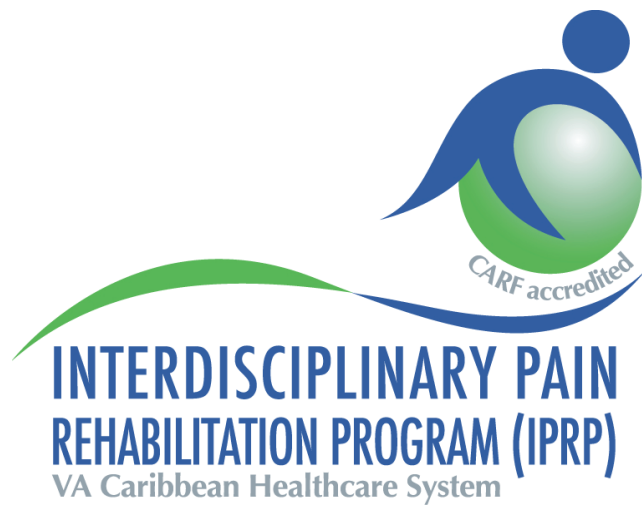


**VA Caribbean Healthcare System-VACHS
Department of Physical Medicine & Rehabilitation
Interdisciplinary Pain Rehabilitation Program (IPRP)**



Patient's Orientation Manual

Telephone: (787) 641-7582
Ext Clerks: 11887 / 11334 / 11501
Case Manager: 11343

TABLE OF CONTENTS

	Page
I. Introduction.....	4
a. Welcome to the Interdisciplinary Pain Rehabilitation Program	
b. Program overview	
Mission	
Vision	
Values	
• Integrity	
• Commitment	
• Advocacy	
• Respect	
• Excellence	
II. Program Structure and Services Provided.....	6
a. Interdisciplinary team members	
b. Services offered by providers	
III. Program Procedures.....	8
a. Instructions to attend your appointments	
b. Cancellation of appointments	
c. Absences/No-shows	
d. Sequence of interventions	
1) Initial appointment	
• When treatment is initiated	
• Patient's Orientation Manual	
• Initial Evaluation and Assessment	
• How will you know if you were accepted to IPRP	
2) Follow up appointments with team members	
a. Individual sessions	
b. Group sessions	
c. Interdisciplinary meetings	
3) Continuity of Care	
4) Discharge date procedure	
a. Reevaluation and recommendations	
b. Functional outcomes	
c. Post-treatment questionnaire (WHYMPI)	
d. Satisfaction Questionnaire (USPEQ)	
5) Follow-up after Discharge	
e. Transition to another level of care	

Discharge Against Medical Advice.....	10
Non-Voluntary Discharge	
Interruption of treatment plan.....	11
Dropouts	
Confidentiality	
Portable profile	
Access to Services	
Coordination for Patients from US Virgin Islands	
IV. Evaluation Measurements/Outcomes.....	12
a. Numerical Rating Scale	
b. Wong-Baker Faces Pain Scale	
c. Medical evaluation	
d. Psychological evaluation	
e. Functional evaluation	
f. Questionnaire (WHYMPI)	
g. USPEQ	
h. Program outcomes and performance improvement	
V. Norms and Regulations for Participation in IPRP.....	14
a. What is expected from the participant?	
b. What is expected from the interdisciplinary team members?	
c. Safety and security	
d. Health Insurance	
e. Co-Payments	
VI. Most Frequently Asked Questions.....	16
VII. Technological Resources.....	17
VIII. VACHS and Community Resources.....	19
Appendix A: Admission, Continuing Stay, Transition, Discharge, and Non-Voluntary Discharge Criteria.....	23
Appendix B: Rights and Responsibilities of VACHS Patients and Residents of Community Living Centers.....	26
a. Non-discrimination and respect	
b. Information disclosure and confidentiality	
c. Participation in treatment decisions	
d. Concerns and complaints	
e. Additional rights and responsibilities of Community Living Center residents	
f. Your rights regarding advance directives	
g. Requirements from regulatory agencies	

I. INTRODUCTION

a. Welcome to the Interdisciplinary Pain Rehabilitation Program (IPRP)

You have received this orientation manual because you will be evaluated by our Interdisciplinary Pain Rehabilitation Program (IPRP) within the VA Caribbean Healthcare System (VACHS). This evaluation will determine your participation in the program. We are pleased that you selected our program for your rehabilitation process. Our program has been recognized as having high standards of quality and is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) and The Joint Commission (TJC). Our facility is a place of training and investigation for resident physicians and allied health professions students, which will enhance your rehabilitation process and wellbeing.

The purpose of this manual is to provide orientation to you and your family/support member about the services and regulations that will define your participation in IPRP. We work together as a team that includes providers and **you and your family/support member**. We will all be involved in the development of your treatment plan, required therapeutic interventions, and in the discharge/transition process. We are committed to having you and the members of your family/support system learn all about your rehabilitation to acquire the necessary skills for successful pain management.

b. Program Overview

The Interdisciplinary Pain Rehabilitation Program (IPRP) consists of a group of healthcare professionals of diverse disciplines that merge their knowledge and expertise to offer alternatives for pain control. The team understands that chronic pain can affect the quality of life of patients, relatives, and caretakers. The program offers outpatient services directed toward treatment, orientation, counseling, and education of patients and caretakers about the most effective techniques for pain management.

The purpose of the Interdisciplinary Pain Rehabilitation Program is to reduce the perception of pain of the participant, to enhance his/her level of independence, to promote the level of physical activity, to reduce the emotional stress associated with chronic pain, and to improve the general wellbeing.

Mission:

Honor America's Veterans by providing comprehensive patient-centered-care pain rehabilitation services through an interdisciplinary approach. We are committed to providing the highest standard of care by promoting maximum rehabilitation potential and improving the quality of life of Veterans with chronic non-malignant pain.

Vision:

To be an exceptional, integrated pain rehabilitation treatment program for Veterans and lead the healthcare community in education and research.

