

The NRH Brain Injury and Stroke Specialty Programmes

Pre-admission information about the
Brain Injury and Stroke Specialty Programmes



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The National Rehabilitation Hospital has developed a full range of care for people with Acquired Brain Injury. This range of care ensures that all patients can receive the most suitable programme of care based on their injury and their individual rehabilitation needs.

The Brain Injury and Stroke Specialty Programmes include the following services:-

- The Brain Injury Comprehensive Integrated **Inpatient** Rehabilitation Programme
- The Brain Injury **Outpatient** Rehabilitation Programme
- The Brain Injury **Home and Community** Based Rehabilitation Programme
- Brain Injury **Vocational** Services
- **Stroke** Specialty Programme

Acquired Brain Injury may result from injury (such as an accident) or Stroke, medical conditions such as brain tumours, or other neurological conditions.

Brain Injury and Stroke Speciality Programmes at the NRH receive medical referrals from hospitals, doctors (GPs), and other HSE services nationwide.



Each Programme aims to discharge all patients after they have achieved their rehabilitation goals and gained maximum benefit from their treatment programme at the NRH.

The Rehabilitation Team from the NRH Brain Injury and Stroke Speciality Programmes works together with patients who have an Acquired Brain Injury (ABI), and their families and carers, to assist them in achieving the following aims:-

- to adjust to their injury
- to achieve the safest possible level of independence
- to participate socially and in the community

Frequently Asked Questions By Patients Coming To The NRH

What can I do before admission to the NRH?

Begin applying for your Medical Card as soon as possible; this will be needed if you require specialist equipment. Ask your doctor for an up to date copy of your prescription and bring this, along with all your medications with you on the day of your admission. Begin to think about identifying the goals you would like to achieve during your rehabilitation programme.

What makes the NRH different from other hospitals?

Other hospitals treat medical conditions or illnesses and aim to discharge patients within a short time following treatment. At the NRH, the focus is to provide personalised treatment plans dedicated to helping patients to achieve the safest level of independence possible. Patients being admitted to the NRH must be medically stable. Each person referred is assessed to ensure that participating in an intensive rehabilitation programme is suitable treatment for them, based on their clinical need.



How long before I can get in?

Your admission depends on a number of factors including your diagnosis, your level of complexity, your readiness to undertake rehabilitation and the availability of a bed in the particular service you require. At times there can be significant waiting lists.

The average waiting time for admission to the Brain Injury and Stroke Specialty Programmes in 2024 was 172 days.

How long will I stay there?

A Consultant or member of the Outreach and Coordination Team from the NRH may be able to give a broad indication of your length of stay. However, on admission to the NRH, your team will assess you and aim to answer this question as accurately as possible. Usually at around two weeks after your admission, you will be given an estimated discharge date.

The average length of stay for patients in the Brain Injury Programme in 2024 was 101 days. The average length of stay in the Stroke Specialty Programme was 110 days in 2024.

What recovery can I expect to make?

It may be that life into the future is different for you and your family, but the expertise of the rehabilitation team at the NRH will help you and your family in adjusting to that changed future. Staff at the NRH will take every opportunity to make the most of all possibilities for you to achieve health and social gain. The most effective way to reach your rehabilitation goals is by participating in your scheduled treatment and education sessions.

What will I do in the NRH?

The day in the NRH is usually organised between time spent on your unit, attending therapies, and participating in recreational activities. Therapies are usually scheduled over 6 days. This is a holistic rehabilitation approach involving engagement with your rehabilitation team based on your goals.

Therapeutic Leave

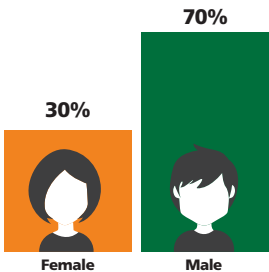
Therapeutic leave may be planned into your rehabilitation programme to practice the skills at home that you have learned in the NRH, and to facilitate a gradual return to home and community.

Woodpark is a pre-discharge Unit at the NRH to enable patients and family to prepare for transition home. Please ask a member of your rehabilitation team for more information.

What is the typical age range and gender of people admitted to the Brain Injury Programme?

In **2024** the breakdown of patients admitted to the Brain Injury Programme was **30% female** and **70% male**. The age range was **19 - 75** years old.

Gender of Patients admitted to the Brain Injury Programme in 2024



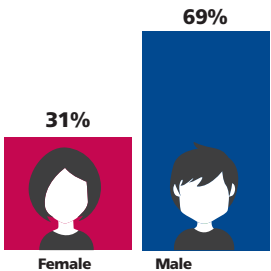
Age Profile of Patients admitted to the Brain Injury Programme in 2024



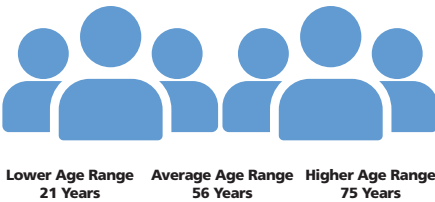
What is the typical age range and gender of people admitted to the Stroke Specialty Programme?

In **2024** the breakdown of patients admitted to the Stroke Specialty Programme was **31% female** and **69% male**. The age range was **21 - 75** years old.

