

## Rehabilitative Care Framework Decision Tree for Bedded Levels of Rehabilitative Care



Restorative Potential means that there is reason to believe that the patient's/client's condition is likely to undergo functional improvement and benefit from rehabilitative care. The degree of restorative potential and benefit from the rehabilitative care should take into consideration the patient's/client's:

- Premorbid level of functioning
- Medical diagnosis/prognosis and co-morbidities (i.e., is there a maximum level of functioning that can be expected owing to the medical diagnosis /prognosis?)
- Ability to participate in and benefit from rehabilitative care within the context of the patient's/client's specific functional goals and direction of care needs.

**Note:** Determination of whether a patient/client has restorative potential includes consideration of all three of the above factors. Cognitive impairment, depression, delirium or discharge destination should not be used in isolation to influence a determination of restorative potential. If a patient has limited restorative potential due to medical diagnosis or ability to participate due to treatment schedule, consider

- Acute care until restorative potential improves (from medical interventions)
- Complex Medical Management (may be short term) for a longer duration medical need but restorative potential is expected to increase
- Convalescent Care with clear goals
- Community-based rehabilitation

Weightbearing Status should not determine the level of care on its own. Consider if the patient is able to participate at the intensity provided and achieve goals for discharge within the LOS. If a longer length of stay is required but patient can participate and improve, refer to Activation level of care, with potential referral to Rehabilitation as restorative potential and weightbearing status improve.

Reassess patient needs during rehabilitative care to determine if a different level of care is required.