

# AROC Impairment Specific Report

## Spinal Cord Injury

### INPATIENT – PATHWAY 3

January 2022 – December 2022

Anywhere Hospital



**Australasian  
Faculty of  
Rehabilitation  
Medicine**



australian health services  
research institute



**UNIVERSITY  
OF WOLLONGONG  
AUSTRALIA**

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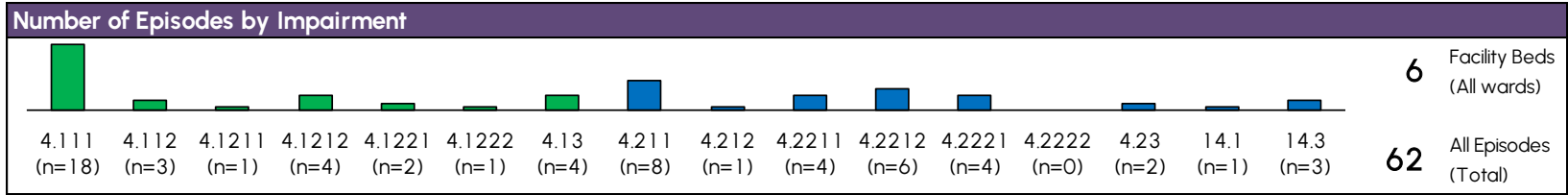
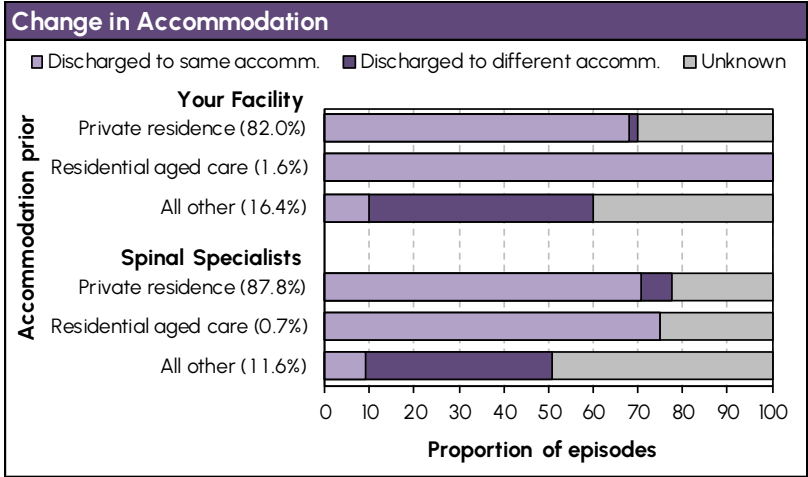
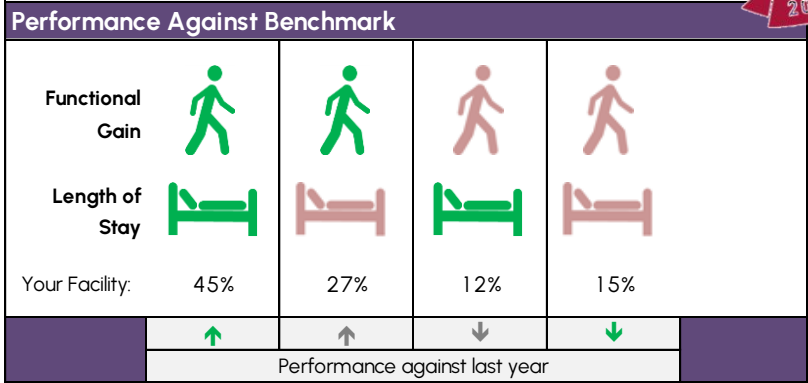
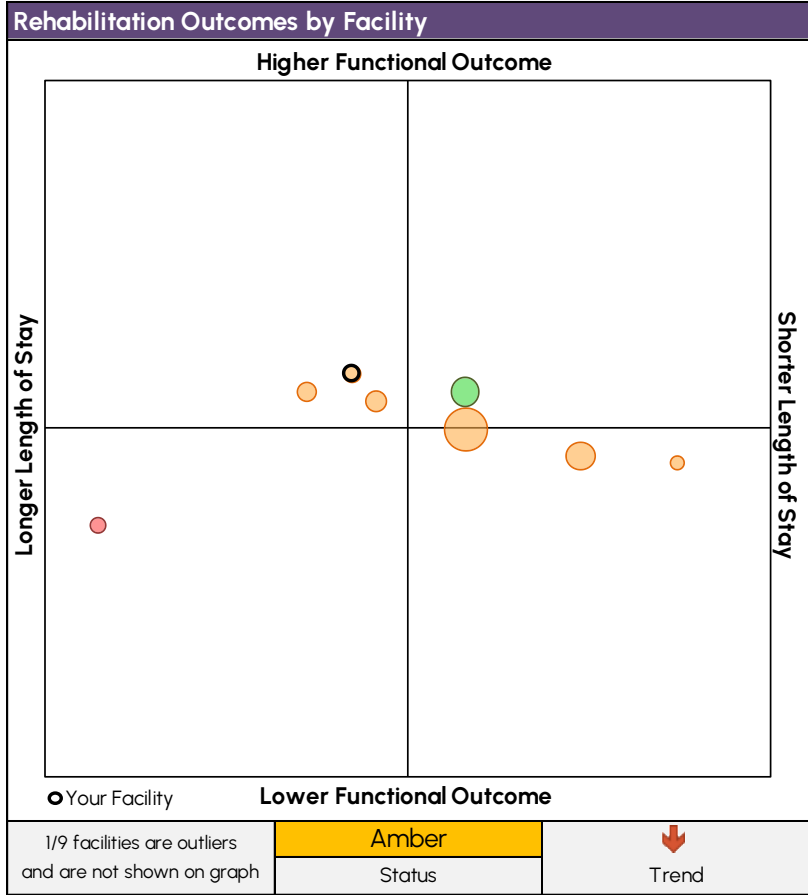
## AN-SNAP Changes