Values:

- **Integrity:** All disciplines providing services to our population will act with high moral principles and adhere to the highest professional standards. We will maintain trust and confidence of all with whom we engage.
- **Commitment:** We will work diligently to serve Veterans and other beneficiaries. We will be driven by an earnest belief in VACHS's mission. We will fulfill our individual responsibilities and organizational responsibilities.
- **Advocacy:** We will be truly Veteran-centric by identifying, fully considering, and appropriately advancing the interests of Veterans and other beneficiaries.
- **Respect:** We will treat all those we serve and with whom we work with dignity and respect. We will show respect to earn it. We will promote an environment of inclusion and embrace diversity.
- **Excellence:** We will strive for the highest quality in rehabilitation services and continuous improvement. We will be thoughtful and decisive in leadership, accountable for our actions, willing to admit mistakes, and rigorous in correcting them.

The setting where treatment is mainly provided is in the Pain Program area, located on the first floor of the main building, San Juan VACHS, office C-125. Other treatment facilities include: therapy offices, physical therapy gym, occupational therapy clinic, recreational therapy areas, interventional rooms for procedures, living skills laboratory, education center classrooms, prosthetic laboratory, and patient library. The program operates Mondays through Fridays from 7:00 am to 4:30 pm. On average, selected disciplines provide four to six individual/group sessions during a four-to-six month treatment period.

We take honor in serving adults (18 years or older), eligible Veterans from Puerto Rico, the Virgin Islands and a minimum from the continental U.S., in addition to military active persons. The **most common condition** treated is chronic low back pain. Other conditions often treated are chronic cervical pain, peripheral neuropathy, and fibromyalgia. Most common **referral sources** are Primary Care Service, Surgery, and PM&R Services.

Our community includes patients with **special needs** based on cultural differences, age, religion, or unique characteristics given the diversity of the population served. Populations with special needs may include younger veterans from recent conflicts, non-Hispanics, and persons with religious beliefs other than Christian. Patients with traumatic brain injury, spinal cord injury, and the elderly may also present special needs. Please, communicate with your case manager, or any other team member, if you feel you have special needs that are not being addressed to your satisfaction.

The most common **activity limitations** observed are in the areas of physical, occupational, social, and recreational activities. **Participation restrictions** range from limited tolerance to walking, sitting or standing, limitations in performance of activities of daily living, and reduced participation in community activities due to social isolation or emotional stressors.

The population served displays **a variety of psychological and behavioral conditions**. Patients might present mood and adjustment disorders, disturbed behavior episodes, and problems with family/support system dynamics. The most common psychiatric disorders prevalent among patients enrolled in the clinic are major depression and anxiety disorders.

The person served should be **medically and psychiatrically stable** for admission to the IPRP (see Appendix A). When a major medical or psychiatric complication arises, or the person served becomes medically unstable, he/she will be referred to the appropriate service within the VACHS.



II. PROGRAM STRUCTURE AND SERVICES PROVIDED

a. Interdisciplinary Team Members: The interdisciplinary team is integrated by the following members:

- a. Medical Director
- b. Case Manager
- c. Physiatrists
- d. Clinical Pharmacist
- e. Clinical Psychologist
- f. Psychiatrist
- g. Physical Therapist
- h. Occupational Therapist
- i. Recreational Therapy
- j. You: The Person Served/Participant. Your integration as a team member and communication of your concerns and goals is of vital importance for the success of the treatment provided.
- k. Your Family and/or Support member. He/she participates in the education program, communicates concerns and assists in the establishment of goals, as a team member.

b. Services offered by providers:

- **Case Manager:** management of individuals who have been selected and admitted to IPRP. He/she facilitates all processes related to patient care services rendered and participates in program's patient and family educational activities.
- **Physiatrist:** medical/physical evaluation, orders studies and laboratories as required, consultations to other medical specialties.
- **Clinical Pharmacist:** reconciliation of medications, identification/prevention of drug interactions, recommendations of pain pharmacotherapy, and dose adjustments.
- **Clinical Psychologist:** individual psychotherapy on pain management and group sessions on the relationship between physical and emotional pain, sessions on biofeedback, self-hypnosis, and other evidence-based therapies.
- **Physical Therapist:** exercise groups, individual back care programs, TENS unit revision, therapeutic pool, and education on assistive devices equipment.
- **Occupational Therapist:** education on body mechanics, posture, ergonomics and vocational alternatives, energy conservation education, instrumental activities and laboratory, vocational rehabilitation and education, self-management of flare-ups, goal setting, managing sexuality, living skill training, and home evaluation.
- **Recreational Therapist:** education on leisure management and available resources for complementary therapies, outings, leisure activities like arts and crafts, therapeutic pool, and Wii games.
- **Psychiatrist:** psychiatric evaluations and educational groups on sleep hygiene.

Depending on your needs, the program makes referrals to mental health/psychiatry, drug dependency program, diagnostic radiology, driving training, neurosurgery, orthopedics, neuropsychology, sexual health clinics, social work, dietitian, weight management program (MOVE!), recommendation of specialized assistive equipment, such as special wheelchairs, and other subspecialties, including other specialty clinics within PM&R department.

Responding to your needs and preferences, the program offers **alternative or complementary medicine interventions for integrative medicine**, such as biofeedback, hypnosis, and referrals for acupuncture treatment. Also provides education and information about resources for other **complementary therapies**, such as yoga, tai chi, reiki, and water aerobics. Consultation is available for the Special Housing and Home Improvement Structural Alterations (HISA) programs. The program also provides educational and clinical experiences to PM&R residents and trainees of health related professions, and is a site for investigation and research.



