

# Rehabilitation

## ***Brain Injury Support*** in Northern Ireland

This leaflet is part of the series:  
Brain Injury Support in Northern Ireland

## Rehabilitation

Rehabilitation is a process of change aimed at helping brain injured persons regain former skills, compensate for skills lost and to achieve the optimum levels of physical, cognitive and social competence followed by integration into the most suitable environment.

Rehabilitation is a continuous process involving family and friends of the injured person, working on recovery of function lost by the injured person and helping the family adapt to and cope with the longer term outcome of the injury.

Research suggests that patients who make the best recovery are those whose family is actively involved and can maintain this informal rehabilitation at home.

The greatest physical improvement generally occurs in the first one to two years. Improvements in cognitive and neurobehavioural functions, may continue at a slower rate for a number of years after injury.

### Who's Who on the Rehabilitation Team?

As the effects of a brain injury can be wide-ranging, there may be a number of different specialists involved in a person's rehabilitation. This core group of medical and nursing staff is called a **Multi Disciplinary Team**, and ensures that every aspect of the patient's brain injury receives proper attention.

### What are the Roles of the Medical Staff?

#### Doctors

Within hospital based rehabilitation, the team will normally be led by a Consultant in Rehabilitation Medicine. He/she will be responsible for the overall care of the patient and will work within the Multi Disciplinary Team.

Other specialities such as Neuropsychiatry may be involved.

## Nurses

Nurses are trained in all aspects of general health care and will help with dressing, washing, feeding and toileting. Within Rehabilitation Units they will also have specialist skills. The usual structure is of a Ward Manager, Deputy Ward Managers and nursing staff supported by health care assistants. The nursing staff will carry through nursing rehabilitation to ward level.

## Physiotherapists

Physiotherapists will be involved in all stages of management from Intensive Care Unit (ICU) through to outpatient rehabilitation. Their role will depend on the stage of management and will range from chest management and position in ICU, through control of posture and mobility in early rehabilitation to higher level mobility and balance skills as the patient progresses.

## Occupational Therapists (OT's)

OTs will be involved from early in the process, working on balance and seating, assessing level of response and cognitive or thinking functions. As the patient progresses, the OT will concentrate more on developing independence in carrying out everyday tasks such as self care, cooking and housework.

They will also help the individual develop skills which underline these activities, such as budgeting, planning, improving thinking and finding ways around problems. They may also provide special equipment and adaptations around the home.

## Clinical Neuropsychologist

The Clinical Neuropsychologist is responsible for assessing the patient's thinking (cognitive) abilities, such as processing speed, memory and concentration using specially designed tests.

They will also advise on behavioural management and provide therapy, education and advice on dealing with the emotional problems involved in adjustment and coping after brain injury.

## **Social Worker**

Social Workers are skilled in helping families through their counselling role. They are also able to provide information about benefits, accommodation and transport. If there has been no contact with a Social Worker in hospital ask for an appointment to see one.

## **Speech and Language Therapist (SLT)**

Speech and Language Therapists aim to help patients communicate more effectively using both the spoken and written word. They may provide structured exercises and activities aimed at improving speech and language skills, or may work with other staff and relatives to improve all-round communication. The Speech and Language Therapist will also have experience of communication aids. In the early stages the SLT will be very important in assessment and management of swallowing disorders suffered by many brain injured persons.

## **Rehabilitation Units**

There are four inpatient rehabilitation units in Northern Ireland, each providing a specialist service. Following a referral assessment, generally by rehabilitation medicine, and discussion with the family, the brain injured person will be admitted to the unit that will serve their needs most appropriately. Within each unit, the management of the patient will be provided by the Multi Disciplinary Team in full agreement with the family, based upon a treatment plan that addresses the needs of patient and family.

## **Community Rehabilitation Programmes**

Community Rehabilitation programmes involving the Multi Disciplinary Team, are carried out in the patient's home or another suitable community setting. They are usually led by a Consultant Clinical Neuropsychologist. Once the patient has been referred, a member of the team will meet the individual to undertake the initial assessment. The team may complete further assessments after this.

The team will work closely with the individual and family to ensure the development of a rehabilitation plan. They will discuss appropriate goals and work closely together to make sure the rehabilitation plan meets the individual's needs. As well as individual therapy, the team will offer advice, support and education to carers and family to enable them to be involved as appropriate. For further information on your local Community Brain Injury Team, contact your local Health and Social Care Trust.