

Pre-budget Submission 2019 Joint Committee on







SUMMARY

Acquired Brain Injury Ireland (ABI Ireland) is asking the Government to support people with acquired brain injury (ABI) in the 2019 Budget by investing €542,000 in an ABI **CASE MANAGEMENT SERVICE** (8 new posts) which will ultimately lead to significant savings in healthcare expenditure.

1. Brain injury case management

An acquired brain injury (ABI) case manager acts as a single point of contact and provides a clear pathway to support the person's transition from acute settings through post-acute and into community rehabilitation services. Case managers are highly competent, skilled and trained health care professionals. They provide a personalised service to the person with brain injury and their family.

There is compelling evidence that specialist case management is a key way to enable service integration across the range of specialists and service providers for people with ABI. Research from the UK indicates that case management for complex cases of ABI serves to maximise the person's independence and quality of life. It also leads to significant benefits to society including the reduction in the burden of care with avoidable, expensive and long or frequent hospital admissions being sigificantly reduced.¹

2. Current provision

Currently in Ireland there are ABI case managers in the following locations:

HSE CHO	Counties	Whole Time
		Equivalent
Area 1	Cavan/Monaghan LHO	1
Area 7	Dublin South West, Kildare	.5
Area 8	Laois, Offaly, Westmeath, Longford, Louth LHO, Meath LHO	3
Area 9	Dublin North/North West/Central	.5
	TOTAL WTE	5

3. Gaps in provision

In order to improve the geographic cover and have more equitable access to a case manager for those people with ABI who need one, an ABI case manager in each CHO, at a minimum, is urgently required². Therefore, this initial investment in case management would allow for a very basic coverage and a single point of contact in each CHO area as an initial development (See detailed HSE CHO Map in Appendix 1).

¹ Department of Health (UK) (2005) Supporting People with Long Term Conditions: An NHS and Social Care Model to support local innovation and integration, London, Department of Health

² The HSE Rehab Medicine Model of Care (2018) recommended 10 case managers per 1m population.

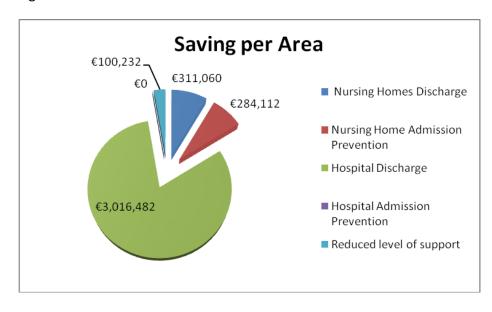


HSE CHO	Counties	Whole Time
		Equivalent
Area 1	Sligo, Donegal, Leitrim, West Cavan	1
Area 2	Galway, Roscommon and Mayo	1
Area 3	Clare, Limerick, North Tipperary, East Limerick	1
Area 4	Kerry, North Cork, North Lee, South Lee, West Cork	1
Area 5	South Tipperary, Carlow/Kilkenny, Waterford, Wexford	2
Area 6	Wicklow, Dun Laoghaire, Dublin South East	1
Area 7	Kildare, West Wicklow, Dublin West, Dublin South city, Dublin South West	.5
Area 9	Dublin North, North Central, Dublin North West	.5
TOTAL WTE		8
FUNDING REQUIRED	PAY AND NON PAY	€542,000

4. Evidence of effectiveness

Research carried out in 2009 in the North East HSE region on the brain injury-specific case management service proved that they were hugely cost effective. The study showed that case managers facilitated discharge from nursing homes and hospitals, prevented admission to nursing homes and hospitals and led to a reduced level of support (post case management intervention). In the year in question, the research showed that a net savings of €3.5m occurred. The following graph (Fig 1) represents the savings in monetary terms across the whole of the North East HSE area³.

Fig 1:



³ Whelan, D. (2010) An evaluation of the cost effectiveness of Acquired Brain Injury Ireland case management in the North East Area (Meath, Cavan/Monaghan and Louth). Unpublished MA thesis, Institute for Public Administration



5. Policy context and international best practice

A number of policy initiatives and commitments have been made to improve ABI rehabilitation services in Ireland including:

- In 2011 the Department of Health and the HSE jointly published the National Policy on Strategy for the Provision of Neuro-Rehabilitation Services in Ireland 2011-2015⁴. The Strategy recognises the importance of neuro-rehabilitation for people with ABI and sets out a national model of service delivery. This includes a case management model to provide a continuum of individualised supports and services that are accessed at different stages on the pathway. The HSE is currently developing an implementation plan for the Strategy.
- The Programme for Government 2016⁵ has committed to publishing a plan for advancing neuro-rehabilitation services in the community.
- The recently published HSE Rehabilitation Medicine Model of Care⁶ acknowledges the
 critical role of the case manager as a dedicated and distinct role to support the provision
 of services on the pathway, addressing fragmentation and enhancing quality of life for
 the person and their family.
- **Sláintecare** advocates for much more significant investment in community services, and specific investment in community services for people with disabilities. It also recognises that rehabilitation is one of the services that should come under the remit of universal healthcare.