III. PROGRAM PROCEDURES

a. Instructions to attend your appointments

- Register with the clerk before attending each appointment.
- Wear appropriate clothing to exercise when attending physical therapy (PT) and recreational therapy (RT) appointments.
- Take your pain medications.
- Bring the assistive devices previously provided, if requested.
- Bring the reports of previous diagnostic procedures, or psychological and/or psychiatric exams.
- Bring a companion who can provide relevant information, if necessary.
- Avoid bringing expensive accessories with you. If you decide to bring them, keep them with you at all times, as we do not have the facilities to keep them safe.

b. Cancellation of appointments: In the event that you cannot attend an appointment, you should call at least with 24 hours of anticipation to the extensions 11343 / 11887 / 11334 / 11501 and leave a message with the Case Manager or clerk, specifying the cancellation of the appointment(s). You will be assigned a new appointment, according to the availability of each professional. Always be assured that the appointment(s) cancelled are rescheduled for new ones.

c. Absences/No-shows: No-shows are defined as failure to report to a scheduled appointment. In case of two consecutive absences (no-shows) without justification and subject to notice, the treatment will be discontinued. To resume in the program, a new consultation from your primary provider will be required.

d. Sequence of interventions:

1) Initial Appointment with the Interdisciplinary team: Appointment date is notified by mail and by a telephone call. During this phone call, the case manager provides information about pain program structure, what to expect during initial visit, and possible co-payments and fees for services. You will be able to express your preferences about the participation of your family/support member.

- **Treatment is initiated** with a general orientation about the program by the case manager. You will be read the program agreement document to explore your disposition to participate in IPRP. If you agree to participate, you will sign the agreement and will receive verbal and written information about the scope of program: admission process, estimated length of stay, specific services to be offered, intensity and frequency of services, services provided for family/support members, and alternative resources. The case manager will invite you to stop by the **Program Outcomes Boards** to see the latest data on characteristics of the persons served, average number of persons served per diagnosis, program achievements and satisfaction of patients, and research projects. You will be

asked to complete the West Haven-Yale Multidimensional Pain Inventory questionnaire (WHYMPI), to help us evaluate important dimensions of your chronic pain experience.

- **You will receive a copy of the IPRP Patient's Orientation Manual:** includes information about program structure and procedures, services provided, instruments to measure outcomes, norms and regulations for participation, criteria for admission, continuing stay, transition, discharge, non-voluntary discharge, and discharge against medical advice. Also about the importance of developing and updating a personal health profile booklet, your rights and responsibilities, requirements from regulatory agencies, procedures for security of personal possessions, VACHS and community resources, and program contact information.
- Each discipline will then complete an **initial evaluation and assessment** to determine your level of impairment, activity limitations, participation restrictions, and environmental barriers.
- **How will you know if you were accepted to IPRP?** An initial interdisciplinary meeting is conducted to determine your admission to the program, pain-related problems, treatment plan, preferences, predicted outcomes, precautions, goals, and discharge plan. Pain team physician has the ultimate responsibility for the **admission decision**, based on team members' evaluations and recommendations. Appointments will be scheduled to start the treatment plan. The case manager will contact you or your family/support member by phone to communicate the scheduled appointments dates and discuss the initial interdisciplinary care plan and treatment goals. A letter with copy of this care plan will be mailed to you. The care plan is further discussed during the first follow-up appointment with the physician and time is allowed for discussion. You and your family/support member are able to suggest modifications according to specific requirements or preferences.

2) Follow-up appointments with team members:

- Individual sessions:** You and your family/support member will participate of individual sessions with providers to further assist in the therapeutic process of rehabilitation.
- Group sessions:** Providers will offer a series of group sessions to you and your family/support member, all for educational purposes and for practice. None of the group sessions are intended for the disclosure of individual matters. These can be addressed during individual sessions.
- Interdisciplinary meetings:** You and your family/support member will meet with team members about three (3) months after the initial evaluation to discuss your advance in plan of care, review treatment goals, and establish a discharge date from program. This meeting may be face-to-face or by phone, as preferred. Time is allowed to answer any questions or concerns regarding your treatment plan.

3) Your continuity of care in the program will be determined by: medical/psychiatric stability, compliance with program agreement, preferences, tolerability to treatment provided, and/or recommendations from physician and team members.

4) Discharge date procedure:

- a. You will meet with the team physician or clinical pharmacist for final **reevaluation and recommendations**.
- b. You will meet with the team physical or occupational therapist to repeat **functional outcome evaluation** tests for evaluation of achievements reached.
- c. You will be asked to complete the post-treatment questionnaire (**WHYMPI**) for comparison of results. (Page 13)
- d. You will be asked to complete a Satisfaction Questionnaire (**USPEQ**). (Page 13)

5) Follow-up after discharge:

- a. After being discharged from the program, you will receive follow-up by your primary care provider, who will be notified via the electronic record. You will receive education about the procedure for follow-up/continuity of pain medications and other treatment recommendations. You may obtain a copy of discharge progress notes, with summary of all treatment recommendations, at the Release of Information Office.
- b. **You will be contacted by phone six (6) months after discharge** for information about your average pain intensity, maintenance of functional gains, and visits to emergency room (ER) related to chronic pain and/or to Psychiatric Intervention Center (PIC). The team physician and case manager will be notified about this intervention via the electronic record. Persons served who require reevaluation are discussed during interdisciplinary meeting for recommendations.

e. Transition to another level of care:

If you require **transition to another level of care** during IPRP enrollment, based on team members recommendations or by your preferences (e.g., inpatient pain rehabilitation treatment, neurosurgery or interventional pain treatment), the decision will be discussed with you and your family/support member. The final decision will be communicated to the team members, your referral source, and your primary care provider via the electronic record.

Discharge Against Medical Advice:

If you decide to leave the program (**Discharge Against Medical Advice**), you must communicate this wish to any team member, who will then refer your request to the program staff physician. You and your family/support members will be counseled regarding risks of discontinuing treatment plan, especially if there are medical conditions that require immediate medical management. An alternate plan may be formulated to receive appropriate care. This information will be shared with the primary care provider and/or the referral source.

Non-Voluntary Discharge:

You may be discharged from Program if any of the following criteria is met:

- Non-compliance with scheduled appointments
- Non-compliance with program agreement
- You exhibit disruptive or aberrant behavior which interferes with treatment plan or poses danger to yourself or others
- You become medically, psychiatrically, or cognitively unstable

Interruption of treatment plan is defined as the person served who interrupts treatment plan for no more than four weeks due to medical, social, or family issues, and is interested in continuing treatment plan. Re-enrollment to IPRP is subject to team physician disposition.

