

NAI NATIONAL CONFERENCE

How critical the voluntary sector is to the
provision of rehabilitation services

Innovation, Effectiveness & Value for Money

Acquired Brain Injury Ireland



About ABI Ireland

- Acquired Brain Injury Ireland (formerly the Peter Bradley Foundation) was established in 2000 to respond to the needs of Peter Bradley, who had an Acquired Brain Injury (ABI).
- Aim was to provide an ABI specific service for him which led on to the provision of a range of pioneering, flexible and tailor-made services to people with ABI.
- Now in 2011 the Foundation is a National service provider to people with ABI funded by the HSE
- CARF Accredited for Specialised Acquired Brain Injury Residential and Home & Community Based Rehabilitation Services. Awarded Three Year Quality Award 2003,2006,2009

Mission

“to enable people with an acquired brain injury to live an independent life within the community, by providing and maintaining a supportive living environment”

Our Philosophy

- The Individual
- Community based services
- Social/Community model
- Integration and Rehabilitation
- Maximise ability/Minimise disability

Why do ABI Rehab Services Exist?

- Complexity: Combination of physical, cognitive, behavioural, emotional or vocational issues
- Require multi-organisational involvement
- Disjointed, untimely, absent or inappropriate rehabilitation & support for many individuals and their families
- Traditionally emphasis has been placed on the service not the individual
- In ABI, the need to take account of the individual's perspective becomes paramount

Rehabilitation Services – National Picture

14 Residential Services

Short-term / Long-term

Transitional

Challenging Neurobehavioural

14 Home & Community Rehabilitation Services

9 ABI Case Management Services

4 Clinical teams

2 Day Resource Centres

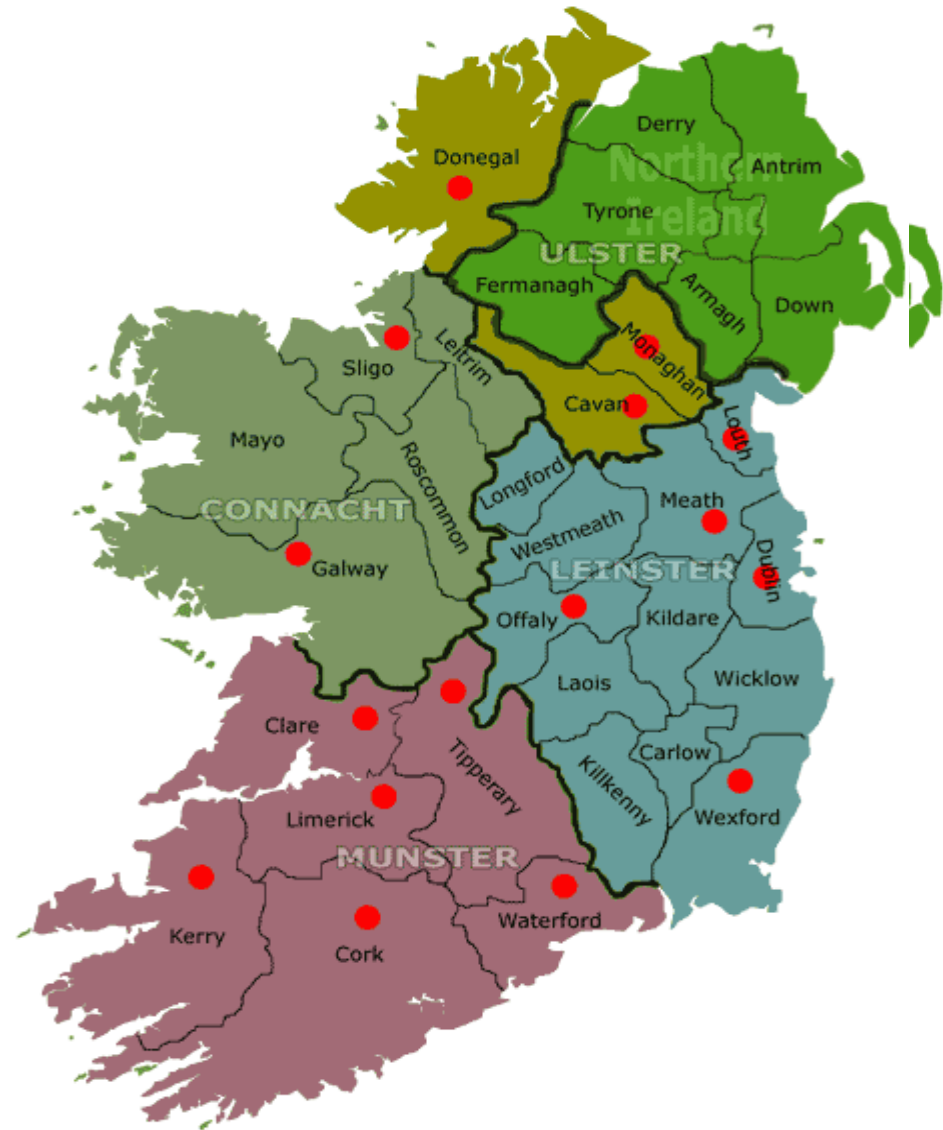
Awareness, Education & Information

Family Support

Nationally we provide services to over 1000 people and their families



Service Map



Rehabilitative Approach

- Use the BSRM Model
- Individualised
- Based on the individuals own priorities
- Individual Rehabilitation Plan (IRP)
- Outcomes measured
- 8 weekly Goal Review
- Clinical review

Innovation, Effectiveness & Value for Money

- Example 1: Transitional Living Unit Sligo
- Example 2: Case Management in the Dublin North East Area

Transitional Living Unit - Sligo



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What is the Transitional Living Unit?

