Educational Programs
- Computer Evaluations and Training
- Patient and Family Education Classes
- Therapeutic Home Visits

Specialized Clinics
- Diabetes/Heart
- Psychology
- Sexuality
- Telehealth
- Urology
- Urodynamics and Procedures
- Urology
- Upper Extremity/Hand
- Wound and Plastic Surgical Evaluation
- Other VA Palo Alto Health Care Services

SCI/D Home Care
Our Home Care program's goal is to help participants live well at home and remain healthy and active. The SCI Home Care team provides assessment, treatment, and teaching in patients’ homes. Those who live within two hours and 100 miles driving distance from the hospital may be served by this program.

Network of SCI/D Spoke Clinics
Primary care and follow-up is also provided at SCI/D Spoke Clinics located at VA Medical Centers in Reno, Sacramento, Fresno, San Francisco, and Honolulu.

Education
The VA Palo Alto SCI/D Center provides specialized training to clinical fellows & residents, therapists, nurses, psychologists and social workers via formal internship and fellowship programs and by affiliation with the Stanford University School of Medicine.

Research
The Clinical Research Program is aligned with the SCI/D Center Mission to promote health, functional independence and community participation throughout the lifetime and enhance quality of life. Current projects include using a new method for vocational rehabilitation, exploring strategies to achieve and maintain an active lifestyle, long-term bone loss, functional electrical stimulation-assisted rowing for musculoskeletal health, MRI to understand motor learning after tendon transfer for improved hand function, and a novel implantable stimulator for bladder control. Funding sources include VA Rehabilitation R&D and Department of Defense.

The Future
Construction at the VA Palo Alto
New construction will provide more single rooms and renovated facilities for the SCI Center. There is a new Aquatic Center and additional parking for patients, families, and staff.

We have a Defenders Lodge for accommodation of veterans who require overnight stays while they attend outpatient appointments. We also have the Fisher House for temporary accommodation of families and/or caregivers of Active Duty members and veterans with SCI/D who are inpatients.

Acute Rehabilitation Patient Demographics

CAUSES OF SCI/D
We provide care for patients with spinal cord injury due to both traumatic and non-traumatic causes in about equal proportion. The majority of traumatic injuries are the result of falls and the most common non-traumatic cause is stenosis or spondylosis.

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VA Palo Alto Health Care System
Spinal Cord Injury/Disorder Center

ACUTE REHABILITATION and CONTINUUM OF CARE

The Spinal Cord Injury/Disorder (SCI/D) Center at the VA Palo Alto Health Care System is a CARF accredited rehabilitation center. The Center is affiliated with Stanford University School of Medicine and has been serving SCI/D since 1974. We provide rehabilitation, specialized services, and coordinate lifetime care for veterans and active duty military with injury or disease of the spinal cord in many of the western states of the USA. We promote early mobilization, maximum function, and prevention of complications. Our program addressed potential barriers to SCI/D rehabilitation by successfully managing patients with behavioral/psychological needs including adjustment and mood disorders, substance abuse, PTSD and cognitive problems. We utilize a patient-centered focus to include cultural issues related to ethnicity, sexual orientation and personal beliefs.
Age
The chart below shows the age distribution of patients seen in 2012-2014. We have served veterans and active duty personnel from age 24 to 97. Approximately half are between 50 and 69, and one third are older than 70 years.

Categories of Impairment
The following data shows percentages of patients within each SCI/D impairment category who were admitted for acute rehabilitation. The majority had incomplete injuries, classified as ASIA level D.

Acute Rehabilitation Outcomes

Discharge Living Environment
Since 2012, 94% of all our patients who completed our acute rehabilitation program have been able to go home or to a similar non-institutionalized environment. This means living in a family member’s home or in the community, rather than in a nursing home, skilled nursing facility, or long term care facility.

Our goal is that 90% or more of acute rehabilitation patients return home and for them to remain living there as long as possible.

Length of Stay
The table below shows the average time that a patient within each impairment category of SCI/D spent in acute inpatient rehabilitation. This is referred to as the average rehabilitation length of stay (RLOS).

Continuum of Care
The SCI/D Center offers both inpatient and outpatient services for a lifetime which include:

- Coordination of Specialty Care
- Coordination of Community Services
- Comprehensive Rehabilitation
- Evaluation of Equipment Needs
- Health Promotion Services
- Medication, Supplies, & Equipment
- Patient, Caregiver, and Family Education
- Psychosocial Assessments/Intervention
- Specialized Social and Recreation Opportunities
- Including Seasonal Wheelchair Games Participation

Annual Evaluations
We encourage all patients to undergo a yearly “wellness-check” or Annual Evaluation either as an outpatient in our clinic or as an inpatient for a short-stay on our ward. These include evaluations by a physician or nurse practitioner, psychology, social work, occupational therapy, physical therapy, and nursing. We address primary care issues and secondary conditions associated with the individual’s disabilities including SCI and when relevant, related TBI or amputations issues. The comprehensive integrated annual assessment treatment plan may include

- Immunizations, preventative health screening tests, access to various specialists including Urology, Neurosurgery, Plastic Surgery and specialty programs including specialized assessments of hand and limb function; sexuality, driving, diabetes, and the wound program.

Specialized Therapeutic Interventions
- Accessibility Evaluation
- Adaptive Equipment Evaluation
- Biofeedback
- Community Mobility
- Driver Training
- Electrotherapeutic Modalities
- Gait Training
- Individual and Family Counseling
- Individual and Group Exercise Programs
- Sexual Counseling
- Social Skills Training

Wound Care
The SCI/D Inpatient Service at VAPAHCS has a Pressure Ulcer Prevention Program (Team PUPP) consisting of a Certified Wound Care Nurse (CWON) certified through the Wound Ostomy Continence Nurses Society (WOCN) and several nurses who have been specially trained in the prevention, treatment, and management of pressure ulcers.

The SCI/D Outpatient Clinic has a Wound Clinic run by a Nurse Practitioner CWON to treat and manage pressure ulcers for SCI/D patients in the community.

SCI/D Peer Support Group
- Support group for people with spinal cord injuries or disorders
- Meets monthly in person and via Skype for those who cannot travel to the center
- Chaired by a veteran with SCI/D who volunteers at our center

Functional Independence
We measure the progress our patients make in each ‘motor’ functional area; some of the categories of motor functional areas are: grooming, upper and lower body dressing, transfers, ambulation (walking), etc. Progress is measured in each area using a 7 point scale: the Functional Independence Measure (FIM). By measuring these areas at admission and discharge, we determine our patients’ FIM Gains.

This figure shows the average FIM Gain made by our acute rehabilitation patients by impairment category.

Acute Rehabilitation Outcomes

Patient Satisfaction
All VA SCI/D Centers nationwide have participated in the Universal Stakeholder Participation and Experience Questionnaire (uSPEQ) since October of 2012. So far, 100% of our acute rehab patients who participated have reported high satisfaction with our chosen Overall Value Items within this survey.

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