



Government of **Western Australia**
North Metropolitan Health Service
Mental Health, Public Health and Dental Services



State Head Injury Unit Annual Report 2020/21



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Endorsement

Ms Jo Fagan

Director, Public Health

Mental Health, Public Health and Dental Services

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Overview of SHIU

The State Head Injury Unit (SHIU) is a state-wide, comprehensive, specialist case coordination and community based rehabilitation service for individuals diagnosed with an acquired brain injury (ABI) between the ages of 16 and 65. The SHIU's primary focus is to provide assessment and therapy for individuals returning to the community from hospital whose goals are to optimise their engagement in meaningful activities and pre-ABI roles. The SHIU actively engages family / significant others in service delivery to support the individual in their recovery journey. Eligible patients have access to Case Coordination (CC), Clinical Psychology (CP), Occupational Therapy (OT), Physiotherapy (PT), Social Work (SW), Speech Pathology (SP) and Allied Health Assistant (AHA) for their community rehabilitation needs.

Whilst SHIU has always accessed Virtual Care services for rural and remote patients and service providers, with the global pandemic our service model has adapted to offer Virtual Care services to patients and external service providers located within the Perth metropolitan area.

Once eligible for services through the SHIU, patients are able to access the following pathways:

- **Comprehensive Registration (CR):** Individuals with moderate to severe brain injury requiring access to CC and multiple therapeutic rehabilitation services.
- **Telephone Registration (TR):** Individuals with mild brain injury. Individuals accessing this pathway can access CC and up to two therapy services. If additional therapy services are required, then the person will be transferred to a CR pathway. Patients who are rural and remote and have sustained a moderate to severe brain injury, follow the TR pathway as they are usually linked with local therapy services.
- **Concussion Program:** Individuals with a diagnosis of concussion are prioritised for early access to CC within the first four weeks of injury. Most are contacted within one week of referral receipt and provided with resource information to access via our website to optimise outcomes.
- **Therapy Only (TO):** Individuals requiring targeted intervention or specialist therapy opinion are able to be allocated directly to the required therapy. An example would be a patient who has made a good recovery with minimal residual deficits and requires assistance to negotiate a return to work plan could be allocated directly to OT. The TO pathway is accessed only when other options have been exhausted, with most patients allocated to a CC pathway.
- **Discrete Registration:** This pathway is used for former SHIU patients requiring access to services for a targeted issue that requires very short-term intervention. For example, completion of support letter.

The SHIU is based at Sir Charles Gairdner Hospital (SCGH) and is part of the Public Health Unit that sits within the North Metropolitan Health Service - Mental Health, Public Health and Dental Services Directorate (NMHS MHPHDS).

Staffing

The 2020-2021 year has seen the SHIU become fully staffed with experienced and passionate staff who are driven towards improving the lives of those following ABI. Recruitment will remain at the forefront for SHIU moving into next financial year as the unit embraces the exciting opportunities presented by a restructure, which will enable expansion to provide Specialist Rehabilitation Medicine and Clinical Neuropsychological services.

Recruitment:

- Successful recruitment of the following positions:
 - Permanent Senior SP, commenced October 2020
 - Backfill Senior SW for secondment period from April 2021 to April 2022
 - Backfill P1 OT for extended leave period from April 2021 to November 2021
 - Permanent CP, commenced February 2021
 - CC positions were filled via existing staff changing roles in a permanent capacity (August 2020) and pool recruitment for contract positions (February 2021)
- Following the finalisation of the restructure in 2021-2022, it is anticipated that where possible, eligible contracted staff will move through conversion to permanency, further cementing the experience and knowledge based of the SHIU.

