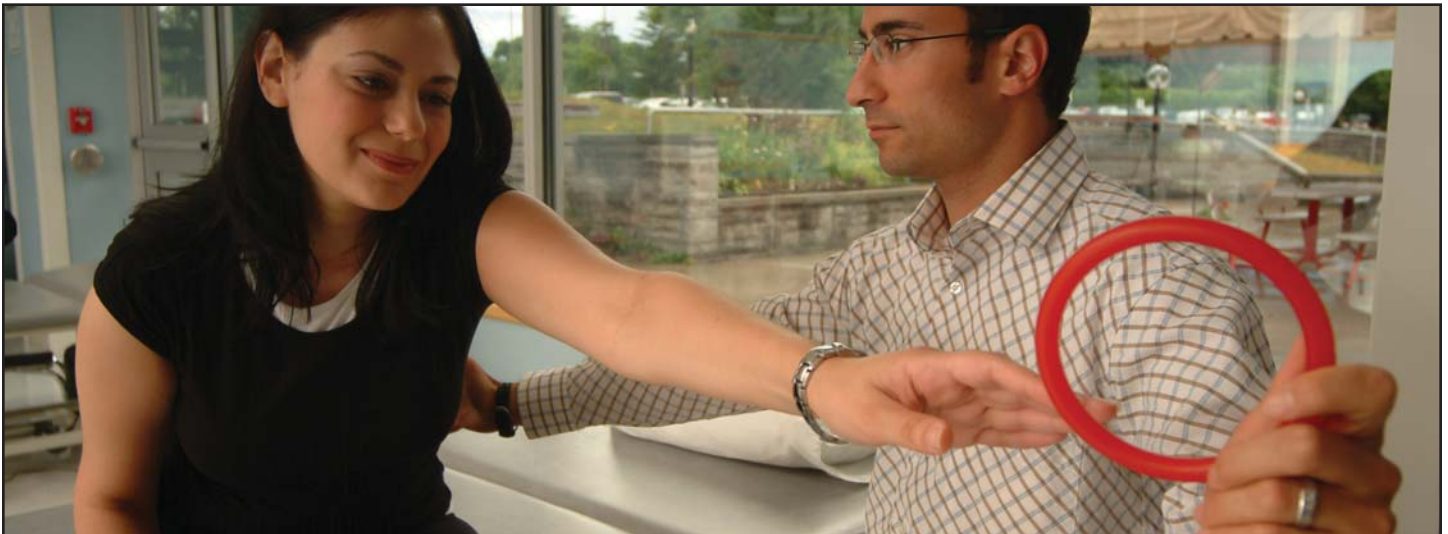


Together we can

Physical Medicine and Rehabilitation



If you arrive at the university hospitals of Kingston suffering from a stroke, brain injury or spinal cord injury, or spent time in hospital with an amputation or hip replacement, one of the final stops in your program of care is likely to be the Physical Medicine and Rehabilitation Program at Providence Care's St. Mary's of the Lake Hospital.

Physical medicine and rehabilitation is often called the "quality of life profession" because its aim is to restore the best possible patient functioning — medically, physically, socially, emotionally and vocationally — after injury or disease. St. Mary's rehabilitation services include 46 inpatient beds where the average length of stay is 35 days, and a busy outpatient program that manages up to 40,000 patient visits a year through a wide range of clinics, including Musculoskeletal Neurological, Respiratory and Amputee Rehabilitation, Vocational

Rehabilitation, and the Regional Community Brain Injury Services. Providence Care staff also provide rehabilitation at Kingston General Hospital and in community settings throughout the region.

By all measures, patients and clients give the rehabilitation program top marks on the Ministry of Health and Long-Term Care's province-wide hospital report card.

