

Victorian Paediatric Rehabilitation Service model of care



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Introduction

The Victorian Paediatric Rehabilitation Service

The Victorian Paediatric Rehabilitation Service (VPRS) began in October 2005 with inpatient and ambulatory services at The Royal Children's Hospital. Inpatient and ambulatory services began at Southern Health's Monash Medical Centre campus in June 2007. Eastern Health, Bendigo Health Care Group and Barwon Health will start services during 2007-08, with further service expansion to occur across Victoria in the future.

The VPRS specifically caters for children and adolescents who, as a result of injury, medical/ surgical intervention, or functional impairment, will benefit from a program of developmentally-appropriate, time-limited, goal-focused multidisciplinary rehabilitation. This includes children and adolescents with acquired conditions that can benefit from a defined period of rehabilitation, such as following an Acquired Brain Injury (ABI). It also includes children and adolescents with either congenital or developmental-based conditions, following a specific event or surgery, that are amenable to a defined period of rehabilitation. The VPRS will build on and integrate with existing paediatric and rehabilitation service platforms.

While it is acknowledged that there may be gaps within the overall paediatric health service system, it is not the role of the VPRS to fill these service system gaps. The VPRS will focus on the provision of specialist rehabilitation services for children and adolescents, from high complexity clients through to moderately complex clients. Lower complexity clients may or may not require specialist VPRS intervention. Specifically, the VPRS will not deliver:

- early intervention
- developmentally-based services
- maintenance services
- primary and community services.

However, where appropriate, the VPRS may refer to, and receive referrals from, agencies that deliver these services.

The vision for the VPRS is:

- Victorian children who need specialist rehabilitation will be able to get the level of service they need, when they need it, in the most appropriate location, no matter where they and their families live.
 - child-and-adolescent-centred and family-focused clinical care
 - evidence-based, best practice
 - integrated continuum of care from hospital to community
 - appropriate linkages with other services.

The principles underpinning this vision are:

- to provide the most appropriate care for the client
- to support a child-and-adolescent-centred and family-focused model of care
- to encourage and support continuity of client care
- to encourage appropriate transition from inpatient and ambulatory settings and optimise community reintegration.

Development of the VPRS

The Paediatric Rehabilitation Reference Group was responsible for overseeing the development of the VPRS. The aim of the reference group was to develop a model of care and policy framework for the delivery of coordinated statewide specialist paediatric and adolescent rehabilitation services (both inpatient and ambulatory) in Victoria, taking into account the principles outlined above. The Terms of Reference for the reference group are now completed and the Paediatric Rehabilitation Governance Group will oversee the governance and future development of the VPRS.

Model of care working group

A model of care working group was established in June 2006 with representatives from the Royal Children's Hospital, Southern Health, Eastern Health, Barwon Health, Bendigo Health Care Group, Transport Accident Commission, Melbourne Citymission, Transition of young adults clinics and the Department of Human Services. The model of care working group initially reported to the Paediatric Rehabilitation Reference Group and, following this, to the Paediatric Rehabilitation Governance Group.

The tasks of the working group were to develop a discussion paper for the model of care that would enable the provision of a statewide specialist paediatric and adolescent rehabilitation service in Victoria, for consideration by the Paediatric Rehabilitation Reference Group. This has included:

- advising on, and contributing to, the evidence base that will underlie the model of care
- defining the components of the model of care, including principles, objectives, and core aspects
- developing role delineation criteria for inpatient and ambulatory services
- identifying the role of outreach services and relationships with local providers.
- identifying key linkages with ongoing community support providers
- preparing a discussion paper for the VPRS model of care for consideration by the Paediatric Rehabilitation Reference Group.

This document

This model of care document describes the components of the paediatric rehabilitation model of care to be developed in Victoria. It outlines the context of the document, the components of the model of care and relationships and roles to be developed. It should be noted that regional areas may wish to make modifications to the implementation of this model to suit their needs.

The Paediatric Rehabilitation Reference Group has endorsed the model of care document, in principle. The Paediatric Rehabilitation Governance Group will oversee any further development of the model of care. This document will be reviewed every 12 months.

Section 1: The context

Policy context

The VPRS model of care will be developed within a framework provided by relevant Department of Human Services' policies. These include:

- *Review of Victorian paediatric services – Department of Human Services response (2003)* (<http://www.health.vic.gov.au/metrohealthstrategy/response-paediatric.pdf>)

The *Review of Victorian paediatric services (2002)* identified issues and gaps in the provision of paediatric rehabilitation services in Victoria. It recommended that a statewide specialist paediatric and adolescent rehabilitation service be developed, and the *Department of Human Services Response to the review (2003)* accepted this recommendation.

