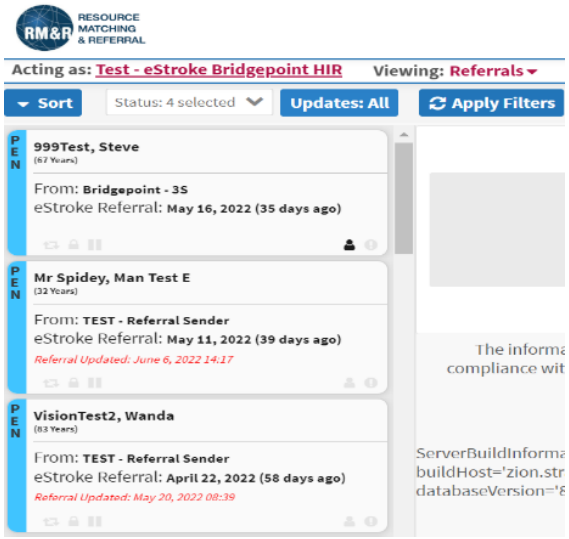
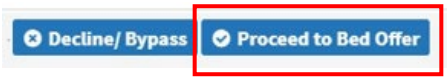
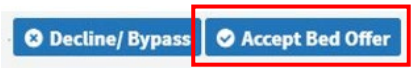
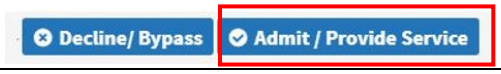
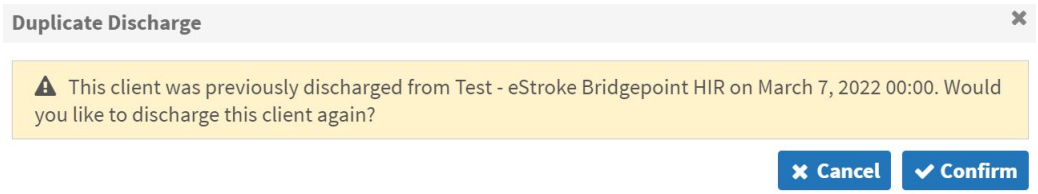
Process for using the vacancy module to discharge a current patient, and admit a new patient.

Step in eStroke RMR	Activity Associated	Rationale
1) Create a Vacancy on Vacancies page	Discharge a current patient	Begins the process to Admit a new stroke patient to your facility
	Leave as Internal Status	As an Internal Status, nobody outside of your organization will see the Vacancy.
2) Review the accepted patients on your wait list on Referral page	Confirmation a bed is available to admit new stroke rehab patient Review patients on referral page/ your wait list 	Find the appropriate patient to match your available bed
3) Make Vacancy "Available"	Click on the "Change to Available" button when ready to match a patient Match screen will appear where you can select the next available patient	Acute care is able to see the number of vacancies available at your site You can begin the process to match a bed and proceed with bed offer
4) Select patient	Select the appropriate patient to proceed and review their referral information 	Able to see the patient details and clinical profile to ensure this is the patient you wish to offer a bed to
5) Proceed to Bed Offer	If you wish to proceed with the patient selected, click on the "Proceed to Bed Offer" button. 	The vacancy is matched When other rehab sites select this patient, it will show "Match in Progress" as you have now created the match
	Call to acute care to offer bed and provide admission date	

6) Accept Bed Offer	Acute care has confirmed patient accepts bed offer 	Confirms that patient/family has accepted your bed offer
	OR Deny/Bypass if bed offer is declined	This allows the match to be broken so other rehab sites are able to create a match to admit the patient
7) Admit/ Provide Service	Once the patient arrives at your site, you can proceed to click on the Admit/Provide Service button. 	Confirms patient is admitted to your facility Referral will fall off of other rehab sites that this patient was referred to

