

Filling the transitional care gap: First year outcomes of the ABI Transitional Rehabilitation Service Pilot Project

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Introduction

The Acquired Brain Injury Transitional Rehabilitation Service (ABI TRS) is a 5-year pilot which aims to facilitate early community reintegration for individuals with acquired brain injury (ABI) and their families.

This service was established to address an identified unmet need in the continuum of ABI rehabilitation in Queensland. Funding for the pilot was received from the Motor Accident Insurance Commission (MAIC) in July 2016, with clinical services commencing in January 2017.

To determine the impact of ABI TRS on community re-integration, funding included an embedded service evaluation for the duration of the pilot.

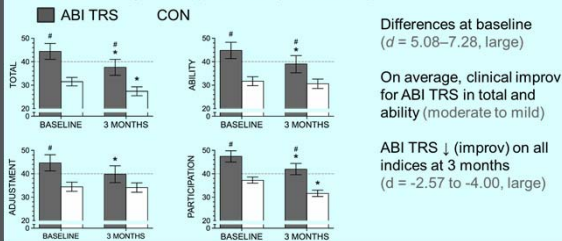
Methods

People with ABI (n=71) completed the 12 week ABI TRS community-based program, comprising an intensive, individualised, goal directed program using an interdisciplinary, client-centred approach. Self and/or practitioner-rated measures were completed at 0 (baseline) and 3 months. Results were compared to a quasi-control (CON) where no transitional service existed. Data were analysed using linear mixed models in a Bayesian framework.

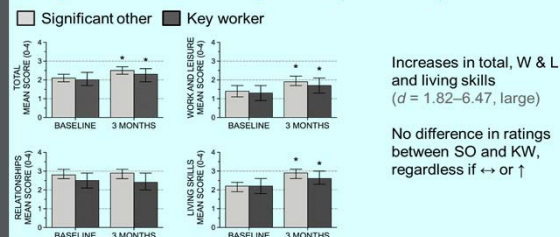
Results

1. Baseline ratings in all outcome measures were statistically worse for ABI TRS clients compared to CON i.e. the ABI TRS cohort was more impaired than the CON group at the first time point.
2. There were statistical improvements in measures of global function (MPAI-4¹) and psychological wellbeing (DASS-21²) compared to CON.
3. Psychosocial function (SPRS-2³) and health-related quality of life (EQ-5D⁴) were statistically improved at 3 months compared to baseline.

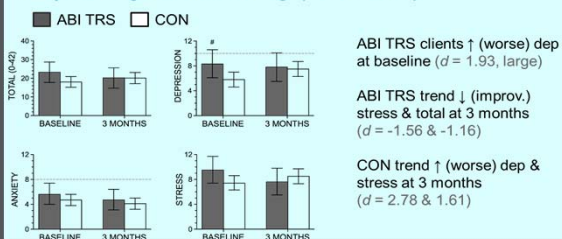
Community integration (MPAI-4)



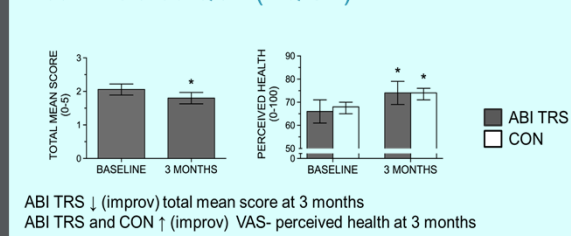
Psychosocial reintegration (SPRS-2)



Psychological wellbeing (DASS-21)



Health related QOL (EQ-5D)



Conclusions

ABI TRS clients demonstrated statistically improved or matched outcomes at 3 months compared to the quasi-control group.

The ABI TRS sees a clinically diverse range of individuals, and early results indicate that clients generally exhibit superior outcomes following program completion.

¹Mayo Portland Adaptability Inventory-4; ²Depression Anxiety Stress Scale 21; ³Sydney Psychosocial Reintegration Scale-2; ⁴EuroQuol Health Questionnaire