

St Cyril's Rehabilitation Unit Inpatient Admission Criteria.

New inpatient referrals will be made in writing, using an appropriate referral form, to the Rehabilitation Consultant and will be discussed with the multi- disciplinary team. Following this discussion and possibly a pre – admission assessment visit, to the patient, a decision will be made as how to best meet the patients, needs.

Suitability for admission to St Cyril's Rehabilitation Unit will be based on the following inclusion/exclusion criteria.

Patients will not be admitted if they meet any of the exclusion criteria outlined in Sections 1 – 6 below.

1. Presentation/condition	
<i>Inclusion:</i>	Brain injured adult of 18 years or over traumatic (RTA, Assault, Fall) and non-traumatic (CVA, encephalitis) origin ranging from those with disorders of consciousness, i.e., vegetative, minimally conscious state (including those with a tracheostomy), to those with cognitive and behavioural disabilities, including those potentially in a locked-in syndrome, but excluding those who require secure services. St Mary's hospital can provide for patients who require secure services as long as the patients meet the criteria for detention under the Mental Health Act (1983).
	We do not except fully-ventilated patients, but do consider patients with indwelling tracheostomies.
	Other patients with complex needs requiring interdisciplinary rehabilitation may be considered on an individual basis after discussion with the MDT

2. Suitability for rehabilitation programme	
<i>Inclusion:</i>	Willing to cooperate with staff and to participate in a programme of rehabilitation.
	Pre-admission assessment identifies potential to improve and benefit from a rehabilitation programme.
<i>Exclusion:</i>	The patient's needs would be better met within an alternative service e.g a specialist spinal injury unit.

3. Age	
<i>Inclusion:</i>	Over the age of 18 + years.

Exclusion:	Under the age of 18 years
-------------------	---------------------------

4. Management – Medical	
Inclusion:	Medically stable.
Exclusion:	Needing specialist equipment and/or skills not within the unit's resources, e.g. ventilators.
	Additional medical conditions that prevent patient engaging effectively in a rehabilitation programme, e.g terminally ill, poor prognosis.

5. Management – Behavioural	
Inclusion:	Patients with occasional outbursts of verbal aggression.
	Patients with low level disinhibition
	Patients who require a protected environment
Exclusion:	Patients who currently misuse drugs or alcohol
	Physically aggressive behaviour that has the potential to cause harm to self or others.
	Behaviour that would interfere with the rehabilitation of other patients.
	Repeated excessive language that is abusive, insulting or threatening towards staff
	Repeated destruction of property
	Patients unable to comply with the unit policies including No Smoking Policy

6. Psychological/Psychiatric	
Inclusion:	Psychological disturbance secondary to an acquired brain injury or spinal cord injury.
	Patients who need access to specialist Neuropsychological or counselling assessment and therapy.
Exclusion:	A person whose primary needs arise from a psychiatric condition.

Rehabilitation Programme.

Patients have a weekly timetable that will include both individual and group sessions in order to provide assessment, advice and/or rehabilitation by the whole range of professionals within the multidisciplinary team.

Rehabilitation goals will be set and reviewed with patients regularly. Patients, family members and significant others are invited to regular reviews of their progress which will be discussed within the patients case conferences.