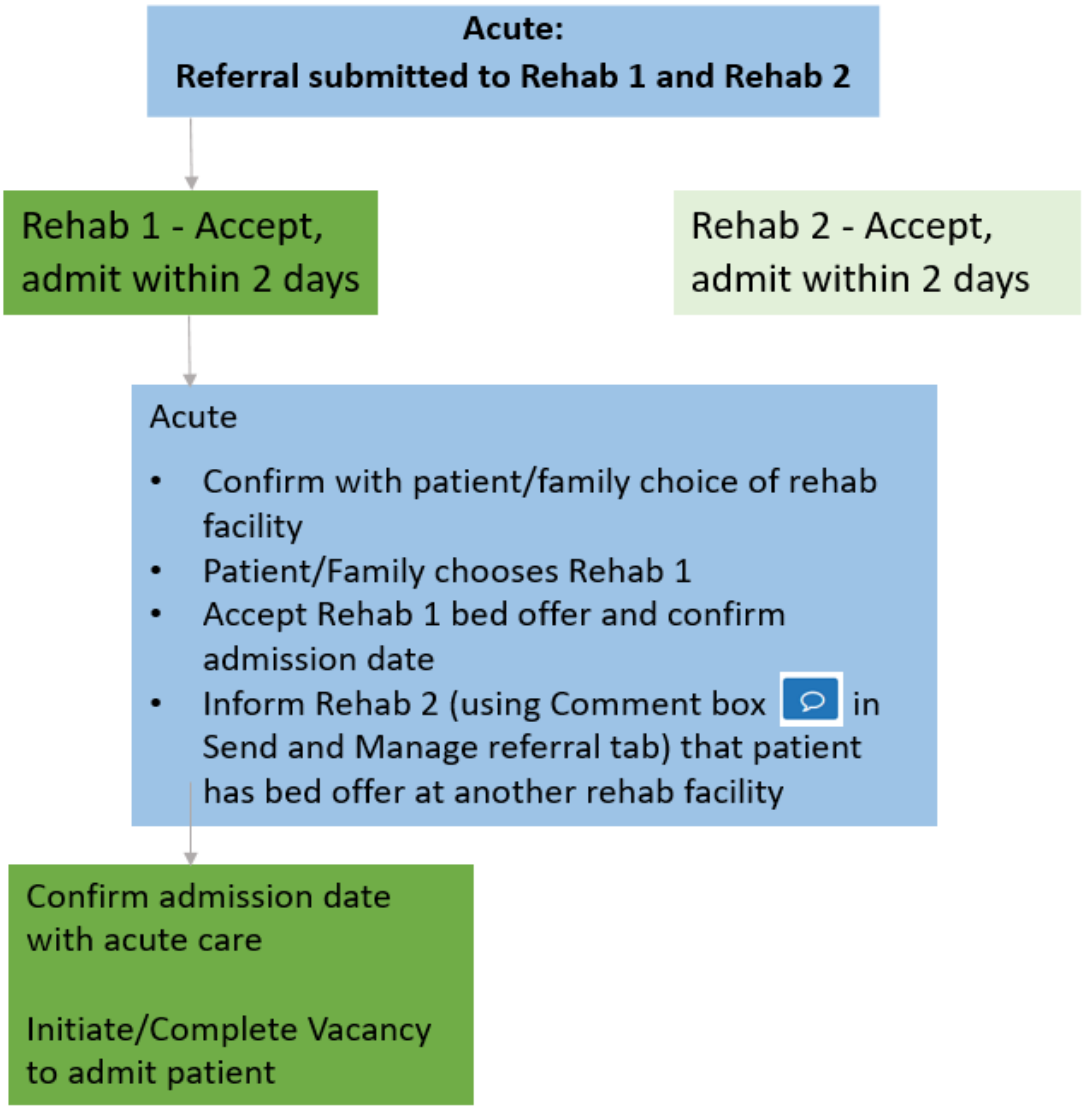
Frequently Asked Questions

Question	Answer
1) How do I gain access to the eStroke Rehab Referral System in RM&R?	The eStroke system monitors and collects data to help inform the stroke system. So it is important that users are familiar with the eStroke System, that referrals are accurate and comprehensive, and have knowledge of the standardized referral processes. To gain access to eStroke in RM&R you should: • Work regularly on stroke units • Regularly assess and treat stroke patients • Regularly participate in providing referral content or submit stroke rehabilitation referrals • Ensure you have access to RM&R first. Connect with your IT department/ Helpdesk within your own organization for assistance if you do not yet have access to RM&R • Speak to your manager or equivalent about having access to eStroke. Your manager should email Donna.cheung@uhn.ca providing approval for access to the eStroke care type in RM&R as a Sender
2) How can I create a vacancy when I do not have a patient to discharge at the same time?	• You will be able to use a standardized substitute patient name to create the vacancy • Use: **Doe, John** with **Health Card number 1234567891**, complete all additional mandatory fields for vacancy notice • When you try to save, the below notification will pop up, click "Confirm" to proceed 
3) What should I do when acute care	• Remind acute care to place the patient on hold

Question	Answer
informs me that the patient is medically unstable?	• Patient should remain on hold up to 1 week. If > 1 week, acute care should cancel the referral and resubmit when the patient is ready for rehab.
4) What should I do if a patient was referred for a specific rehab program type (HIR/LIR/OP), and I do not feel this is a good fit, and want to offer an alternative rehab program.	• Discuss with acute care the option of the alternative rehab program. • If alternative rehab program is accepted, request acute care to submit a referral to the alternative program type (HIR/LIR/OP) • Accept referral for the new alternative rehab program. • Create vacancy from alternative rehab program referral list
5) How do I create an outpatient (OP) admission for an internal referral?	For those patients who were admitted to your inpatient program through: • **New eStroke RM&R system, with an internal referral to OP:** ○ An admission to OP is required using the vacancy module. ○ Use the standardized substitute patient name "John Doe with OHIP# 1234567891" as your discharge patient to create the vacancy. ○ Then proceed to admitting the patient • **Old E-Stroke System, with an internal referral to OP:** ○ Initiate the OP episode as you have always done with an admission date, in the old E-Stroke System. ○ This is required so we are able to follow the patients journey and capture data accordingly • Remember to discharge patients in both systems
6) Confirmed admissions to rehab are sometimes cancelled. How can I offer a rehab bed in a timely manner to another patient? SEE APPENDIX A for additional information	• A patient will "disappear" from your list only when they have been transferred and admitted to another rehab facility. • For some of the patients on your waitlist, you may see "Match in progress" or a "Bed offer has been accepted". This means that these patients have accepted a bed offer from another rehab site, but may still be waiting in acute care to be transferred • Contact acute care to determine if your bed offer is earlier that the match with the other rehab site. - If not earlier, then admission to the other rehab site remains - If earlier, then a bed offer to your site can be provided • If the patient agrees to admission to your facility, acute care needs to inform the other rehab site to cancel the bed offer by clicking on "Deny/Bypass" in the vacancy and indicate the reason as "Patient Admitted to Another Service Provider" • You will be able to create the match and proceed with admitting the patient