Dropouts are defined as persons served who abandon treatment. Reasons for dropouts include:

- Non-compliance with treatment plan
- Non-compliance with program agreement
- Unstable medically or psychiatrically
- Refuses further treatment
- Patient prefers to discontinue treatment due to inability to come to appointments
- Multiple no shows/cancellations
- Medical procedures/surgery

For Complete Program Admission, Continuing Stay, Transition, Discharge, and Non-Voluntary Discharge Criteria see Appendix A.

Confidentiality:

The team commits to keeping confidentiality of each case. Nevertheless, the progress of the participant's treatment will be documented in a computerized progress note.

Portable Profile:


The case manager will provide you with a portable profile and will teach you how to use it for your benefit. The portable profile is a written tool that will help you gather all your medical information for your own reference or to be shared with other health service providers.

Access to Services:

You may have access to medical services in your community through a non-VACHS referral originated by your provider. Laboratory services are available from Monday through Saturday at San Juan Hospital, Ft. Buchanan, and satellite clinics (Ponce, Mayagüez, Ceiba, Utuado, and US Virgin Islands). You may also have access to MyHealtheVet, a website for Veterans and their families/support members to help understand and manage their health. MyHealtheVet links you with online library and trusted consumer health information, creates an access to your own personal record, provides the ability to work with your healthcare team, in addition to providing information about VACHS benefits, services, news, and events.

Coordination for Patients from the Virgin Islands:

A coordinator for patients from the U.S. Virgin Islands residents is available to provide assistance during your visit or stay. You may call ext. **31227**.



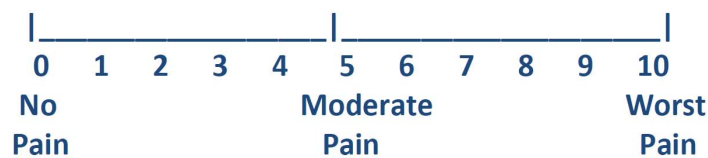
A good communication and follow-up
of given recommendations are the
key to improving your quality of life!

IV. EVALUATION MEASUREMENTS/OUTCOMES

Several tools are used in the program to measure pain and treatment outcomes:

a) Numerical Rating Scale for Pain:

The Numerical Scale for Pain measures the intensity of the pain giving it a value from 0 to 10, where 0 is the absence of pain, 5 implies moderate pain and 10 represents the most intense pain imaginable. You will identify the number that best describes the intensity of your pain.



(Published from: Pain Management-The Series: American Medical Association)

b) Wong-Baker Faces Pain Scale:

This scale is utilized with children, elderly persons or people with special needs.

WONG-BAKER FACES PAIN RATING SCALE



(Published from: Pain Management-The Series: American Medical Association)

The report of pain is individual for each participant and its report is not comparable with other participants. The report should help the professionals identify the intensity of your pain and see the progress in its management.

c) Medical Evaluation: Consists of a pertinent physical examination, diagnostic tests and/or radiological tests, as needed. Participants may be referred to other clinical departments as deemed necessary. Specialized laboratory tests may be requested.

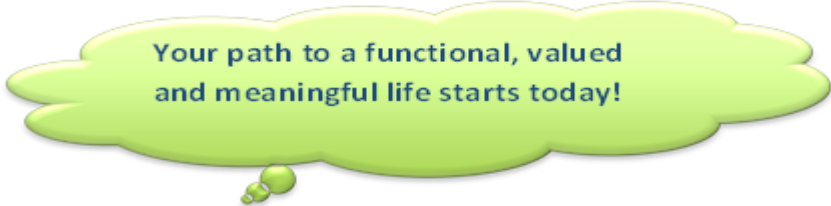
d) Psychological Evaluations: Participant may receive a *Mini Mental Status Exam (MMSE)* during the initial evaluation. Depending on patient's specific needs, he or she may be referred to our program's psychiatrist or the Department of Psychology and/or Mental Hygiene for a more extensive evaluation, if deemed necessary.

- e) **Functional Evaluation:** These are tests that measure how the daily activities are carried out by the participants, the flexibility in their movements, and tolerance to physical activity. These are performed by the physical therapist and occupational therapist. The evaluation will be performed at the beginning and at the end of the program for the purpose of evaluating the achievements reached.
- f) **Questionnaire (WHYMPI):** This questionnaire measures the progress of the patient in each area (emotional, physical activity, social, pain severity). The questionnaire is administered at the beginning and at the end of the Program treatment.
- g) **Universal Stakeholder Participation and Experience Questionnaires or USPEQ:** This questionnaire is given to each participant on the day of discharge to evaluate IPRP's services during your treatment.

h) Program Outcomes and Performance Improvement

We strive to provide you and other Veterans with the highest quality of service. Throughout your treatment, please stop by the Program Outcomes Boards to see the latest data on program achievements and satisfaction of patients.

We invite you and the members of your family/support system to provide us with information and recommendations, in order to improve our services to better serve Veterans. You may do so by filling out our patient satisfaction survey prior to your discharge. Program personnel will call you approximately six (6) months after your discharge to gather information about your pain condition, functional status, and pain-related needs. Also, you may be invited to participate in discussion focus groups to provide us with additional information to improve our services.



Your path to a functional, valued
and meaningful life starts today!

V. NORMS AND REGULATIONS FOR PARTICIPATION IN IPRP

a. What is expected from the participant?

- Punctuality to scheduled individual, group, and interdisciplinary appointments.
- Disposition to express personal information to the interdisciplinary team, in relation to the emotional and physical events experienced.
- Responsibility in the rehabilitation process by following the recommendations of the team.
- Responsibility to communicate the clerk (secretary) about any cancellation of appointments, and to be assured to obtain follow up appointments.
- To fully complete the treatment program.
- To comply with the regulations and expectations of the Program, as described in the Agreement document.

b. What is expected from the interdisciplinary team members?

- Apply their knowledge and expertise in the development of the treatment plan, integrating treatment alternatives, according to the specific needs of each participant.
- To share information that leads toward a better management of the condition.
- To discuss with participants his/her progress in treatment plan.
- To treat participants with dignity and respect.

c. Safety and security:

- **Emergency Drills:** The VACHS regularly performs emergency drills of fire, bomb threat, earthquake and others. Throughout your stay, you may be required to participate in an emergency drill. During this exercise or in case of a real emergency, please, follow the instructions of the personnel. Evacuation routes are posted throughout the building and by the elevators. The elevators will not function during a fire.
- **Injury Prevention:** We are committed to your safety throughout your stay with us. Please, follow all recommendations provided by your team of clinicians regarding fall prevention.
- **Security of Personal Possessions:** Patients are responsible of safeguarding personal items. The facility is not responsible for losses due to improper storage or misplacement. We do not provide for storage of personal items in the IPRP treatment areas.

