Rehabilitation care in NSW is defined as the provision of care that aims to:

- restore functional ability for a person who has experienced an illness or injury
- enable regaining function and self-sufficiency to the level prior to that illness or injury within the constraints of the medical prognosis for improvement
- develop functional ability to compensate for deficits that cannot be medically reversed.

Why do we need a new Model of Care?

Rehabilitation services are a critical component of the health care system. They improve patient outcomes, free up acute hospital capacity and decrease the burden of disability in the community. Over the last 20 years, there has been minimal change in how rehabilitation services are provided or organised. The provision of rehabilitation services continues to grow in volume, with an average 7% increase in inpatient episodes of rehabilitation provided annually for the past 3 years and the casemix of patients increasing in both acuity and complexity.

What is new about the Rehabilitation Model of Care?

The Rehabilitation Model of Care is a Framework for Rehabilitation services to use to ensure that the care they provide meets the standard agreed by the NSW Ministry of Health. It describes the range of settings in which rehabilitation occurs and identifies key principles which should be in evidence across each of the care settings.

It supports:

- Early, intensive rehabilitation, commencing in the acute setting through appropriate and early identification of relevant patients
- Collaboration and education with acute services regarding the role of rehabilitation services
The availability of a range of ambulatory care rehabilitation services including day hospital and home based services increases the choices available for the early and safe discharge of patients from the admitted hospital setting.

This means:

- greater capacity in the hospital,
- freeing up beds for patients who cannot be safely discharged
- many patients will be able to go home directly from their acute hospital bed, avoiding an inpatient rehabilitation stay entirely.
- patients can remain at home while receiving their rehabilitation care.

Continuity of care and timely transfer is improved and there is greater coordination of services for patients and their carers.

Through provision of more intensive therapies, patients show faster functional gains which in turn leads to earlier discharge from hospital.

How will the Rehabilitation Model of Care benefit patients?

Through the provision of early, intensive rehabilitation, patients will benefit from:

- shorter lengths of stay in hospital due to more intensive therapy services
- greater choice and flexibility in how and where they receive their rehabilitation services
- a quicker return to their previous level of functioning
- more active involvement in deciding their rehabilitation goals
- care provided closer to home.

By targeting specific patient cohorts, it will also be possible to prevent the rising incidence of deconditioning as an impairment group, as faster movement through the system will result in a reduction in patients awaiting transfer to a rehabilitation bed.

How will the Rehabilitation MoC benefit the health system?

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The ACI Rehabilitation Implementation Toolkit and associated resources are available on the ACI website: http://www.aci.health.nsw.gov.au/networks/rehabilitation/implemention-toolkit

For further information contact Claire O’Connor, ACI Rehabilitation Network Manager on 9464 4639 or claire.oconnor@aci.health.nsw.gov.au.