

PATIENT & FAMILY

INFORMATION BOOKLET

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KIA ORA

Welcome to Auckland Spinal Rehabilitation Unit

The Auckland Spinal Rehabilitation Unit (ASRU) is a 20-bed unit and is one of only two specialist spinal rehabilitation units in New Zealand. We admit patients from the Central North Island to the far North. Our catchment area's Southern border extends from Taumaruni, Turangi and across to Wairoa/Gisborn. We provide care for those people who have had some damage to the spinal cord which may result in complete or partial loss of movement and/or feeling in areas of the body. This booklet is designed to answer some of your initial questions.

DIRECTIONS



Address 30 Bairds Road, Otara

Phone 09 270 9000

www.aucklandspinalunit.co.nz

FROM: Middlemore Hospital (MMH) to Auckland Spinal Rehab Unit (ASRU)

Turn right out of MMH and continue on Hospital Road.

Turn right at lights onto Mangere road, Otahuhu

Turn right Great South Road, Otahuhu

Turn Left Bairds Road, Otara

End: Turn left into Auckland Spinal Rehab Unit 30 Bairds Road Otara, Auckland.

FROM North

Travel along Southern Motorway

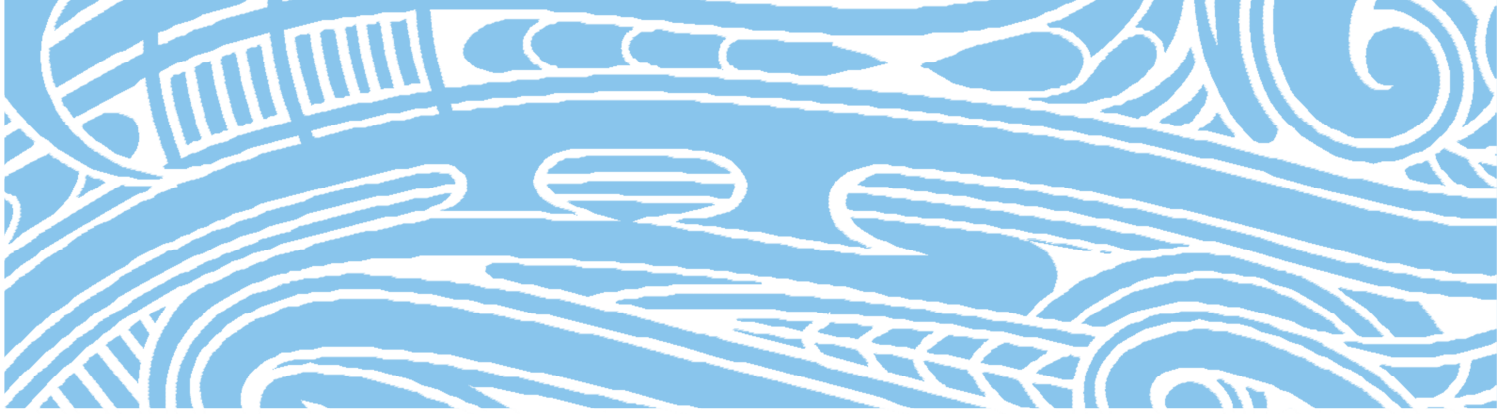
Bear left at Highbrook Interchange, Otara, Exit Number

443 Turn right onto roundabout and follow the MIT, Otara

sign

Turn right at the Bairds Rd lights and continue along the road to the Spinal Unit

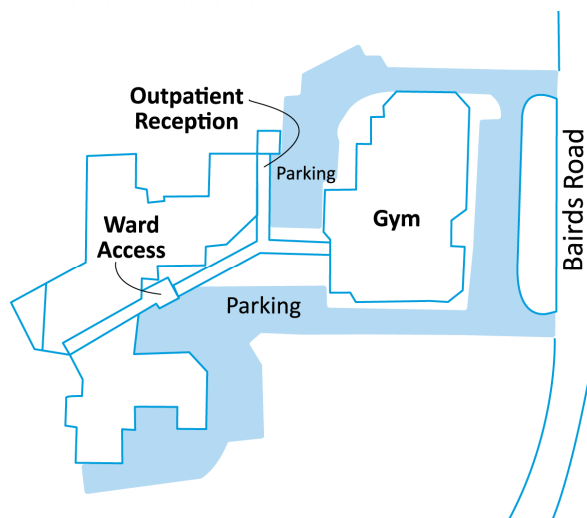
End: Turn right into *Auckland Spinal Rehab Unit 30 Bairds Road Otara Auckland*



PARKING

Parking and disabled parking is available at both entrances to the spinal unit. We ask that you do not park in the ambulance parking bay directly in front of the entrance to the ward. It is preferable that you park behind the physiotherapy gym area. Please keep your car locked and do not leave any valuables in your car. There is a security guard on site during some hours, however Auckland Spinal Rehabilitation Unit is not responsible for stolen or lost property.

