

**Residential Rehabilitation Services at
The Children's Trust**

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**Criteria for admission for 3-6 months
rehabilitation programme**

- Acquired brain injury
- Ranging from low to high level cognitive and physical difficulties

**3-6 Months rehabilitation programme
elements of service**

- Inter professional team assessment
- Individually tailored therapy and care programmes
- Medical interventions
- Community liaison and support
- Family support
- Transitional support to home/local community

**3-6 Months rehabilitation programme
Reporting and Outcomes**

- Regular family meeting with inter professional team
- Full review at 8-14 weeks
- Regular update summaries for purchaser
- Set up of equipment and liaison re: home adaptations
- Local planning meeting, full discharge report and handover

**Criteria for admission for 6-18
months
rehabilitation programme**

- Acquired brain injury
- Long term ventilation
- Complex health and social needs
- Vegetative state/minimally conscious

**6-18 months
rehabilitation programme
elements of service**

- Inter professional team assessment of care and therapy needs
- Medical interventions
- Community liaison and support
- Transition to long term placement

**6-18 Months
rehabilitation programme
Reporting and outcomes**

- Set up of equipment and liaisons re: home adaptations
- Develop a needs led care plan
- Regular family meeting with inter professional team
- Regular case reviews with local planning meetings

**6-18 Months
rehabilitation programme
Reporting and outcomes**

- Regular update summaries for purchaser
- Full review at 8-14 weeks
- Differential diagnosis between vegetative state and minimally conscious
- Full discharge report and handover

**What is the Community Support
Team for Children with Acquired
Brain Injury.**

Fiona Adcock
Head of Community Support Team for Children with Acquired
Brain Injury

Who do we see? – Referral criteria

- Children with acquired brain injury
- School age children with high-level cognitive and communication difficulties
- Children who do not require intensive therapy
- Independently mobile children



What do we do? – Service model

- Referral assessment
- Inter professional assessment and intervention model
- Short intervention block
- Long intervention block

Key features of service:-

- Specialist service working in partnership with local services
- In-depth assessment of child's cognitive, communication, physical and psychological needs
- We use a range of standardized and non standardized assessments
- Detailed reports
- Brain Injury education for families, schools and local services
- Specific brain injury intervention as required
- Work in the child's local area in home, school and community

Can we measure what we do? – Service evaluation

- Key areas to measure could be:
- Does this service make a difference?
- Quality of life
- Family satisfaction
- Teacher satisfaction
- Improvement in activities of life
- Improvement in participation in life situations

Is there evidence in the literature?

- Studies over the last twenty years document the long term challenges faced by families.
- Key issues:-
- Parents most stressed by changes in cognition and behavior
- Poor academic achievement
- Poor social relationships
- Lack of social and practical support available
- Models of long term care and support need to be developed.
- (Ref: - Carpentieri S 2003, Steinlan M 2003, Mulhern R K 2004, Upton P 20005

Summary

- This is a group of children whose needs are not currently being met
- They do not usually fit the criteria for local services
- Often referred at points of transition
- Often have ongoing medical implications
- They have a pattern of interrupted development
- They need ongoing long term follow up