

## **DOES CASE MANAGEMENT INCREASE PARTICIPATION AND FUNCTION AFTER TRAUMATIC BRAIN INJURY? A SYSTEMATIC REVIEW.**

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**Introduction:** Adults who survive a traumatic brain injury (TBI) require ongoing rehabilitation, even after discharge. Adults who survive TBI commonly see a range of health and medical specialists, receiving assistance from a number of different service providers. In order to address the difficulties patients often face negotiating a number of different health systems, as well as helping to overcome the difficulties which arise because of the client's cognitive impairments, patients are referred for case management. Despite its common use throughout Australia, little is known about the effectiveness of a case management program. The purpose of this study was to evaluate the evidence for effectiveness of case management during recovery from TBI in adults.

**Methods:** Systematic review methodology. Electronic databases were searched and 5 articles met the criteria for review. Each paper was critically appraised and summarised. PEDro scale was used to determine the quality of randomised controlled trials (RCT) and the QUORUM scale was used to determine the quality of systematic reviews (SR).

**Results:** Four RCTs and one SR were appraised and their design features and data relating to participation and function outcomes were placed in two evidence tables. Due to methodological limitations, there was neither clear evidence of effectiveness nor of ineffectiveness.

**Discussion:** Among the principal findings are: (1) there is a paucity of applicable research on case management (2) there is a major need to evaluate the impact of case management on participation outcomes, and (3) there remains considerable variation between case management services provided in clinical research and that which is provided in the Australian community. This paper will provide suggested ways forward for both clinicians and researchers.