

FOREWORD

The ACI's Challenging Behaviours Project addresses an important aspect of one of the more difficult and costly issues for the health system and the community - the management of patients with Traumatic Brain Injury (TBI) and challenging behaviour.

The ACI's Brain Injury Rehabilitation Directorate (BIRD) worked with the NSW Brain Injury Rehabilitation Program (BIRP) clinicians and consumers from the 14 specialist brain injury units to investigate the prevalence, course, burden and co-morbidities of challenging behaviour associated with TBI and to identify how to improve outcomes for patients and families.

The project addressed the needs of adults and children separately.

Between February 2007 and December 2009 the Adult Challenging Behaviours Project (CBP) collected information on 659 clients aged between 18 and 65 years with a primary diagnosis of TBI and completed a qualitative case review of 28 clients from 10 adult BIRP Services

The results suggest changes to the model of care to include the need for better early detection of challenging behaviour to enable intervention before problems become entrenched.

The project developed eight key principles to guide clinical practice, and 41 recommendations for an improved model of care for clients with, or at risk of demonstrating, challenging behaviours.

There are around 2,500 new cases of moderate or severe TBI in Australia each year - most frequently caused by motor vehicle accidents, other collisions, falls, and assaults.

The ACI project found the prevalence of challenging behaviour after TBI to be high, affecting more than half (51%) of the adult clients involved.

TBI can cause long term physical and neurological disability and significantly higher risk of premature death, but it is the emotional, behavioural and social consequences of TBI that cause the most distress to families and patients.

In addition to personal and family devastation, the total cost to the Australian community through direct care and lost productivity has been estimated by Access Economics (2009) at more than \$8.6 billion a year. Almost two thirds of the cost is shouldered by individuals and families either directly or through insurances.

The ACI project found that there is a complex interaction between medical, psychological, social and environmental factors that contribute to the development of challenging behaviour after TBI and that an integrated model of care is, therefore, required.

This major ACI project, led by clinicians and drawing on the hands-on knowledge of doctors, nurses, allied health professionals and consumers, offers practical solutions to real problems facing individuals, families and health services across NSW.

We recommend the report to you and welcome any suggestions you may have for further improvements in future.

Dr Nigel Lyons



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