

## Appendix 8

### 45. Acquired Brain Injury Case Manager

It is envisaged that as individuals with neuro-rehabilitation needs who move from acute to community, or require neuro-rehabilitation while in the community, should have access to services in the community with specialism in neuro-rehabilitation, as and when they need them. **Navigation through these services should be supported by case management.**

A Case Manager is best described as the person who engages with and assists the person in coordinating appropriate environmental interventions and supports so that their activity and societal participation are optimised. The goals of case management are to support the provision of quality health care along a continuum, decreasing fragmentation of care across many settings and enhancing the client's quality of life. This case manager post will differ from other case manager posts as this person will manage the cases of people with complex neuro rehabilitation needs as per the model of care for rehabilitation medicine.

The scope of neuro-rehabilitation case management role includes being the first point of contact for the individual and provision of information as required. They also have a role liaising with the hospital, rehabilitation centre and/or other acute or post-acute services to ensure a seamless pathway. A neuro-rehabilitation case manager remains with the person on the pathway for a period of time until they are no longer needed in terms of their role, as outlined above. A case manager may work with a person over a short or longer term (6 months +). These posts are not specific to a particular organisation or diagnostic group but will work across the CRT.

It is recommended that the case manager role is equivalent to a health & social care professional post. For the purposes of costing a community rehabilitation team, a mid-grade social work post has been used i.e. €50,687, plus PRSI at 10.85% (€5,500) equalling €56,187.

Using these metrics, 8 neuro-rehabilitation case managers (not ABI specific) would cost €449,496.

Non-pay costs of approx 25% should also be applied.

### 46. Community Neuro-rehabilitation teams

The table below gives the staffing ratios for the various clinicians and health & social care professions required for a fully resourced community neurorehabilitation team in a CHO with a population of approx. 500,000. Included is 25% non-pay costs for each WTE. Recommended staffing ratios for the provision of community neurorehabilitation services are adapted from the recommendations by the British Society of Rehabilitation Medicine (BSRM). These are the ratios recommended within the recently published Model of Care of the National Clinical Programme for Rehabilitation Medicine. The BSRM ratios are given per population of 1 million. These figures have been adapted based on population per CHO so specific staffing numbers may vary across CHOs depending on population.

The recent review of existing resources exercise has shown that the gap between demand and capacity for specialist rehabilitation services is ever widening. This is likely due to sustained improvements in retrieval and intensive care management of those who have sustained severe injuries or illnesses i.e. improvements in the area of stroke where recent advances in acute management of stroke have seen mortality rates drop by 25%. Developments in rehabilitation have not kept pace with developments in the acute sector which has led to an ever increasing demand on rehabilitation services. The recent exercise shows there are limited dedicated posts around the country dedicated to the provision of neuro-rehabilitation services.

It is clear that there are substantial numbers of individuals who could potentially benefit greatly from the provision of neuro-rehabilitation services. It has been shown that this type of intervention can be delivered in a cost-effective manner and would likely increase the capacity of both the acute hospitals and rehabilitation facilities by preventing delayed discharges and facilitating early supported discharges of patients who would previously have required inpatient rehabilitation.

- A team per CHO will cost € 5180609 (included 25% non pay overheads)
- The staffing for the MCRN in CHO 6/7 will cost € 4.5m

Grade Code	Grade Group	Basic Mid Point Sept'19	Gross Cost 2019	Total + 25%	Per CHO CNRT - phase 3	total cost per CHO
558	General Administrative (IV)	36,577	41,097	50,241	2	100482
1163	Consultant Medicine	153,830	185,269	223,727	2.8	626435.6
1628	Specialist Registrar	70,070	113,684	131,202	0	0
2135	Staff Nurses	38,932	54,175	63,908	0	0
2173	Staff Nurses Senior	49,224	70,012	82,318	0	0
2632	Clinical Nurse Specialist	54,381	64,471	78,066	9.4	733820.4
314X	Physiotherapists Basic Grade	45,279	51,795	63,114	5	315570
3158	Physiotherapists Senior	58,263	65,541	80,106	2	160212
3247	Pharmacy	49,896	56,639	69,113	0	0
3298	Occupational Therapists Basic Grade	45,279	50,387	61,706	10	617060
3301	Occupational Therapists Senior	58,263	64,629	79,194	2	158388
336Y	Speech & Language Therapists Basic	45,279	50,287	61,606	2.8	172496.8
3379	Speech & Language Therapists Snr	58,263	64,585	79,150	2	158300
3389	Dietitians Basic	45,279	50,395	61,714	0.4	24685.6
3395	Dietitians Snr	58,263	64,610	79,175	2	158350
3557	Social Workers (medical- basic inc Case Manager	50,687	56,187	68,858	12	826296
367Y	Psychologists Senior	87,820	97,561	119,516	2	239032
3689	Psychologists Clinical	68,000	75,779	92,779	2.8	259781.2
3902	Team Leader	64,628	71,750	87,907	2.4	210976.8
3958	Counsellor Therapists (CBT)	68,000	75,378	92,378	0	0
6075	HCA, Nurse's Aide, etc.	32,610	44,271	52,423	0	0
6482	HCA, Nurse's Aide, etc.	33,975	49,735	58,228	0	0
3019	Social Workers Snr	64,628	71,688	87,845		
6503	Rehabilitation Assistants	32,610	36,393	44,545	9.4	418723
143Y	Consultant Psychiatry	153,830	180,729	219,186	0	0
		-	-	-	0	0
<b>TOTAL</b>						<b>5180609</b>

- The 12 Social Workers requested include 4 case managers, 5 MSW and 3 Sen Social Workers.

There is no one team within the country which meets the requirement of a community neurorehabilitation team so the scope for reconfiguration is limited.

**In relation to the question asked “based on the roll-out of the demonstration project and the resources already in place across the country” for this demonstration project in CHO 6/7 the HSE sought funding of € 4585214 for 56 posts in the Estimates 2019 process.**