Accreditation Page 1 sur 9

Full display of programme n° 8:

> Accreditation - Page 1/9 - General presentation

Identification data:

Dr ZOLTAN Denes

Position: head of the unit Phone: 36 30 270 75 65 Email: z.denes@rehabint.hu

Years certification: 2006, No: 1935

Name of unit: Brain Injury Rehabilitation Unit

Hospital or other facility: National Institute for Medical Rehabilitation

Address: Szanatorium utca

Postal Code: 1528 City: Budapest Country: Hungary,

**** Title of the programme of care :**

07. PRM and patients with neurological disorders

****** Description of the programme :

Target population: Patients with brain injury (mainly traumatic origin)

Aims and goals: multidisciplinary rehabilitation of patients

Procedures: physioterapy, occupational therapy, psychology, neuropsychology, speech therapy (afazia and dysarthria,swalloving problems) nutritional therapy, sportterapy, orthetica,hydrotherapy,

- The unit delivering the programme
- Location: unit of the national rehabilitation institute
- -- Means devoted to the programme
- -- Safety and patient rights: informed consens for treatment and other activities,
- -- Patient rights
- The PRM specialist in the programme: PRM doctor is the leader of the R. team
- Team management in the programme: multidisciplinary team with weekly session,
- Evidence Based Medicine of programme: Not the whole program is evidence based as the rehabilitation generally, but some part; organization and records: written medical and paramedical documentation, goal planning, assessment and measurement, Barthel Index, and FIM are used,

- Monitoring and outcomes:

Top of the page

> Accreditation - Page 2/9 - Aims and goals

**** This programme is applying for :**

Referral of patients (choose one or several) :

Direct access No

Accreditation Page 2 sur 9

Referred from a general practicioner Yes

Referred from a specialist Yes

Referred from a specialist in PRM Yes

Setting:

Part of a university or national hospital

Approach:

multiprofessional

Stage of recovery:

Within two weeks of onset No
2 weeks to 3 months after onset Yes
3 months or longer after onset Yes

Type:

Inpatients in beds under PRM responsibility Yes

Inpatients in beds belonging to other departments No

Day programme (most of the day in outpatient No setting, not home)

Outpatient clinic (assessment and/or treatment, No for up to 3 hours/day)

Community-based (in the patient's home or No workplace or other relevant community location, e.g. sports centre)

****** Targets of the programme :

• Which impairments does your programme focus on? See "limitations of body function or body structure :

s110, s198, s710, s720, s730, s740, s750, s760, s120,

- Which activity limitations does your programme focus on?
 b140, b144, b147, b730, b760, b770, b510, b710, b735, b620,
- Which participation restrictions does your programme focus on? d230, d310, d330, d410, d445, d450, d465, d530, d540, d550,

Accreditation Page 3 sur 9

Top of the page

> Accreditation - Page 3/9 - Location and safety

Does your programme have a designated and accessible space ?

- For assessments and consultations? Yes
- For an ambulatory or day care programme? Yes
 - For inpatient beds? Yes
 - For therapeutic exercises ? Yes
- For training in independence and daily living Yes
- For vocational and/or recreational activities? No

The safety concerns of persons in your unit programmes relate to :

- Emergencies (fire, assault, escape) Yes
 - Medical emergencies Yes
 - Equipment No
 - Handling of materials No
 - Transports No

The safety of persons in the programmes of your unit is provided by :

- Written standards from National Safety Bodies No
- Written standards from National Medical Bodies No
 - Unit-specific written rules Yes

Periodic inspection:

- Internal Yes
- External No

Top of the page

> Accreditation - Page 4/9 - Patient rights

* Has your programme adopted a formal policy or statement of patients' rights?

Yes

Accreditation Page 4 sur 9

** Does this statement specify the influence that the patient should have in the formulation and implementation of the programme? Yes
■ Is the statement known to all personnel involved in delivering the programme ?
Yes
This is checked periodically ? Yes
■ Is the statement made known to and is available to all persons visiting your unit?
Yes
Give at least one example of NGO activities for disabled people that staff from the programme participates in (or will participate in):
> Last year :
helper activities
transportation helping
> This year :
helper activities
transportation helping
Top of the page
> Accreditation - Page 5/9 - PRM specialists in the programme
Is your programme directed/supervised by a PRM physician (not only "medical" responsibility)?
Yes
** Does he/she have a European Board Certification in PRM ?
Yes
** Does he/she meet National or European CME/CPD Requirements ?

