

Two members of the Brain-BITP team attended an All Party-Political Committee at the Palace of Westminster on Tuesday 30<sup>th</sup> January 2018 where several presentations were given concerning:

**Acquired Brain Injury - the cost to individuals and society.  
Neurorehabilitation Services and the role of the Rehabilitation Prescription**

- Overview of prevalence and incidence of ABI

*[Professor Mike Barnes outlined that there are only approx. 3,000 beds in all Rehab Staging units in the UK now, whereas at least 12,000 beds are required]*

*[Only 5% of Major Trauma Centres have Patient Rehab Specialists available]*

*[Statistics indicate strongly that the early engagement of Rehab Specialists reduces long-term rehab costs]*

*[GPs and Clinical Groups lack a general awareness about the setting up of a patient Rehab Prescription for each patient]*

*[There appears to be a reluctance to fund Rehabilitation]*

- Consequences of ABI and the need for early and long-term neurorehabilitation services from acute, specialised, community and vocational rehabilitation

*[There are 15 professional bodies specialising in ABI, which includes any damage from birth or infant brain trauma]*

*[Across the world there are estimated to be 50M TBI occurrences per annum, with over 1M resulting in death]*

*[In the UK the ABI figures are close to 1.4M with over 135k hospital admissions]*

- Cost-effectiveness of rehabilitation

*[The ABI costs include Social Care Costs, Loss of Employment, and Costs of Redeployment]*

*[Statistics presented by Professor Lynne Turner Stokes, MBE demonstrated that rehabilitation by specialists at the acute phase and early rehabilitation phase, was financially far more effective within the ABI Care Pathway, along with ensuring a greater quality of life for the injured]*

- **Role of the Rehabilitation Prescription**

*[Clinical Neurotraumatologist Hannah Farrell followed with a clear outline of the Rehab Prescription, explaining that it is something each patient has a right to receive a copy of, demand a Co-ordinated Pathways of Care, and that it should cover emotional, social and behavioural assessment.]*

*[She outlined that the Prescription should:*

- *Describe all the Patient Rehab Needs*
- *Engage the patient in Processes and Empower them*
- *Help to Improve Service Quality*
- *Provide comprehensive information and on-going, long term needs across all services of care]*

*[She also outlined the need for better connections across rehab services, for the establishment of Multi-Disciplinary Rehab Teams with a more co-ordinated approach to working on the Passport]*

*[She also outlined the important of safeguarding across the area to ensure the preservation of liberties and standards]*

- **Case studies: James and Josh**

*[The meeting ended with a brain injury survivor (James Piercy) outlining his experiences of Rehabilitation following his Traumatic Brain Injury]*