



## Future State: Rehab Therapies Wheelchair Mobility Clinic

Cerner Workflow ID: Client Workflow ID: 1087

Last updated by Christina Carile, Mar 19, 2024 10:36am (UTC -5 hours)

**Workflow Details:**

Workflow Name: Rehab Therapies Wheelchair Mobility Clinic

Workflow State: Future State

Workstream: Ongoing Assessment and Treatment

Venue: Rehabilitation

Client Owner: Carile, Christina Elizabeth

Cerner Owner:

Standard: Yes

Related Workflow(s):

Tags:

**Workflow Summary:**

Service Line:

Related Solution(s): Rehab Therapies

Project Name: Niagara Health System:OPT-0297674:NIAG\_CD Niagara HIS RFP

TestBuilder Script(s):

Cerner Workflow ID:

Client Workflow ID: 1087

Workflow Notes:

Introduced By: WS 7

Validated By: WS 8

**Swim Lane:**Role(s): Occupational Therapist  
Physiotherapist [Custom]

Department(s):

Security Position(s):

**Start/Stop [5]**

Description: Consult to Wheelchair Mobility Clinic

Step Impact: Training

Comments: An OT, a PT, or a prescriber can complete consult orders

**Swim Lane:**

Role(s): Scheduler

Department(s):

Security Position(s):

**Off Page Reference [18]**

Workflow Link: Scheduling - ESM - Orders to Scheduling (CPOE)

## Future State: Rehab Therapies Wheelchair Mobility Clinic

Cerner Workflow ID: Client Workflow ID: 1087

Last updated by Christina Carile, Mar 19, 2024 10:36am (UTC -5 hours)

**Work Step [17]**

Description: Schedules patient

**Swim Lane:**

Role(s): Wheelchair Mobility Occupational Therapist [Custom]

Department(s):

Security Position(s):

**Start/Stop [7]**

Description: Receive appointment notification for wheelchair mobility assessment in Rehab Organizer and/or Schedule View

**Work Step [8]**

Description: Review patient chart

Method: PowerChart

Step Impact: Training

Comments: Continue to communicate with treating inpatient therapist for further information as needed.

**Decision [9]**

Description: Is patient appropriate for wheelchair mobility clinic?

**Work Step [10]**

Description: Ad-hoc the Wheelchair Mobility Clinic Assessment PowerForm

Method: PowerForm

Step Impact: Training

Comments: Find the Wheelchair Mobility Clinic Assessment PowerForm in the Inpatient OT Ad Hoc Folder

**Decision [19]**

Description: Did the patient consent to the assessment?

**Work Step [23]**

Description: Complete assessment and sign it

Method: PowerForm

## Future State: Rehab Therapies Wheelchair Mobility Clinic

Cerner Workflow ID: Client Workflow ID: 1087

Last updated by Christina Carile, Mar 19, 2024 10:36am (UTC -5 hours)

**Decision [45]**

Description: Will the patient apply through the Assistive Devices Program (ADP)?

**Work Step [43]**

Description: Completes Assistive Devices Program (ADP) form as appropriate and document completed in PowerForm

Comments: Assistive Devices Program (ADP) forms are Government of Ontario forms, not found in HIS.

Documenting in the PowerForm that this form is completed is appropriate to keep record within HIS.

**Start/Stop [38]**

Description: Provides equipment prescription form to vendor or uses Provider Letter to efax request to community vendors

Step Impact: Training

Comments: Communication with vendor onsite shall remain as in current state.

**Start/Stop [40]**

Description: A dispensing date is scheduled by the OT, for the OT and Vendor with the patient, once wheelchair is ready

Step Impact: Training

Comments: Communication continues to occur between the OT and the Vendor to determine dispensing date/time.

The Wheelchair Mobility Clinic OT will have access to scheduling software. The scheduling can also be delegated to the scheduler, as appropriate and at the OT's discretion.

**Start/Stop [70]**

Description: The wheelchair is dispensed and adjusted by the vendor

Comments: OT is present for the appointment with the patient and the vendor.

**Work Step [41]**

Description: OT reviews equipment after 1 week/makes any necessary adjustments; Ad Hoc Inpatient OT Treatment PowerForm to document

Method: PowerForm

## Future State: Rehab Therapies Wheelchair Mobility Clinic

Cerner Workflow ID: Client Workflow ID: 1087

Last updated by Christina Carile, Mar 19, 2024 10:36am (UTC -5 hours)

**Start/Stop [50]**

Description: Conduct follow up and final discharge of patient from caseload, when ADP approval received - Document discharge.

Method: PowerForm

Comments: ADP approval usually received at 4-6 weeks from submission of ADP paperwork.

<u><b>This OT can use any of the standard Inpatient OT PowerForms in HIS to document progress and discharge:</b></u>

/b> </u>

OT Initial Assessment PowerForm

OT Treatment PowerForm

OT Discharge Summary

**Start/Stop [12]**

Description: Communicate with referring OT and/or PT that patient not appropriate for assessment. Ad Hoc PowerForm and document

Method: PowerForm

Step Impact: Training

Comments: Communication can be verbal, or via email/message center to interdisciplinary team members.

**Start/Stop [21]**

Description: Document consent not obtained in the PowerForm; communicate to interdisciplinary team

Method: PowerForm

Step Impact: Training

Comments: If the patient wants the therapist to return at a later time, then the therapist can hold off on completing the consent section and revisit the patient at a later time. The OT can save the PowerForm, for documentation later.

**Start/Stop [48]**

Description: Provide patient with used equipment vendor information, along with written measurements for patient reference

Comments: This process in this work step will remain the same as in current state.

## Future State: Rehab Therapies Wheelchair Mobility Clinic

Cerner Workflow ID: Client Workflow ID: 1087

Last updated by Christina Carile, Mar 19, 2024 10:36am (UTC -5 hours)

**Work Step [53]**

Description: OT meets with patient ~ 1-2 weeks later to assist patient with seating & if ADP funding appropriate

**Start/Stop [60]**

Description: Ad Hoc Inpatient OT Treatment PowerForm to document and discharge patient from care

Method: PowerForm

Step Impact: Training

Comments: **<u>**This OT can use any of the standard Inpatient OT PowerForms in HIS to document progress and discharge:**</u> </b>**

- OT Initial Assessment PowerForm
- OT Treatment PowerForm
- OT Discharge Summary

**Off Page Reference [65]**

Workflow Link: Scheduling - ESM - Schedule Appointment

Step Impact: Training

Comments: Any staff member can schedule, that works in or for the Wheelchair Mobility Clinic.

**Facilities:**

Facility Name: Hotel Dieu Shaver

Status: Pending Approval

Facility Cerner Owner:

Facility Client Owner: Carile, Christina Elizabeth

Authorize Date: Jan 03, 2024

Facility Comments: