

# THE OHIO STATE UNIVERSITY MEDICAL CENTER

## POSITION DESCRIPTION

**JOB TITLE: Rehabilitation Team Member**

**Working Title: Rehab Engineer**

<b>SALARY RANGE:</b>		<b>TITLE CODE:</b>	
<b>SHIFT:</b>	<b>Variable</b>	<b>STATUS: (Exempt/Non-Exempt)</b>	
<b>DEPARTMENT:</b>	<b>Outpatient Rehabilitation Services</b>	<b>% FTE:</b>	<b>***</b>
<b>COST CENTER:</b>	<b>H10000 - 94904</b>	<b>OSUMC Human Resource Approval:</b>	
<b>CATEGORY:</b>	<b>SA&amp;P</b>	<b>A&amp;P</b>	<b>P&amp;T</b>
	<b>OTHER:</b>		<b>CCS</b>
		<b>Signature</b>	<b>Date</b>

### SIGNATURES:

<b>Employee Name:</b>	
<b>Employee Signature:</b>	<b>Date:</b>
<b>Supervisor/Title:</b>	<b>Theresa Berner</b>
<b>Supervisor Signature:</b>	<b>Date:</b>
<b>Director/Title:</b>	<b>Susan M. Fetherolf, MBA, OTR/L, BCPR, Director Outpatient Rehabilitation</b>

### Scope of Position

The Rehabilitation Engineer will work within a team oriented multi-disciplinary rehabilitation program. These services are offered via outpatient to patients who have disorders and conditions associated primarily with neurologic and orthopedic injuries. The Rehabilitation Engineer reports to the rehabilitation clinic manager as part of the Ambulatory Rehabilitation Services structure.

### Position Summary

Provides comprehensive interdisciplinary assistive technology services as part of a multi-disciplinary team with emphasis on human characteristics, functional task/activity demands and requirements, commercially available technologies, and contextual environments. Services include the application of assistive technology devices, practices, and strategies within a service delivery model that includes assessment, recommendation, implementation, training, and follow-up services. Services include integration of device(s) across multiple environment and may involve product design, fabrication, customization, and installation of unique and individualized technologies. Services may relate to any/all of the following: computers, augmentative alternative communication (AAC), seating and positioning, mobility (manual and power), adaptive devices for daily living, recreation, and driver rehabilitation in the magnitude of environmental settings (work, home, school).

Provides performance measurement and analysis of various tasks and anthropometric measures via the application of rehabilitation technology in order to facilitate the service delivery process within the realm of evidence based practice.

The Rehabilitation Engineer is first a part of a group effort to provide care within a continuous performance improvement environment, and secondly a distinct professional who provides specific contributions to the team approach. Team members assess patients and establish together plans of care; provide a wide variety of treatment techniques; provide education and support to families; and facilitate continuing care planning. Team members evaluate quality of services and participate in outcomes management activities.

### **Duties and Responsibilities:**

Rehabilitation Engineer provides services according to: the laws of the State of Ohio governing licensed professionals; standards of practice, scope of practice, clinical guidelines, and codes of ethics published by respective national professional associations; and OSUMC policies and procedures governing the work of licensed clinical professionals. All staff must meet standards established by the Ambulatory Rehabilitation Department as part of the OSUMC personalized performance plan (P3). Core competencies are determined based on the departments Key Result Areas. These Key Result Areas are integral to successful clinical practice. Teamwork, Customer Service, Resource Management, and Job Knowledge / Skills and should be interwoven throughout the employee's position description. Core competencies include Workplace of Choice, Quality, Productivity and Efficiency, Financial Performance, Service and Reputation and Innovation and Strategic Growth. These core areas are integral to successful clinical practice.

### **60 % of the time – Clinical Practice**

*Clinical Practice* consists of patient/family orientation, evaluations, assessments, observations, treatment procedures, training, interventions, educational sessions, and counseling conducted as part of a team approach or as a single practitioner. The documentation of patient care and planned progression are integral components of clinical practice.

- Knowledge of assistive technology
- Knowledge of rehabilitation technology
- Knowledge of ergonomics and universal design
- Knowledge of current standards of practice within the field of assistive technology
- Knowledge of current funding mechanisms
- Knowledge of the assistive technology service delivery process (assessment, implementation, training, follow-up & follow-along)
- Knowledge of evidence based practice within the field of assistive technology
- Knowledge of current models within the disability community (social, rehabilitation, biopsychosocial)
- Knowledge of assistive technology outcome measures
- The ability to perform assistive technology assessments, implementations, follow-up and follow-along
- The ability to critically analyze, synthesize and evaluate the effectiveness of assistive technology solutions
- The ability to work in an multi-disciplinary team
- Excellent computer skills, ideally in conjunction with computer access
- Excellent communication and interpersonal skills
- Clinical, Academic and Research skill sets
- Technology skills
- Instrumentation skills

### **Competencies:**

- Use creativity in developing, promoting, and enhancing assistive technology and rehabilitation engineering services
- Employ practices consistent with the International Classification of Functioning, Disability, and Health (ICF) developed by the World Health Organization (WHO) in all aspects of education, service delivery and research

- Understand health care delivery systems to enhance patient/client access to quality care and to ensure reimbursement
- Understand other service delivery models (e.g. educational, vocational) as they relate to the patient's/client's quality of life and access to assistive technology services
- Manage an organized plan of professional development
- Assessment, goal setting and implementation
- Critically review and understand the literature as it relates to assistive technology
- Synthesize data from the assistive technology assessment and analyze data to make appropriate decisions and recommendations
- Incorporate evidence-based practice into the service delivery process, including quantitative tools, instruments and technologies.
- Implement current outcome measures as it relates to the service delivery process

### **25% of the time – Team Activities**

*Team Activities* are those that support care of the persons served, including scheduling, daily planning care conferences, alignment meetings/family conferences, internal continuing education sessions, team and divisional business meetings. Team members also participate in clinical quality and outcomes management activities. In addition, team members may have opportunities to participate in medical center committee activities and outreach opportunities.

### **15 % Professional Discipline Activities**

It is important that in an interdisciplinary environment those rehabilitation team members maintain formal links with members of their own profession, having opportunities to pursue discipline-specific continuing education, teach students and other professional about aspects of practice, participate in research activities, and interact with members of their own profession within and outside the medical center.

All team members will establish specific goals and activities which related to their professional discipline, including in-service education and periodic discipline-specific professional business meetings' conferences both within and outside the medical center. Some members of the rehabilitation team may have indirect, but specific ties to a central department of the medical center, if applicable.

### **Organizational Expectations**

Practices within the Medical Center's policies and procedures. Adheres to the Intensive Caring Value statements as demonstrated through positive patient/guest relations, positive and effective interactions with staff, and formulating and meeting developmental goals.

### **Minimum Qualifications**

**Initial:** Bachelor or Master's Degree (MS preferred) in engineering field (e.g. biomedical engineering, electrical engineering, industrial engineering, general engineering, mechanical engineering, rehabilitation engineering). Clinical Internship in assistive technology or rehabilitation engineering. Certificate in assistive technology, rehabilitation technology, or rehabilitation engineering (preferred).

### **Experience Level**

- 2 years of experience providing assistive technology services
- Evidence of attendance of continuing education programs within the field of assistive technology
- Evidence of ability to function as a member of a multi-disciplinary team (communication skills are critical)

## Credentials

- Assistive Technology Professional (ATP) certification or ATP eligible from the Rehabilitation Engineering and Assistive Technology Society of North America (RESNA)

**Ongoing:** Maintains professional licensure and/or certification; demonstrates commitment to continuing education; meets mandatory education and health requirements; demonstrates competence in technical, interpersonal, and cognitive skills required to meet essential job functions. Maintain current American Heart Association BLS certification.

## Patient Population Served

Knowledge of growth and development and an understanding of the range of treatments necessary to meet the age specific needs of the patient population served (Check those that apply):

Not Applicable: Non-patient care title		Adolescents (14 - 17 years)	X
Neonates (0 - 6 months)		Adults (18 - 64 years)	X
Children (7 months - 13 years)	Age 8-13 X	Geriatrics (65 + years)	X

## Job Relationships

**Contacts:** Interacts daily with patients, families, caregivers, faculty members (physician and psychologists), nurses, and their support staff, other team members (inpatient and outpatient), clerical staff, managers and administrators, admissions personnel, visitors and vendors. May interact with referral sources and payors if requested.

**Responsible to:** Rehabilitation Clinic Manager

## Physical/Visual/Mental Requirements

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodation may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee must be able to:

- Communicate, clearly with all members of the health care team, patients and families.
- Concentrate and attend to a task or series of tasks.
- Maintain visual attention and concentration, depth perception and visual field for patient treatment tasks and safety.
- Identify and respond to emergency signals and indicators and respond quickly.
- Frequently lift and support weight of 80+lbs. (i.e. transferring patients from one surface to another).
- Frequently push or pull 80+lbs. (i.e. pushing patients in a wheelchair).
- Frequently climb stairs or ramps with patients.
- Frequently stoop, crouch, kneel, crawl, or stand during patient treatment.
- Carry objects of 20lbs. or less (i.e. equipment).
- Seize, grasp, and hold onto objects or patients.
- Balance self and patient to prevent falls.
- Complete documentation

## Work Environment

The work environment involves everyday risks or discomforts which requires normal safety precautions typical of such places as offices and meeting rooms (i.e. use of safe work practices, avoidance of trips and falls, and observance of fire regulations and traffic signs).

**Note: The above statements are intended to describe the essential functions and related requirements of persons assigned to this job. They are not intended as an exhaustive list of all job duties, responsibilities, and requirements.**