

Are Therapists Preparing Brain Injury Survivors for Community Reintegration After Insurance Discharge?

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PURPOSE: For acquired brain injury (ABI) survivors, adjustment to life following insurance discharge can be overwhelming and complicated (Schwertfeger et al., 2020). Coping strategies and new routines that promote emotional and social well-being are needed to improve quality of life and reintegration into society after brain injury; however, there is a gap in the availability, accessibility, and awareness of the support services provided for brain injury survivors post-discharge (Schwertfeger et al., 2020). The purpose of this study was to identify clinician perspectives on the need for community integration and cognitive impairment resources for ABI patients to improve their functional recovery and overall quality of life post-insurance discharge.

DESIGN: This study used a mixed-methods design. Occupational therapists and physical therapists in South Carolina were recruited using snowball sampling to complete an online survey.

METHOD: An anonymous, optional, online survey was distributed via REDCap (Harris et al., 2019) and included 5-point Likert-type and open-ended questions to collect data on the current discharge process, available resources regarding community support for brain injury survivors, and preferences for additional resources.

RESULTS: Occupational therapists (n = 23) and physical therapists (n = 3) practicing in South Carolina completed the survey. Quantitative and qualitative data were analyzed using descriptive statistics and thematic content analysis. The majority of therapists agreed that community integration is an ongoing struggle for brain injury survivors (96%) and indicated that they feel educated on knowing the long-term difficulties patients face post-discharge (88%). However, only half of therapists agreed that they can adequately provide patients and families with information on community resources upon discharge. None of therapists agreed that their patients are fully prepared on how to access community services after discharge. Almost all therapists agreed that a discharge packet with available community resources would be beneficial to give to patients (92%). Majority of therapists indicated that patient and caregiver educational materials on community support and assistance programs are currently being distributed (88%). However, some therapists indicated that other professions such as case management and social workers often take on the responsibility of educating clients and families (12%). Therapists indicated that there is a need for (1) more educational materials, (2) continued follow up and support, and (3) increased access to community groups for brain injury survivors. Results indicated that both paper handouts and online resources would be beneficial in providing further education to clients.

CONCLUSION: Brain injury survivors and caregivers need to be better equipped and educated on how to access community reintegration resources and services post-discharge. Patient and caregiver education on community reintegration is within the scope of practice for both occupational and physical therapists. Therapists in South Carolina need access to clear educational resources to provide to ABI survivors during the discharge process. Resources that contain community support services should be compiled in a well-organized and easy to read document that all disciplines can utilize when educating their clients. Distributing these resources to patients and their families will increase education, preparedness, and access which is critical in providing client-centered and holistic care that results in improved quality of life for brain injury survivors.

References

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