

BRAIN INJURY SERVICES

CHAPTER 42

The Liverpool Brain Injury Rehabilitation Program (BIRP) is a Statewide Service for people with acquired brain injury, usually traumatic, aged between 16 years and 65 years. The Program includes the provision of inpatient care, transitional and community care. Other components of the Service include community development and research. In addition, the Brain Injury Unit provides vocational rehabilitation. Patients are accepted into the Program from all parts of SWSAHS, the southern part of SESAHS, the Illawarra, the southern AHS (including Goulburn), the Greater Murray AHS (including Albury), and other parts of the State on a case-by-case basis in consultation with other brain injury units.

The GMTT Directorate for Brain Injury Rehabilitation has prioritised and commenced work on a review of access to the statewide Brain Injury Rehabilitation Program. Issues to be addressed are access at all levels: rural to metropolitan, metropolitan to rural, appropriate and timely access to service provision, transition from paediatric to adult services and access to long term support.

NSW Health considers that there is a need for approximately 22 beds across the NSW Brain Injury Rehabilitation service Program for non-traumatic brain injury. The Liverpool Brain Injury Unit has estimated seven beds, based on staffing changes and flow-on effects to average LOS, are required to meet their share of this need. Though some clients may come from the general neurological rehabilitation beds, others may not currently receive rehabilitation and have been placed in nursing homes.

Current Services

The Brain Injury rehabilitation service is a greater than area service and access to the service needs to be balanced to provide the most timely and fair access to all referring agencies.

The largest component of service provision is in direct clinical service. Another significant although relatively small component is in community development. Staff at many levels are working with the Motor Association of Australia (MAA), NSW Health, the Brain Injury Association and attempting to negotiate with Department of Ageing, Disability and Home Care to achieve more appropriate access to long term accommodation and community supports for the patients with traumatic and acquired brain injury.

Referrals are generally from the Acute Metropolitan Trauma Hospitals, the top two being Liverpool Hospital (40%) and St George Hospital (15%). Referrals are also accepted for both ACT and NSW residents from The Canberra Hospital (20%), as there is no specialist Brain Injury Rehabilitation Service in Canberra.

Transitional Living Unit: Referrals are predominantly from the Inpatient unit but approximately 30% are from the community. Most reside in the area covered by the Community team but as the Illawarra does not have a TLU this area is included.

Community referrals: Those referred to the community team must live in the SWSAHS and the southern part of SESAHS as well as meet the other acceptance criteria.

Camden case management rehabilitation service: Those known to the service who benefit from respite, crisis accommodation and individual case management and assessment.

Head 2 Work: Referrals are for vocational and a vocational assessment and rehabilitation. This service also includes the Driving Assessment service. 60 referrals are received for vocational rehabilitation and 40 driving assessment referrals are received each year.

Brain Injury Unit (BIU) : There are a total of 24 beds for BIU. 16 of these beds are located in the BIU ward. Four beds are allocated to the transitional care unit and four beds in the Camden residential unit

Each year, between 65 and 75 new inpatients are referred to the program. Between 30 and 35 patients a year are referred to the Transitional Living Unit and 150 to 200 patients are referred for community care. The Camden Case management Rehabilitation Service receives 100 -120 admissions per year. In 2002/03 for the brain injury ward, there were 51 separations, with an average LOS of 108.1 days. At 95% occupancy this is equivalent to 16 beds. 31 separations were recorded for the transitional care ward with an average LOS of 31.13 days. At 95% occupancy this equates to 3 beds. The Camden residential unit had 56 separations with an average LOS of 10.4 days. At 95% occupancy this equates to 3 beds.

Research and Teaching

The service has a strong basis in research, with various funded research programs coordinated by the Research Officer. The Unit staff also run workshops and education programs in clinical aspects of Brain Injury Rehabilitation.

RECOMMENDATIONS

- Liverpool Brain Injury Unit provide additional beds to improve access for non-traumatic brain injury patients. A Procurement Feasibility Plan be conducted to identify the capital options to provide the additional beds.
- Additional medical, nursing and allied health staff be provided to fulfil its role as a Statewide Service.