

Topic: Services for people who have experienced Brain Injury

“Brain injury is the leading cause of death and disability in young people”¹. Approximately one million people in the UK are living with the effects of an acquired brain injury (ABI)². ABI is an injury that has occurred since birth. It includes traumatic brain injury (TBI) which is an injury caused by an external force such as in a road traffic collision, violent assault or a fall. Non-traumatic brain injury includes tumours, strokes and encephalitis.

Someone is admitted to hospital with a brain injury every 90 seconds in the UK. Within Merton for 2013/14, there was a total incidence rate of 545 per 100,000 for acquired brain injury (ABI) whilst the prevalence of traumatic brain injury (TBI) in the borough was 2396. The total of ABI admissions from the Merton Clinical Commissioning Group for 2013/14 listed 938 individuals whilst Sutton and Merton Community Service listed a total of 2128 admissions in 2012/13.

Even after a minor head injury, brain function can be impaired while the more severe the brain injury, the more pronounced the long-term effects are likely to be. Brain injury can lead to physical, cognitive, emotional and behavioural problems. Survivors of more severe brain injury are likely to have psychiatric co-morbidity and complex long-term problems affecting their personality, their relationships and their ability to lead an independent life.

Rehabilitation is concerned with helping an injured person to recover, as far as possible, the functions that they used to have before the injury. Where this is not possible, it aims to help the individual to achieve the highest possible level of independence. Rehabilitation is critical to recovery after a brain injury because, unlike most other cells in the body, brain cells do not regenerate when they are damaged.

Research shows that effective rehabilitation of brain injury is cost-effective, reduces health inequalities and enables people to manage their own health and wellbeing as independently as possible. This, in turn, is likely to lead to a reduced reliance on state support in the long term as people are able to maximise their recoveries and care for themselves.

Better services for brain injury survivors within the borough would reduce isolation and health inequalities, enable people to remain or regain independence and prevent individuals from seeking long term care and avoid survivors of a brain injury from coming into contact with the criminal justice system.

Residents who sustain an ABI in Merton benefit from having an internationally renowned acute service at St George’s University Hospitals NHS Foundation Trust

¹ Health Select Committee : Head Injury Rehabilitation, March 2001

²Alan Tennant, The epidemiology of head injury, Department of Rehabilitation Medicine, The University of Leeds, March 2005

on their doorstep. Subsequently, there is an excellent neurorehabilitation service provided at St George's. This service is provided for patients who require intensive therapy. In-patients are admitted for a 12-week programme and follow individually tailored programmes based on goals set by the patient and their family or carers, in collaboration with the treating team.

How could scrutiny look at it?

- This could be considered as an in-depth task group review
- A visit could be made to the acute neurosciences centre and neurorehabilitation services at St George's to see how services manage patients and their rehabilitation.
- Evidence could be sought from rehabilitation specialists to consider if there is adequate provision in Merton and what services are provided to brain injury survivors on discharge to smooth their transition from hospital to home.
- An in-depth review of commissioned services for brain injury survivors could be completed for the Healthier Communities and Older People Panel, where scrutiny could invite participation from Public Health, St George's University Hospitals NHS Foundation Trust, Adult Social Care, Merton CCG and the voluntary sector.
- Scrutiny could propose improved services for individuals who have sustained a brain injury. This might include developing a prevention strategy, reducing admissions to hospital or residential care by offering short-term, focused support when survivors or their families face a potential crisis. Public Health may identify strategies to reduce head injuries caused by road traffic collisions, improved cycle safety and a reduction in falls.