At the end of the 2020-2021 financial year the SHIU current staffing comprises (14.2FTE):

1.0FTE	Program Manager (Acting)	Formerly Head of Department
1.0FTE	Team Leader (Acting)	Formerly Program Manager
4.0FTE	Case Coordination	(1 fulltime and 5 part-time staff)
1.4FTE	Clinical Psychology	(2 part-time staff)
2.0FTE	Occupational Therapy	(1.0 Senior job share; 1.0 Occupational Therapist)
1.0FTE	Physiotherapy	(1.0 Senior)
1.6FTE	Social Work	(1.0 Senior; 0.6 Social Work)
0.2FTE	Speech Pathology	(0.2 Senior)
1.0FTE	Allied Health Assistant	(2 part-time staff)
1.0FTE	Administration Assistant	(HSU Level 2)



SHIU Team represented by L to R: Erika Lori (Senior PT), Donna Lindop (CC), Alison Teng (CC), Shelley Tregoe (Senior SP), Jade Sachau (AHA), Ceri Pass (Senior OT), Belinda Veary (CC), Joanna Grzech (Senior OT), Tiana Hankins (CP) and Rose Blight (Team Leader)

Achievements

The SHIU is a dedicated state-wide Allied Health team who work diligently to provide excellent clinical care. The team take pride in ensuring that the unit is providing relevant, evidence-based rehabilitation programs as well as progressing quality improvement (QI) and project opportunities. 2020-2021 has been a busy and successful year with staff maintaining their high level of commitment and dedication to the ABI community. The unit is primed for continued growth and becoming a leading service in the area of ABI in WA.

SHIU Planning Day

Our annual Planning Day was conducted on the 2nd of June 2020. This continues to be a productive and highly valuable day which brings together the team to review previous projects and QI achievements; plan for continuing and future opportunities, and creates a sense of ownership, accountability and pride in working towards improving outcomes for patients, families and the SHIU as a team. The day involved all available staff to undertake:

- Reviewing the 2020-2021 Operational Plan and working party outcomes;
- Brainstorming to bring forward everyone's ideas from small "quick win" projects to larger scale "big bet" organisational projects;
- Conducting an Impact vs Effort analysis on projects identified to determine which were viable moving forward;
- Reviewing ideas in groups to generate and develop project themes; potential milestones; and anticipated outcomes; and
- Identifying priorities for 2021-2022 and nominating staff responsible which allows staff to take ownership and be accountable in areas of mutual interest.

The Planning Day outcomes contribute to the Operational Plan for 2021-2022.

Working with Aboriginal Health

The "*Improving Access to ABI Rehabilitation Services for Aboriginal Clients*" QI project which commenced with initial discussions in 2019-2020 was successfully undertaken in 2020-2021. In the period, January to June 2020, of the 28 Aboriginal patients admitted to SCGH with an ABI, 22 were considered eligible for SHIU services. Unfortunately, and for reasons unknown, only one Aboriginal patient was referred. Hence the need to develop processes to improve referral and access whilst also providing education regarding the ABI journey to promote and foster engagement with services.

The project saw the SHIU and MHPHDS Aboriginal Health:

- Develop an abbreviated referral form for use by the SCGH-based Aboriginal Liaison Officers (ALO's) with the aim to eliminate barriers at point of referral;
- Develop a culturally appropriate SHIU brochure for use with Aboriginal patients and community following ABI; and
- Determine a referral process to assist with engagement which involved the SHIU Team Leader meeting with the patient and family whilst an inpatient and providing education regarding ABI recovery, with support of the ALO's.

Following development of both the referral form and brochure, the project to increase access to ABI rehabilitation services commenced. From November 2020 to March 2021, the SHIU received nine referrals direct from the ALO's, eight of whom were eligible for SHIU services,

with the one deemed not eligible being linked with appropriate support services. Through the referral and initial engagement process, all eight patients commenced and remained on SHIU program. The project was presented at the inaugural NMHS “Inspire Conference” on the 26th of March 2021.

Given the success of the initial project, steps are being made to expand to other health services in 2021-2022 including:

- Working with the Edith Cowan University (ECU) “*Healing Right Way*” project to determine referral numbers to inform building a case for an Aboriginal Case Coordinator (or similar role) within SHIU to assist with project roll-out and provision of culturally safe care;
- The SHIU and MHPHDS Aboriginal Health undertaking “*Guddi Way – Come Home, Come Heal, Come Rest*” training by Synapse planned to take place in early 2022 to ensure provision of culturally safe and appropriate assessment and rehabilitation programs; and
- Working with MHPHDS Aboriginal Health to expand with other Aboriginal Health services.

