



Frazier Rehab Institute

NeuroRehab Program Handbook



NeuroRehab Program
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“Welcome To Frazier NeuroRehab Program”

Dear Friends:

Although it is unfortunate to meet each other under such difficult circumstances, I would like to welcome you and assure you that our team will care for you and your loved one as if you were a member of our family.

Our team is highly trained and sensitive to the fact that many people have never experienced the need for physical or cognitive rehabilitation. We understand that you may be apprehensive as to what is expected and what will occur during the rehabilitation process. This handbook will hopefully help you get started in understanding our program.

Our goal is to provide the highest quality of care in a compassionate manner. If at any time you have questions or concerns regarding your care, please do not hesitate to contact your team leader or me.

Sincerely,

A handwritten signature in black ink that reads "Kathy Panther". The signature is written in a cursive, flowing style.

Kathy Panther, M.S., CCC
Director, Inpatient Therapy
Brain Injury Program Manager
Frazier Rehab Institute

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**Frazier Rehab Institute
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4912 U.S. Highway 42
Suite 104
Louisville, Kentucky 40222
(502) 429-8640**

Members Of Your Treatment Team

YOUR NAME _____

Primary Therapist _____

Psychologist _____

Speech and Language
Pathologist _____

Occupational Therapist _____

Physical Therapist _____

Case Manager _____

Physiatrist or
Rehab Physician _____

NeuroRehab
Program Supervisor _____

Medical/Healthcare
Providers _____

Please help us by
adding to this list
if you wish... _____

INTRODUCTION

To learn someone you care about has sustained a brain injury is never easy. Most people experience worrisome and confusing thoughts while uncertainty about the recovery process adds to their level of stress and despair.

Frazier Rehab Institute recognizes how difficult it is for survivors and their families to cope with the effects of brain injury. Thus, Frazier has developed a comprehensive brain injury treatment program to meet the unique needs of each person served. It is staffed with highly skilled professionals and has been organized to treat each individual admitted according to their needs. The treatment goal is to restore each person to their fullest potential in independence and productivity. To achieve this goal, the treatment team assists individuals in pursuing all aspects of rehabilitation: physical, social/interpersonal, cognitive, and emotional, while recognizing differences in personal beliefs.

This handbook has been prepared to assist you with beginning or continuing outpatient therapy. The following pages will outline Frazier's NeuroRehab Program and explain how you can assist and participate in the recovery process.

MISSION STATEMENT

Frazier NeuroRehab Mission Statement

Consistent with the mission and vision statement of Jewish Hospital and St. Mary's Healthcare, Frazier Neuro Rehab's primary mission is to provide health services of world-class quality to all people.

WHAT POPULATION WE DO WE SERVE?

The following is a list of neurological problems that are regularly treated at the NeuroRehab Program. It is not an exclusive list.

Individuals with other neurological conditions or illnesses may be served based on the NeuroRehab Program's ability to provide appropriate services to the individual.

Anoxia/Hypoxia

Brain Tumor

Electrical Injuries

Encephalopathies

Guillain-Barre' Syndrome

Infections

Metabolic Disorders

Mild Traumatic Brain Injury (Post-Concussion Syndrome)

Multiple Sclerosis

Parkinson's Disease

Spinal Cord Injury

Sports Related Injuries

Strokes/Aneurysms

Seizure Disorders

Traumatic Brain Injury

DAY ONE!

Orientation

The purpose of orientation is to provide you and your family members with information about the NeuroRehab Program.

- 1.) On the day of admission into the program (the first day), you and your family members will attend a 45 min. orientation to the program. This almost always occurs from 9:00 am – 9:45 am.
- 2.) During this time you and your family members will be oriented to safety policies, medication policies, the daily schedule, funding sources and also receive a tour of the clinic.
- 3.) During the orientation, you will be given the opportunity to ask questions or request additional information.
- 4.) Each individual, or that individual's guardian, will be required to sign some paperwork regarding the smoking policy, cancellation policy and release of records.

* If you are scheduled for an evaluation ONLY, then orientation will not be given on the day of the evaluation.

