

Frequently Asked Questions –

Clients & Families

Specialized Orthopedic and Developmental Rehab



1. What can I expect in this environment?

Families can expect an environment where there is respect on both ends from clients, families, staff, and nursing. Clients and families can expect an environment where constant communication is encouraged by everyone. Families can also expect a clean environment that's maintained by staff and families alike.



2. When will my child return to his/her regular routine?

All of our clients are encouraged to be as independent as possible. Examples of independence include morning care (brushing their teeth and putting on clothes instead of a hospital gown), attending school, attending recreation, and feeding themselves to the best of their abilities.



3. How can I be involved in my child's rehab?

Depending on the parent or guardian's schedule and other commitments some family might be able to visit client when available or stay at the bedside. Families are encouraged to learn the client's daily routine's such as pain management, turning the client and changing their clothes.



4. Who can show me how to do my child's exercises?

Physiotherapy will teach families using a hands on approach and provide picture instructions on how to do a client's stretches. Stretches are done by the clients, physiotherapy, families, and nursing.



5. Can I have a private room?

Private room availability will depend on multiple factors. For example: client safety, medical concerns, etc.



6. How long should I expect to wait when I ring my call bell?

When a client rings their call bell any nurse on the unit can answer and respond to the call. Your nurse or any other available nurse will do their best to respond to the client in a timely manner.



7. When are shower days?

Clients shower days are usually scheduled for three days spread across a week and in accordance with the client's pool days if applicable. Additional showers can be given by family members if they wish. Families are required to provide the client's toiletries and clothing for the client's length of stay. Families are responsible for washing the client's clothes (a laundry room is available on the unit).



8. Who takes my child to their clinic appointments?

A guardian of the client is expected to accompany the client to prescheduled orthotics, dental, on site clinics, and any follow up appointments that the client is scheduled for offsite. Physiotherapy and occupational therapy will notify parents ahead of time if they need to be present for a session.



9. Can a sibling stay at the bedside when I'm gone?

Siblings and family members must be 16 years and older to stay at bedside with a minor. One family member is permitted to stay at bedside overnight



10. When are lights turned out on the unit?

Nursing will turn off lights for all clients at 10 pm (2200 hrs.). Older clients may stay up in their room in bed until 11 pm (2300hrs).



11. What is the night routine like at the hospital?

During the night nurses will go around the unit and do hourly safety checks on clients. Doing hourly checks at night is mandatory for every client as it ensures every client's safety. Night nurses will also (as required): change, turn, feed, and give medications to clients.



12. Weekend Pass (WP): When can I go/what time do I come back?

Once the client is approved by their healthcare team to go on a weekend pass families are allowed to go home. This could mean just being away from the hospital as out of town families may choose to stay with family/friends/hotel etc. Weekend passes are only for two nights at a time (usually weekends) to make sure they can keep up with the client's therapy schedule. Families are encouraged to return from WP at or before 8 pm (2000 hrs.) on Sunday to complete all care needs for the client before bedtime. Returning early ensures that the client is settled and rested for Monday morning. Additionally returning early minimizes disruption to other roommates who may be sleeping.

Sick Kids

- ❖ **Most rooms are private**
- ❖ **Meals are ordered off a menu and usually eaten in patient room**
- ❖ **School is not a requirement while in hospital**
- ❖ **Nurse to client ratio depends on patient acuity and medical needs – most patients have a higher acuity**
- ❖ **Doctor – client seen by doctor more frequently**

Holland Bloorview

- ❖ **Most rooms are double occupancy with a few private rooms**
- ❖ **There is a set menu with a variety of options served and eaten in the lounge**
- ❖ **All clients are expected to attend school during rehab to aid in the transition back to community.**
- ❖ **Nurse to client ratio depends on patient acuity and medical needs- most patients are more medically stable.**
- ❖ **Two part time doctors, one nurse practitioner, additional doctors on call**