The SHIU and Aboriginal Health are excited for the opportunities this project brings to patients, family and community to gain a greater understanding of ABI and how to welcome home and support Aboriginal patients following ABI.



Miffy Durham (SHIU Program Manager) and Rebecca Collard (SCGH AHLO)

Equipment and Technology

MedTech, our electronic medical record, officially went “live” from the 1st of July 2020 and has already proven to be beneficial in obtaining data to inform ongoing service provision and planning.

In conjunction with the introduction of MedTech, the SHIU have sought updated technology to provide enhanced options for patient engagement, improved practice efficiency and a greater service reach. Examples include:

- Treadmill – primarily for use with the post-concussion patients to aid with assessment and treatment programs;
- Updated resources – priority was made for purchasing of updated resources to assist with cognitive, communication and psychological assessment and rehabilitation programs, with OT, SP and CP receiving up-to-date and relevant assessment and therapy tools;
- New SP iPad “apps” for use with patients with aphasia to enhance provision of care; and
- Improved use of Virtual Health Care, particularly with Covid-19 restrictions

Innovative Future (IF) Program and associated websites

SHIU Case Coordinator, Dianne Mitchell, was a successful recipient of the 2019-2020 IF Program grant, which enabled the building of a website under NMHS to house the SHIU Early Response to Concussion pathways and ABI education resources. A passionate advocate for patient's post-concussion, Dianne worked with the SHIU team, IF Program, NMHS Communications and clients who had experienced concussion to bring the content to life and provide an excellent resource for patients and health professionals regarding the concussion recovery pathway and concussion management.

This project allowed the SHIU to “piggyback” on the website development and upgrade our site with direct link. Like the concussion website, the SHIU website offers resources post-ABI for patients and health professionals, with information about the services offered, education programs provided, and external evidence-based links. Both websites were completed and went “live” in April 2021 – check them out through following the links below:

www.nmhs.health.wa.gov.au/concussion and www.nmhs.health.wa.gov.au/shiu

Going the Extra Mile (GEM) Finalist – Chief Executive Award, Team

The SHIU team were nominated for and progressed to finalist on the 31st of July 2021 for the GEM Chief Executive Award for embodying the NMHS values of Care, Respect, Innovation, Teamwork and Integrity through a positive and empowering culture. The staff are caring, empathic, supportive, collaborative and professional, providing patient-centred care with principles of kindness, empathy and compassion. All staff and patients are treated with respect, courtesy, equity and dignity. The SHIU is a team who is open to change which moves towards broader organisational and community goals and how we can “do better” to improve patient outcomes.

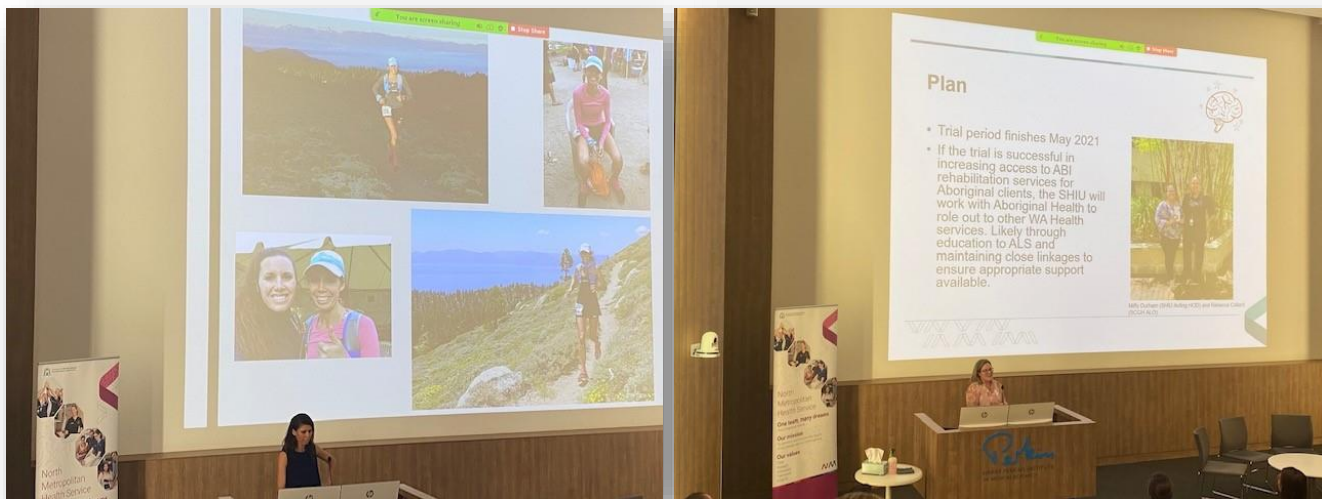
L to R: Rose Blight, Emma Morgan (Senior SW), Miffy Durham and Karen Kyriakou (MHPHDS Acting Executive Director)