TYPICAL DAILY SCHEDULE:

8:45 am -9:00 am	Individuals arrive at therapy and sign in the front office. Visitors can obtain passes at this time. Individuals will then go to the community room where there is a refrigerator for their lunch. Schedules can be found on the tables in the community room. The schedule changes daily and an important part of therapy is copying down the schedule correctly. A staff member will be in the community room to provide assistance.
9:00 am - 12:00 noon	Each therapy runs for approximately 40-45 minutes. There are four morning sessions. You will typically have a short break between sessions to use the restroom or to get a drink.
12:00 noon	<p>Lunch and Wellness Group: All friends and family members are welcome to join their loved one for lunch, but are not required. There are a variety of options available for lunch.</p> <ol style="list-style-type: none">1.) Individuals may bring their lunch from home. The lunch must be labeled and dated. It can be stored in the refrigerator in the community room.2.) Individuals may sign out to go out to lunch with a family member or friend.3.) Individuals may choose to purchase their lunch from one of the fast food restaurants or lunch delis nearby. A staff member will accompany all individuals going out into the community to buy lunch.4.) Once an individual is independent in the community and the treatment team has discussed it with their family, that individual will be allowed to sign out and go out for lunch without any staff supervision. <p>(It is possible that an individual may be scheduled for Physical Therapy at 12:00 noon. In this case, that person would eat lunch at 11:00 instead of 12:00.)</p>
1:00 pm – 3:15 pm	There are three afternoon sessions both running for approximately 40- 45 minutes.
3:15 pm	Therapy day ends. Due to the volume of participants in the NeuroRehab Program, it is not possible for staff to assist in helping individuals to their vehicles. If assistance is needed, arrangements can be made at the front desk. Please arrange to meet your transportation in the waiting area/lobby at 3:00 pm. If you need additional assistance, ask the front desk for help.

Note: It is important to note that this is an example of a therapeutic day. While Most schedules run from 8:45 - 3:15 pm, some individuals may attend from 1-4 pm or from 2-5 pm. Your treatment team will explain your schedule to you thoroughly during your first day. Each treatment day is tailored specifically to meet the needs of each individual.

WHAT DO I NEED TO BRING WITH ME?

These are things that you need to bring with you to the program:

1. Lunch or lunch money. If you bring your lunch from home, it must be labeled with your name and the date.
2. Medications and/or other medical equipment. Please bring your medications for that specific day only. Keep these on you in your purse or in your pocket.
3. Pen/Pencil
4. A list of your current medications
5. Your current insurance card (if applicable)
6. Comfortable clothing and supportive shoes
7. This handbook

These are things that you do not need to bring with you:

1. Whole bottles of medications
2. Drugs or alcohol

ATTENDANCE POLICY

It is our expectation that you will view attendance in this program much in the same way you view work or school. We expect you to attend therapy unless there is a medical emergency.

In the event that you will be missing a scheduled therapy, you need to let your primary therapist know at least one week in advance. Whenever possible, schedule medical appointments for days or times that you are not in therapy.

In the event of an illness, please contact your primary therapist as early as possible. **Please ask to speak directly to your primary therapist and do not leave a message.**

PROGRAM DESCRIPTION

The Referral and Admission Process

Referrals to the program require an order from your physician for each therapy your doctor feels will benefit you. The order should be phoned, faxed, or mailed to the case management (CM) office at the NeuroRehab Program (see front cover of this handbook). Case Management will contact you to set an appointment for your evaluation or admission. If the appointment is set for evaluation, the CM will contact you with the results of the evaluation and an admission date if appropriate.

Team Approach

Throughout your participation in the NeuroRehab Program, a team of professionals will serve you in helping you regain the highest level of day to day functioning in all aspects of life. Each week your treatment team will meet to discuss your progress in the program and to ensure that you are receiving the most effective treatment. During your therapy, the treatment team will help you and your family coordinate your care with other professionals, including physicians, vocational rehabilitation, case managers, and other therapies. Eventually, our goal is to help you become the team leader and assist you in making decisions regarding your therapy. Ultimately you are responsible for your life!

Role of the Primary Therapist

Upon your admission to the program you will be assigned a primary therapist (one of our staff members). This therapist will act as your contact within the program. You will be responsible to let your primary therapist know of any scheduling conflicts or cancellations you may have. Your primary therapist is also a good person to go to with any questions or concerns you may have.

Individual's Rights and Responsibilities

Individuals being served at the NeuroRehab Program have rights and responsibilities to enhance the rehabilitation process and to ensure that everyone is treated with respect and dignity. Individuals and their families are encouraged to become familiar with these rights.

Healthcare Providers Rights and Responsibilities

Healthcare providers have professional rights and responsibilities to provide ethical care and treatment within the realm of their practice. Our staff is regulated by ethical codes enforced and regulated by their individual disciplines and by state and federal laws. At Frazier NeuroRehab Program, healthcare professionals are responsible for setting high expectations to provide quality rehabilitation services to all individuals.

