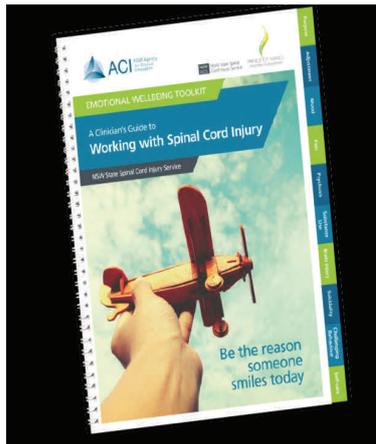


SSCIS Psychosocial Strategy for People with a Spinal Cord Injury

The Emotional Wellbeing Toolkit: A Clinicians Guide to Working with Spinal Cord Injury

NOVEMBER 2016



Emotional Wellbeing Toolkit: A Clinician's Guide to Working with Spinal Cord Injury

All interactions that health professionals have with clients provide an opportunity to either hinder or enhance adjustment to a SCI. When a person is in crisis, they are more likely to be influenced by others than when everything is going smoothly. Therefore crises present opportunities to promote coping ability and mental health. Successful mastery of life crises can lead to psychological growth.

The **Emotional Wellbeing Toolkit** is designed to educate and provide guidance to health professionals working with people with a SCI, experiencing difficulties or who may be in crisis. The **Toolkit** is an evidence-based resource containing validated and standardised assessment tools to facilitate decision-making about the need to call on mental health professional assistance. The **Toolkit** aims to improve understanding of psychosocial issues and emphasize critical role staff play assisting their clients in crises and with long term adjustment. The **toolkit** covers issues such as grief and trauma, common psychological and emotional problems experienced by people with spinal cord injury, and ideas for managing challenging behaviours.

The accompanying **Brief Psychosocial Clinical Assessment Tool**: an assessment sheet to be used in conjunction with the Toolkit and available at the website.

<https://www.aci.health.nsw.gov.au/resources/spinal-cord-injury>

For further information on the work of the Psychosocial Strategy contact:

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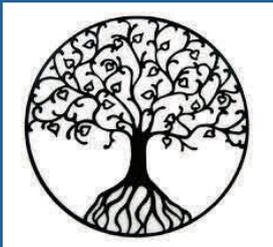
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With thanks to ...

NSW SSCIS NSW State Spinal Cord Injury Service



ACI NSW Agency for Clinical Innovation



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SSCIS PSYCHOSOCIAL RESOURCES

Designed to support clinicians in understanding and managing psychosocial issues associated with acute and long-term spinal cord injury

Psychological Adjustment after Spinal Cord Injury - Useful strategies for health professionals

A. Dezarnaulds and R. Ilchef (First Edition 2002) - Prof A. Craig (Second Edition 2013)

Factors that influence psychological adjustment following a spinal injury are numerous and multilayered, including the effect of institutionalisation, grieving the loss of life before the injury, secondary complications like chronic pain and infections, and restrictions on social and physical mobility. Recent research has investigated the psychological and social dynamics associated with SCI adjustment, so that there is now a rich source of information arising from research detailing the short- and long-term psychological and social sequela and adjustment to SCI.

This **resource** provides an overview of this complex journey following a SCI, the relevant issues, possible psychological complications, and predictors of both resilience and vulnerability

Directory of Information and Support

SSCIS Psychosocial Steering Committee (Updated 2013)

The **Directory** provides guidance about specific services, sources of support and information on the psychological and social consequences of SCI. It is a resource for people who have acquired an SCI, as well as their family and friends and the professionals working with them.

Guide for Health Professional on the Psychosocial Care of Adults with Spinal Cord Injuries

Prof A Craig & Ass Prof K Nicholson Perry (2010) ; Second Edition 2013 by Professor Ashley Craig.

The **Guide** aims to provide direction and support to relevant health professionals who are involved in the rehabilitation of people with SCI. A collaborative approach with the individual, their family, carers and other professionals involved in their care, to decisions about treatment and ongoing care is promoted in accord with the self-management and resilience model approaches to SCI care.

Watch this space ... !

For further information about the Psychosocial Skills Training Workshops.



SSCIS PSYCHOSOCIAL STRATEGY

What is the Psychosocial Strategy?

Spinal cord injury (SCI) is a catastrophic injury with a complex presentation from both a medical and psychological perspective, including pain, fatigue, substance abuse and frequent hospitalisations.

In 2005 Prof Paul Kennedy visited Sydney as the inaugural NSW Office for Science and Medical Research Spinal Exchange Program Fellow. He advocated for the importance of psychosocial issues for those adjusting to and living with a spinal cord injury. With the objective of improving the quality of life for people with a SCI, Prof Kennedy facilitated communication on techniques, and therapies focussing on the psychosocial rehabilitation of people with SCI.

Psychosocial issues need to be considered 'everyone's business', meaning all health professionals can affect the wellbeing of someone in their care, emphasising the importance that they understand how to enhance the individual's wellbeing. This is not just the domain of social workers, psychologists or psychiatrists. Following Prof Kennedy's visit, the NSW State Spinal Cord Injury Service (SSCIS) established the **Psychosocial Strategy** to ensure that psychological and social factors remain at front and centre for optimal rehabilitation outcomes following SCI in the short and long term.

The **Psychosocial Strategy** aims to develop strategies to address the psychosocial needs of clients, carers and staff by examining current practice, existing service models and gaps, as well as ways of improving this aspect of clinical care from time of injury to discharge and beyond. Oversight of the development and implementation of the Strategy is provided by a Steering Committee chaired by Strategy Coordinator and its membership comprises spinal cord injury (SCI) specialist health professional representatives from all SSCIS adult and paediatric services, and stakeholders (e.g. ParaQuadNSW and Spinal Cord Injuries, Australia).

The SSCIS Psychosocial Steering Committee - Current Members:

- ◆ Annalisa Dezarnaulds (Chair), Clinical Psychologist, SIU, Prince of Wales Hospital
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- ◆ James Middleton, Director, SSCIS - james.middleton@sydney.edu.au
- ◆ Catherine Ephraums, Clinical Psychologist, Spinal Injury Unit, Royal Rehab
- ◆ Dallas Pirronello, Occupational Therapist, Spinal Outreach Service, Royal Rehab
- ◆ Beverley Berelowitz, Social Worker, SIU, Prince of Wales Hospital.
- ◆ Neil McKinnon, Manager, iCare (Alternate rep - Gary Kent Senior Project Officer - Vocational Programs, LTCSA NSW).
- ◆ Helen Tonkin, Social Worker, Royal North Shore Hospital. Spinal Unit
- ◆ Sky Fosbrooke, Physio, Rehabilitation Paediatric Services Children's Hospital, Randwick
- ◆ Anne Marie Sarandrea, Clinical Psychologist, Kids Rehab, Children's Hospital Westmead
- ◆ Christina Donnelly, Psychologist, Hunter Spinal Cord Injury Service
- ◆ Mathew Smith, Social Worker, ParaQuad NSW
- ◆ Chris Nicholls, Operations Manager, Spinal Cord Injuries Australia (SCIA)
- ◆ Christina Donnelly, Psychologist, Hunter Spinal Service;
- ◆ Ex Officio: Dr Ralf Ilchef, Consultation Liaison Psychiatrist, RNSH

For further information
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