NMHS Inspire Conference

The inaugural NMHS “Inspire Conference” on the 26th of March 2021 saw SHIU PT, Erika Lori, invited to present “*Running a Mountain Ultra-marathon: A Story of Goal Setting, Perseverance and Motivation*”. Erika’s presentation told of the preparation, guts and determination required to not only undertake an ultra-marathon, but to complete a 100 mile (160km), 2 lap ultra-marathon through the mountains around Lake Tahoe in the USA. Erika’s dedication to her running is certainly inspiring!!

Miffy Durham, Acting Program Manager, presented the “*Improving Access to ABI Rehabilitation Services for Aboriginal Clients*” QI project (outlined previously) and outcomes thus far.



Erika Lori and Miffy Durham presenting at the NMHS Inspire Conference 2021

Donation

Michael and Emmalene Head visited the SHIU on the 22nd of April 2021 to formally announce their donation of \$5000 to the SHIU. Michael is a former patient of the SHIU from 2009. Michael commenced his SHIU rehabilitation program following a haemorrhagic stroke due to ruptured aneurysm at the age of 37. Part of his rehabilitation involved PT which lead to learning to run to improve his balance and neuro-physical recovery – he was never a runner prior to his stroke.

This initial intervention sparked a passion for running in Michael and Emmalene. Michael has since gone on to become an ultra-marathon runner and last year completed the Lighthorse Ultra-Marathon which involving running as far as possible in a 24hr period. Michael ran an incredible 180km with Emmalene’s employer sponsoring his every kilometre.

The SHIU were very fortunate and very thankful recipients of 50% of the funds raised, with 50% going towards cancer research.

Michael attributes his positive recovery and change of lifestyle to his time on our program and the support provided both to himself and his family. The SHIU will put the donation to excellent use in 2021-2022.



L to R: Emmalene Head, Miffy Durham, Michael Head and Rose Blight

Partnering with the Neurological Intervention and Imaging Service of Western Australia (NIISWA)

In 2021 SHIU embarked on a partnership with NIISWA to educate Registrars regarding cognitive deficits; the return to driving process; and supporting psychological recovery post-stroke. Whilst in its infancy, the aim of the partnership will be for Registrars to gather relevant information regarding cognitive and psychological recovery and future goals to inform referral to the SHIU who will undertake a rehabilitation program. This partnership was started through

gaps in service becoming evident through clinic reviews and concerns that these issues were not necessarily being addressed effectively. The SHIU looks forward to this partnership progressing in 2021-2022.

Partnering with Edith Cowan University (ECU) Research and the University of Western Australia (UWA) Psychology Departments

2020-2021 has provided the opportunity to join with both ECU and UWA on various research projects regarding interventions for patients with ABI. Research projects that have been successful in receiving funding through the Neurotrauma Research Program at the Perron Institute, and for which SHIU are investigators, are:

- **ECU** – *ENLightIND: The effectiveness of a 12-week remote-delivered green-blue light therapy intervention on daytime sleepiness, fatigue, work productivity and quality of life outcomes in individuals following traumatic brain injury.*
 - Investigators: D Bartlett, T Cruickshank, J Walsh, J Lo, M Durham, C Richardson, M Stanley, M Turner.
- **UWA** – *Pilot study of a group therapy program for individuals with emotion dysregulation after an acquired brain injury.*
 - Investigators: R Becerra, C Pestell, M Weinborn, J Gross, N Pepping, N Rushworth, M Durham.

