

**SECTION - THERAPY SERVICES
ADMINISTRATIVE DIRECTIVE NO. 426
(Replaces A.D. No. 426 dated 7/13/06)**

Effective Date: July 12, 2007

SUBJECT: REHABILITATION THERAPY AND ACTIVITY SERVICE

I. PURPOSE

The purpose of this Administrative Directive is to define the organization and functions of the Rehabilitation Therapy and Activity Service.

II. AUTHORITY

California Code of Regulations, Title 22, Sections 71221, 71225, 73377, 73379, 73381, 73383, 73385, and 73387.

III. POLICY

- A. The Rehabilitation Therapy program encompasses the evaluation, consultation, direct programming, and other activities provided by professionals from the disciplines of art, dance/movement, music, occupational and recreational therapy. In addition to those direct services, there are a broad range of social, skill building, and leisure activities provided by other staff members under the supervision and/or consultation by the Rehabilitation Therapist.
- B. Rehabilitation therapy and activity programs are planned, delivered, and available to each Individual based upon assessed needs. These services are provided through the organization and structure of the various residential programs and as requested through the Wellness and Recovery Team process.
- C. Rehabilitation Therapists provide services and programs which:
 - 1. Assess Individuals' needs through the use of standardized methods and evaluations that are focused on the Wellness and Recovery goals of the Individuals;
 - 2. Encourage development of appropriate self-expression and communication of feelings;
 - 3. Encourage and promote the development of creative skills and abilities essential to normal levels of self-esteem;
 - 4. Encourage and promote the development of positive attitudes and motivations necessary to benefit from available interventions;

5. Improve reality testing;
6. Improve cognitive skills, pre-vocational and vocational work skills;
7. Explore and develop leisure skills;
8. Improve physical fitness, self-care, body awareness, sensory perception and motor coordination;
9. Assist the Individual in developing the necessary social skills needed for independent functioning in his dispositional settings;
10. Enhance independent life skills; and
11. Assist with preparation for post-hospital readjustment.

IV. METHOD

- A. Rehabilitation Therapists are organized as a professional group as the Rehabilitation Therapy Service of Coalinga State Hospital. They are under the clinical coordination of the appointed Chief of Rehabilitation Therapy Service (Program Consultant – Rehabilitation Therapy), and are administratively supervised by the Program Director, Department Head or designee. The Service is organized according to its own rules and regulations, ethical code and standards of practice, and creates a forum for the professional activities of performance improvement, orientation, proctoring, credentialing, standards compliance, professional education and development, and internship training. Service members participate on specified committees of the hospital. The Service meets monthly to conduct business and to provide in-service training to the membership.
- B. The Service rules and regulations, ethical statement and scope of practice are developed by the Service membership, reviewed by the Medical Staff Executive Committee, and are subject to the final approval and authority of the Governing Body. The Service is accountable to the Clinical Administrator.
- C. The Chief of Rehabilitation Therapy participates in the development and monitoring of clinical programs, policies and procedures; participates in design and implementation of the hospital's performance improvement plan and the maintenance of licensure and accreditation; oversees the clinical work, the credentialing, committee structure and peer review procedures of the Service; prepares the Rehabilitation Therapists' performance reports in cooperation with Administrative Supervisors; and participates in the hospital's Policy Management Conference. In the absence of the Chief of Rehabilitation Therapy Service, a designee shall be appointed.

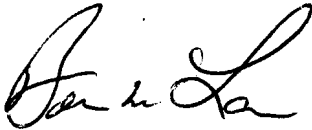
- D. The Rehabilitation Therapy Service Chair is elected by the Service members and serves as liaison between the Service, the Administration, and the Medical Staff. The representative will serve a one (1) year term. The representative meets with the Chief of Rehabilitation Therapy Service on a regular basis and may be called upon to assist in special projects and assignments of the Chief.
- E. Rehabilitation Therapists conform to the principles set forth by the:
1. American Art Therapy Association
 2. American Music Therapy Association
 3. Certification Board for Music Therapy
 4. American Association of Music Therapy
 5. National Association of Music Therapy
 6. American Occupational Therapy Association
 7. National Therapeutic Recreation Society
 8. California Park and Recreation Society Therapeutic Section
 9. American Therapeutic Recreation Association
 10. National Council for Therapeutic Recreation Certification
 11. American Dance Therapy Association
- F. The Service Standards, Scope of Practice, and Ethical Statement are derived from the tenets of these professional organizations.

V. RECRUITMENT

The Chief of Rehabilitation Therapy Service, in cooperation with Personnel, develops and implements a recruitment plan annually, which addresses the needs of the hospital. The Chief of Rehabilitation Therapy Service recruits qualified applicants for available positions through advertising, college and university liaison and participation in community-based events. The Chief of Rehabilitation Therapy Service maintains a Recruitment and Retention Committee to address issues of employee retention and targeted recruitment.

VI. DUTIES

Consistent with the Rehabilitation Therapist Generic Duty Statement, the Administrative Supervisor, in collaboration with the Rehabilitation Therapist, develops a specific duty statement consistent with the Rehabilitation Therapist's qualifications and discipline orientation and integrated with the orientation and needs of the Program. Duty statements are reviewed by the Program Director, the Rehabilitation Therapist, and the Chief of Rehabilitation Therapy Service, with each signing the final statement.



BEN MCLAIN
Executive Director (Acting)