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Nursing homes becoming a stop for rehab between hospital, home

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Nursing homes are giving themselves an extreme makeover in hopes of shedding their image as the place where the old and frail go to die.

"Our industry has been known as the last stop in life, but that's changing," said Mike Gavin, president of Preferred Care Partners, a Plano company that manages nursing homes in Texas and eight other states. "We're sending more and more patients home to lead full lives."

At the company's Keller Oaks Health Care Center in North Richland Hills, 81 percent of the patients who have been admitted this year have returned home, usually after a month of physical, occupational and speech therapy following a hospital stay.

Many of the patients had hip or knee replacement surgery or had suffered a stroke, said administrator Clark McLaurin.

Keller Oak's therapists work one on one with them two to three hours a day to help them regain as much of their independence as possible.

"The day a patient arrives here, we're already figuring out what he needs to accomplish to get home," McLaurin said.

Keller Oaks' emphasis on short-term rehabilitation is typical of an industry that's reinventing itself to serve a senior population that's declared it won't go gently into the good night.

Many nursing homes now call themselves "health care and rehabilitation centers."

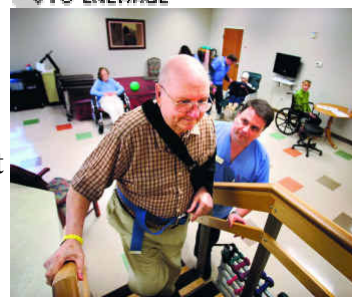
The facilities are renovating patient rooms, installing state-of-the-art therapy equipment and adding amenities such as Internet cafes to appeal to short-term residents whose No. 1 goal is to get better and get back to their daily routine at home as soon as possible.

Lou Hellmuth, 72, of Mansfield, who had suffered a bone fracture, could barely take a step when she arrived at Keller Oaks.

But after several weeks of exercising her leg under the watchful eye of a physical therapist, she could walk the length of the hallway.

"The therapists are encouraging without being too pushy," she said. "They know your limits."

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JIM MAHONEY/DMN
Earl Willis, 85, climbs a short set of steps with the aid of physical therapist assistant Eric Justiss at Keller Oaks Health Care Center in North Richland Hills.

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JIM MAHONEY/DMN

Physical therapist Kathy Belcoff (left) and rehab technician Tony Moreau assist Joy Huffman, 78, at Keller Oaks.

In the gym one recent morning, two stroke patients were going through drills to strengthen their hand muscles as therapists sat alongside them. One picked pennies out of a mound of clay while the other clipped clothespins to a laundry line.

The women paused to tease each other about which one would go home first.

"Our patients enjoy egging each other on," said director of rehabilitation Lezli Brown. "It's all in fun."

Remodeling projects

Christian Care Centers has remodeled all three of its nursing homes in Mesquite, Fort Worth and Gunter, Texas, to handle the growth of rehabilitation services, including four renovations or expansions in seven years on its main Mesquite campus.

The number of short-term patients at the Mesquite nursing home has almost tripled since 2001, and they now account for nearly a quarter of the facility's residents, said Martha Fiddes, assistant vice president of Medicare services for Christian Care Centers.

To assist stroke patients and others who have difficulty walking, the nursing home has added a newly developed therapeutic device, called Bioness, that attaches to a leg and uses mild electrical stimulation to improve the limb's mobility, Fiddes said.

At Grace Presbyterian Village in Dallas, a specially built pool accommodates aquatic therapy for patients recovering from hip or knee surgery. A hydraulic chair gently lowers them into the water and lifts them out.

"The buoyancy takes weight off their joints and allows them to exercise more easily," said Brenda Terry, vice president of rehabilitation and wellness services at Presbyterian Communities and Services.

Economics factor

As with many changes in the health care system, economics are driving nursing homes' focus on rehabilitation services. Medicare and private insurers are favoring less costly alternatives to post-surgery stays in hospitals.

"Because of its lower overhead, a nursing home can provide rehabilitative care for a fraction of the cost of a hospital," said Susan Feeney, vice president of public affairs for the American Health Care Association, an industry group.

Traditional Medicare covers up to 100 days of skilled nursing care and rehabilitation services after a hospital stay of at least three days. The program pays 100 percent for the first 20 days. A patient pays \$133.50 per day after that. The average nursing home stay for a Medicare patient in 2007 was about 27 days.

Nursing homes' rehabilitative services are particularly well-suited for patients who don't have medically complex conditions or can't tolerate the more intensive therapy typically provided at inpatient rehabilitation hospitals, Feeney said.

Medicare pays two to three times more for rehabilitative services than Medicaid does for long-term care, so nursing homes are expanding their rehabilitation units to attract the higher reimbursements and improve their finances.

"Because Medicaid doesn't pay enough to cover the cost of long-term care, the Medicare patients allow many nursing homes to survive," said George Linial, president and chief executive of the Texas Association of Homes and Services for the Aging.

On-campus

Linial says comprehensive senior-living communities are also adding or expanding their rehabilitation units so that their residents don't need to leave the campus for therapy when they're recovering from a fall or other injury.

Juliette Fowler Homes in Dallas plans to begin building a larger short-term rehabilitation unit this summer. The additional therapy space will include a mock kitchen and bathroom for patients to practice household tasks before returning to their apartments.

"Having a rehab unit is especially important for couples living on our campus," said senior vice president Mark Lenhard. "If one spouse has to undergo therapy, the other is only steps away and can still visit every day."

McLaurin, the administrator at Keller Oaks, expects the trend toward short-term rehabilitation will only accelerate at nursing homes as more of the nation's 78 million aging baby boomers consider hip and knee replacements.

There will always be a need for a place for the old and frail to spend their last days, he said. But as more boomers have elective surgery, they will have to recuperate somewhere after leaving the hospital and before resuming their daily lives.

"That's where rehab units will fit in," he said. "Nursing homes will be less a final destination and more a rest stop on the way back to independence."