The ECU ENLightIND project is currently undergoing Department of Health ethics approval and governance with SHIU being able to refer direct to the project towards the end of 2021.

The UWA emotional dysregulation group program commences August 2021 with patients self-referring on advice from treating therapists.

SHIU are also partnering with UWA Psychology Department to be able to direct-refer to the ABI Recover Neuropsychology research program which undertakes initial and ongoing cognitive assessment to inform recovery and rehabilitation.

These partnerships and research projects will only help to further inform treatment and best-practice for patients post-ABI.

Students

The SHIU hosted two fourth year Curtin University of Technology OT students in October 2020 for an eight-week fulltime placement; and one final year UWA Neuropsychology student for 3 months, 3 days per week from September to December 2020.

In addition to the clinical demands of their placement, the OT students completed a “Protocols for Return to Driving in the ABI population” project which is used to inform return to driving processes. The Neuropsychology student completed clinical assessment and data analysis of the RedCap concussion data and former SHIU database to assist with future research projects.

Snapshot of Activity 2020-2021 – A comparison

The following provides a comparison of SHIU data from 2019-2020 and 2020-2021, specifically geographical areas, diagnoses, gender and referral sources.

The SHIU received 785 referrals 2020-2021 with 76 being redirected to other services (not eligible for SHIU). This is an increase on 2019-2020 of 179 (total = 606). The SHIU has experienced a steady increase in referrals of, on average, 20 per month since 2016 with no increase in FTE.

Whilst we have had a steady increase in the number of referrals to the unit, the capacity of staff to admit patients to the unit has been reduced from previous years due to the impact of the National Disability Insurance Scheme (NDIS) requirements for discharge planning for long term supports, which has significantly limited the throughput of patients. Changes to our triaging practices have had to occur to reduce further impact moving forward. Additionally, the SHIU will have a co-located NDIS Local Area Coordinator onsite in early 2021-2022 to assist with NDIS referrals and discharge planning with the aim to streamline services and increase access to SHIU services for waitlisted patients.

Strategies have also been put in place to provide early education at point of referral to assist with determining need for ongoing support. Examples include: invitation to the Understanding ABI seminar; provision of relevant resources through mailed education packages; and linking to our website resources.

Management of the ever-increasing number of referrals for patients' post-concussion continues with different strategies trialled to ensure access to early intervention to reduce potential for long-term deficits and development of post-concussion syndrome. 2021-2022 hopes to see progression of the NMHS, Western Australian Primary Health Alliance (WAPHA) and SHIU partnership to assist with education of General Practitioner networks in the management of this patient cohort.

The SHIU has spent much of 2020-2021 identifying gaps in service where we can make a difference to patient outcomes, which we anticipate will be reflected in our next financial year.

A focus for 2021-2022 will also be ensuring the unit is adequately resourced to provide appropriate services to the current cohort in addition to:

- The increasing number of patients following concussion;
- Progressing the improving access to ABI rehabilitation services for Aboriginal patients; and
- Progressing the partnership with NIISWA to address gaps in cognitive, driving and psychological rehabilitation post-stroke.

Providing rehabilitation services to patients following ABI state-wide: admissions by geographical region

(South Metropolitan Health Service SMHS, North Metropolitan Health Service NMHS, East Metropolitan Health Service EMHS, WA Country Health Service WACHS)

2019-2020	2020-2021
<ul style="list-style-type: none"> • 495 admissions • 32% SMHS • 31% NMHS • 22% EMHS • 15% WACHS • *844 patients received services 	<ul style="list-style-type: none"> • 387 admissions • 29% NMHS • 28% SMHS • 26% EMHS • 17% WACHS • *762 patients received services

(*Patients receiving services includes patients carried over from previous financial year)