- Commenced July 2007
- Covers Sligo/Leitrim & West Cavan
- Detached two storey house at Tonaphubble
- Mon – Fri Service
- 4 Residential Places
- Base for Community Rehabilitation Service to those at home
- Joint team employed by ABI Ireland & HSE in Sligo/Leitrim and West Cavan (Community Brain Injury Rehabilitation Team)
- Staffed and managed by ABI Ireland: Manager & Trained Rehabilitation Assistants
- Partnership with the HSE – 2 of the MDT are HSE: OT & Case Co-ordinator
- 78 Persons Served on last calendar year audit

Effectiveness & Value for Money

- Trinity MBA Study 2010
- Looked at the cost of the TLU
- Looked at the cost without the referral option to the TLU i.e. where they would have been placed without it and the relative cost

Case Study

- Stephen' 32 years
- Referred to the TLU from an Alzheimers Unit at the Community Hospital.
- TLU for 5 months.
- Without the TLU Stephen would be in a nursing home
- Following his stay at the TLU he was discharged home with multi organisational support.
- The IWA provided him with support & transport.
- 20 hours of PA by the CIL
- Home help on Saturday
- Family on a Sunday (Training supported by the TLU)
- Despite these increased services for a year the cost of rehabilitation for Stephen after his stay at the TLU was still less as compared to a one year stay at a nursing home.

Case Study

- 'Maria' 36 yrs
- Referred to the TLU from Sligo General
- TLU for 3months
- Discharged home with multiple agency support.
- She attended a 1 day group session at the TLU every week
- Rehabilitation Assistant who provided specific rehabilitative support
- Home Help & IWA Support
- Home Adaptation Grant
- Without the TLU, Maria would have transferred to the Community Hospital potentially for the entire year and Nursing Home thereafter.

A cost saving of €287,437

TLU Cost Benefit Analysis

Example 1	
Cost of Continued Hospital Stay	€123,750
Cost at TLU	€49,382
Initial Saving	€74,368
Post Discharge Cost of Care at Nursing Home (w/o TLU)	€38,400
Post Discharge Cost of Care (with TLU)	€11,040
Total Cost W/O TLU (Hospital Stay + Nursing Home)	€162,150
Total Cost (TLU + Reduced Care)	€60,421
Total Cost Differential	€101,728

Example 2	
Cost of Hospital Stay	€74,250
Cost at TLU	€29,629
Initial Saving	€44,621
Continued Stay in Hospital (W/O TLU)	€297,000
Post Discharge Cost of Care (with TLU)	€54,184
Total Cost W/O TLU (Hospital Stay + Nursing Home Stay)	€371,250
Total Cost (TLU + Reduced Care)	€83,813
Total Cost Differential	€287,437

ABI Case Management in the DNE Area

- Covered Cavan/Monaghan, Louth & Meath
- Commenced in 2006
- ABI Case Managers sit on the respective HSE Physical & Sensory Disability Teams
- Provide expertise on ABI to the team, support individuals, families and other organisations as well as educate and inform.
- Innovative collaboration between a specialist provider and a statutory body

Effectiveness & Value for Money 2009 Calendar Year Study

- Facilitated discharges from Nursing Homes
- Interventions to prevent admission to nursing homes
- Facilitated discharges from Hospitals
- Interventions to prevent admission to Hospitals
- Reducing the level of support required

Outcomes

Cost Savings

- Facilitated discharges from Nursing Homes – **€311,060**
- Interventions to prevent admission to Nursing homes - **€284,112**
- Facilitated discharges from Hospitals - **€3,016,482**
- Reduced level of support - **€100,232**

Sub-Total Cost Savings: **€3,711,886**

Cost of Case Managers x 3 (Includes Salary & Non-Pay) = **€215,442**

Total Cost Saving = Subtotal Cost Savings – Case Managers Cost

€3,496,444

Summary

- **Our challenge is to look at new and innovative ways to respond, to move from segregated wrap around service delivery to integrated and collaborative working, maximising all available supports to meet the individual needs in a person centred approach.**
- **As shown here in just two examples of service provision, the voluntary/not-for profit sector is effective in terms of delivering outcomes as well as significant value for money.**
- **The Voluntary Sector is critical to the provision of rehabilitation services.**

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Thank You

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