In terms of international best practice standards, The **British Society of Rehabilitation**Medicine⁸ states that people living in the community with neuro-rehabilitation needs should have timely and on-going access to a named individual with experience in the management of their condition.

6. Final remarks

There is an urgent need for the Government to prioritise and accelerate provision of ABI community based rehabilitation services and an investment in a nationwide ABI case management service is one step towards meeting the vast levels of unmet need.

⁴ Department of Health and Health Service Executive (2011) National Policy and Strategy for the Provision of Neuro-rehabilitation Services in Ireland 2011-2015, DOH&HSE, Dublin.

⁵ Programme for a Partnership Government, May 2016

⁶ Health Service Executive National Clinical Programme for Rehabilitation Medicine (2018) Model of Care for the Provision of Specialist Rehabilitation Services in Ireland

⁷ Slaintecare (2017) Houses of the Oireachtas, Dublin

⁸ British Society of Rehabilitation Medicine (2009) Standards for Rehabilitation Services Mapped on to the National Service Framework for Long-Term Conditions, BSRM, London



Supporting Information – About ABI Ireland and ABI

ABI Ireland

ABI Ireland is a dedicated provider of community-based neuro-rehabilitation services for people with an acquired brain injury (ABI) and their families. As a brain injury can affect a person's ability to manage their own life, ABI Ireland works in communities across Ireland to support and empower people to rebuild their lives. ABI Ireland also campaigns, educates and advocates for the rights and needs of this hidden group in society.

ABI Ireland Services

ABI Ireland provides a diverse range of accredited neuro-rehabilitation services. The core services include:

- Clinical neuro-rehabilitation team
- Residential rehabilitation
- Transitional living
- Day resource/clubhouse
- Home and community rehabilitation
- Case management

Additional support services are also provided and include ABI information, psychology (Cognitive Behaviour Therapy/family therapy), social work (family support services) and carer supports.

What is an ABI?

There are many ways in which a person can acquire a brain injury. These include, among others, a fall, assault, accident, infection, stroke or tumour. People's lives can change suddenly and significantly following an ABI. Having a serious brain injury is totally life altering for both the person and their family due the effects of brain injury. The brain is a complex organ. Depending on what part of the brain is injured, and the extent of the injury, the person will have to live with different consequences. Many of these consequences may be hidden, others not. They range from physical and sensory to cognitive and psychological.

Key Facts and Figures on ABI in Ireland

- Each year it is estimated that 13,000 people in Ireland acquire a brain injury
- There are over 100,000 people living with ABI in Ireland today
- ABI is one of the leading causes of disability and can have life-long consequences for people with the condition, their carers and families.

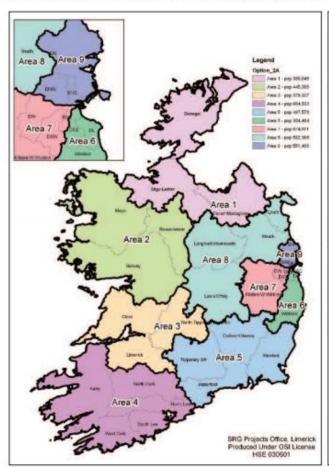
Contact Details

Further information from Grainne McGettrick, Policy and Research Manager, ABI Ireland National Office, 64 Mulgrave Street, Dun Laoghaire, Co. Dublin. T: 01 280 4164 E: gmcgettrick@abiireland.ie www.abiireland.ie



Appendix 1

The nine Community Healthcare Organisations are outlined below:



Area 1 - Population 389,048

Donegal LHO, Sligo/Leitrim/West Cavan LHO and Cavan/Monaghan LHO.

Area 2 - Population 445,356

Galway, Roscommon and Mayo LHOs

Area 3 - Population 379,327

Clare LHO, Limerick LHO and North Tipperary/East Limerick LHO

Area 4 - Population 664,533

Kerry LHO, North Cork LHO, North Lee LHO, South Lee LHO and West Cork LHO

Area 5 - Population 497,578

South Tipperary LHO, Carlow/Kilkenny LHO, Waterford LHO and Wexford LHO

Area 6- Population 364,464

Wicklow LHO, Dun Laoghaire LHO and Dublin South East LHO

Area 7 - Population 674,071

Kildare/West Wicklow LHO, Dublin West LHO, Dublin South City LHO and Dublin South West LHO

Area 8 - Population 592,388

Laois/Offaly LHO, Longford/Westmeath LHO, Louth LHO and Meath LHO

Area 9 - Population 581,486

Dublin North LHO, Dublin North Central LHO and Dublin North West LHO