The geographical distribution of the 785 referrals received is on par with that of patients admitted to service:

- 29% NMHS
- 29% EMHS
- 26% SMHS
- 15% WACHS

Providing rehabilitation services to patients* with diverse diagnoses

2019-2020	2020-2021
<ul style="list-style-type: none"> • 35% Stroke • 32% Traumatic Brain Injury • 16% Concussion • 6% Tumour • 6% Other • 2% Hypoxia • 2% Encephalopathy • 1% Infection / Abscess 	<ul style="list-style-type: none"> • 31% Traumatic Brain Injury • 28% Stroke • 27% Concussion • 9% Tumour • 2% Infection / Abscess / Cyst • 1% Other • 1% Hypoxia • 1% Encephalopathy

(*Patients admitted to service in the financial year – does not include all referrals)

Reduction in patients admitted following stroke can be directly attributed to premature referral to the NDIS to access therapy programs through an “Early Intervention” loophole (11% of stroke referrals), rather than following the traditional rehabilitation pathway. This raises concerns from our service as a specialist ABI rehabilitation provider that patients with post-stroke deficits are not accessing specialist rehabilitation to optimise outcomes but rather a service designed for long term “maintenance” therapy.

The increasing number of referrals post-concussion has indicated a need for a dedicated service pathway, particularly with respect to early intervention. The SHIU aims to provide education and link to the Concussion website at point of referral, with contact occurring within two weeks of referral. This process follows evidence-based practice and aims to support patients early to prevent long-term deficits and over-reliance on health services.

Referral percentage by Gender and Diagnosis of admitted patients

2019-2020	2020-2021
Overall <ul style="list-style-type: none"> 64% Male; 36% Female 	Overall <ul style="list-style-type: none"> 65% Male; 35% Female
Stroke (Haemorrhagic) <ul style="list-style-type: none"> 49% Male; 51% Female 	Stroke (Haemorrhagic) <ul style="list-style-type: none"> 51% Male; 49% Female
Stroke (Ischaemic) <ul style="list-style-type: none"> 71% Male; 29% Female 	Stroke (Ischaemic) <ul style="list-style-type: none"> 63% Male; 37% Female
Traumatic Brain Injury <ul style="list-style-type: none"> 68% Male; 32% Female 	Traumatic Brain Injury <ul style="list-style-type: none"> 81% Male; 19% Female
Concussion <ul style="list-style-type: none"> 54% Male; 46% Female 	Concussion <ul style="list-style-type: none"> 56% Male; 44% Female
Tumour <ul style="list-style-type: none"> 64% Male; 36% Female 	Tumour <ul style="list-style-type: none"> 58% Male; 42% Female
Other <ul style="list-style-type: none"> 54% Male; 46% Female 	Other <ul style="list-style-type: none"> 60% Male; 40% Female
Hypoxia <ul style="list-style-type: none"> 92% Male; 8% Female 	Hypoxia <ul style="list-style-type: none"> 50% Male; 50% Female
Encephalopathy <ul style="list-style-type: none"> 67% Male; 33% Female 	Encephalopathy <ul style="list-style-type: none"> 50% Male; 50% Female
Infection / Abscess <ul style="list-style-type: none"> 100% Male; 0% Female 	Infection / Abscess <ul style="list-style-type: none"> 56% Male; 44% Female

Referral Sources (of admitted patients)

(Fiona Stanley Hospital FSH, Royal Perth Hospital RPH, Rehabilitation in the Home RITH, Sir Charles Gairdner Hospital SCGH, General Practitioner GP, Perth Children's Hospital PCH, Joondalup Health Campus JHC, St John of God Midland MSJOG)

2019-2020	2020-2021
<ul style="list-style-type: none"> 25% RPH 21% FSH Inpatient 14% Other (incl. private; other outpatient) 12% SCGH 10% RITH 6% Self / Family 4% GP 3% Rehabilitation Medicine 3% Specialist 2% FSH Outpatient <1% PCH 	<ul style="list-style-type: none"> 21% SCGH 20% RPH 15% FSH Inpatient 11% FSH Outpatient 8% Other (incl. WACHS & other outpatient) 8% Private Hospital (JHC, MSJOG) 5% RITH 5% GP 4% Specialist (incl. Rehabilitation Medicine) 3% Self / Family <1% PCH

Education Programs

Understanding Acquired Brain Injury

The Understanding ABI group education program is held monthly for patients and family members to assist patients and their families to improve their knowledge and understanding of ABI. Areas covered during the sessions include causes of ABI; introduction to brain function; the effects of an injury; phases of recovery; and strategies to manage common difficulties.