Discharge Criteria from Program:

There are specific instances when a patient would be discharged from the program. They are as follows:

- If a patient has achieved discharge goals.
- If a patient has achieved maximum outcome at this point in their recovery.
- If a patient has a significant change in their medical status.
- If a patient has significant psychiatric, behavioral or substance abuse issues that need clinical attention.
- If a patient has a lack of insurance or benefits and it would be an economic hardship for the family.
- If a patient becomes non-compliant with treatment and misses 3 consecutive appointments without calling and informing the treatment team.

TO THE FAMILY:

Family and friends often experience a wide variety of strong feelings when their loved one is injured or ill that involve both hope and concern. Often in the first few weeks or months after the injury, they may experience feelings of fear, anxiety, hope or denial. Generally, as the individual progresses, you may begin to have feelings of anger, frustration, and sorrow. All of these reactions to the experience are very normal considering the seriousness of the injury/illness.

We recommend that you allow yourself to feel and recognize the wide variety of feelings you are experiencing. Your life, as well as your loved one's, has been dramatically altered by the injury/illness. We have learned that allowing yourself to express your feeling will help keep you healthier and more able to cope with this stressful situation. We have outlined below activities that will help you care for yourself during the recovery process:

•**Live Without Guilt:** We have observed that many family members and friends feel guilty if they take time to attend to their own needs and even have a little break or recreation. Your loved one will recover best if you are as well rested and as happy as you can be. It is important that you set a good example for a well-balanced life that includes some enjoyment. Helping your loved one by working on overcoming your guilt, if present, is a positive, healthy contribution.

•**Rest, Rest, Rest:** To be an effective team member and to think clearly, we recommend you allow yourself adequate rest periods. Many times brain injury recovery is a long process and you will need lots of energy to handle the “ups” and “downs”. Keeping yourself rested is a gift that you are giving to your loved one.

•**Proper Nutrition:** You will need all the energy you can get to cope, both physically and emotionally, with this traumatic situation. Avoid eating on the run or eating junk food. A daily,

well-balanced diet is recommended.

•**Maintain Your Life:** Unfortunately, your everyday life does not come to a standstill when someone you love experiences a brain injury. Balance your personal needs with the situation. Allow yourself time for a hot bath, exercise, or time out with friends. Your loved one is in a safe environment with professionally trained personnel.

•**Avoid Abusive Activities:** Substance abuse, alcohol, and drugs will only create more problems and add stress to the situation. They may also cause seizures or reinjury.

•**Discuss Your Feelings:** Confide in someone that can give you love and support during this stressful experience. Don't be ashamed to express both your positive and negative feelings. Often times family and friends find it beneficial to maintain a journal regarding their experiences and feelings.

•**Ask Questions and Seek Support:** Ask any questions you have. The staff at the NeuroRehab Program is accustomed to assisting family and friends with resources to answer their questions. Although not all questions have clear-cut answers, we will do our best to provide families with answers. We also recommend that families seek emotional support. Support can be provided through our Psychology Department. Frazier can also refer families to support groups, and/or place them in contact with former participants/families.

TREATMENT TEAM

You will receive a variety of therapies to meet your physical, emotional, cognitive, and social/interpersonal needs. The treatment team will utilize several different treatment strategies and techniques in order to promote recovery.

Individual Therapy

Individual therapies allow each team member to address specific goals related to their specialty. Individual therapies may include:

•**Psychology:** Following brain injuries, individuals may experience depression, financial worries, social changes, and more. We recognize that your feelings of self worth are important and Psychology can help to address these issues. Psychology examines and identifies observable behavior/changes that are the result of an injury or illness. Treatment may address adjustment to injury, deficit awareness, redevelopment of social interaction skills, close and intimate relationships, education regarding the illness or injury and education regarding activities to avoid.

•**Occupational Therapy (OT):** Often after an injury or illness, everyday life activities are more difficult to participate in than they were before. Occupational Therapists assist individuals in improving the skills needed to complete everyday tasks such as dressing, bathing, driving, shopping and returning to school or work. OT's will focus on increasing strength, balance and coordination necessary for performing Activities of Daily Living (ADL's). They will also address cognition (thinking) and visual perceptual abilities. Your OT may suggest adaptive techniques or equipment that will allow you to be more independent with these daily activities.