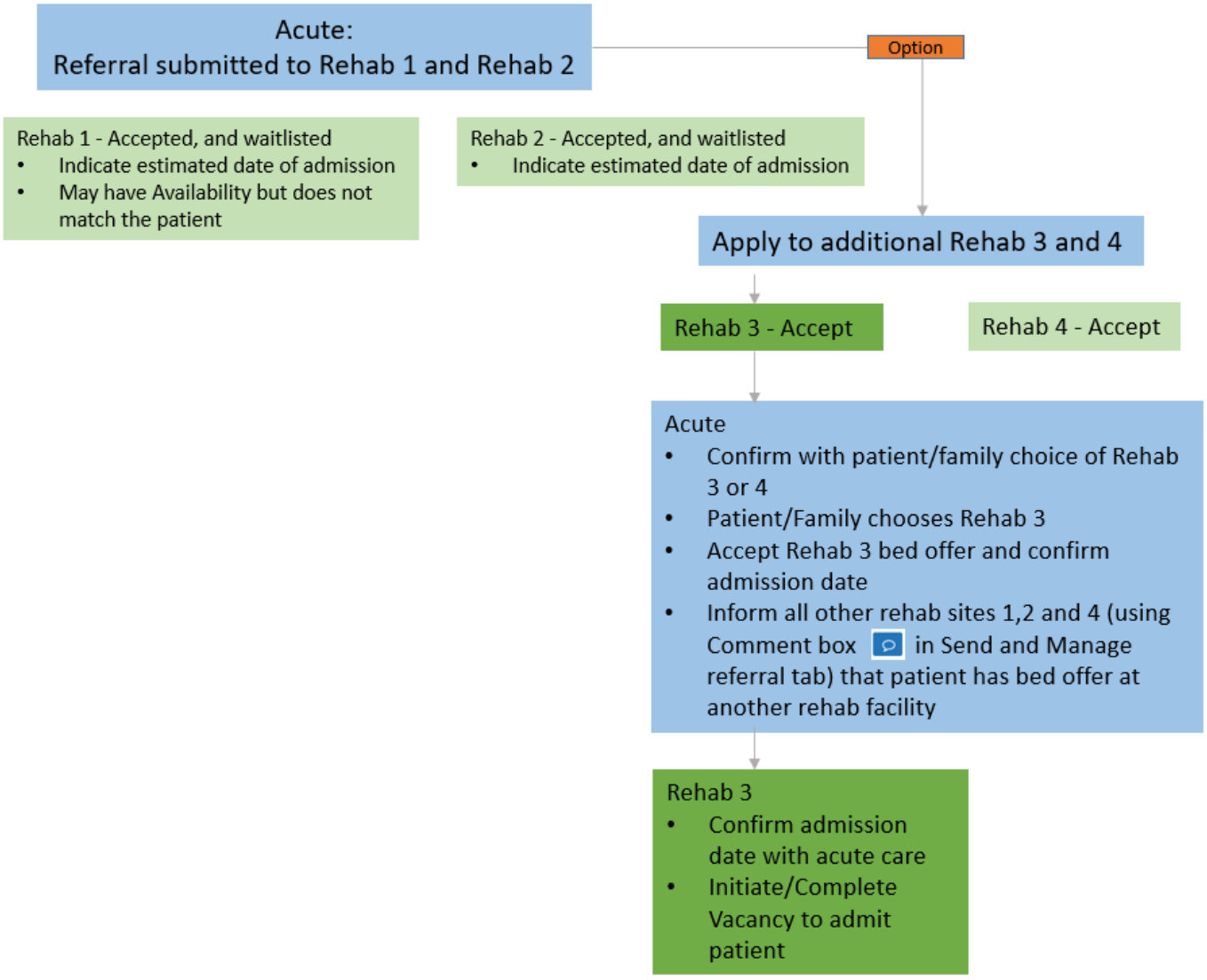
APPENDIX A: How to match a patient using Vacancy Module: Scenarios provided below

