











# The National Clinical Audit of Specialist Rehabilitation for Patients with Complex Needs Following Major Injury (NCART)

#### Guidelines on completion of the assessment tools

There are 5 assessment tools requiring completion as part of the audit

Two tools are to be commenced by the Major Trauma Centre(MTC) staff within 48 hours for patients with an Injury severity score (ISS) $\geq 9$  to identify those with potential Category A or B needs

- 1. Complex needs checklist (CNC)
- 2. Rehabilitation Complexity Scale (RCS-E Trauma)

If the patient is likely to have Category A or B needs then the CNC needs to be sent to the Consultant in Rehabilitation Medicine (CRM) or their designated deputy.

The CRM completes the Patient Categorisation Tool (PCAT)

3. Patient Categorisation Tool (PCAT)

If the CRM confirms that the patient has Category A or B needs they (CRM) or any other team member completes the

- 4. Northwick Park Dependency Scale (NPDS-H)
- 5. Neurological Impairment Set Trauma (NIS-T)

## **Complex Needs Checklist**

Completed once by MTC staff.

This is a one sided screening tool with checklist options and is completed based on clinical opinion of the complexity of the patients on-going rehabilitation needs. The final table requires the clinician to indicate if the patient is likely to have Category A, B C or D needs. Those identified as Category A or B needs should then have an RCS-E Trauma score completed and then a referral to the CRM.

No total score is required.

### Rehabilitation Complexity Scale-Extended Trauma (RCS-ET)

Completed once by MTC staff.

This assessment tool with 5 domains; medical, care/risk, nursing, therapy and equipment. Within the MTC it is scored based on need whereas within rehabilitation units it will be scored on what the patient actually receives.

All domains must be completed by selecting/circling the appropriate response. Care and/or risk can be scored based on the patients need but only the highest score is added up not the score for both (choose the highest).

Full descriptions for each score are incorporated on the double sided detailed description of the tool. Information in red font on the tool is not compulsory for completion but may assist in identifying the correct score to select.

Once completed there should be an M score, C/R score, N score, TD & TI score and an E score.

#### Patient Categorisation Tool (PCAT)

Completed once by the CRM/designated deputy following referral.













This is a double-sided check list used to assist in confirming Category A/B needs. It is familiar to CRM's currently working within a Specialist Rehabilitation Service as it is completed for all patients on admission.

There are 16 domains – each domain contains a list of needs divided between 3 columns. All relevant responses should be ticked – either within or between columns for example using the Intensity domain: It may be appropriate to select >5 therapy disciplines in Category A column and 20-25 hours total therapy time in the Category B column.

If a domain is left blank (no selection made) it will be assigned as Category C. At the bottom of the second side the Service Level, Category and expected length of stay (in rehabilitation) should be completed based on Clinical Impression.

No total score is required.

#### Northwick Park Nursing Dependency Scale - Hospital version (NPDS-H)

Completed once by the CRM/designated deputy (with or without the help of the nursing staff) following confirmation that the patient has Category A or B needs.

This is a 6 sided document that is quick to complete by staff familiar with the patients care needs. It is divided into 4 sections:

- Section 1. Basic Care Needs
- Section 2. Special Nursing Needs
- Section 3. In-patient needs
- Section 4. Care Needs Assessment

All sections must be fully completed including frequency of care (for example number of times per week/times in 24 hours they have urinary accidents).

Descriptions of the activity to be considered when scoring certain items are included on the actual tool or within a help text box on TARN. There are no other guidelines required.

The correct response for each item is circled/ticked/selected.

- Section 1 Basic Care needs has an ordinal score for each item 1 score per item should be selected (if 2 seem appropriate select the most frequent).
- Section 2. Special Nursing Needs there are 7 items in this section with dichotomous responses circle the number (5) for each item that is applicable
- Section 3. In-patient Nursing Needs this is a mixture of dichotomous (yes/no response) and ordinal scores.
- Section 4. Care Needs Assessment this section is scored based on "if the patient was at home today" what care would they require. When completing the "skilled help required" domain in this section it is also necessary to state the frequency of intervention per week and the person providing the care.

No total score is required.

## **Neurological Impairment Set - Trauma (NIS-T)**

Completed once by the CRM/designated deputy (with or without the help of the trauma team) following confirmation that the patient has Category A or B needs.

There are 23 domains within the tool. Each domain is scored using the severity score:

- 0 No impairment normal function
- 1 Mild impairment affecting high level function only
- 2 Moderate impairment Significant limitation but some useful function











## 3 Severe impairment - Little or no useful function, effectively limiting rehab

As the tool is scored at an early stage the level of function may not be assessable – in these cases "unknown" or "untestable" can be selected. For scores of 1-3 the impairment type must be selected (select all that apply). If the impairment type is not listed please add the response in the "other" text box.

Some impairment types have the World Health Organisation, International Classification of Functioning, Disability and Health (ICF) code alongside the description. It is not necessary for the ICF code to be added to the "other" types of impairment.

No total score is required.

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