•Speech/Language Therapy (ST):

After a brain injury or illness, many individuals report difficulties with memory, organization, and focus. Our Speech Therapists address the communication skills of listening, speaking, reading, writing, and cognition (thinking). These skills include attention, orientation, memory, problem solving, sequencing, and thought organization. Speech Therapists also diagnose and treat swallowing difficulties and voice problems.

•**Physical Therapy (PT):** Mobility and independence are important to all of us. Physical Therapists assist individuals in improving movement, strength, coordination, balance, sensation and flexibility. If individuals are unable to walk independently, PT's may recommend and encourage the use of braces, assistive devices or custom wheelchairs to maximize each person's level of independence. Physical therapy will also address safety issues involved in physical activities.

•Case Management (CM):

Case management serves to coordinate the care between the individual, family, treatment team, and payer source. The case manager is a health professional that advocates for essential services, analyzes fiscal benefits, advises the individual and family, and monitors the use of resources. The CM guides the individual and family through the admission process into the NeuroRehab Program and assists the individual to ensure that all the services recommended are obtained.

GROUPS:

All of us work in groups in some way. It may be at your worksite, through a religious organization, or in your neighborhood. Groups are a part of everyday life. An important aspect of the NeuroRehab Program is the involvement in group therapies. Therapeutic groups provide an opportunity to relate to other individuals who are going through similar circumstances. The groups provide encouragement and support. They also allow individuals to practice new strategies and procedures in a structured and safe setting. Some participants in groups at the NeuroRehab Program are doing well, and others are having more difficulty. Groups work together toward common goals.

Some of the groups that are offered are:

Goals Group Emphasis:

- Recording schedule accurately into planner or notebook
- Increasing independence by following a daily routine
- Identifying weekly goals to get done
- Prioritize daily, weekly, and monthly tasks (i.e. putting the most important things first)
- Learning to use strategies for daily tasks and responsibilities

Fitness Group Emphasis:

- Stretching exercises
- Strengthening
- Neuromuscular re-education (re-teaching muscles how to work)
- Gross motor coordination (large movements)
- Cardiovascular endurance (making your heart stronger)
- Balance
- Development of your exercise routine

Reasoning Group Emphasis:

- Generating and organizing thoughts
- Recognizing relevant information
- Recognizing similarities and differences
- Concrete versus abstract thinking
- Deductive reasoning

Executive Skills Group Emphasis:

- Initiation
- Goal setting
- Self evaluation
- Self awareness
- Self monitoring
- Cognitive flexibility
- Task completion
- Planning

Life Skills Group Emphasis:

- Home management skills (running the house)
- Financial management skills (money/paying the bills)
- Meal planning/preparation
- Safety
- Energy conservation/work simplification (using your energy wisely and doing more with less)
- Real life problem solving
- Community reintegration (getting back to your activities in the community)

Vision Group Emphasis: (the following relate to how your eyes work)

- Visual scanning strategies
- Visual memory techniques
- Visual perception skills
- Vision exercises for teaming, convergence, and tracking

Lunch Group Emphasis:

- Socialization with others
- Meal preparation/set up
- Eating
- Community integration (getting back to your activities in the community)
- Group problem solving (making decisions with others)
- Health and nutrition education

Brain Injury Education and Adjustment Emphasis:

- Knowledge of basic brain anatomy and function (how the brain works)
- Emotional adjustment after injury/illness
- Learning to deal with changes
- Deficit awareness (knowing how your injury/illness effects you)
- Support and encouragement
- Reentry into life roles (getting back to your life)

Cognition Group Emphasis:

- Thought organization
- Reasoning
- Problem solving
- Memory
- Attention

Vocational Skills Group Emphasis:

- Practice interviews
- Job etiquette
- Self-esteem/confidence
- Interpersonal skills (getting along with others)
- Resume building
- Vocational Rehabilitation Services (helping you get back to work or school)

Pragmatics Group Emphasis:

- Non-verbal behaviors
- Social skills
- Self-monitoring
- Social cues
- Complex social situations

The individual's primary therapist will be responsible for scheduling persons into groups as they are appropriate

POSSIBLE RECOMMENDATIONS FOR YOU:

The following are some examples of recommendations you may receive. Some, none, or all of these may be right for you. Other recommendations may be given that are not listed here.

Memory Device/Planner

A memory-planning device is frequently recommended for use after a brain injury or stroke. Planners have been shown to be one of the most effective tools in helping people return to school, work, and/or independent living after injury. If you already own a planner, please bring it with you to therapy. If not, your therapists will work with you in choosing a system that will best fit your needs. Planners are intended for long-term use at home, at work and in the community.