ACCESS TO UNIT



There are two main entrances to the unit. One allows access to the outpatient and administration area, and the other, to the left of the administration area, allows access to the in-patients area. There are directions/sign posts in place.

VISITING



We are aware that visits from family and friends have an important role to play in your rehabilitation, however sometimes a patient's condition or rehabilitation programme may restrict visiting times.

It is important to respect the privacy of other patients.

Visitors are welcome at the Unit depending on COVID Alert

level

11pm - 8pm Monday to Sunday

Children under 16 years old are to be strictly supervised

Please ask your visitors to respect visiting hours

SERVICES

TELEPHONE



Patients may make short, local phone calls using the ward phone.

Unit phone: (09) 270 9000 Ward phone: (09) 270 9016

WIFI: Free all day.

MAIL



Mails are delivered to the ward daily during the week. Outward mails can be posted from administration, but are to have stamps. The postal address for the Unit is:

**Auckland Spinal Rehabilitation Unit
Private Bag 93319
Otahuhu 1640
Auckland**

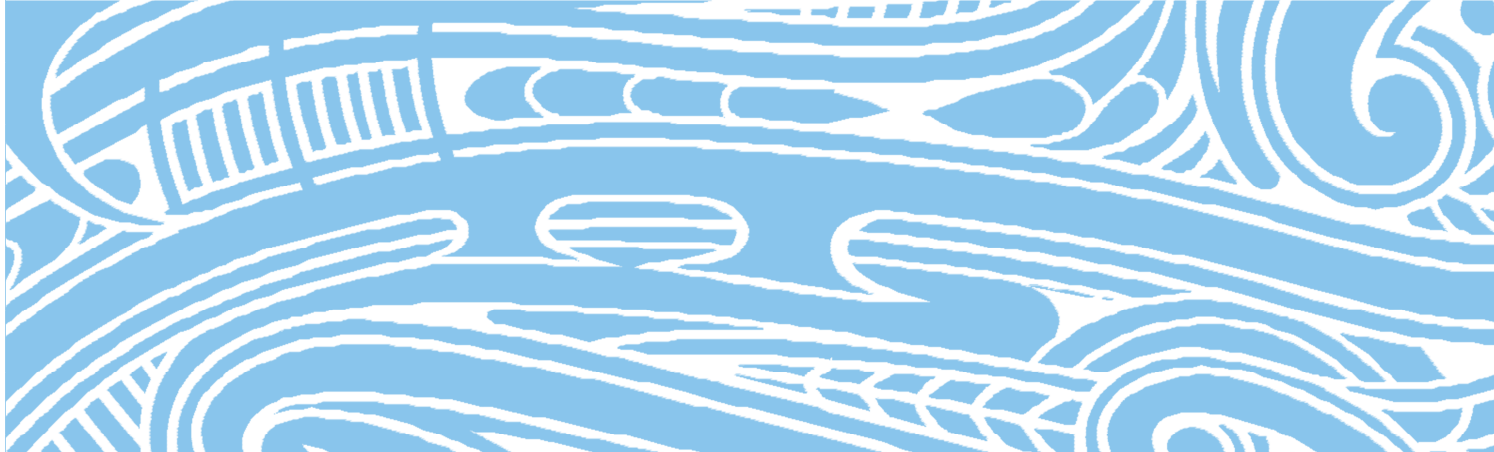
TOTAL MOBILITY TAXI SCHEME



The discounted Total mobility taxi scheme is designed to increase the mobility of people with disabilities in the community.

The application takes about three weeks, so contact a social worker for all residential areas, or Spinal support if you are based in the Auckland region to see if you are eligible. There is a processing fee.





TV/RADIO

There is a large screen TV in the dining room and TVs are available at the bedside. If you wish to bring in your own radio or other electronic equipment, this is at your own risk, and this will preferably have earphones. Please show consideration to other people regarding noise levels.



