

To: SOCIAL WORK (OPERATIONS AND SERVICES) SUB COMMITTEE		Subject: BRAIN INJURY NEEDS IDENTIFICATION WORK BY DARE : FINAL REPORT
From: DIRECTOR OF SOCIAL WORK		
Date: 20 th MAY 2004	Ref: ST/SKMCD	

1. PURPOSE OF REPORT / INTRODUCTION

- 1.1. To advise Committee of the final report written by the DARE (Disability and Rehabilitation Education) Foundation on the outcome of the review of Brain Injury Services and how the recommendations made will be addressed.

2. BACKGROUND

- 2.1. Damage to the brain can occur through a variety of different injuries and as a result the difficulties people experience are often wide ranging and complex. Consequently, people are often unable to return to their lifestyle prior to their brain injury without a significant period of rehabilitation, which may initially be hospital based followed by service provision within their local communities.
- 2.2. Approval was granted at Social Work (Operations and Services) Sub Committee on 25 April 2002 for the DARE (Disability and Rehabilitation Education) Foundation, an independent organisation, to conduct a review of brain injury services. Funding of £36,510 was approved for this purpose.
- 2.3. The work facilitated by DARE took place between August 2003 and January 2004 as part of the Best Value Review of Independent Living Services. Participants worked in facilitated project teams over a six-month period. The outcomes were significant both in terms of identifying areas for service improvement or development and also in pin pointing sustainable methods for improving these services through joint working and service user/carer involvement.

3. PROPOSALS / CONSIDERATIONS

- 3.1. There were a number of recurrent and significant issues emerging from each of the four project teams which includes:
- Lack of awareness, understanding and training in the specific needs of people with acquired brain injury.
 - Lack of information given in hospital relating to expectations of the effects of brain injury.
 - Apparent failure or lack of communication and joint working between Health and Social Work.
 - Failure of referral systems for appropriate rehabilitation or follow-up following brain injury.
 - Lack of information, assistance and support with training, education and employment opportunities for people with acquired brain injury.
 - Lack of respite facilities.
 - Lack of appropriate advocacy services.

3.2. The report makes a number of recommendations in relation to these issues:

1. Disability equality and acquired brain injury awareness training should be mandatory for all provider agencies.
2. A cultural change in all agencies needs to be embraced which focuses on a more person centred approach.
3. The creation of a new post of Brain Injury Co-ordinator (jointly funded by Health and Social Work) whose primary role would be to act as liaison link between hospital and community. A designated team comprising social work, health and the voluntary sector should support this role.
4. Greater strategic collaboration between health, social work, housing, the voluntary sector, service users and carers is required to develop meaningful and sustainable strategies of inclusion and equality and person centred service provision.
5. Clear partnership pathways identified with a multi-agency framework for the transition of young people with acquired brain injury through school and into adulthood.
6. Within health, there needs to be a dedicated neurological service which is directed by staff specialising in brain injury.
7. Implementation of a programme enabling people with acquired brain injury to retrain and find meaningful, sustainable and appropriate employment.
8. A range of work is required around provision of information which includes:
 - A seamless process of access to information in different formats.
 - Publication of a comprehensive directory of services, with funding to ensure the directory is updated and accurate.
 - Production and distribution of a regular newsletter/bulletin as a discussion forum and means of communication.
 - Redesign of the Councils' website to make it more user friendly and accurate.
 - Development of an interagency database to reduce or eliminate the present system of ineffective and frustrating multiple assessments.
9. Development of advocacy services and greater person centred planning for people with acquired brain injury enabling means of achieving greater independence and inclusion in society.

3.3 These recommendations will be taken forward as part of the implementation process of the Best Value Review of Independent Living Services. Progress is being made as follows:

- i) Approval was given on 11th March 2004 at Social Work Committee for the redevelopment of an existing post to Job Coach to enhance the capacity of the Supported Employment Team to support people with acquired brain injury.
- ii) Single shared assessment is currently being rolled out to all care groups including people with physical disability.
- iii) Transition planning provides a mechanism whereby Education and Social Work Departments and Health collaborate to assist young people with a range of support needs into adulthood.

4. FINANCIAL / PERSONNEL / LEGAL / POLICY IMPLICATIONS

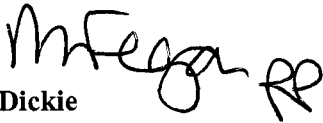
4.1 The findings and recommendations of this report are consistent with the broader findings contained within the Best Value Review of Independent Living Services, which was reported to Committee on 11th March 2004. They are also consistent with the direction of national and local policy in respect of community care services.

4.2 The recommendations will be incorporated into the Best Value Implementation Plan for Independent Living Services. This will require further work in considering which proposals can be addressed via service improvements on a no cost basis, and which will require additional investment. These resource implications will be reported to Committee at a future date, in the context of progress in implementing the Best Value Review.

5. RECOMMENDATIONS

5.1. Committee is asked to :

- (i) note the contents of this report
- (ii) request the Director of Social Work to provide additional information to Committee about service improvements and development with associated resource implications.



Jim Dickie
Director of Social Work
1st April 2004

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