Patients are generally invited at point of referral prior to accessing formal SHIU services if deemed suitable for group attendance at that time. Alternatively, they can attend once their program commences. Invitation is also extended to patients who may be deemed ineligible for SHIU services (i.e. early access to NDIS) but would benefit from general education; and to patients with ABI from the Insurance Commission of Western Australia (ICWA) Catastrophic Injuries Scheme where such education is not available in the private sector.

The program also includes presentation by a former SHIU patient and their ABI journey, which involves the patient presenting for a maximum of three sessions as part of their rehabilitation goals.

During 2020-2021, the Understanding ABI program was held on 10 occasions (combined November/December 2020 and May/June 2021 sessions). During this time, the education was provided to 231 patients and/or family members. We would like to thank the Niche for accommodating the program in 2021 as usual venues were impacted by Covid-19 clinics.

Support Worker and Carer Training Day

The SHIU hosts a Support Worker and Carer Training Day biannually (May and November). In 2021 the training underwent a full review and redevelopment creating a new education program and resource booklet for attendees. The focus of the redevelopment was to have attendees more engaged with the learning experience, with the education structured around case studies and real-life experiences. Excellent feedback was received following the May 2021 session with minor changes to format to be made for November.

This is a full day course for paid support workers and carers offering education in the following areas:

- Understanding the Brain and ABI (Program Manager)
- The Significance of Support Workers and Creating Therapeutic Relationships in Your Rehabilitation Role (SW)
- Understanding Behaviours (CP)
- Towards Independence: Improving Activity Participation (OT)
- Facilitating Mobility and Physical Activity post-ABI (PT)
- Supporting Swallowing and Communication in ABI (SP)
- The Role of the Allied Health Assistant in Community Rehabilitation (AHA)
- Interactive workshop (Team Leader and all presenters)

This event is fully subscribed with 107 attendees in 2020-2021, selling out within 36hrs for both sessions, and proves to be very popular with support worker agencies.

Key Performance Indicators (KPIs)

Key Performance Indicator	Frequency	Target	Thresholds			Av. Outcome end 2019-2020
			Not Performing	Under Performing	Performing	
1. Percentage of SHIU referrals triaged within 10 days of date of receipt of referral and waitlisted based on clinical priority	Quarterly	100%	<75%	75 – 89%	>90%	72%
2. Percentage of waitlisted patients sent waitlist letter within 10 days of triage	Quarterly	80%	<70%	70-79%	>80%	60%
3. Percentage of patients contacted (attempted) by Case Coordinator within 10 days of allocation	Quarterly	95%	<85%	85-94%	>95%	92%
4. Percentage of patients contacted within 2/52 of receiving therapy referral	Quarterly	80%	<70%	70-79%	>80%	52%
5. Percentage of appointed clients who did not attend / engage with the service	Quarterly	<10%	>20%	10-19%	<10%	6%
6. Percentage of Unit patient discharge letters sent within 1/52 of program completion and discharge	Quarterly	90%	<80%	80-89%	>90%	95%
7. Percentage of Unit Discharge/Clinical Handover reports completed within 2/52 of discharge	Quarterly	>85%	<75%	75-84%	>85%	80%
8. Number of participants attending monthly Understanding Acquired Brain Injury Seminar	Quarterly	>10	<5	5-10	>10	23/mth
9. Percentage of Therapy Summary reports completed within 2/52 timeframe	Quarterly	>85%	<75%	75-84%	>85%	66%
10. Average time from triage to allocation for clients with concussion diagnosis to be < 14 days	Quarterly	<14 days	>18 days	14-17 days	<14 days	8 days

Whilst in 2020-2021 the SHIU became fully staffed, the demands of recruitment and training of new staff; staff leave; increased clinical priorities, particularly higher referral rates, the impact of NDIS on discharge planning and increasing concussion referrals; and the SHIU restructure have impacted significantly on our KPIs. The KPIs will be undergoing review in 2021-2022 to ensure that the data captured informs ongoing service delivery and clinical care.

