



Service Priorities and Programmes Electronic Presentations

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Can I work again? Helping the Young Acquired Brain Injury to Resume Work

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Introduction

“The bad news!” This is how Lynn Brouwers, the director of the Rainbow Rehabilitation Centres at US, described the figures of returning to work in people with disability. The challenge is even bigger for the acquired brain injury (ABI) because the injuries affect not only the physical function, but also the cognitive and affective abilities of the patients. The return to work (RTW) rate after stroke could be as low as 19% (Treger et al 2007), and only 11% of patients with significant neglect or aphasia were working at 1 or 3 years post-injury (Hofgren et al 2007).

Objectives

The neurorehabilitation team in MacLehose Medical Rehabilitation Centre (MMRC) worked to facilitate RTW by (1) providing multi-disciplinary and early RTW rehabilitation services and (2) the establishment of Neurosurgical Follow-up Clinic (NSFU Clinic) to enhance the day RTW rehabilitation services. This study investigated the outcomes of our services.

Methodology

149 young ABI (aged 65 or below) who were discharged from MMRC from 2014 to 2016, and were employed before the injury were included in the study. Based on our clinical pathway, they were classified into two groups, namely mild-to-moderate (N=78) and severe (N=71) neurological impairment. 49 of them were followed up in the NSFU Clinic.

Result

The RTW rates for the multi-disciplinary and early RTW rehabilitation services were encouraging. Based on the statistics of Hong Kong Government in 2013, only 36.5% of people with disability were working. However, 59% of our young ABI could return to the labour market. The RTW rate for the mild to moderate neurological impairments

could reach 83%, which was very promising.

The day services and the NSFU Clinic were very useful in facilitating the RTW. The RTW rates in the NSFU Clinic were very satisfactory (Mild-to-moderate: 92%; Severe: 56%), and were much higher than those not in the NSFU Clinic (Mild-to-moderate: 58%; Severe: 20%).

In line with the goal of rehabilitation in MMRC to help patients to accept the “new” self after ABI and start a new meaningful life, RTW further boost up their courage for the future rather than just to earn a living. The two key findings strongly support that the neurorehabilitation services in MMRC can bring hopes to the young ABI and their families.