VALUABLES

In your room there will be space to store your personal effects. For your own security, please do not bring large sums of money or unnecessary items of value into the Unit. We have a policy in place for staff handling and storage of patient monies. However, outside of the unit, staff will not handle patient monies, so arrangements should be made prior to admission for access to money and purchase of personal items. Should this not be possible, a plan will be made with the patient and the Social worker, and clearly documented.



SMOKING

As smoking damages your health, Counties Manukau District Health Board (CMDHB) has adopted a **SMOKEFREE** policy. This means that smoking is not permitted for patients, family and whanau, or staff anywhere within the hospital grounds. If needed, CMDHB will help you through this with use of nicotine replacement therapy. If you have any further smoking related questions please consult with the team to discuss with your doctor.



DRUG USE

The use or possession of illegal/non prescription drugs is strictly prohibited and is a criminal offence. The police will be informed if this occurs.

The consumption of drugs and alcohol within the hospital grounds, including the motels, is strictly prohibited.



FACILITIES

LAUNDRY

Patients living within the Auckland area are required to have family/whanau tend to their personal laundry needs if possible. For patients from other areas it is also preferred that the patient's family/whanau tend to their laundry needs. If this is not possible, there are laundry facilities available on the ward with washing powder supplied. To economise, it is desirable to complete your washing in bulk loads. It is wise then to have a minimum of five complete changes of clothing to allow for this.



NO RESPONSIBILITY will be taken by the unit for loss or damage to your personal property. To prevent loss of clothing it is advisable to have your clothing clearly labelled.



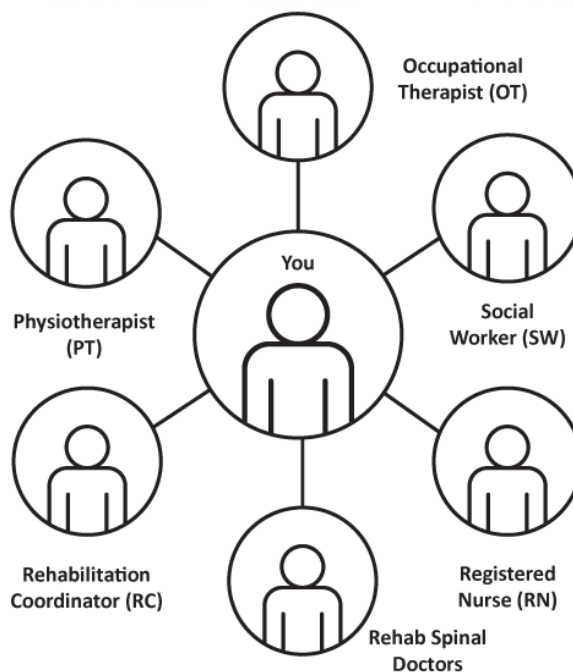
ADMISSION

Who will I meet?

PRIMARY CARE TEAM

On your admission you will be assigned a **Primary Care Team (PCT)**.

Your Primary Care Team will include a:



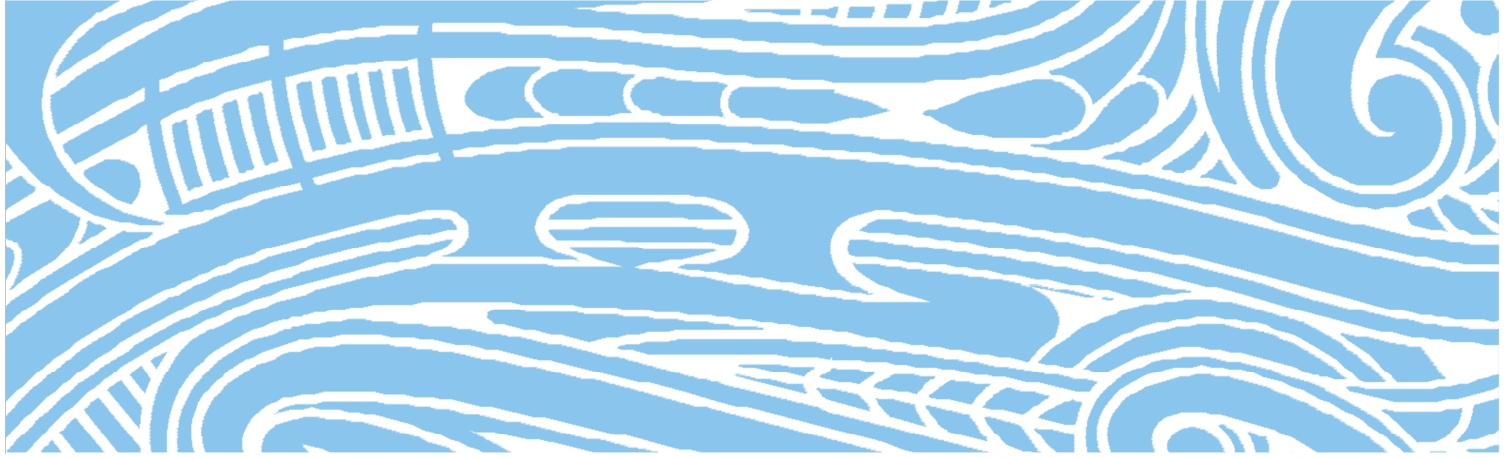
Your Rehabilitation Coordinator is a central person to coordinate your care and answer your or your families' questions.