- This is the second AROC report to use the Australian National Sub-Acute and Non-Acute Patient (AN-SNAP) Version 5 Classification, introduced by Independent Health and Aged Care Pricing Authority (IHACPA) in July 2022.
- Like previous AN-SNAP classification versions, Version 5 uses impairment, age, weighted FIM motor admission score and FIM cognition score to determine which rehabilitation class an episode should be assigned to. AN-SNAP Version 5 has 48 inpatient admitted overnight adult classes (the full list of classes can be found in Appendix 3).
- Information about how the **AN-SNAP class** has changed since Version 4 and a description of **Impairment specific weighted FIM scores** can be found in Appendix 1. Further information about AN-SNAP Version 5 is available on the IHACPA and AROC websites.

## What does using AN-SNAP V5 mean for this report?

- **DASHBOARD:** Where you are positioned in the quadrant graph in 2022 is based on V5 casemix-adjusted data, however comparison data from years prior to 2022 uses V4 casemix-adjusted data.
- **OUTCOMES ANALYSIS:** All years' data presented in time-series analysis is casemix-adjusted using AN-SNAP V5 with 2022 as the base year.



# Spinal Injury Dashboard



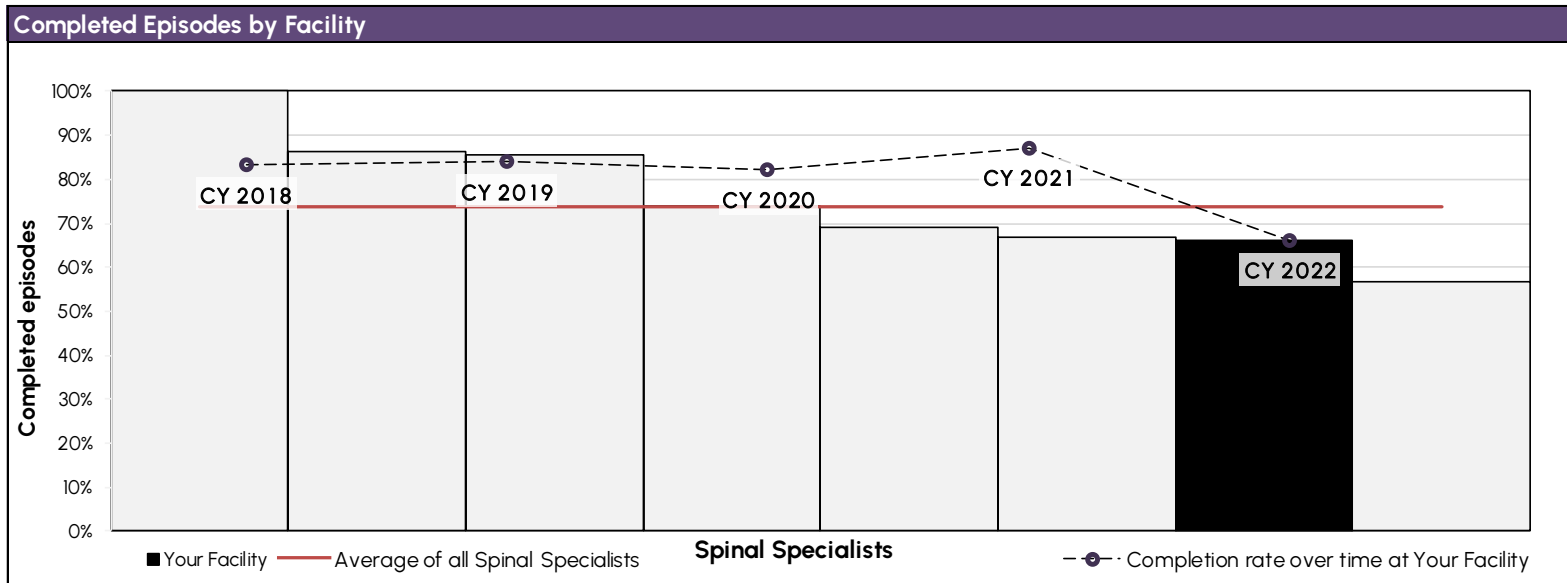
# Spinal Injury Dashboard

Key Indicators*	
Your Facility	Spinal Specialists
Average Age: 56.1	Average Age: 55.7
Mortality Rate: 0.0%	Mortality Rate: 0.4%
% with at least one comorbidity: 42%	% with at least one comorbidity: 40%
% with at least one complication: 37%	% with at least one complication: 46%
% episodes with start delays: 29%	% episodes with start delays: 26%
Days between onset and rehab episode: 33.9	Days between onset and rehab episode: 37.9
Days between clinically rehab ready & start date: 1.8	Days between clinically rehab ready & start date: 2.1

