

Introduction

The purpose of the service evaluation study was to evaluate the extent to which Recolo's Neuropsychological Rehabilitation promotes the improvement of family quality of life and mental wellbeing of children and young people with Cerebral Palsy or Traumatic Brain Injury.

The service evaluation investigated the following hypotheses:

- Recolo's Neuropsychological Rehabilitation improves family quality of life as measured by the PedsQL FIM.
- Recolo's Neuropsychological Rehabilitation improves mental health as measured by the SDQ.

Methods

Paediatric Quality of Life Inventory Family Impact Module (PedsQL FIM) – To measure the impact of paediatric chronic health conditions on parents and family in physical, emotional, social, cognitive, function, communication, and worry, family daily activities, and family relations.

Strengths and Difficulties Questionnaire (SDQ) – To measure the mental health of children and young people.

Service Evaluation Study

Design – T1 (baseline measure), and T2 (outcome measure) study investigating change attributed to Recolo's Neuropsychological Rehabilitation.

Participants - The Recolo clinical database included 40 patients from England with either CP birth injury (N=22), TBI involving a road accident (N=18), with an average age of 16.

The content and ethics of the service evaluation were considered and approved by UCL R&D Office. Parents/guardians of Recolo patients gave written consent for the use of their child's outcome data for research purposes.

Procedure

Outcome Measurement

During the Recolo Core Assessment, baseline measures of: PedsQL FIM and SDQ were collected. These were repeated to measure progress on a yearly basis.

Intervention

Neurorehabilitation was delivered following Recolo's PEDS Model addressing the Physical, Executive, Developmental and Systemic needs of children and young people (Byard, Fine, and Reed's, 2011).

Data Analysis

The Recolo Access database was used to obtain baseline and review measures. The review scores utilised for this study included 1 year, 2 year, and 'most recent review' (3-6 years post assessment). Data was transferred to SPSS to complete statistical analyses using paired samples t-tests to investigate significant change in measures.

Implications for Recolo

Main Findings:

Recolo's Neuropsychological Rehabilitation leads to significant improvement in:

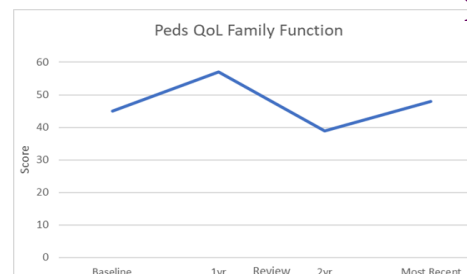
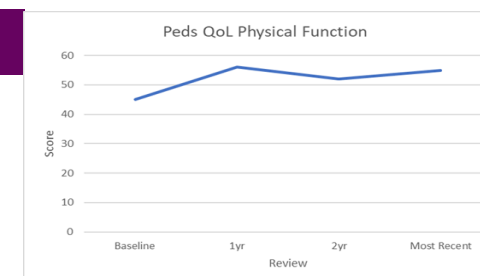
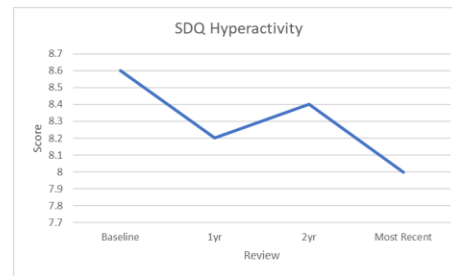
- **Child and Young People's Behaviour (Hyperactivity and Conduct).**
- **Family Quality of Life (Physical Function and Family Function)**

Recommendations for service improvement:

Recognition of non-linear pattern of progress in neurorehabilitation which requires:

- **Long-term and sustained provision of neurorehabilitation.**
- **Long-term investment of funding for the young person and their family.**
- **Consistent collection of clinical outcome data to record progress.**

Results



Non-linear progress of change