An assessment will be completed by each member of the Primary Care Team to identify your individual needs and along with you and your family/whanau, plan your rehabilitation programme.

TEAM MEMBERS

The team members based at the unit are:

- **Doctors:** Spinal Consultant/clinical head & Registrar: Responsible for your medical care
- **Nursing Staff:** Charge Nurse, Clinical Nurse Educator(CNE), Clinical Nurse Specialists (CNS), Registered Nurses, Enrolled Nurses, Health Care Assistants: Responsible for your day-to-day personal and medical care, and education
- **Physiotherapist and Physiotherapy Assistant:** Responsible for training and education in activities such as getting in and out of bed, car, and other mobility activities.



- **Occupational Therapist and Occupational Therapy Assistant:** Will provide assessment, training & education for specialised equipment and daily living activities e.g. dressing, bathing.
- **Social Worker:** Will provide support and assistance with managing your lifestyle changes.
- **Admin Team/Clerical support:** Responsible for coordinating your ongoing outpatient appointments following discharge.
- **Admission coordinator/CNS:** Responsible for coordinating your admission to the unit.
- **Rehab coordinator:** Keyworker and liaison person with your primary rehab team, facilitates your patient/family meetings during your stay.
- **Dietician:** Available to advise you on any dietary needs. Please let us know if you have any special dietary requests.
- **Peer Support:** Available to provide support and share lived experiences to assist you in your rehab journey.
- **Cleaning and Orderly Services:** Responsible for keeping our environment clean and for transportation between ASRU and MMH.
- **Security Services**

Other members on referral

- **Urologist:** Specialist involved in assessment and treatment of bladder and sexual health rehabilitation.
- **Plastic Surgeon:** Specialist involved in assessment and treatment of skin and pressure area management and also involved in upper limb surgery when required.
- **Interpreting Services:** If the service of an Interpreter is required for patients and families, this will be arranged.
- **Cultural Support:** For Maori and Pacific Island patients, representatives from the Cultural Resource Unit are available for you and your family, and will visit the Unit as required. Regular visits from our Kaumatua are available.
- **Chaplain:** Available to visit the unit on request.
- **Psychologist:** For counselling, available on request and/or on referral by unit doctor.
- **Orthopedic Spinal Surgeons:** Available for surgical consultation.

Based external to the hospital:

- **ACC Recovery Partner:** Assigned to you to support you with funding your services and equipment if your injury is accident related and covered by ACC.
- **Income Support Services:** Can visit the unit to discuss benefits, accommodation, etc. - See the social worker for more details.

ADMISSION

What to expect

WHAT TO BRING

We advise that you bring a few changes of comfortable clothing. Clothing that is loose at the waist and hip, it's easier to put on and adjust. Some fabrics and styles of clothing may cause problems marking your skin e.g. back pockets and rivets in jeans. Also, slippery fabrics make it difficult to stay in an upright position in the chair causing you to slide.



We recommend that your socks and shoes should not be too tight.

GOAL SETTING MEETINGS/HUI

Rehabilitation is not just exercise, but is a process that covers all aspects of learning to care for yourself and your health. Each team member is responsible for teaching you different skills important to your recovery.