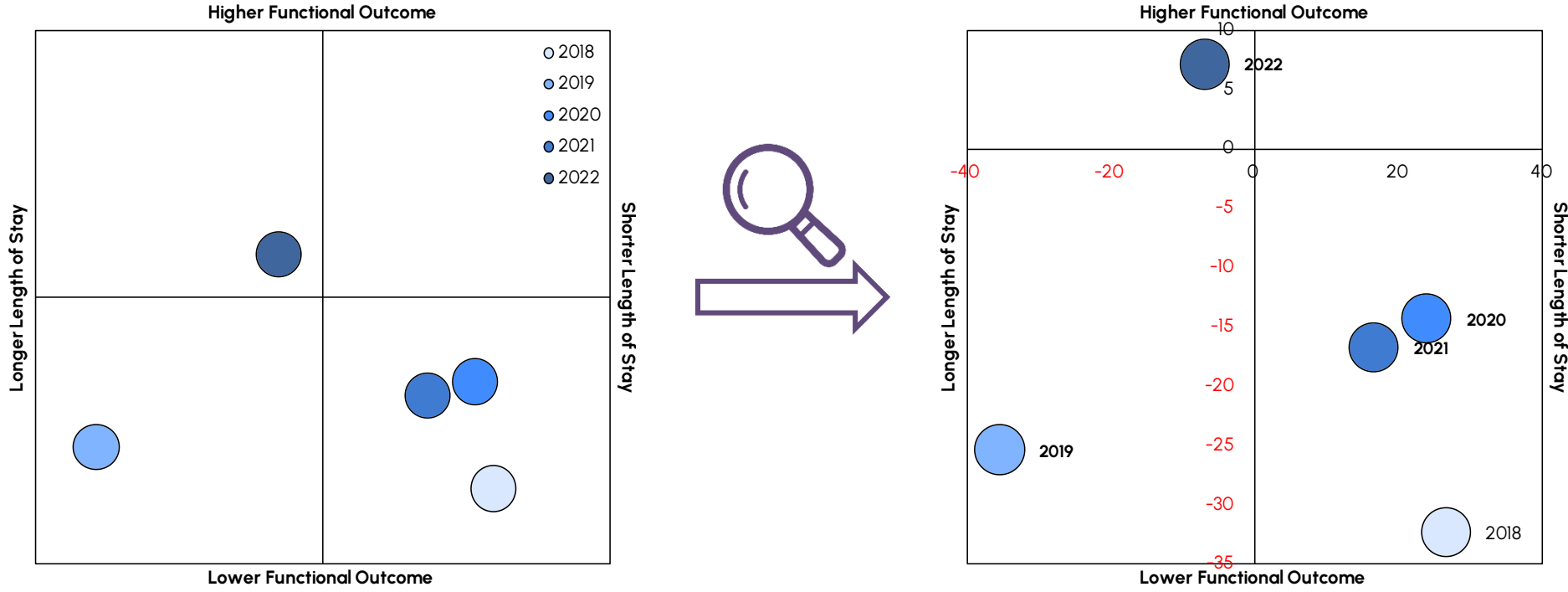
\* Mean value provided unless otherwise specified

Facility FIM Training*	
FIM Credentialed Staff per 100 Episodes	FIM Credentialed Facility Trainers
 11.7 Your Facility	3 Your Facility
 14.3 Spinal Specialists (Mean)	2 AROC Suggested Minimum

\* This includes all impairments from all wards



# Quadrant Position – last 5 years



Axes are locked to match the dashboard, your facility has 0 data point(s) outside the plot

**NB: Data from before FY22 is benchmarked using AN-SNAP V4 classes. FY22 onwards benchmarked using AN-SNAP V5 classes.**  
 NOTE: For the purpose of this graph, a positive (>0) length of stay represents a stay shorter than the benchmark

# Data used in this report

- Spinal cord injury episodes discharged during the reporting period (January 2022 – December 2022) and time series data covering five years.
- Benchmark group is first admission episodes at SPECIALIST spinal cord Injury units in Australia and New Zealand.
- Casemix analysis uses version 5 AN-SNAP classes (Appendix 3). This has been calculated separately for traumatic and non-traumatic episodes since FY2017.
- Data is summarised for your facility, all SPECIALIST and all NON-SPECIALIST services. Where data is provided by specialist facility your facility code is ANYWHERE.
- Unit of counting is by concatenated\* episode, not by patient.
- Where there are less than five episodes within a subgroup, summary data are not provided. Missing data and ungroupable AN-SNAP classes are excluded from figures, but are included in tables.

The immediate impact of COVID-19 on rehabilitation was a 12% decline in the number of rehabilitation episodes following temporary suspension of elective surgeries, ward re-assignments and closures, and fewer traumatic accidents. The ongoing impact of COVID-19 on rehabilitation from still reduced inpatient beds, increasing patient complexity and staffing issues has seen inpatient rehabilitation episodes decline 20% compared to the years prior to COVID. See **COVID-19** in Appendix 1 glossary for information about the collection of data for COVID patients.

Note: Appendix 1 (Glossary) contains definitions of concepts referred to in this report. An understanding of these will help with interpretation of the data. This report should be considered in conjunction with the Outcome Benchmarks Report for your facility.

\*Refer to Appendix 1 for more details about the process of data concatenation.

# Spinal cord injury impairment codes

Spinal cord injury episodes were identified as those with the following AROC impairment codes:

## Traumatic (TSCI)

- 4.211 – Paraplegia, incomplete
- 4.212 – Paraplegia, complete
- 4.2211 – Quadriplegia, incomplete C1-4
- 4.2212 – Quadriplegia, incomplete C5-8
- 4.2221 – Quadriplegia, complete C1-4
- 4.2222 – Quadriplegia, complete C5-8
- 4.23 – Other traumatic spinal cord dysfunction
- 14.1 – Major Multiple Trauma, Brain + Spinal cord injury
- 14.3 – Major Multiple Trauma, Spinal cord injury + multi fracture/amputation

## Non-traumatic (NTSCI)

- 4.111 – Paraplegia, incomplete
- 4.112 – Paraplegia, complete
- 4.1211 – Quadriplegia, incomplete C1-4
- 4.1212 – Quadriplegia, incomplete C5-8
- 4.1221 – Quadriplegia, complete C1-4
- 4.1222 – Quadriplegia, complete C5-8
- 4.13 – Other non-traumatic spinal cord dysfunction