1) Two rehab sites accept and able to admit within 2 days

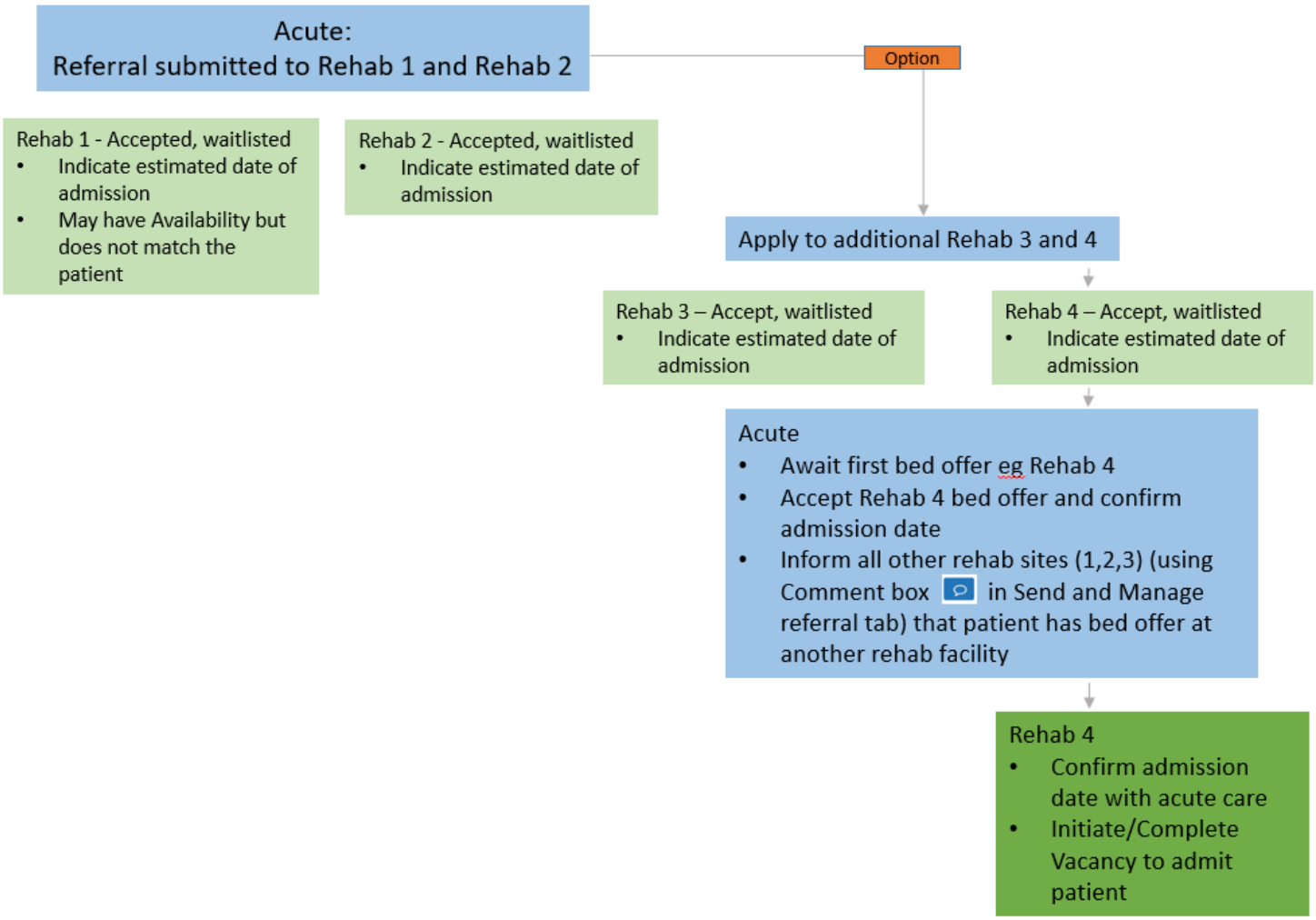
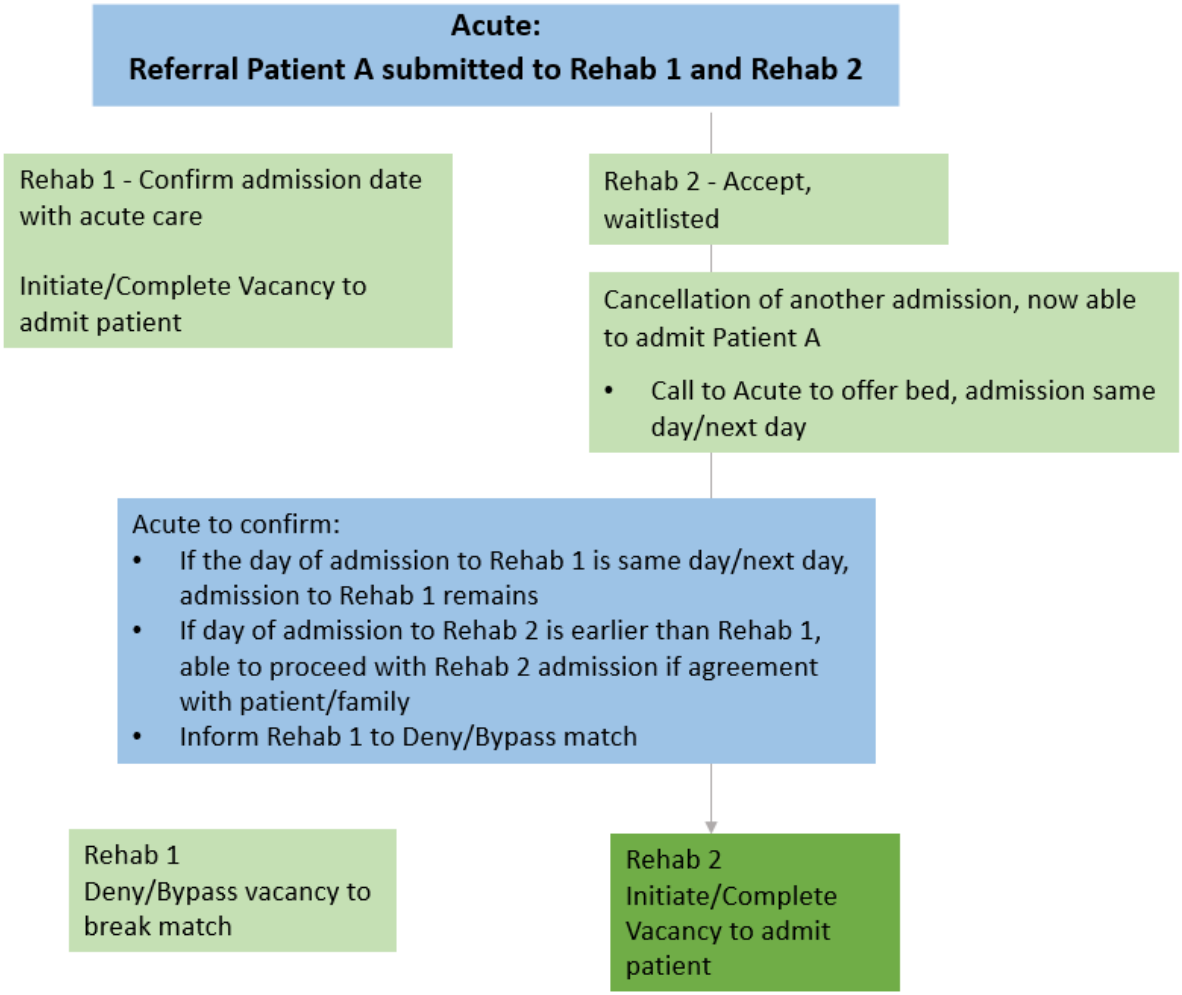