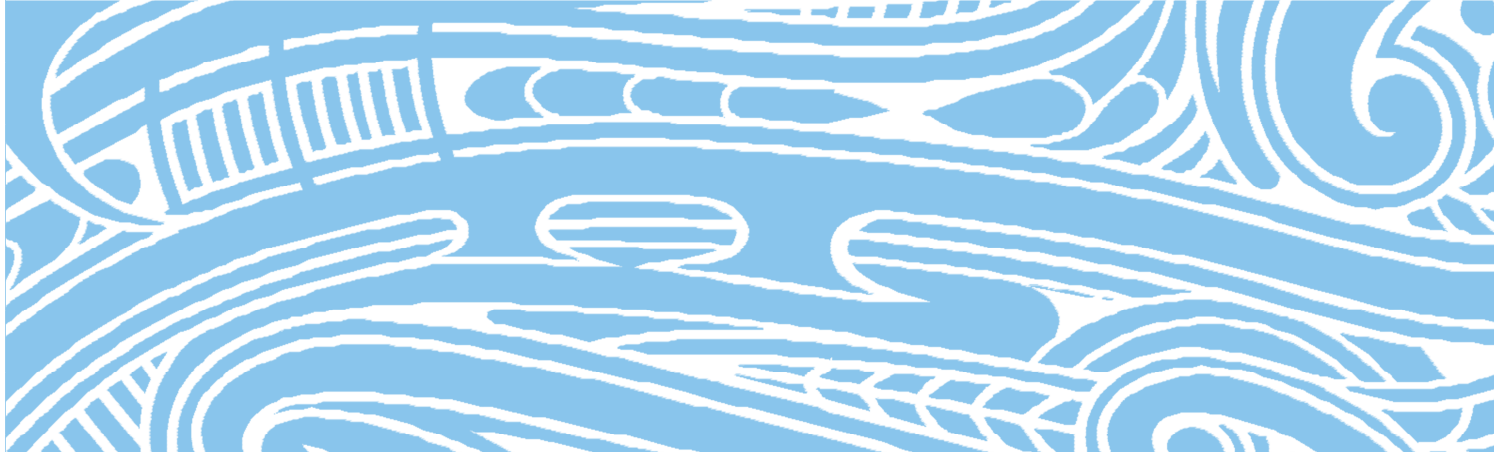
Your Responsibilities:

- You are expected to participate in all aspects of your rehabilitation while at the unit.
- It is important to follow medical advice including bed rest and medications.
- It is important to start a routine – getting up on time and doing as much as possible for your program and yourself each day.
- Rehab starts as soon as you wake up in the mornings.

Within two/ three weeks of your admission a **Goal Setting Meeting (GSM)/Hui** will be arranged. This meeting includes you, your **Primary Care Team (PCT)** and any family/whanau you wish to be present. At your first **GSM**, we will discuss your short and long term goals and create a treatment plan to help you achieve your goals, ensuring your safe discharge home and into the community.

Your goals and plan will be reviewed at regular **GSMs**, throughout your rehabilitation. Planning for discharge will be a major focus throughout your rehabilitation. A discharge date will be agreed upon with you and your family, and planning for required temporary or permanent housing modifications, attendant care, and equipment needs, will be discussed.

Prior to your discharge you will have a final meeting where you and your **PCT** will complete a checklist, to ensure that everything is in place for discharge. This will include equipment, carers, alterations, referrals back to community services which provide support following discharge e.g. District Nursing Service, plan for follow-up etc.



YOUR PROGRAMME

When you arrive at the unit there will be a number of assessments completed by the primary care team to plan how to best work with you and establish your individual programme.



Your individual rehabilitation programme will consist of a range of therapy options and education options; both group and 1:1 education, which will be incorporated into a daily routine. These will include such areas as skin care, mobility, bladder and bowel cares, strengthening exercises and daily living skills. Also during your stay, we will work with you on issues such as house alterations if need and transport options, so that you are well prepared on discharge to return home.

It is important to realise that rehabilitation is a team effort, with you and your family at the centre. You need to be fully involved in all aspects of your programme, so that your goals are achieved. The team will provide you with the professional support and encouragement to do this.

KEEPING WELL



PATIENTS, WHANAU AND VISITORS HYGIENE

While you are an inpatient at the unit, the team of people that care for you are required to follow certain processes that reduce your risk of getting any sort of infection or illness. This involves cleaning their hands carefully before and after touching you or your equipment, along with cleaning all shared equipment in between each person's use and keeping the shared environment as clean as possible. Sometimes this may also involve staff wearing a yellow gown to care for you.