- *Care in your community (2006)* (http://www.health.vic.gov.au/ambulatorycare/downloads/care_in_your_community.pdf)

Care in your community provides a strategic framework for planning and delivering integrated health services, with an emphasis on providing people with care in their own community wherever it is safe and effective to do so.

- *Metropolitan Health Strategy (2003)* and forthcoming updates (<http://www.health.vic.gov.au/metrohealthstrategy/index.htm>)

The *Metropolitan health strategy* provides a framework for service and capital planning in Melbourne.

- The *Sub-acute Ambulatory Care Services (SACS) framework* and associated guidelines (forthcoming) (<http://www.health.vic.gov.au/subacute/sacs/index.htm>)

The *SACS framework* will provide guidance on the integrated provision of community-based rehabilitation and specialist assessment and management services.

- *Better access to services: a policy and operational framework (2001)* (<http://www.health.vic.gov.au/pcps/publications/access.htm>)

The *Better access to services: a policy and operational framework* describes the reasons service coordination is being undertaken and outlines the principles that guide service coordination.

- *Victorian service coordination practice manual (2007)* (http://www.health.vic.gov.au/pcps/downloads/sc_pracmanual.pdf)

The *Victorian service coordination practice manual* defines the practices, processes, protocols and systems that support service coordination across Victoria.

The evidence context

The development of the VPRS model of care was informed by the best available evidence, including:

- review of interstate and overseas paediatric rehabilitation service delivery models, including a literature review of best practice for paediatric rehabilitation service delivery models
- data about service utilisation
- information gathered through consumer consultations (Consumer consultations to inform the development of the Victorian Paediatric Rehabilitation Service Final Report 2007)
- documentation produced by similar and related services, including:
 - Melbourne Citymission documents
 - Western Metropolitan Region paediatric ABI case management referral pathway for children and young people who do not have complex ABI needs
 - Western Metropolitan Region paediatric ABI case management referral pathway for compensable children and young people (0-18 years)
 - Western Metropolitan Region paediatric ABI case management referral pathway (non-compensable) for children and young people (0-18 years)
 - Paediatric ABI services list – Southern Region (draft document)
 - Department of Human Services' Disability Division: identifying the needs and possible service responses for children and young people with ABI and their carers
 - Queensland Paediatric Rehabilitation Service documents
 - Statewide Paediatric Rehabilitation Service, Queensland Health evaluation report (August 2000)
 - Statewide Paediatric Rehabilitation Service, Queensland Health evaluation report – supplementary report prepared for Queensland Health (December 2000)
 - An investigation of Paediatric rehabilitation systems of care in North America – Churchill Fellowship report by Lynne McKinlay
 - Sample patient journeys for complex ABI and cerebral palsy
 - Southern Health Paediatric Clinic or Service profiles.
 - King, G., Tucker, M., Balwin, P., Lowry, K., LaPorta, J., & Martens, L. (2002) 'A life needs model of paediatric service delivery: Services to support community participation and quality of life for children and youth with disabilities'. *Physical & Occupational Therapy in Paediatrics*, 22(2), 53-57.
 - Paediatric rehabilitation service delivery in North America – Brainwave and Rosemary Derham Travelling Scholarship report by Jane Galvin 2006

- Stroke Care Strategy for Victoria (Department of Human Services, 2007)
- Clinical Services Capability Framework (Queensland Health, 2004)
- NSW guide to the role delineation of health services, third edition (NSW Health 2002).
- Visit to Queensland Paediatric Rehabilitation Service – report by Fiona Gorrie, 2006
- Canadian Paediatric Rehabilitation and Trauma Services visit report by Lyndal Hickey, 2006
- Visit to National Institute of Rehabilitation, Paris – report by Dr Anna Mandalis, 2006
- Visit to Children’s Trust – report by Dr Anna Mandalis, 2006.
- Visit to Astrid Lindgren Children’s Hospital, Karolinska Institute, Sweden – report by Dr Anna Mandalis, 2006
- Transport Accident Commission clinical justification flowchart
- Rural and regional case studies from Bendigo Health, Barwon Health and Eastern Health
- Service model for paediatric rehabilitation – The Royal Children’s Hospital, Melbourne, June 2005 – Dr James Rice.