Note: A list of all impairment codes can be found in Appendix 2



# Spinal cord injury AN-SNAP classes

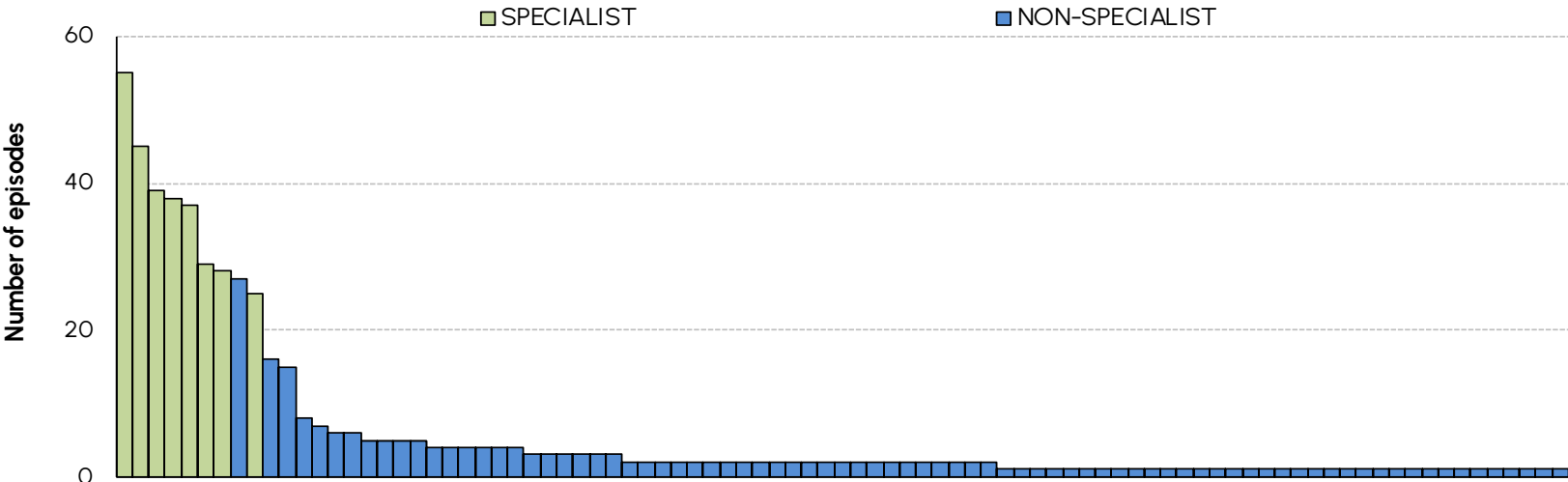
Levels of functioning for spinal cord injury are categorised by the following version 5 AN-SNAP classes:

- 5AD1 – Spinal cord dysfunction, weighted FIM motor 55-91
- 5AD2 – Spinal cord dysfunction, weighted FIM motor 37-54
- 5AD3 – Spinal cord dysfunction, weighted FIM motor 19-36
- 5AP1 – Major Multiple Trauma, weighted FIM motor 51-91
- 5AP2 – Major Multiple Trauma, weighted FIM motor 19-50
- 5AZ1 – Spine, Major Multiple Trauma, Weighted FIM motor score 13-18, Age  $\geq$  59
- 5AZ2 – Spine, Major Multiple Trauma, Weighted FIM motor score 13-18, Age  $\leq$  58

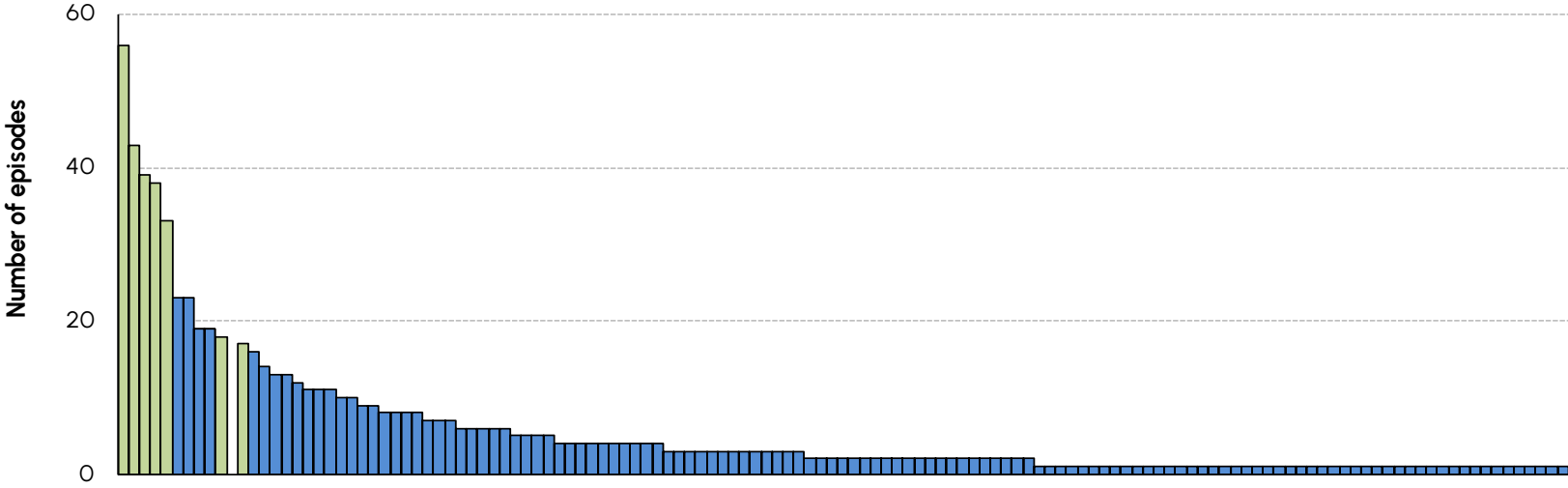
NOTE: A list of all AN-SNAP classes can be found in Appendix 3