2) Multiple referrals, varying estimated date of admission

Scenario 2a


Acute:
Referral submitted to Rehab 1 and Rehab 2
Option
Rehab 1 - Accepted, and waitlisted
• Indicate estimated date of admission
• May have Availability but does not match the patient
Rehab 2 - Accepted, and waitlisted
• Indicate estimated date of admission
Apply to additional Rehab 3 and 4
Rehab 3 - Accept
Rehab 4 - Accept
Acute
• Confirm with patient/family choice of Rehab 3 or 4
• Patient/Family chooses Rehab 3
• Accept Rehab 3 bed offer and confirm admission date
• Inform all other rehab sites 1,2 and 4 (using Comment box in Send and Manage referral tab) that patient has bed offer at another rehab facility
Rehab 3
• Confirm admission date with acute care
• Initiate/Complete Vacancy to admit patient

Scenario 2b


Acute:
Referral submitted to Rehab 1 and Rehab 2
Option
Rehab 1 - Accepted, waitlisted
• Indicate estimated date of admission
• May have Availability but does not match the patient
Rehab 2 - Accepted, waitlisted
• Indicate estimated date of admission
Apply to additional Rehab 3 and 4
Rehab 3 – Accept, waitlisted
• Indicate estimated date of admission
Rehab 4 – Accept, waitlisted
• Indicate estimated date of admission
Acute
• Await first bed offer eg Rehab 4
• Accept Rehab 4 bed offer and confirm admission date
• Inform all other rehab sites (1,2,3) (using Comment box in Send and Manage referral tab) that patient has bed offer at another rehab facility
Rehab 4
• Confirm admission date with acute care
• Initiate/Complete Vacancy to admit patient

3) New bed offer with earlier admit date