Accreditation Page 5 sur 9

Yes

• Number of CME or EACCME points earned in the 3 last 3 years :

The two Main Tasks for the PRM specialist in your Programme are to :

- Treat comorbidity No
- Assess the rehabilitation potential of the patient Yes
 - Analyse & treat impairments Yes
 - Coordinate interprofessional teams No

Top of the page

> Accreditation - Page 6/9 - Team management in the programme

** Which rehabilitation professionals work on a regular basis (minimum of once every week) in your programme?

- Psychologists Yes
- Physiotherapists Yes
- Occupational therapists Yes
 - Social workers Yes
- Speech & Language therapists Yes
 - Vocational specialists Yes
 - Nurses Yes
- Orthotists/prosthetists assistive Yes technicians/engineers
 - Other (please specify) No

How often does your staff receive formal continuing education (mark as is)?

• in team rehabilitation :

every year

• in their own profession :

every second year

* Do team activities in your rehabilitation programme include the following?

• Is the patient at the centre of a Yes multiprofessional approach?

Accreditation Page 6 sur 9

- Do you always give informed choices of Yes treatment?
- Do you regularly promote family involvement? Yes

** Does your organisation of multi professional team working include :

- holding regular team meetings with patient's Yes records only (more than 2 members)
- holding regular team meetings (more than 2 Yes members)
 with the presence of the patients
 - joint assessment of the patient or joint Yes intervention
- regular exchanges of information between team Yes members

Top of the page

> Accreditation - Page 7/9 - Evidence Based Medicine of programme ; organization and records

** Do you use evidence-based strategies or published clinical guidelines in your rehabilitation programme (textbooks do not apply)?

No

** Name a minimum 3 of references published in indexed journals and up to two national guidelines.

Please, note the location of those guidelines. Textbooks do not apply.

references 1:

Hall KM, Cope N: The benefit of rehabilitation in traumatic brain injury: a literature review. J of Head Trauma 1995;10:1-13.

references 2:

Verplancke D, Snape S, Salibury CF, Jones PW, Ward AB: A randomised controlled trial of the management of early lower limb spasticity following acute acquired severe brain injury. Clinical Rehabilitation 2005;19:117-125.

references 3:

Turner-Stokes L, Disler PB, Nair A, Wade DT: Multi-disciplinary rehabilitation for acquired brain injury in adults of working age. Cochrane database 2005.07.20. pCD004170 ISSN: 1469-493x-E.

references 4:

references 5:

Accreditation Page 7 sur 9

**** Does your programme show evidence of sustainability ?**

• Established part of public service: Yes

• Has existed for more than 3 years: Yes

• Has received national accreditation (where No

available):

****** Do the rehabilitation records have a designated space within the medical files ?

Yes

Do you have written criteria for :

- Admission Yes
- Discharge Yes
- Do your rehabilitation plans include written information about aims and goals,

time frames and identification of responsible team members?

Yes

Do you produce a formal discharge report (summary) about each patient?

Yes

Top of the page

- > Accreditation Page 8/9 Monitoring and outcomes
- How many <u>new</u> patients (registered for the first time) are treated in your programme each year:

300

In your day care or inpatient programme:

- What is the mean duration spent in therapy by 54 active days patients on this programme
- How many hours a day do the patients spend in 4 hours therapy.

Give the mean duration of stay spent in the programme :

Accreditation Page 8 sur 9

54 days

Does your programme have an overall monitoring system in addition to patient's records?

Yes

Are the long term outcomes of patients who have completed your programme regularly monitored?

Yes

- Impairment (medical) outcomes: Yes
- Activity/Participation (ICF) outcomes: Yes
- Duration of follow up of the outcomes: 12 months
- # Do you use your outcome data to bring about regular improvements in the quality of your programme's performance?

Yes

Do you make the long term overall outcomes of your programme available to your patients or to the public?

Yes

Top of the page

- > Accreditation Page 9/9 Audit spiral
- # Which are the most positive points (strong points) of your programme? multidisciplinary team work
- ****** Which are the weak points of your programme?

substitution of specialists (neuropsychologist, speech therapist) financial problems,

Which action plan are you setting up, in order to improve your programme?

continuing education

Top of the page

Accreditation Page 9 sur 9