical, occupational and, if indicated, speech therapists; dietitians and case managers. A behavioral assessment may also be conducted if warranted. The team will then work with the patient to establish goals and tailor treatment to address impairments in mobility, self-care, speech, cognition and other areas. This plan is documented to guide care delivery, monitor improvement and is modified as needed.

### **Special needs**

Our hospital also accommodates patients requiring special care needs including colostomy care, gastrointestinal (PEG) feeding tubes, halo devices and external fixators, indwelling catheters, intravenous lines (e.g., PICC lines, Hickman and Broviac catheters, ongoing IV therapy), nasogastric (NG) tubes for feeding and hydration, orthotic and prosthetic prescription and training, peritoneal dialysis and tracheostomy tubes. Contracted services are available for blood transfusions and hemodialysis.

## **Provision of care**

### **Hours of service**

Our comprehensive, integrated inpatient rehabilitation program is open 24 hours a day, seven days per week. Nursing services are provided 24 hours per day, seven days a week. Physical, occupational and speech therapies are available Monday through Friday from 7 a.m. to 6 p.m. and weekends from 7 a.m. to 4 p.m. Patients' schedules are established by the care team. Outpatient services are generally offered Monday through Friday between 8 a.m. and 6 p.m.

Physician, respiratory therapy, pharmacy, phlebotomy, dietary, wound care, recreational therapy and other services are provided to meet the needs of the person served, their individual plan of care and regulatory requirements.

### **Rehabilitation team**

The rehabilitation team is led by a physiatrist, a board-certified physician specializing in physician medicine and rehabilitation, and includes rehabilitation nurses, physical and occupational therapists, speech language pathologists, recreational therapists, respiratory therapists, dietitians, pharmacists, case managers/social workers and other clinical, support and administrative staff.

A majority of our staff have advanced degrees and specialty certifications that enhance the delivery of expert care. This includes certified rehabilitation registered nurse (CRRN), board certified clinical specialist in neurological physical therapy (NCS), vital stim and Lee Silverman Voice Treatment (LSVT) Loud and Big, certified brain injury specialist (CBIS), certified stroke rehabilitation specialist (CSRS) and lymphedema certification.

### **Staffing**

Staffing is based on census, diagnosis, severity of injury/illness and intensity of services required by each patient, as well as by state practice guidelines for each discipline. Contract staff is available for coverage as needed.

### **Therapy schedules**

The rehabilitation team sets each patient's treatment schedule. Patients are expected to participate in three hours of physical, occupational and/or speech therapy per day, five days per week. If unable to tolerate these hours due to certain medical issues (e.g., chemotherapy, radiation, dialysis) or other extenuating circumstances, they may engage in 15 hours of therapy over a seven-day period.

### **Scope of treatment**

We offer a wide range of evidence-based treatments, advanced techniques and innovative technologies to help rebuild strength and skills, restore function and mobility and maximize independence. This carefully coordinated, individualized approach guides patients toward their goals including a safe and timely discharge to home or the next appropriate level of care.

## **Additional services**

To best meet patients' complex needs, Kessler Institute for Rehabilitation - Marlton offers additional or ancillary services including, but not limited to, nutritional guidance and dietary services, pharmacy services, respiratory therapy, recreational therapy and contracted diagnostic radiology (including modified barium swallow evaluations) and laboratory services when indicated. Chaplaincy services/pastoral care are arranged upon request.

Also available are prosthetic and orthotic services and wheelchair and mobility evaluations. The interdisciplinary rehabilitation team helps determine and arrange for these services.

## **Practice guidelines**

Our hospital follows the standards and guidelines established by federal, state, local and industry agencies including the Centers for Medicare & Medicaid Services (CMS), Commission on Accreditation of Rehabilitation Facilities (CARF), The Joint Commission and national boards/associations of medicine, nursing, therapy, pharmacy and others.

## **Evaluating and documenting patient progress**

Ongoing assessment of a patient's medical condition, progress and changing rehabilitation needs is documented through the individualized, interdisciplinary plan of care, progress notes, team conference report, discharge summary and post-discharge follow-up calls.

## **Our specialized programs and services**

As detailed above, Kessler Institute for Rehabilitation - Marlton provides highly integrated, coordinated care and treatment to individuals seeking comprehensive medical rehabilitation. The scope and intensity of our specialized programs and services focus on the unique needs of individuals with stroke, brain injury, spinal cord injury, amputation and other diagnoses.

### **Spinal cord injury services**

Comprehensive inpatient spinal cord injury (SCI) rehabilitation services are provided to persons who are medically stable and have physical and/or functional needs that require highly coordinated care and interdisciplinary therapy services (physical, occupational and/or speech therapy). Specific criteria for admission to our specialized SCI program also take into account the level and severity of injury and any other medical issues (co-morbidities) that may limit or prevent a patient from actively participating in the rehabilitation program.

