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Oxford Centre for Enablement

Information for patients



This booklet is for people who have been referred to the Oxford Centre for Enablement (OCE) and their family members.

We know that for many people, the circumstances leading to their referral to the OCE have been scary, difficult, and distressing, and the next steps are uncertain. This booklet explains:

- What the OCE is
- What the reasons are that a person is referred to the OCE
- What the service offers at the OCE
- How the process of referral to the OCE works

What is the OCE?

The Oxford Centre for Enablement (OCE) is a highly specialist rehabilitation service which has an inpatient unit with 18 beds. The inpatient service offers specialist rehabilitation for people with the most complex needs. It serves a population of approximately 3 million people covering a wide geographical area including Oxfordshire, Buckinghamshire, Berkshire, Wiltshire, Hampshire, Dorset and the Isle of Wight.

What are the reasons for a person to be referred to the OCE?

A person is usually referred to the OCE if they have new onset significant problems that affects their ability to function in many different ways. In other words, a person who has significant changes in their ability to walk, talk, eat, hear, see, think and look after themselves is likely to be referred. Common diagnoses that cause this level of disability are brain injury, stroke, spinal cord injury, multiple fractures or limb loss.

What is offered at the OCE?

There are different pathways offered at the OCE, depending on the reason for referral. These pathways include:

1. The Rehabilitation Pathway

-or-

2. The Prolonged Disorders of Consciousness (PDOC) Assessment Pathway

1. What is the Rehabilitation Pathway?

An admission to the OCE in this pathway will work towards things that matter to the person, taking into account their wishes and values. This is done with the support of therapists, nurses, doctors and important people in the person's life. This includes supporting a person's physical and mental health as well as helping them to take part in activities they would like to be able to do. Sometimes this involves helping a person to re-learn skills, but also learning new ways to do things and helping them to adjust to change.

Who is involved in the care of a person having rehabilitation?

A person who is admitted to the OCE works with a team of clinicians (nurses, physiotherapists, occupational therapists, speech and language therapists, clinical psychologists/neuropsychologists, dieticians, orthoptists) led by a Rehabilitation Medicine Consultant. One of the rehabilitation team is allocated as a key worker, who can be the main person to contact for any queries.

The initial assessment period

The first two to three weeks of an admission is a period of assessment, where we get to know the person and identify their needs and priorities. Following this initial assessment period, we estimate how long they would benefit from intensive inpatient rehabilitation and work through a process called 'Goal Setting'.

What is Goal Setting?

This is where we set goals that are bespoke to the person, a bit like targets that we are working towards. These are reviewed every 2 weeks throughout a person's stay.

What happens on an average week?

Each week a person is given a timetable of rehab sessions that run Monday to Friday. Most therapy sessions last around 45 minutes. There are also group sessions led by different members of the multidisciplinary team (MDT), giving patients extra opportunities for therapy and support. There are sometimes extra group sessions at weekends run by Rehabilitation Assistants. Periods of rest are scheduled, which are also important. The Rehab Team will also suggest exercises that can be worked on between sessions.

There is a Consultant ward round once a week. There are doctors available on site during the day Monday to Friday, and an on call doctor out of hours.

In addition to the 2 weekly goal setting meetings, there are opportunities for a person and their family to meet with the whole team at the midpoint of the admission and towards the end.

How long does a person stay at the OCE?

This is different for each person, and is estimated after the initial period of assessment based on the person's particular needs. Therefore, most people are given an 'Estimated Discharge Date' (EDD) a few weeks into the admission. This is reviewed regularly during the admission and may be brought forward or delayed depending on the person's rehab plan. On average, people stay between 2 to 4 months.

What happens after discharge from the OCE?

We know that sometimes people can feel apprehensive about leaving hospital after a life changing injury or illness. Therefore, the OCE team will work with community services to ensure that your discharge is as smooth as possible. We aim to help the person become as independent as possible, but many will continue to need support following their inpatient stay.

