





QuDoS Multiple sclerosis: NHS case studies 2019

Outstanding MS physician Barbara Chandler

Your name, job title and centre

Dr Barbara Chandler, Consultant in Rehabilitation Medicine, Raigmore Hospital, Inverness

Project / initiative name

Neuro-Rehabilitation Project with Highland Hospice

Project start date

2019



Challenge

- People with advanced MS can face a range of day-to-day issues caused by common symptoms such as fatigue, mobility problems, cognitive impairment and spasticity. Accessing services to help with these issues can be challenging.
- While many of these issues can be dealt with in the community, patients can often benefit from a period of intensive, goal-oriented rehabilitation.
- 3. Competing demands for beds on the Highland Neurorehabilitation ward, such as emergency admissions, make admissions from the community very difficult to achieve.

Solution

- Highland Hospice was keen to broaden its range of services at the same time as the Neuro-Rehabilitation team were exploring options to offer people periods of focussed in-patient rehabilitation.
- Neuro-rehabilitation patients referred by Dr Chandler and the neuro-rehab team are assessed by the hospice team before being admitted on a 10-day intensive rehab programme.
- Each patient has a different set of goals. Previous examples have included being more independent in a wheelchair, regaining the ability to self-feed and fatigue management.

Solution cont...

- 4. Each programme is tailored to meet the individual's needs and goals.
- 5. At the end of the rehab period, the patient is connected to relevant community organisations and services to help them continue with their progress.
- 6. Follow up over the next 12 months is with the neuro-rehab and palliative care teams.

Results

- 1. These rehab beds are not subject to competing emergency admission demands, meaning patients can plan for their stay.
- 2. From 9 admissions; 7 had multiple sclerosis of whom 3 partially and 4 fully achieved their goals. Follow up indicates ongoing goal engagement.

What was the biggest challenge?

We were concerned that patients might worry about the concept of going to a hospice, but in fact the staff are so rehabilitation focussed that individuals were immediately put at ease and unanimously felt positive about the rehabilitation programme.

How did you overcome the challenge?

Describing the project initially, often followed by a joint meeting with the hospice therapy staff and neuro-rehab team staff.

What would be your advice to others wanting to replicate this project?

Make contact with local palliative care services and find out if they are interested in developing links with neuro-rehabilitation and working with patients who have advanced disease.

This project initially came about because the team were already in regular contact to share experience and seek advice in both directions. The lack of NHS services had prompted the team to look outside the NHS for possibilities to improve neuro-rehab opportunities.

Testimonial quote



The individuals who have been through the project to date have valued the time given to practice activities such as mobilising, transferring, upper limb functions. They have valued the time to focus on their rehabilitation needs with skilled staff and the opportunities to continue post discharge.

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