Patients may be admitted to our SCI program with a traumatic or non-traumatic injury including, but not limited to, fracture, compression, surgery, neurological diagnoses (Guillain-Barre syndrome, motor neuron disorders, multiple sclerosis), spinal stenosis and other degenerative conditions, cancer/tumors, infection or congenital disorders. Patients at any level of injury or impairment as measured by the standardized American

Spinal Injury Association (ASIA) scale may be accepted. Patients on a ventilator must be weaned prior to admission.

### **Stroke services**

Comprehensive inpatient stroke rehabilitation services are provided to persons who are medically stable and have physical and/or functional needs that require highly coordinated care and interdisciplinary therapy services (physical, occupational and/or speech therapy). Specific criteria for admission to our specialized stroke program take into account the nature and extent of injury including impairment or loss of mobility, ability to perform self-care and activities of daily living (ADLs), cognition, speech and other physical or functional imitations and any other contributing medical issues (co-morbidities).

Under this program, we care for patients who have experienced ischemic stroke (when blood flow to the brain is blocked), hemorrhagic stroke (bleeding in the brain), transient ischemic attack (TIA, a mini stroke) and other neurologic injuries.

### **Brain injury services**

Comprehensive inpatient brain injury (BI) rehabilitation services are provided to persons who are medically stable and have physical and/or functional needs that require highly coordinated care and interdisciplinary therapy services (physical, occupational and/or speech therapy). Specific criteria for admission to our specialized BI program also take into account the level and severity of injury and any other medical issues (co-morbidities) that may limit or prevent a patient from actively participating in the rehabilitation program.

Patients may be admitted to this program with an acquired BI including, but not limited to, traumatic, non-traumatic or anoxic BI, brain tumor or aneurysm. They must also be assessed at a Level II or higher on the standardized Ranchos Scale of cognitive function to be considered for admission. Patients in a coma or persistent vegetative state who do not demonstrate a purposeful response to their surroundings are not appropriate candidates for admission. Patients on a ventilator must be weaned prior to admission.

### **Amputation services**

Comprehensive inpatient amputee rehabilitation services are provided to persons who are medically stable and have physical and/or functional needs that require highly coordinated care and interdisciplinary therapy services. Specific criteria for admission to our specialized amputee program take into account the nature and extent of limb loss and physical and functional limitations including mobility, ability to perform self-care and activities of daily living (ADLs) and any other contributing medical issues (co-morbidities).

Patients with upper or lower limb loss due to a traumatic injury or surgery resulting from vascular disease, diabetes, cancer, infection, excessive tissue damage, neuropathies or other conditions may be admitted to this program.

## **Orthopedic services**

Comprehensive inpatient rehabilitation services are provided to persons who are medically stable and have physical and/or functional needs that require highly coordinated care and interdisciplinary therapy services. Specific criteria for admission to this program take into account the nature and extent of medical stability and physical and functional limitations including mobility, ability to perform self-care and activities of daily living (ADLs) and any other contributing medical issues (co-morbidities).

Under this program, we care for patients who have undergone joint replacement, experienced a musculoskeletal injury, sustained bone trauma or have been diagnosed with a degenerative joint disease.

## **Medically complex services**

Comprehensive inpatient rehabilitation services are provided to persons who are medically stable and have physical and/or functional needs that require highly coordinated care and interdisciplinary therapy services. Specific criteria for admission to this program take into account the nature and extent of medical stability and physical and functional limitations including mobility, ability to perform self-care and activities of daily living (ADLs) and any other contributing medical issues (co-morbidities).

Under this program we care for patients who have experienced cardiac arrest, heart disease, pulmonary disease, organ transplantation, metabolic disorders, neurological disorders, complex infections and critical illness myopathy.

## **Cancer services**

Comprehensive inpatient rehabilitation services are provided to persons who are medically stable and have physical and/or functional needs that require highly coordinated care and interdisciplinary therapy services. Specific criteria for admission to this program take into account the nature and extent of medical stability and physical and functional limitations including mobility, ability to perform self-care and activities of daily living (ADLs) and any other contributing medical issues (co-morbidities).

Under this program we care for patients who have experienced cancer and cancer-related issues with a focus on maximizing each person's medical, physical, psychological, cognitive and social potential and overall quality of life. Common cancer-related issues include, but are not limited to, musculoskeletal disorders, neuromuscular disorders, radiation fibrosis syndrome, lymphedema, post-surgical pain syndromes and fatigue. We consider restorative, transitional, and supportive pathways in the care of these individuals.

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