



**community
neurorehab**

Community NeuroRehab of Iowa 2021 Outcome Validation Report

Reporting Period January 2020 to December 2020

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Executive Summary

Community NeuroRehab's Outcome Validation Study was developed to measure the durability of outcomes achieved through participation in CNR's community-based neurobehavioral rehabilitation service. Information is provided on each discharging participant's avocational and vocational endeavors, behavioral supports, social role return, substance abuse, interfering psychiatric issues, level of caregiver involvement, and other factors affecting quality of life and level of autonomy. Data is collected in each of these areas at time of admission, discharge, and post-discharge follow-up. This study is reflective of the 85 discharges which have occurred since CNR's opening in 2010; however, due to 15 readmissions, the study is based on data collected on 60 individuals.

The number of discharges per year has ranged from three in 2011 to fourteen in 2016. The 2020 cohort consisted of 13 discharges. However, one person discharged, re-admitted and discharged again in 2020. Unless otherwise noted, he/she will only be counted once in statistics on the 2020 cohort. For instance, the average age of admission was 40 years old because he/she is not counted twice. The individuals discharged in 2020 experienced an average gap between injury and admission of 11.83 years, which was slightly above the cumulative average of 10.4 years.

Data from the 2020 cohort showed the following:

- At time of admission, 100% of individuals were at risk of institutionalization, hospitalization, incarceration, or homelessness. At time of discharge, 41.67% of individuals went to a lower level of care than they were at prior to admission and 58.33% discharged to a similar level of care to what they were in at admission (ex. Home and Community-based Services).
- One person was working prior to admission. This person was a readmission who had received vocational assistance during his/her first stay. Four people (33.33%) were working at discharge.
- Although eight people (66.67%) in the 2020 cohort had a history of struggling with addiction post injury, only five had active issues at admission. At follow-up two reported moderate use and one reported heavy use, all others reported minimal use or abstinence.
- Access and utilization of community-based services increased by 24% between pre-admission and discharge. The primary reason for individuals not receiving community-based services post discharge was that the individuals left against clinical advice before services could be put into place.
- Interfering psychiatric and behavioral problems decreased for 41.67% of the individuals, allowing for a greater return to pre-injury social role.