Gender of Patients admitted to the Stroke Specialty Programme in 2024



Age Profile of Patients admitted to the Stroke Specialty Programme in 2024



What do I need to bring with me on admission?

A checklist of items you need to bring is listed below:

- Everyday Items you may use, for example, reading glasses, hearing aid, walking aid or communication aid. If you have a wheelchair, bring your cushions and both foot plates.
- Clothing – comfortable clothing such as:
 - tracksuit or slacks (3 pairs)
 - warm loose-fitting jacket
 - jumpers or T-shirts
 - underwear and socks or tights
 - shoes - comfortable shoes or runners (ideally not new ones)
 - pyjamas or nightwear (non-flammable material), and slippers
- Toiletries – you will need these on an ongoing basis
 - toothbrush and paste
 - facecloth, soap and shampoo
 - roll-on deodorant (not sprays)
 - shaving cream and razor
- A list of your current medications from your GP if available
- Medical Card
- PPS Number
- Details about any allergies you may have
- Details of special dietary requirements
- Other items you may use every day, for example, smartphone or computer tablet

Please keep personal belongings to a minimum and do not bring in valuable items. Your locker will be emptied and cleaned weekly to maintain our hygiene standards.

Where do I go after discharge from the NRH?

The aim is for 75% of patients to be discharged home when they have completed their rehabilitation programme. Some patients will be unable to go directly home from the NRH because of certain care needs. For example, if they are waiting for housing adaption, special equipment, or appointment of carers. Some patients may be referred to the Brain Injury or Stroke Outpatients Programme, some may be discharged to other healthcare facilities

Intensity of Services at the NRH

Intensity of services means how much and how often services will be provided to patients within their Programme. This will vary depending on each individual's assessment. Rehabilitation nursing services are provided around the clock and relevant therapies will be planned for according to patients' clinical needs.

For example, treatments may be delivered on a one to one basis, or with more than one person being treated by a therapist at the same time; you may also receive group treatment (such as educational sessions).



Visiting Hours*

Monday to Sunday	5.45pm – 7.45pm
Saturday, Sunday & Bank Holidays	2.00pm – 4.00pm (apart from mealtimes)

***Note:** Visiting hours may be affected during times when there is an outbreak or pandemic. Please check www.nrh.ie for up to date information and whether visits need to be booked.

Protected Mealtimes

The NRH operates ‘**Protected Mealtimes**’, visitors are asked to avoid coming to see patients during mealtimes, unless they are helping a patient with their meal. Visitors must leave the units during mealtimes but may remain on the hospital premises.

Patient Satisfaction

Feedback provided by patients, families, carers and visitors is greatly appreciated as it helps us to improve our services. There are various ways to give us feedback about your experience of the NRH, including:-

- An independent consumer survey (uSPEQ) is sent by post to all patients approximately 3 months following discharge from the Inpatient Programme.
- Comments & Suggestions forms are available throughout the hospital. Patients, families and visitors are encouraged to give their feedback. Please ask any staff member if you need any assistance in finding or completing the forms
- Feedback may also be given verbally to any member of staff.
- Information leaflets explaining our Complaints Procedure are available throughout the hospital.

The NRH Values Your Health

In line with Government Policy, the National Rehabilitation Hospital is a smoke free campus.

Making Every Contact Count (MECC) is a HSE Programme which is available to all NRH Patients and is delivered by NRH staff who have been trained in the programme.

The MECC programme:

- Focuses on chronic disease prevention
- Supports patients in making positive changes to their physical and mental health and wellbeing

The programme will offer you supports in the following areas and in line with your health needs and goals:

- Tobacco use
- Alcohol and drug use
- Health eating
- Physical activity
- Overweight and obesity
- Mental health and wellbeing

Please ask your nurse or therapist if you are interested in any of these topics. You may ask to speak with a 'Stop Smoking Advisor' for support. Information sessions will also be available for patients to attend.

The NRH is a fully publicly funded voluntary hospital and operates under its mission and ethos of providing high quality care and



treatment to patients irrespective of background or status, but on the basis of clinical need.

Brain Injury and Stroke Speciality Programmes.

Effectiveness, Efficiency and Access to the Programme

Through seeking CARF* international accreditation, the NRH has shown its commitment to steady and continuous improvement in its service delivery. It puts in place various improvement plans which allow us to measure the access to, efficiency and effectiveness of the Brain Injury and Stroke Speciality Programmes.

* Commission for Accreditation of Rehabilitation Facilities

For patients admitted to the Brain Injury and Stroke Speciality Programmes, a measure of their independence is taken at both admission to and discharge from the Programme. This enables the Rehabilitation Team to measure the improvement that patients have made in their functional ability during their stay (for example, practical skill and ability to manage their needs and care, or ability to direct a carer to do so).

Activity and Outcomes for Inpatient Services

A total of 116 patients were discharged in 2024 from the NRH **Brain Injury** Inpatient Programme. 111 patients were discharged from the full Comprehensive Integrated Inpatient Rehabilitation Programme (CIIRP) and 5 patients were admitted for review or assessment.

A total of 99 patients were discharged in 2024 from the **Stroke** Specialty Programme. 96 patients were discharged from the full Comprehensive Integrated Inpatient Rehabilitation Programme (CIIRP) and 3 patients were admitted for review or assessment.



Contact details for the Brain Injury and Stroke Specialty Programmes

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