Homework and Home Programs

Homework and home programs are often recommended to help you be successful in treatment. These programs will help you in carrying over the strategies and techniques you have learned in therapy. It is extremely important that homework and home programs be carried out to maximize your rehabilitation and overall success in the recovery process.

Family/Friend Teaching Sessions

During your time in the program, with your permission we may ask your family and/or friends to attend some treatment sessions. During these sessions, the therapist will offer information regarding your progress, education about the therapy you are receiving and suggestions for activities to be carried at home. These treatment sessions will be designed for you, to focus on your needs and the needs of your family and friends.

Community Outings

It is therapeutic to include everyday activities into therapy sessions. These activities include shopping, dining out, taking public transportation, banking and recreational/leisure activities. Individuals are encouraged to employ the skills they have been working on in therapy such as social skills, money management skills, map-reading skills, planning and organizational skills, problem solving skills and safety awareness during these activities. The specific location of community outings varies with the needs of the participants and may be done individually or with a group.

Home Evaluation

A home evaluation/visit may be suggested by your occupational therapist. The purpose of a home evaluation is to make sure you are safe, can function, and be the best you possibly can be in your home. You may be asked to complete a small cooking task (if appropriate) or demonstrate how you complete other home tasks. Your occupational therapist may provide you with some suggestions making it easier to get things done in your home. These recommendations may include physical changes to your home or simply other ways to complete home tasks. Following the evaluation, you and your family will be given a written list of recommendations.

Neuropsychological Evaluation

Individuals who have a neurological diagnosis may be referred by their physician to take a neuropsychological evaluation. This evaluation is helpful in finding out your strengths are and what abilities have changed and continue to need improvement. This evaluation is also helpful in planning your rehab. This is typically an all day evaluation that is usually administered downtown. Your Treatment team can provide you with further information regarding this evaluation.

Driver Evaluation and Training Program

Often after a neurological injury or illness, individuals have both physical and cognitive changes that may limit their ability to drive safely. Most individuals are not yet driving when they begin the NeuroRehab Program. Your occupational therapist will consult with your doctor regarding when you will be ready to begin the driving process. For your safety, and others driving on the road with you, a driver's evaluation may be recommended. This evaluation is offered by Frazier located on Newburg Road. The program offers a pre-driving evaluation and a behind-the-wheel assessment to ensure that you demonstrate safety awareness and judgment while driving and the skills necessary to control your vehicle. If necessary, follow up services are provided such as: an individualized driver's training program, a vehicle and equipment assessment and adaptive equipment training. The goal of the NeuroRehab Program and the driving program is to return you to driving again if at all possible. We understand the importance of driving, but also of driving safely.

School Re-entry Program

With permission of parents and student, a member of the treatment team will contact the school to receive past school records, set up home-bound services, begin the process of school reintegration and follow up services with the student after the transition has occurred. (If your student received inpatient treatment we will discuss with that team the recommendations for your student.) The team develops specific recommendations and provides objective data, such as the neuropsychological evaluation, and other standardized tests, so that the school has a comprehensive understanding of the student's needs. Educational information is also provided to the school regarding the effects of brain injury and common changes that can occur. By providing teachers and school staff with education regarding brain injury, it helps them to successfully meet the needs of the student.

The treatment team also educates parents and their student on services within the school system that they may need. Often an Individualized Education Plan (IEP) is set in place for grade school through high school levels of education. This is a specific plan that is legally binding to ensure your student is provided the optimum services and care available. Please talk to your student's therapy team as soon as possible to develop a plan for re-entry.

Vocational Services

The NeuroRehab Program is committed to assisting individuals in achieving the highest level of functioning possible. Therefore, the treatment team offers vocational services to assist individuals in getting back to work. Some of the services offered are: a work-site evaluation, a job analysis, job trials, assessment of work skills, identification of modifications or adaptations, incorporation of strategies, on-site job training and job coaching. The NeuroRehab Program works closely with Kentucky and Indiana Vocational Rehabilitation to provide the best quality of care possible.

FREQUENTLY ASKED QUESTIONS:

1. Does a family member or care-provider need to stay for the entire therapy day?

A family member or care-provider does need come with you during your first visit to Frazier. This is primarily so that an accurate history can be obtained and necessary paperwork can be filled out. After the evaluation, family members are welcome to attend individual therapies but are not required to, unless requested by the treatment team. Many times, it is more therapeutic for family members not to attend therapies as this increases the independence of the individual.

If family members choose to stay for therapy, they will be required to wear a nametag, which can be obtained from the front office.