Where a person goes after discharge is very individual, with some people returning home, sometimes with support from visiting carers, whilst others will move to a more supportive environment such as a care home or sheltered accommodation. The OCE team refer to community therapy teams where appropriate and can signpost other organisations that can offer support. In some circumstances, a person may return to their local hospital before moving to the community so that the local team can organise the care they need.

2. What is the PDOC assessment pathway?

Following a very severe brain injury, a minority of people do not recover a full level of consciousness a month after the injury. It can be unclear how much awareness a person has of the world around them without specialist assessment. This is called a Prolonged Disorder of Consciousness (PDOC).

When it is suspected that a person is in a PDOC, they may be referred for specialist assessment at the OCE. This usually involves a shorter admission for assessment, and consideration of the person's ongoing care needs.

What happens after the PDOC assessment pathway?

The assessment of PDOC takes approximately 8 weeks and the pathway following this is dependent on the outcome. If the person is no longer in a PDOC and has clear rehabilitation goals that can be met in this environment, the person may move to the Rehabilitation Pathway. However, if the person remains in PDOC or no rehabilitation goals can be identified at that time, they will likely return to their local hospital for planning of long term care.

How does the process of referral to the OCE work?

1. The initial referral

The first step is for the clinical team caring for a person with a significant disabling injury to consider that they might be eligible for admission to the OCE. If this is the case, the clinical team will discuss it with the person and check that they consent to this referral. If the person is unable to consent, the person's known family and friends will be consulted to make the decision to refer in their best interests. (Please see the information on Mental Capacity Assessment below). The referral is completed by the clinical team caring for the person.

2. The referral review

All referrals are discussed in a multidisciplinary meeting led by the Consultant on a weekly basis. The outcome of this review can be:

- The person is added to the waiting list.
- The person is not ready for rehabilitation (the pending list).
- The person is not eligible for admission to the OCE.

These outcomes are reported back to the clinical team who made the referral whose responsibility it is to inform you.

3. The OCE waiting list

If a person is considered eligible for the OCE at the time of referral, they may be added to the waiting list. The priority for admission is based on how long a person has been waiting, and whether the OCE can safely care for the person at that time. It can take many weeks before the OCE has the capacity to offer admission.

Sometimes, a person's needs change whilst they are on the waiting list. This means that a person may no longer be eligible for admission to the OCE, or the OCE may not be the most suitable place for them. Therefore, not all patients on the waiting list will be admitted to the OCE. Instead, the person may go straight home or have rehabilitation in a different setting including in the home.

4. The OCE ‘pending’ list

When a person may be appropriate for admission to the OCE in the future but not at present, they will remain under active review by the OCE admissions team. This may be whilst more information is gathered to access eligibility for admission, or whilst a person recovers from an acute illness such as an infection. Once a person is considered ‘ready for rehabilitation at the OCE’ they will be moved onto the waiting list.

5. Referrals declined from admission to the OCE

If a person is not eligible for the OCE, or they have needs that we cannot safely manage in this setting, the referral will be declined. The OCE admission team may make a recommendation to the referring team for an alternative pathway, which may be a different rehabilitation setting or therapy at home.

Mental Capacity Assessment

For some people following brain injury, it can be difficult for them to make important decisions, due to the impact of the injury on their thinking skills or 'cognitive function'.

One such decision is whether to consent to referral to the OCE. The clinical team caring for the person with a brain injury may support you in a mental capacity assessment to explore whether they are able to make this decision. In some cases, a person is unable to make this decision themselves. In this case, the decision is usually made in their 'best interests'. This means that the clinician responsible for their care (usually the Consultant) will liaise with their family, friends and clinicians to consider what the person would have chosen if they were able to. If a person has no-one to advocate for them, an Independent Mental Capacity Advocate (IMCA) will be appointed.

However, if a person who lacks capacity has previously appointed a Lasting Power of Attorney for Health and Welfare, they can consent to the referral on the person's behalf.

For those persons accepted by the OCE, we look forward to welcoming them and their family, and supporting them through the next stage of their journey.

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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Oxford University Hospitals NHS Foundation Trust
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