NOTE: Leave valuables at home. These include jewelry, nice clothes, money and items of sentimental value.

d. Health Insurance

The law allows the VACHS to bill third party health insurance carriers for treatment provided to you for non-service connected conditions. That means that the VACHS will be able to bill your insurance company for episodes of care that meet with appropriate standards. The hospital is able to keep the funds collected from the insurance companies to better serve your needs as patient. You will not be responsible for any deductible not paid by your health insurance.

e. Co-payments

Veterans receiving care in VACHS might be responsible for a co-payment that will depend on a priority group. Your priority group is determined by whether or not you are a service-connected (SC) or a non-service connected (NSC) veteran. It might also depend on your income. Most non-service connected and non-compensable 0% service connected veterans are required to complete a Means Test. You must provide information on your family and your personal annual income to determine whether you are below or above the annual adjusted income established. This is the information used to determine your priority group.

In summary charges are applicable to:

- Veterans treated for medical conditions not related to military service (non-service connected/NSC), whose annual income exceeds the established by law (Priority 7a, 7c, 7e, 7g and or priority 8a, 8c).
- Service Connected Non-compensable veterans (SC 0%) whose annual family income exceeds the established threshold by law and receive medical treatment for condition not connected with military service (NSC).

The Case Manager will provide you with information about your priority group during the initial telephone contact orientation and will send you a letter with information about your category for co-payment.

For additional information regarding co-payments or to clarify any doubt, you can visit the Means Test Office located on the first floor of the main building or you may access the following website for current co-pay rates: http://www.VACHS.gov/healthbenefits/cost/copay_rates.asp.

You may also contact the office by phone: (787) 641-7582, extensions: 31118 (assistance), 31122 (co-payments information).

For Complete Rights and Responsibilities of VACHS Patients and Residents of Community Living Centers see Appendix B.



VI. MOST FREQUENTLY ASKED QUESTIONS



1) Is the Interdisciplinary Pain Rehabilitation Program available in other VA clinics of Puerto Rico?

The interdisciplinary services provided at the Interdisciplinary Pain Rehabilitation Program are offered only at the Caribbean Healthcare System in San Juan, Puerto Rico.

2) What is the treatment duration of the program?

Duration is variable from patient to patient. However, treatment program lasts between four (4) to six (6) months.

3) Are modalities of treatment such as hot and cold applications included within the program?

If the patient has received previously physical therapy for his/her pain condition, the interventions of physical therapy in the management of chronic pain are directed toward the education of the participant about the use of modalities, exercises and equipment at home. The emphasis is in managing day-to-day pain with these tools.

4) Is it necessary to participate of the interventions of all disciplines?

The recommendation of the program is that patients participate of all disciplines, but we respect the participant's preferences.

5) Who provides continuity of treatment once the participant is discharged from the program?

Once discharged from the program, the participant continues his/her follow-up with his/her primary care provider.

6) How many times per week must the participant attend the program?

IPRP team will try to group all appointments the same day, or according to person served preferences to maximize visits to the hospital. Frequency of appointments to IPRP can vary from one to three per week, depending on the needs of the person served.

7) What type of procedures offers IPRP?

We offer epidural, sympathetic and facet blockades, intra-articular injections, viscosupplementation therapy, and trigger-point injections, based on individual needs.

8) What alternatives or resources of Alternative or Complementary Medicine offers IPRP?

We provide biofeedback, hypnosis, and referrals for acupuncture treatment. We also provide education and information about resources for other complementary therapies for integrative medicine, such as yoga, tai chi, reiki, and water aerobics.

VII. TECHNOLOGICAL RESOURCES

A. Mobile Applications

Pain Management



**WebMD
Pain Coach**



**Virtual Hope
Box**



**Moving
Forward**



**Tactical
Breather**



MyCalmBeat

Mental Health



PTSD Coach



LifeArmor



CPT Coach

Insomnia/Sleep



CBT- Coach



**Mindfulness
Coach**



**Mindfulness
Meditation**



ACT Coach

Veterans Administration Apps*



MOVE! Coach



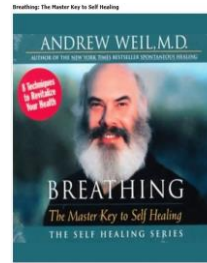
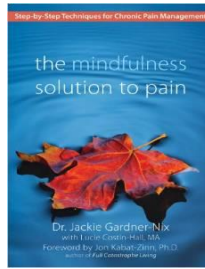
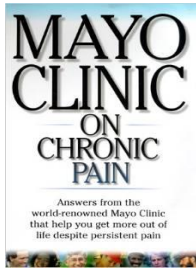
311VET



**Summary of
Care**

*Visit VA App Store at <https://mobile.va.gov/appstore> for more VA apps

B. Recommended Audiobooks and Books



You may also do a Google or Amazon.com search using keywords:
chronic pain, mindfulness, breathing, relaxation, wellbeing

C. Resources for Medication Information and Utilization

1. Patients' Library: Patient's Education Resources Center (PERC)
Second floor in old VACHS Caribbean Healthcare System building
Tel: (787) 641-7582 ext. 12165
2. In Internet: Medline plus:
Spanish: <http://www.nlm.nih.gov/medlineplus/spanish/medlineplus.html>
English: <http://www.nlm.nih.gov/medlineplus/>
3. Applications free of charge:



**Drugs.com
Medication
Guide**



**Pill Reminder
By Drugs.com**



**iPharmacy
Drug Guide**



**MedCoach
Medication
Reminder**



MediSafe

D. Chronic Pain Websites

You can obtain educational material about all aspects of pain prevention and management on the websites listed below. You can also visit the patient's library to obtain further information.