At the Cardiac Rehabilitation Centre at Hotel Dieu Hospital, a multidisciplinary team of health professionals, provides individualized, comprehensive cardiac rehabilitation with graduated levels of programming to assist clients in gaining an optimal lifestyle. Individuals with heart disease access a variety of professional services such as individual nutritional, psychosocial counselling, exercise prescription and monitoring and education about cardiac disease.

Redevelopment



The consolidation of Providence Care's St. Mary's of the Lake Hospital and Mental Health Services programs in a new building will provide patients with a more modern, fully accessible, therapeutic environment designed to enhance patient comfort and support rehabilitation and recovery.

The current facilities are not appropriate for the needs of today's patients and clients, many of whom are recovering from a stroke or spinal cord injury, or living with complex physical health issues. The original buildings at St. Mary's of the Lake date back to the turn of the century, and don't easily accommodate today's wheelchairs and other mobility aids.



Together we can **Physical Medicine and Rehabilitation**

Providence Care's sprawling Mental Health Services site on King Street West was built in the 1950s. Its ward-style rooms spread across kilometres of stark concrete corridors are both inefficient to operate and unsuited to modern approaches to mental health care and recovery.

Providence Care's plan is to consolidate the programs from both sites in a brand new hospital on the King West site. New, efficient rehabilitation space for inpatients and outpatients will mean more people can benefit from post-surgical/accident or injury rehabilitation. Inpatient units will be grouped in neighbourhoods of smaller family-type clusters of eight to 10 beds with access to views of the surrounding landscape and to common areas.

Equipment

Helping those who have experienced life-altering illness or injuries regain independence often requires specialized equipment.

Imagine not being able to pick up the phone, dial it or talk privately to your loved ones after a serious illness. A Head Mouse, specialized equipment that attaches to a patient's forehead to allow him/her to click on a computer screen by a quick nod of the head, opens up doors for the patient to communicate, learn and manage their daily life. This is just one example of equipment that enables rehabilitation patients to get back their independence and dignity following a devastating injury or illness.

From electric overhead lifts and electric parallel bars to treadmills

and bikes, rehabilitation equipment is an integral part of rehabilitation assessment and treatment. Because the equipment is continuously in use, it ages quickly. The large volume of patients using the machines daily increases "wear and tear" on the equipment, creating a constant need for replacements.

Education

Rapidly changing technology, a growing demand for rehabilitation services and a more complex array of health care needs is placing untold demands on physical medicine and rehabilitation's physicians, nurses, therapists and staff. In order to realize their continuing commitment to quality care, the team must access advanced education and training.

Investments in staff education, including equipment training and conferences targeting the latest theories on optimal strategies for recovery, will have a direct impact on patient care. For example, a fund to provide relief time for staff education will enable the program to retain on-call nursing staff to care for patients when full-time team members are attending education sessions.

Research

The Department of Physical Medicine and Rehabilitation is dedicated to the development of rehabilitation research to meet the growing need in Southeastern Ontario. A 1990s study of functionality, for example, resulted in the development of a standard of measure of independence

used to help gauge when patients are ready to be discharged or transferred to outpatient or community-based care. The "Functional Independence Measure" is still used today to help university hospitals of Kingston optimize inpatient care and patient recovery.

Additional research is currently underway on a variety of topics related to stroke and spinal cord rehabilitation, and community-based rehabilitation:

- A three-year interventional research project is evaluating the role of Botox in effectively improving a stroke survivor's ability to walk.
- Researchers are investigating the potential of the KINARM robotic exoskeleton, an instrument that accurately measures impairment and post-treatment recovery, to determine if it could complement the work of an occupational and physiotherapist. If a patient is unable to reach a designated target, the robot could be programmed to assist.

Opportunities for giving

- Unrestricted gifts to help the program
No minimum
- Patient care equipment (list available)
\$1,000 - \$175,000
- Send a nurse or therapist to a training session
\$500 - \$3,000
- Support on-site training session for clinical staff
\$2,000 - \$5,000
- Invest in local hospital research
No minimum