



Community Rehabilitation Planning Meeting – FAQs

1. What is a Community Rehabilitation Planning (CoRP) Meeting?

A CoRP Meeting is a face-to-face meeting between hospital and community therapists, usually OTs.

2. Can a CoRP Meeting take place by phone?

While a face-to-face meeting is preferred, the time required for rural-based community therapists to travel to a central hospital location makes this approach inefficient so less likely to occur. As well, there may be situations where notification of discharge occurs within a very short time frame limiting options for a face-to-face meeting. For these reasons, a CoRP meeting can occur by phone provided the patient and/or family are included. This would be considered a case conference.

3. Who should be considered for a CoRP meeting?

CoRP meetings should be considered for all patients being discharged to a community setting from hospital/rehabilitation who have experienced a stroke. Typically, meetings would occur when patients are being transitioned within the same geographical area as the Community Provider.

4. How is a referral made for a CoRP meeting?

The referring hospital/rehabilitation unit completes a South East Local Health Integration Network (South East LHIN) Home and Community Care referral requesting a CoRP meeting. The Care Coordinator (CC) triages the referral and assigns a CC to the case. The CC assesses for eligibility and then authorizes the CoRP meeting giving the Inpatient OT's contact information to the Community OT via a service offer. The Community OT will be given 4-5 days to schedule the CoRP meeting **when possible**.

5. Who coordinates the CoRP meeting?

The Community OT contacts the Inpatient OT and coordinates the CoRP meeting prior to discharge.

6. When does the CoRP meeting occur?

Ideally the CoRP meeting occurs up to 72 hours prior to the patient's discharge. While, it is preferable to have the CoRP meeting as close to the discharge date as possible to ensure that the information shared is current, it may happen up to 2 weeks prior to the discharge.

7. How quickly can a CoRP meeting be set up?

The CoRP meeting can be arranged with 4-5 days' notice.

8. Who is involved in a CoRP meeting?

The CoRP meeting occurs between patient, family (with patient's consent), Inpatient OT and Community OT scheduled to work with the patient. The inpatient team will need to ensure an appropriate meeting space and the availability of the patient/family for the CoRP meeting. Other team members may attend as appropriate.

9. What happens if the patient is transitioning to a LTCH?

Patients who are transitioning to a LTC Home would not have a CoRP meeting arranged in hospital. With a referral to the *Community Stroke Rehabilitation Program*, the Community OT will arrange a care plan meeting with the DOC/Designate. The planning meeting will include the LTC Home PT, DOC or designate, patient and family when possible and other care providers as deemed appropriate.