# The BIG picture

# Volume of episodes by facilities treating spinal cord injury

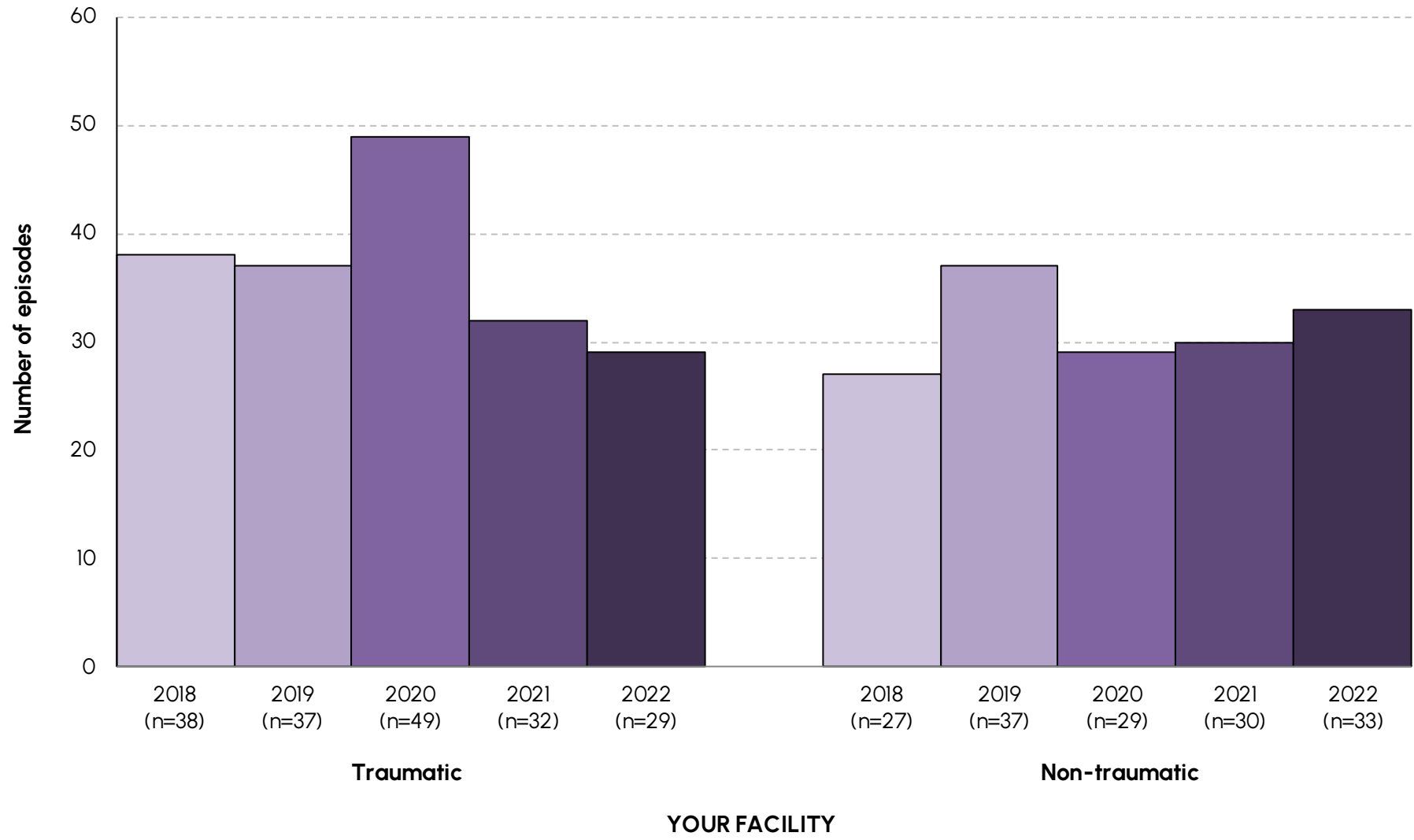


All AROC facilities - Traumatic episodes