At times, we may ask whanau and significant others to wear a gown and gloves as well.

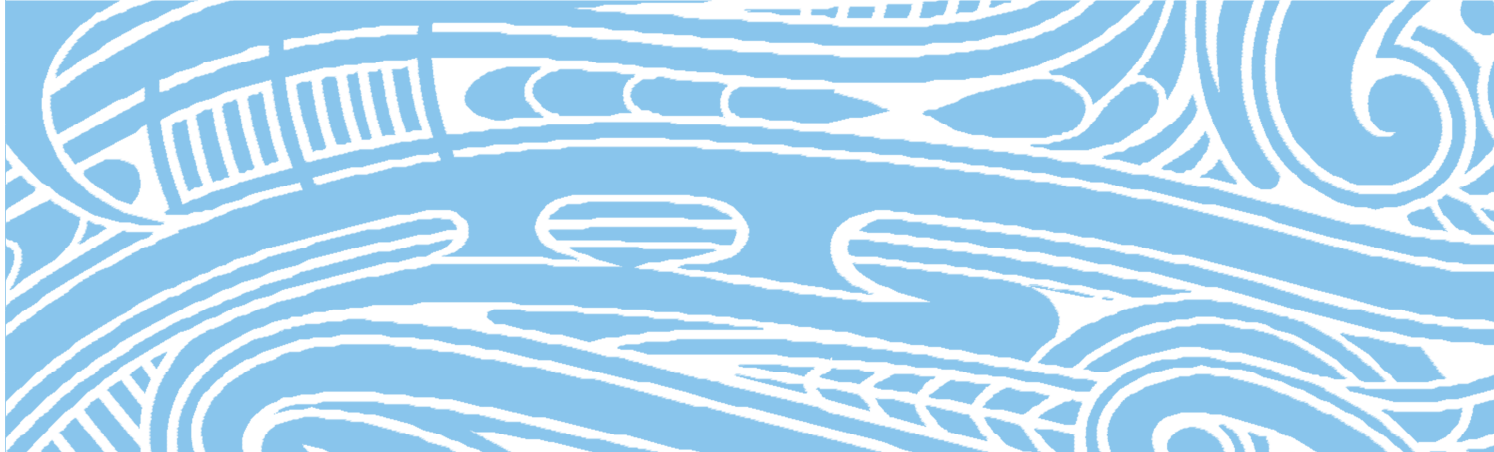
In hospital you are in close contact with the other patients, staff and visitors. All of us carry bacteria and viruses and some of these are more harmful than others. They can make any infections more difficult to treat. Bacteria and viruses can be spread by touching shared surfaces (like door handles, light switches, toilet flush buttons) and particularly when using shared spaces, such as patient rooms, shared bathrooms, the gym and the dining/social areas.

Hand gel is available throughout the unit and when applied on hands, is one of the most effective and important ways for patients, whanau and visitors to prevent the spread of infection.

We recommend hands are thoroughly cleaned with alcohol gel at the following times:

Clean your hands before and after:

- Entering and exiting the unit
- Entering and exiting your room or another patient's room
- Using/leaving a toilet, in addition to washing your hands at the toilet sink inside
- Eating/drinking or preparing food
- After you have just blown your nose or coughed/sneezed into your elbow
- Using gym equipment



We ask that whanau/visitors *do not*:

- Sit on patient beds or use the patient bathrooms
- Visit if they are unwell, for example with coughs/colds, flu or nausea, vomiting or diarrhoea
- Whanau/visitors should not visit for at least 48 hours after a 'gastro bug' or the 'flu'

While many close friendships are made within the unit at times, it is important that patients do not share personal items, drink bottles or food. We also discourage visitors from entering the rooms of patients who they are not specifically there to visit.

DISCHARGE HOME

UNIT LEAVE



Outings from the Unit or overnight/weekend leave must be planned in advance and agreed to by all of the members of your **PCT**. You will be introduced to a day and overnight leave checklist so you can see what you need to work on to go out on leave. Periods of leave from the Unit should be discussed and planned at your **GSM's**. This will ensure suitable equipment is arranged and techniques (eg: transfers into a car) are safe. Once the checklist is completed, you are encouraged to initially leave the unit for day leave. Prior to any time away from the unit you need to inform staff when you will be back.