The American Chronic Pain Association: <http://www.theacpa.org/>

American Pain Foundation: <http://www.painfoundation.org/>

The National Pain Foundation: <http://www.thenationalpainfoundation.org/>

National Fibromyalgia and Chronic Pain Association: <http://www.fmcpaware.org/>

VIII. VACHS AND COMMUNITY RESOURCES

This is a general list of resources available in the Veterans Hospital and the community. For other resources refer to the Case Manager or the Social Worker from your primary care provider.

Emergency

9-1-1

Emergency Hotline

1-800-981-8333

Department of Veterans Affairs

San Juan Regional Office

División de Servicios al Veterano

50 Carr. 165

Guaynabo, P.R.

1-800-827-1000

VACHS Web Home Page

<http://www.VACHS.gov/>

Vet Center San Juan

Mindfulness Yoga Classes

Contact: Isabel Ríos

(787) 749-4409

MORIVI group for Fibromyalgia

San Juan VACHS Psychology Service

(787) 641-7582

Contacts: Yari Colón, PhD Ext. 32519

Nicole Anders, PsyD Ext. 32534

Fibromyalgia-GAFI-Grupo de Apoyo

Guayama, PR

(787) 864-5721

<http://fb.com/fibromialgiagrupodeapoyo>

San Juan YMCA

Edad Dorada: Aquatic exercises for adults 55 years and older

<http://www.ymcasanjuan.org/>

Veteran's Affairs 'Move' Exercise and Weight Control Program (English/Spanish)

<http://www.move.VACHS.gov/>

Veterans Online Application (VONAPP)

<http://VACHSbenefits.vba.VACHS.gov/vonapp/default.asp>

VACHS MyHealtheVet

MyHealtheVet is the Internet gateway to veteran's health benefits and services.

<http://www.myhealth.VACHS.gov/>

Red Cross "Centro Médico de Río Piedras"

San Juan, PR 00935

TEL. (787) 758-8150- General

Blood Center: (787) 759-8100

<http://www.redcross.org>

Social Security

1-800-772-1213 (1-800-SSA-1213)

www.socialsecurity.gov

Advocacy Groups:

American with Disabilities Act

(787) 725-2333

American Legion – (787) 720-4696, (787) 752-7122

Blinded Veterans of America- (BVACHS)

(787) 852-6241

Disabled American Veterans (DAV)

(787) 772-7386, (787) 772-7387, (787) 772-7388, (787) 599-1425

www.dav.org

Ombudsman for Elderly Affairs

(787) 721-8225, (787) 725-1515 - San Juan

(787) 977-0923, (787) 977-0925 - Bayamón

Ombudsman for Patient Affairs

1-800- 981-0031

Ombudsman for Persons with Disabilities

1-800-981-4125- Central Office

1-800-981-1211- Ponce Regional Office

1-800-980-1909- Western Regional Office

1-800-984-1992- Eastern Regional Office

1-800-208-1747- Northern Regional

Paralyzed Veterans of America (PVACHS)

(787) 772-7384, (787) 772-7385

Purple Heart- (787) 772-7372

Silent Warriors, Inc. (787) 396-8218

Veteran of Foreign Affairs- (787) 772-7328

www.vfw.org

Veteran Ombudsman Office

Metro: (787) 758-5760 ext. 241

Vietnam Veterans of America

(787) 231-7550

Women Veterans of America- (787) 287-7630

Associations:

American Lung Association

PO Box 195247

San Juan, PR, 00919-5247

Dirección Física: Ave. Domenech #395 Hato Rey, PR 00919

TEL. (787) 765-5664

<http://www.lungusa.org>

American Diabetes Association (Puerto Rico)

PO Box 19842

San Juan, PR 00919-0842

TEL. (787) 281-0617

<http://www.diabetes.org>

Asociación Puertorriqueña de Ciegos, Inc.

PO Box 29852

San Juan, PR 00929-0852

TEL. (787) 276-0537

Gerontology Society of Puerto Rico

PO Box 363472

San Juan, PR 00936-3472

TEL. (787) 410-8831

United Way

PO Box 191914

San Juan, PR 00919-1914

TEL. (787) 728-8500

Legal Services:

Oficina del Procurador del Veterano

Ave. Ponce de León, Hato Rey PR
(787) 758-5760, (787) 758-5788

Elderly law “Programa Para el Sustento de Personas de Edad AVACHSnzada” PROSPERA

(787) 772-9337, Desk: (787) 767-1500 ext. 2998, 1-877-660-6060
Toll Free: 1-800-981-8666

Tele Abogados: Servicios Legales de Puerto Rico

1-800-981-9160
1-800-981-3432

Tele-Envejecientes

(787) 728-2323, 1-800-981-9160;
1-800-981-3432

Tele-Tribunales

(787) 759-1888: metropolitan area
Isla– 1-877-759-1888
www.Tribunalpr.org

Transportation:

Programa “Llame y Viaje”: Only for the metropolitan area

(787) 294-0500 ext. 599, (787) 758-8122, Toll free 1(800) 981-0097,
(787) 763-2473 (TTY)

Vet. Centers

(787) 749-4314, (787) 749-4409- San Juan
(787) 879-4150, (787) 879-4581- Arecibo
(787) 841-3260- Ponce

Vocational Rehabilitation

Veterans Administration
(787) 772-7341, State level
(787) 729-0160, (787) 758-1049

APPENDIX A

Interdisciplinary Pain Rehabilitation Program (IPRP) Admission, Continuing Stay, Transition, Discharge, and Non-Voluntary Discharge Criteria

Admission Criteria

Persons served who presents at least one of the following will be admitted to the program after a comprehensive interdisciplinary evaluation:

1. Pain that persists beyond the time expected for the healing process (e.g., six months after back surgery).
2. Nociceptive pain that persists for more than six months (e.g., somatic, visceral, myofascial or joint pain).
3. Neuropathic pain for more than six months even after medication regimen changes and dose optimizations, (e.g., allodynia, needles and pins, burning, stinging, electrical shock-like or numbness).
4. Unsuccessful management of chronic non-malignant pain after consults to any the following services:
 - PM&R
 - Neurology
 - Rheumatology
 - Psychology/psychiatry
 - Neurosurgery
5. Unsuccessful management of chronic non-malignant pain after treatment with any of the following:
 - Pharmacologic treatment
 - Physical therapy
 - Occupational therapy
 - Interventional Pain procedures
 - Surgery considerations

In addition to the above person served should:

1. Be medically stable. This includes COPD, unstable angina, congestive heart failure, or other progressive chronically debilitating illness.
2. Have a recent CBC, liver function test, chem. 7, serum creatinine, stool for occult blood and drug screening tests (for those patients with previous history of substance abuse).
3. Be psychiatrically stable for a period of at least three months.
4. Not actively abusing alcohol and/or using illicit drugs.