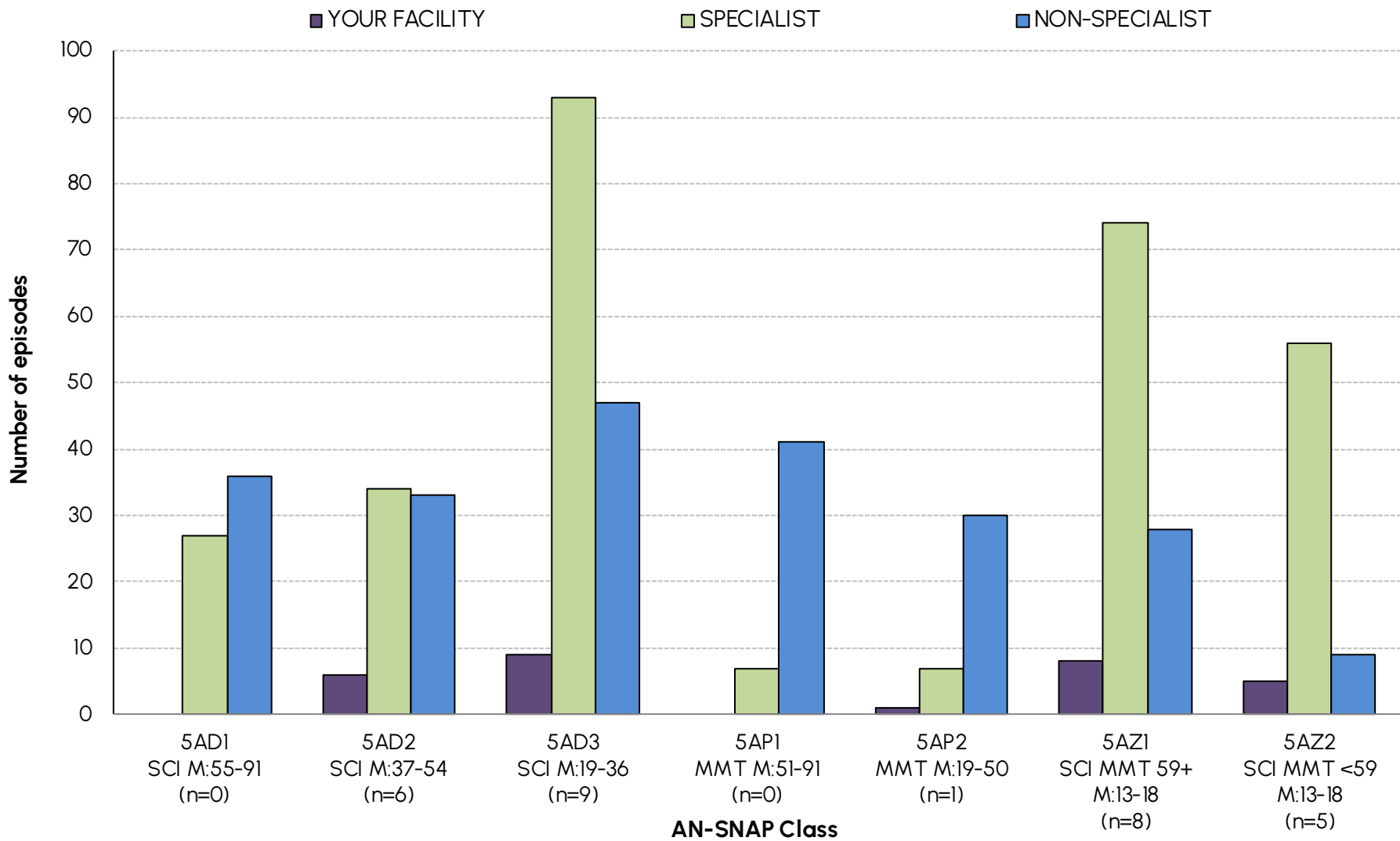


All AROC facilities - Non traumatic episodes

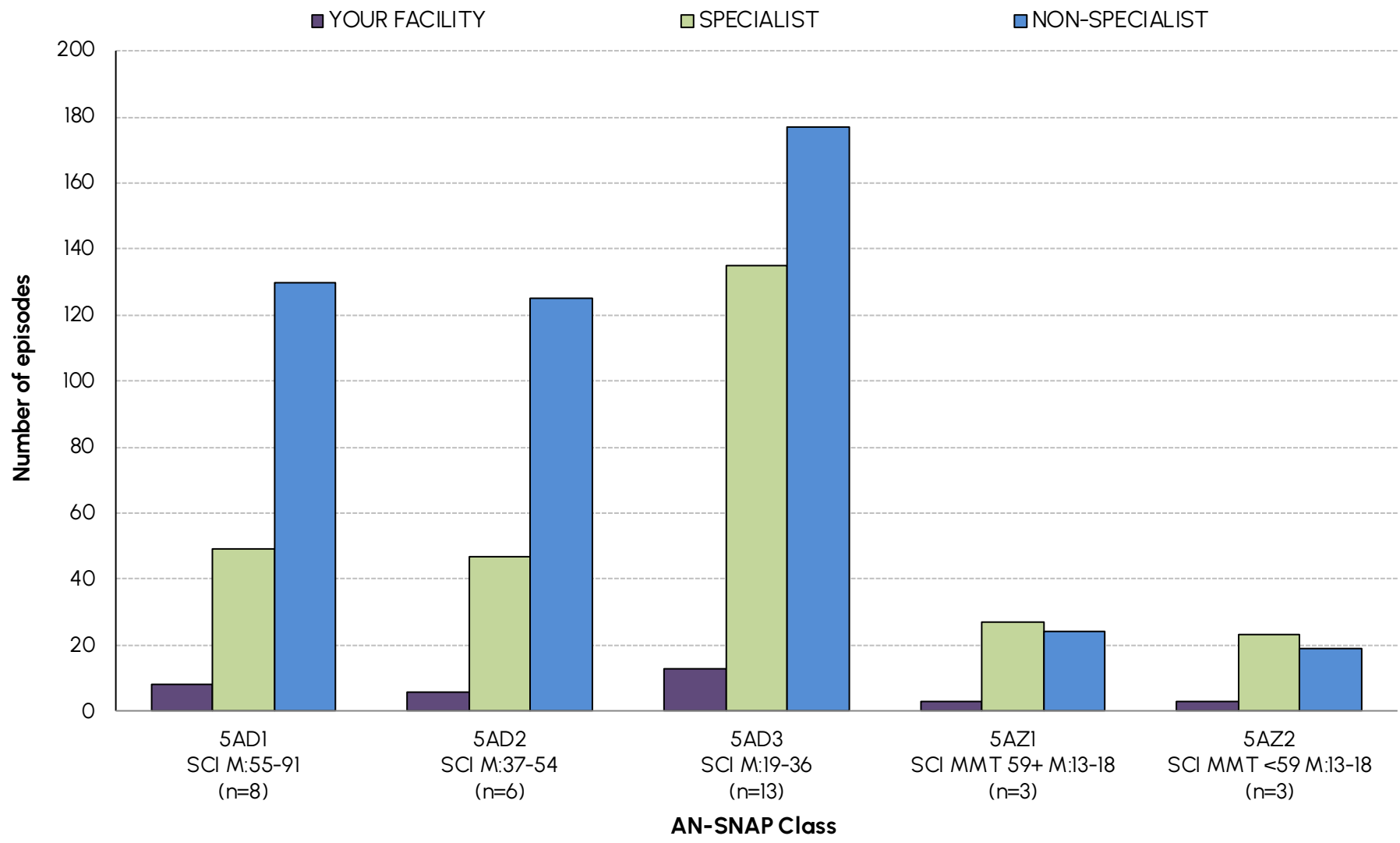
# Number of TSCI and NTSCI episodes over time at your facility