Quality Improvement

The SHIU is dedicated to QI to optimise clinical outcomes; provide evidence-based and best-practice programs; and ensure service delivery is effective and timely. During 2020-2021, the SHIU undertook several projects registered on GEKO as listed below:

Completed QI activities and GEKO reports:

GEKO ID	Project Title
33436	SHIU Medical Records update
33076	Integration of administrative patient lists into Excel
33075	Development of new spreadsheets and process for extrapolating admission, contact timeframes and discharge related KPI quarterly data
31358	To refine SHIU Occupational Therapy clinical guidelines for community rehabilitation of upper limb impairments
35720	Development of electronic Orientation manual
29180	Development of new referral triaging process

Approved activities awaiting review for finalisation:

GEKO ID	Project Title
33719	Review of the Understanding ABI seminar presentations and content
33059	Triaging protocols for patients with concussion diagnosis
39398	Establish transition processes for paediatric ABI patients progressing from Perth Children's Hospital to adult rehabilitation care

Approved QI activities and GEKO reports:

GEKO ID	Project Title
39193	Development of Aboriginal SHIU brochure with Aboriginal Health
39192	Development of specific SHIU referral form with Aboriginal Health
35724	Update SHIU referral form to reflect current client registration requirements and branding, and link to e-referrals
35722	Development of SHIU Management Orientation Manual
39662	Development of education package for clients with a mild brain injury
40621	Review and redevelopment of the SHIU Support Worker and Carer Training Day – presentations and manual

SHIU Promotion

The priority for SHIU promotion in 2020-2021 was the completion of our website under NMHS. This opportunity has allowed for sharing of resources for patients, family, community and health professionals, in addition to enabling promotion of the service via description of service and education programs, referral forms, brochures, Annual Reports and Model of Care. The website went “live” in April 2021 marking a significant step in the SHIU’s history.

Further promotion included:

- Rebranding of the SHIU brochure and development of the Aboriginal culturally appropriate brochure
- SHIU first formal annual report 2019-2020, with dissemination to all Health Service Chief Executives
- Participation in Stroke Week, 31st August to 6th September 2020
- Participation in OT Week with the SCGH OT Department, 28th October 2020
- Presentation to RITH, SCGH and OPH YAR OT health services regarding current SHIU programs
- SHIU Support Worker and Carer Training days – 26th November 2020 and 13th May 2021
- Invited to present to the Armadale Stroke Support group regarding fatigue management post-stroke – 17th March 2021
- Partnering with specialist Allied Health government services through the TRACS Stroke Community of Practice to work towards best outcomes for patients following stroke
- Presenting at the NMHS Inspire Conference – 26th March 2021

Stakeholders and Partnerships

Health Services:

- North Metropolitan Health Service
- South Metropolitan Health Service
- East Metropolitan Health Service
- WA Country Health Service
- Child and Adolescent Health Service
- Rehabilitation in the Home
- Emergency Departments; wards; and rehabilitation services
- Aboriginal Health Services
- Health Promotion
- TRACS WA

Universities:

- University of WA
- Edith Cowan University
- Curtin University

Non-Government Organisations:

- National Disability Insurance Agency (NDIA)

- Synapse
- Stroke Foundation
- Mission Australia
- Explorability
- VisAbility
- Brightwater
- Private Allied Health service providers
- Ethnic Disability Advocacy Centre (EDAC)
- Commonwealth Respite and Carelink Centres

Government:

- Centrelink
- Department of Housing
- Department of Justice

Consumers, Carers and Community, including:

- Health Consumers Council
- Carers WA

**This document can be made available in alternative formats
on request for a person with a disability.**

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