The following screening/exams should have been done prior to consultation if clinically indicated:

1. Spine imaging studies
2. X-Rays Anteroposterior and lateral for cervical/lumbosacral or other affected areas.
3. Bone scan or CT for spine fracture and cancer.
4. Lumbosacral MRI or CT myelogram
5. Restratisation studies for cardiac patient (i.e., stress test)

Continuing Stay Criteria

Person served will continue participating from all IPRP disciplines interventions if the following criteria are met:

1. Person served continues medically and psychiatrically stable.
2. Person served has regular attendance/participation to scheduled appointments and therapeutic activities, and complies with program agreement.
3. Person served is willing to continue participating in the Program.
4. Person served is able to tolerate intensity of Program interventions and plan of care.
5. Person served evidences improvement in chronic pain condition, and potential for further improvement is documented.

Transition Criteria

The person served will be transferred to another level of care if any of the following criteria is met:

1. Person served who has unexpected change in medical condition and requires evaluation and additional work-up by his primary care provider or any sub-specialist.
2. Person served who has achieved maximum benefits from the outpatient pain rehabilitation treatment and requires other levels of care, for instance: inpatient pain rehabilitation treatment, neurosurgery or interventional pain treatment.
3. Person served who becomes medically/psychiatrically unstable and requires additional medical and diagnostic interventions will be transitioned to an acute medicine/psychiatry ward.
4. Person served who requests other level of care and treatment is endorsed/recommended by the Program.

Discharge Criteria

The following criteria will be applied in accordance with the outcomes of the evaluation. The person served will be discharged if any of the following criteria is met:

1. Person served has achieved the goals of the care plan.
2. Person served has achieved maximum benefits of the rehabilitation treatment.
3. Person served is non-compliant with treatment.
4. Person served refuses further treatment.
5. Person served becomes medically and/or psychiatrically unstable.
6. Person served does not comply with the Program agreement.
7. Person served is not able to come to appointments. Example: traveling, hospitalization, surgery.

Non-Voluntary Discharge Criteria

The person served will be non-voluntarily discharged from Program if any of the following criteria is met:

1. Person served is non-compliant with scheduled appointments.
2. Person served is non-compliant with Program agreement.
3. Person served exhibits disruptive or aberrant behavior, which interferes with treatment plan or poses danger to self or others.
4. Person served becomes medically, psychiatrically, or cognitively unstable.

APPENDIX B

YOUR RIGHTS AND RESPONSIBILITIES



Rights and Responsibilities of VACHS Patients and Residents of Community Living Centers

The Veterans Health Administration (VHA) is pleased you have selected us to provide your health care. We will provide you with personalized, patient-driven, compassionate, state-of-the-art care. Our goal is to make your experience as positive and pleasant as we can. As part of our service to you, to other Veterans and to the Nation, we are committed to improving health care quality. We also train future health care professionals, conduct research, and support our country in times of national emergency. In all of these activities, our employees will respect and support your rights as a patient or resident of a community living center (CLC). Your basic rights and responsibilities are outlined in this document. You will receive this information in your preferred language. Please talk with the VACHS treatment team members who are providing your care or to a patient advocate if you have any questions or would like more information about your rights and responsibilities.

1. Nondiscrimination and Respect

- You will be treated with dignity, compassion, and respect as an individual. Consistent with Federal law, VACHS policy, and accreditation standards of The Joint Commission, you will not be subject to discrimination for any reason, including for reasons of age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, or gender identity or expression.
- You will receive care in a safe environment free from excess noise, and with sufficient light to ensure comfort and safety.
- You have a right to have access to the outdoors.

- We will seek to honor your cultural and personal values, beliefs, and preferences. We ask that you identify any cultural, religious, or spiritual beliefs or practices that influence your care.
- You or someone you choose has the right to keep and spend your money. You have the right to receive an accounting of any funds that VACHS is holding for you.
- We will respect your personal freedoms in the care and treatment we provide you. This includes trying to accommodate your normal sleep and wake cycles, food likes and dislikes, and other personal preferences.
- In the Community Living Center, you have the right to be free from chemical and physical restraints. In the inpatient acute care setting, and only in rare cases, the use of chemical and physical restraints may be used if all other efforts to keep you or others free from harm have not worked.
- In the Community Living Center, you may keep personal items and are expected to wear your own clothes. As an inpatient, you may wear your own clothes depending on your medical condition.
- You have the right to keep and use personal items as long as they are safe and legal.
- You have the right to social interaction and regular exercise. You will have the opportunity for religious worship and spiritual support. You may decide whether to participate in these activities. You may decide whether or not to perform tasks in or for the Medical Center or in the Community Living Center.
- You have the right to communicate freely and privately. You will have access to public telephones and VACHS will assist you in sending and receiving mail. You may participate in civic rights, such as voting and free speech.
- When a loved one is involved in support and care of a VACHS patient or CLC resident, VACHS considers a patient or CLC resident's family to include anyone related to the patient or CLC resident in any way (for example, biologically or legally) and anyone whom the patient or CLC resident considers to be family. If you are an inpatient, any persons you choose can be with you to support you during your stay. Medical staff may restrict visitors for inpatients if medical or safety concerns require it. You will be told promptly about any visitor restriction and the reason for it.
- In order to provide a safe treatment environment for all patients or CLC residents and staff, you and your visitors are expected to avoid unsafe acts that place others at risk for accidents or injuries. Please immediately report any condition you believe to be unsafe.