# Number of TSCI episodes by AN-SNAP class



# Number of NTSCI episodes by AN-SNAP class



# Number of TSCI and NTSCI episodes by AN-SNAP class

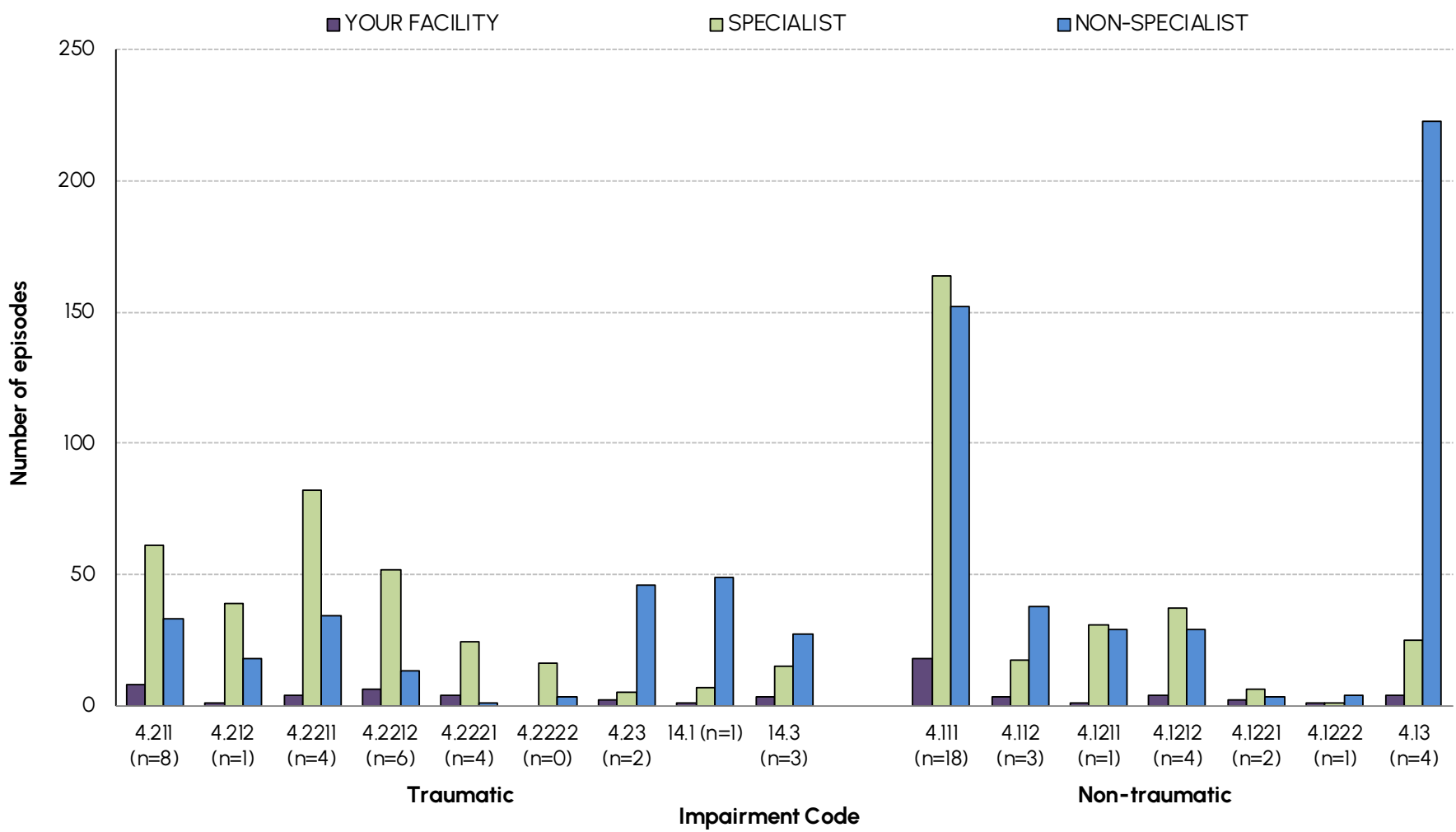


AN-SNAP class	YOUR FACILITY		SPECIALIST		NON-SPECIALIST	
	No.	%	No.	%	No.	%
<b><u>Traumatic episodes</u></b>						
5AD1 (SCI, Weighted FIM Motor 55 - 91)	0	0.0	27	9.1	36	16.1
5AD2 (SCI, Weighted FIM Motor 37 - 54)	6	20.7	34	11.4	33	14.7
5AD3 (SCI, Weighted FIM Motor 19 - 36)	9	31.0	93	31.2	47	21.0
5AP1 (MMT, Weighted FIM Motor 51 - 91)	0	0.0	7	2.3	41	18.3
5AP2 (MMT, Weighted FIM Motor 19 - 50)	1	3.4	7	2.3	30	13.4
5AZ1 (SCI or MMT, age ≥ 59, weighted FIM motor 13-18)	8	27.6	74	24.8	28	12.5
5AZ2 (SCI or MMT, age ≤ 58, weighted FIM motor 13-18)	5	17.2	56	18.8	9	4.0
<b>All Spinal AN-SNAP classes</b>	<b>29</b>	<b>100.0</b>	<b>298</b>	<b>100.0</b>	<b>224</b>	<b>100.0</b>
<b><u>Non - traumatic episodes</u></b>						