Regular outings are organised through Spinal support every 2nd Thursday.

DISCHARGE



On discharge from the Unit you will receive a discharge summary (an overall outline of your stay at the unit). It is prepared by your **Primary Care Team**, medical staff and any other staff involved during your stay at the unit. A copy will be sent to you, your G.P and any other relevant professional, within ten days of discharge. A copy will be filed in your medical records. If you have any concerns about your discharge plan, speak to the Rehabilitation Coordinator, or Social Worker to discuss and resolve these issues.

OUTPATIENT SERVICE

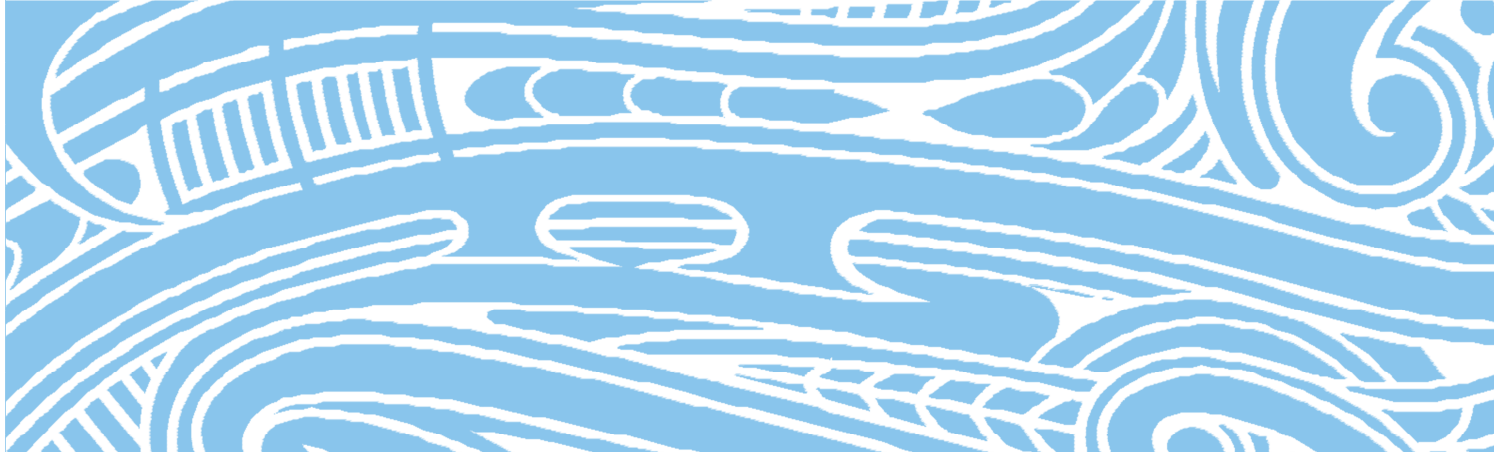
Following your discharge, you will be referred to the spinal outpatient team.



Within the first 6-8 months after discharge, you will receive an appointment letter, requesting you to attend the unit or an Outreach clinic for a Team assessment (checkup). The assessment team (**Doctor, Registered Nurse, Occupational Therapist, and Physiotherapist**) will check and follow-up on your progress.

This will be repeated at specified intervals thereafter, depending on your needs. If you live out of the Auckland area, the same reassessment service will be offered. These 'Outreach Clinics' are scheduled once a month, when the Outpatient team travel outside Auckland to clinics in either, Whangarei, Kawakawa, Kaitaia, Hamilton, Tauranga, Whakatane, Rotorua, Taupo or Gisborne.

If you have any questions regarding outpatient needs, please phone our Outpatient coordinator on (09) 270 9012.



COMPLAINTS



If you are unhappy about any part of the service or care you are receiving, please contact the Inpatient Team Leader or Charge Nurse Manager. You can however make a direct complaint or discuss the issue with anyone in your Care Team. This action will in no way have an adverse effect on the way you are treated. If you wish to take your complaint to a totally independent source, please feel free to contact the Health Advocates Trust on phone (09) 623 5799.

HEALTH AND DISABILITY ADVOCATE



A Health and Disability Advocate is available to advise you on your rights as a patient. The Health and Disability Advocate is not employed by Counties Manukau DHB, and all communications are in confidence. The Health and Disability Commissioner Health Advocates Trust can be reached on Auckland (09) 373 1060 or (09) 623 5799.