Also, family and friends are not permitted to attend group sessions. This is so the privacy of the other individuals in the group is maintained.

We have found that when family members stay interested and involved in the treatment at the Neuro Rehab Program, assist their loved one with following through with homework and home programs suggested by their therapists, encourage regular attendance and participation in the program, recovery is improved.

2. How long is the average length of stay?

An average length of stay is around 10-15 weeks. This question is difficult to answer however, as each length of stay is tailored directly to the needs of each individual. Your treatment team will discuss the recommended length of stay with you after the evaluation.

It is not uncommon for the projected length of stay to change and become longer or shorter as treatment progresses. Everyone has a different speed of recovery. It is well known among therapists who treat individuals with brain injuries everywhere that the best recoveries are made when individuals actively participate in treatment without interruption and for the recommended length of time. Compared to a person's lifetime, the time spent in therapy is a small investment.

3. Is therapy enjoyable?

The staff at the Neuro Rehab Program make every effort to make therapy as enjoyable as possible. However, it is important to remember that the goal of therapy is to get better. Part of the rehab process is working through deficits, or problems caused by the injury or illness, which can be difficult for individual and their family members. This question is similar to asking whether a job is enjoyable. depends upon the person and the things that need to get done. Some individuals see their job as enjoyable and some see it as income Recovery can occur either way, but attitude is everything.

4. We can't provide transportation to therapy, what are our options?

To those who live in Jefferson County, TARC 3 service is a wonderful resource to use for transportation assistance. TARC 3 is a public transportation service for individuals with disabilities. Once the individual has applied and been accepted, TARC will come to their current place of residence, pick them up, and drive then pick them up at the end of the therapy day and transport them home again. There is a small fee involved for each ride. See the list of resources in the back to contact TARC. We encourage you to apply early for this service, as it takes 3-5 weeks to begin.

To those who live outside of Jefferson County, the resources are limited. Talk to your primary therapist about other options that may be available to you.

5. What if we need to cancel therapy?

It is our expectation that you will view attendance in this program much in the same way you view work or school. We expect you will be here unless there is a medical or personal emergency. In the event that you will be missing a scheduled therapy, you need to let your primary therapist know at least one week in advance. Whenever possible, schedule medical appointments for days or times that you are not in therapy.

In the event of illness, please contact your primary therapist as early as possible. Please ask to speak directly to your primary therapist and do not leave a message.

6. What will happen in therapy?

Each treatment program is tailored to the needs of each individual. Therapy may consist of occupational therapy, speech therapy, physical therapy, and neuropsychological services. The program focuses on achieving the highest level of independence possible. When it is appropriate getting back to work or school will be addressed. Memory, organization, vision, endurance, thinking skills, balance, strengthening, coping, brain injury education and adjustment, safety, reasoning and judgement are all addressed as needed.

7. When can I drive?

When the treating Occupational Therapist feels that is appropriate to consider driving, they will collaborate with the treating physician to determine the next course of action. This usually requires a rehab-type driving evaluation that is offered at one of Frazier's clinics. Our goal is to return individuals to driving as soon as possible but also with safety as the primary concern. Ask your OT any questions you have regarding driving.

8. How can family members/ caregivers assist in the recovery process?

It is important that the things learned in therapy be carried over to the home! Your team will work with you to determine what should be done at home. For example, planners are often used as a memory and organizational tool. Encourage the use of the planner at home and while in the community, not just while at therapy. The goal is to create healthy habits in therapy that will be used long after discharge. Call and schedule yourself to attend a therapy day and follow along in the therapy sessions. Meet with staff to learn more about the injury/illness and recovery process. Work with the team to set goals and a pace of recovery that best matches the individual. Ask to participate in team rounds.

9. Where can we have our questions answered?

At any point during rehab, the staff and therapists at Frazier are more than willing to answer any questions you may have. First, seek out your primary therapist to get answers to your questions. The primary therapist may ask another team member to talk to you to address your question. If calling by phone, a good time to reach your primary therapist is before 9:00 am or after 3:00 pm.

10. After participating in the NeuroRehab Program, are participants fully recovered?

After participating in the NeuroRehab Program most individuals are significantly more independent, need less supervision, and have a higher quality of life. Although others may not be able to tell any differences, some people report being able to identify a few skills that are not like they used to be prior to the injury or illness. In this case, strategies and compensations need to be used long term. Also, the healing continues long after therapy! While the first 1-2 years are the most acute and critical phase of recovery, further recovery continues for many years down the road.

