

Chapter 31

Rehabilitation Needs

Lesson 31.1

- Define the key terms and key abbreviations in this chapter.
- Describe how rehabilitation needs to involve the whole person.
- Identify the complications to prevent.
- Identify the common reactions to rehabilitation.

Lesson 31.1 (Cont.)

- Explain your role in rehabilitation.
- List the common rehabilitation programs and services.
- Explain how to promote PRIDE in the person, the family, and yourself.

Disability

- A disability is any lost, absent, or impaired physical or mental function.
- Disabilities are short-term or long-term.
 - Some are permanent.
- Rehabilitation is the process of restoring the person to his or her highest possible level of physical, psychological, social, and economic function.
 - The focus is on improving abilities.
 - When improved function is not possible, the goal is to prevent further loss of function.

Restorative Nursing

- Restorative nursing care is care that helps persons regain health, strength, and independence.
- Restorative nursing:
 - Helps maintain the highest level of function
 - Prevent unnecessary decline in function

Restorative Nursing (Cont.)

- Restorative nursing may involve measures that promote:
 - Self-care
 - Elimination
 - Positioning
 - Mobility
 - Communication
 - Cognitive function
- Many persons need restorative nursing and rehabilitation.
 - Both focus on the whole person.

Restorative Aide

- A restorative aide is a nursing assistant with special training in restorative nursing and rehabilitation skills.
 - They assist the nursing and health teams as needed.
 - Required training varies among states.
 - If there are no state requirements, the agency provides needed training.

The Whole Person

- An illness, injury, or disability has physical, psychological, and social effects.
 - The person needs to adjust physically, psychologically, socially, and economically.
 - Abilities are stressed.
 - Complications are prevented.
- Rehabilitation often takes longer in older persons than in other age-groups.

Physical Aspects

- Physical aspects

- Rehabilitation starts when the person seeks health care.
 - Complications are prevented.
- Self-care is a major goal.
 - Activities of daily living (ADL) are the activities usually done during a normal day in a person's life.
 - The health team evaluates:
 - The person's ability to perform ADL
 - The need for self-help devices

Physical Aspects (Cont.)

● Elimination

- Some persons need bladder training.
 - The method depends on the person's problems, abilities, and needs.
- Some need bowel training.
 - Control of bowel movements and regular elimination are goals.
 - Fecal impaction, constipation, and fecal incontinence are prevented.

● Mobility

- The person may need crutches or a walker, cane, or brace.
- Physical and occupational therapies are common.
- Some people need wheelchairs.
- A prosthesis is an artificial replacement for a missing body part.

Physical Aspects (Cont.)

- Nutrition

- Difficulty swallowing (dysphagia) may occur after a stroke.
 - A dysphagia diet may be needed.
 - When possible, exercises are taught to improve swallowing.

- Communication

- Aphasia (the inability to have normal speech) may occur from a stroke.
 - Speech therapy and communication devices are helpful.

Psychological and Social Aspects

- A disability can affect:
 - Function and appearance
 - Self-esteem and relationships
- The person may:
 - Feel unwhole, useless, unattractive, unclean, or undesirable
 - Deny the disability
 - Expect therapy to correct the problem
 - Be depressed, angry, and hostile
- Successful rehabilitation depends on the person's attitude.
- Spiritual support helps some persons.

The Rehabilitation Team

- Rehabilitation is a team effort.
 - The person is the key team member.
 - The family, doctor, nursing team, and other health team members help the person set goals and plan care.
- Every part of your job focuses on:
 - Promoting the person's independence
 - Preventing decline in function

Rehabilitation Programs and Services

- Rehabilitation begins when the person first needs health care.

Common Rehabilitation Programs

- Common rehabilitation programs include:
 - Cardiac rehabilitation for heart disorders
 - Brain injury rehabilitation for nervous system disorders
 - Spinal cord rehabilitation for spinal cord injuries
 - Stroke rehabilitation after a stroke
 - Respiratory rehabilitation for respiratory system disorders
 - Musculo-skeletal rehabilitation for fractures, joint replacement surgery, and so on
 - Rehabilitation for complex medical and surgical conditions

Continuing Care

- Depending on the person's needs and problems:
 - The process may continue after the person leaves the hospital.
 - The person may need home care or nursing center care.
 - Some persons transfer to rehabilitation agencies.

Quality of Life

- Successful rehabilitation and restorative care improves the person's quality of life.
 - The more the person can do alone, the better his or her quality of life.
 - Protect the right to privacy.
 - Encourage personal choice.
 - Protect the right to be free from abuse and mistreatment.
 - Learn to deal with your anger and frustration.
 - Encourage activities.
 - Provide a safe setting.
 - Show patience, understanding, and sensitivity.