PATIENT EXPERIENCE



Tell us what you think about the care you have received from the Spinal Rehab unit at the end of your stay.

We want our service to be the best it can be. We want to understand how we can make things better, so please tell us what you think by completing our survey.

Let's get started!

Talk to a team member on the ward today.

RECREATION AND RESOURCES

Recreational services and resources at Harrison Learning Centre

HARRISON LEARNING CENTRE



On site at Auckland Spinal Rehabilitation Unit is our Harrison Learning Centre
(Based in the building next to our dining room)

- Games, Puzzles and Books (can be loaned out)
- A quiet place to relax
- Piano

For everyone to get maximum enjoyment from the Centre we do need to have a few agreements (some people call them rules!)

1. The computers are for the patients' use only. No children are allowed to use/ play with them.
2. The Centre is for patients and their visitors to relax, learn and enjoy themselves.
3. Staff may restrict the use of the facility to any patient or their visitors if the above guidelines are not being followed

Opening Hours

Monday to Friday, 9.00 am – approx. 7.00 pm (On request at the weekends)

The Social Worker may be able to assist you with the following issues:

Work and Income Benefits (WINZ): You may be eligible for supportive living payment or a job seeker benefit. A WINZ Case Manager can visit you at the unit.

Social Housing Applications: Your social worker can assist you at the unit to make an application for modified Social House.

Mobility Parking Permit: This parking permit enables people to park in Accessible car parks, standard car parks for longer periods than stated times, and time restricted zones for longer than stated times. The scheme is operated by CCS and there is a cost criteria involved.

*Note: A parking permit is available at reception for patients and families to borrow for outings.

Lottery Welfare Grants: This grant is for Ministry of Health patients who may apply for costs of vehicle modifications, or in some cases to purchase a vehicle/mobility scooter.

OTHER ORGANISATIONS ON-SITE

OTHER ORGANISATIONS ON-SITE



Kaleidoscope:

The Kaleidoscope programme is dedicated to getting people who happen to have a disability into jobs that they love.

Spinal Support NZ

Spinal support's main function is to inform, encourage and motivate people with spinal cord disabilities. Spinal support also have vans to hire for outings and leave. Please check with their office for details. Free budgeting advice is also available and in the Auckland area the discounted Total mobility taxi can be applied for through Spinal support at a cost of \$10.00.

PARAFED (Paraplegic and Physically Disabled Association):

PARAFED focuses on Rehabilitation with a strong emphasis on sport. PARAFED organises sports and recreation events for many different skill levels.



YOUR RIGHTS

THE CODE OF HEALTH AND DISABILITY SERVICES CONSUMERS' RIGHTS

The Code of Rights means that you should have:

1. **RESPECT** - You should always be treated with respect. This includes respect for your culture, values and beliefs, as well as your right to personal privacy.
2. **FAIR TREATMENTS** - No-one should discriminate against you, pressure you into something you do not want or take advantage in any way.
3. **DIGNITY AND INDEPENDENCE** - Services should support you to live a dignified, independent life.
4. **PROPER STANDARDS** - You have the right to be treated with care and skill, and to receive services that reflect your needs. All those involved in your care should work together for you.
5. **COMMUNICATION** - You have the right to be listened to, understood and receive information in whatever way you need. When it is necessary and practicable an interpreter should be available.
6. **INFORMATION** - You have the right to have your condition explained and be told what your choices are. This includes how long you may have to wait, an estimate of any costs and likely benefits and side effects. You can ask any questions to help you be fully informed.
7. **IT IS YOUR DECISION** - It is up to you to decide. You can say no or change your mind at any time.
8. **SUPPORT** - You have the right to have someone with you to give you support in most circumstances.
9. **TEACHING AND RESEARCH** - All these rights also apply when taking part in teaching and research.
10. **COMPLAINTS** - It is okay to complain - your complaints help improve service. It must be easy for you to make a complaint, and it should not have an adverse effect on the way you are treated.

This is an outline of the rights guaranteed by the law known as the Code of Health and Disability Services Consumers' Rights. They apply to all health or disability services, whether you pay for them or not. A full copy of the Code of Rights is available from your provider, the Health and Disability Commissioner or Bennett's Government Bookshop. If you need help ask the person or organisation providing service.