2. Information Disclosure and Confidentiality

- Your privacy will be protected.
- You will be given information about the health benefits you can receive. The information will be provided in a way you can understand.

- You will receive information about the costs of your care (for example, co-payments), if any, before you are treated. You are responsible for paying your portion of any costs associated with your care.
- Your health record will be kept confidential. Information about you will not be released without your authorization unless permitted by law (an example of this is State public health reporting). You have the right to have access to or request a copy of your own health records.
- Please respect the privacy of other patients and CLC residents and do not reveal their health information that you may overhear or otherwise become aware of.

3. Participation in Treatment Decisions

- You have a right to express your preferences concerning future medical care in an advance directive, including designating a health care agent to make health care decisions on your behalf when you can no longer do so.
- You, and any person(s) you choose, will be involved in all decisions about your care. You will be given information you can understand about the benefits and risks of treatment in your preferred language. You will be given other options. You can agree to or refuse any treatment. You will be told what is likely to happen to you if you refuse a treatment. Refusing a treatment will not affect your rights to future care but you take responsibility for the impact this decision may have on your health.
- Tell your provider about your current condition, medicines (including over-the-counter and herbals), and medical history. Also, share any other information that affects your health. You should ask questions when you do not understand something about your care. This will help us provide you the best care possible.
- You will be given, in writing, the name and title of the provider in charge of your care. You have the right to be involved in choosing your provider. You also have the right to know the names and titles of those who provide you care. This includes students and other trainees. Providers will properly introduce themselves when they take part in your care.
- You will be educated about your role and responsibilities as a patient or CLC resident. This includes your participation in decision-making and care at the end of life.
- If you believe you cannot follow the treatment plan, you have a responsibility to tell your provider or treatment team.
- You will be informed of all outcomes of your care, including any possible injuries associated with your care. You will be informed about how to request compensation and other remedies for any serious injuries.
- You have the right to have your pain assessed and to receive treatment to manage your pain. You and your treatment team will develop a pain management plan together. You are expected to help the treatment team by telling them if you have pain and if the treatment is working.

- As an inpatient or CLC resident, you will be provided any transportation necessary for your treatment plan.
- You have the right to choose whether or not you will participate in any research project. Any research will be clearly identified. Potential risks of the research will be identified and there will be no pressure on you to participate.
- You will be included in resolving any ethical issues about your care. If you have ethical issues or concerns, you may speak with the Medical Center's Ethics Consultation Service for help.

4. Concerns or Complaints

- You are encouraged and expected to seek help from your treatment team or a patient advocate if you have problems or complaints. Any privacy complaints will be addressed by the facility Privacy Officer. You will be given understandable information about the complaint process in your preferred language. You may complain verbally or in writing, without fear of retaliation.
- If you believe that you or your family member has been neglected, abused or exploited by VACHS staff, please report this promptly to the treatment team or patient advocate. You will receive help immediately.
- If you believe the organization has failed to address or satisfy your concerns about health care quality and safety, you may contact the Joint Commission's Office of Quality Monitoring at 1-800-994-6610. If you believe that the organization has failed to address your concerns about suspected criminal activities, fraud, waste, abuse, or mismanagement, you may contact the VACHS Office of the Inspector General at 1-800-488-8244 or email VACHSoighotline@VACHS.gov.

COMPLAINTS

If you have problems or complaints about our services, we encourage you to seek help from your treatment team. If this does not meet your needs, you may contact the VACHS patient representative. You may complain verbally or in writing, without fear of retaliation.

Following are the steps and timeframes for management of complaints. The Case Manager or Social Worker can provide you with additional information regarding this process, upon request.

Step	Timeframe for resolution or referral to appropriate level
1. Person served shares concern with an employee, member of his/her treatment team.	Immediately
2. If the concern is not addressed to a level of satisfaction, person served may request to contact a supervisor of the area.	Immediately after referral
3. If concern is still not addressed to a level of satisfaction, person served may request a meeting with the service chief.	Within 5 days
4. If person served understands the problem remains unresolved he/she may contact the Patient Representative Office. (Note: persons served can seek resolution to their issues directly at with the patient representative).	Within 7 days
5. Appeals: Persons served have the right to have access to a fair and impartial review of disputes regarding clinical determinations, health benefits or services that are not resolved at the facility level. This is done through the VISN appeals process. Appeals will be done according to VACHSNHA directive and regulations.	30 — 45 days

COMPLIMENTS

If you like to formally praise the services you received, you may submit a compliment:

- In writing to the staff member(s) involved
- In writing to the ACOS for Rehabilitation
- Verbally or in writing at the Patient's Representative office

YOUR RIGHTS REGARDING ADVANCE DIRECTIVES

Advance directives are legal forms that state your preferences about future health care. If you become too ill to make decisions about your care, an advance directive can help your doctors and family members understand what you want. It is up to you to decide if you want an advance directive. Your decision must not affect your access to health care or other VHA services.

There are two types of advance directives. In the Department of Veterans Affairs (VACHS), the two are in one form. You may complete neither, one, or both of the following:

- **Durable power of attorney for health care**
- **Living will**

Your rights:

1. You have the **right to accept or refuse any medical treatment.**
2. You have the **right to complete a durable power of attorney for health care.**
3. You have the **right to complete a living will.**

Your responsibilities:

1. If you have an advance directive, it's important to give the Veterans Health Administration (VHA) a copy for your health record.
2. If you require further information about advance directives please contact the Case Manager or direct to your primary care team Social Worker to schedule an appointment to help filling out the standard forms that you will need to state your decision.

REQUIREMENTS FROM REGULATORY AGENCIES

For specific information concerning program/services contact our Quality Management Section at extension 33941.

Our programs and services are accredited by:

- The Joint Commission (TJC)
- The Commission for Accreditation of Rehabilitation Facilities (CARF).

For any information related to JCAHO you can write to them through their website at:

<http://www.jointcomission.org>.

Or call: 1-877-223-6866

For information on the most recent CARF Accreditation Report or accreditation requirements you may access their Website at:

<http://www.carf.org>

Or call: 1-888-281-6531

Prepared by: Interdisciplinary Pain Rehabilitation Program (IPRP)
Revised June 2015