5AD1 (SCI, Weighted FIM Motor 55 - 91)	8	27.6	49	16.4	130	58.0
5AD2 (SCI, Weighted FIM Motor 37 - 54)	6	20.7	47	15.8	125	55.8
5AD3 (SCI, Weighted FIM Motor 19 - 36)	13	44.8	135	45.3	177	79.0
5AZ1 (SCI or MMT, age ≥ 59, weighted FIM motor 13-18)	3	10.3	27	9.1	24	10.7
5AZ2 (SCI or MMT, age ≤ 58, weighted FIM motor 13-18)	3	10.3	23	7.7	19	8.5
<b>All Spinal AN-SNAP classes</b>	<b>33</b>	<b>113.8</b>	<b>281</b>	<b>94.3</b>	<b>475</b>	<b>212.1</b>

Note: 0 episode(s) at YOUR FACILITY, 3 episode(s) at SPECIALIST facilities and 0 episode(s) at NON-SPECIALIST facilities had an AN-SNAP class of 599A for traumatic episodes.

Note: 0 episode(s) at YOUR FACILITY, 0 episode(s) at SPECIALIST facilities and 3 episode(s) at NON-SPECIALIST facilities had an AN-SNAP class of 599A for non-traumatic episodes.

# Number of TSCI and NTSCI episodes by impairment

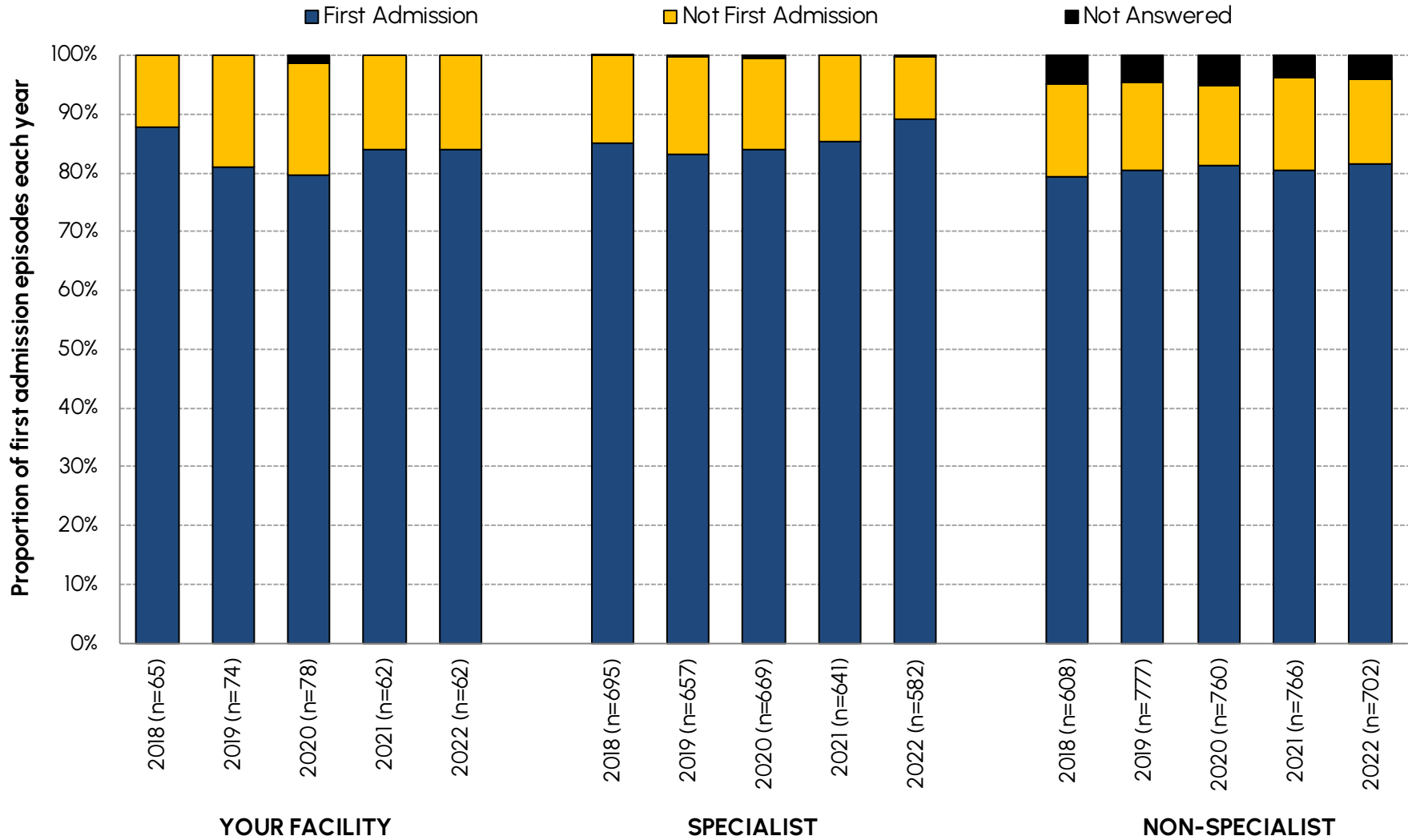




# Number of TSCI and NTSCI episodes by impairment

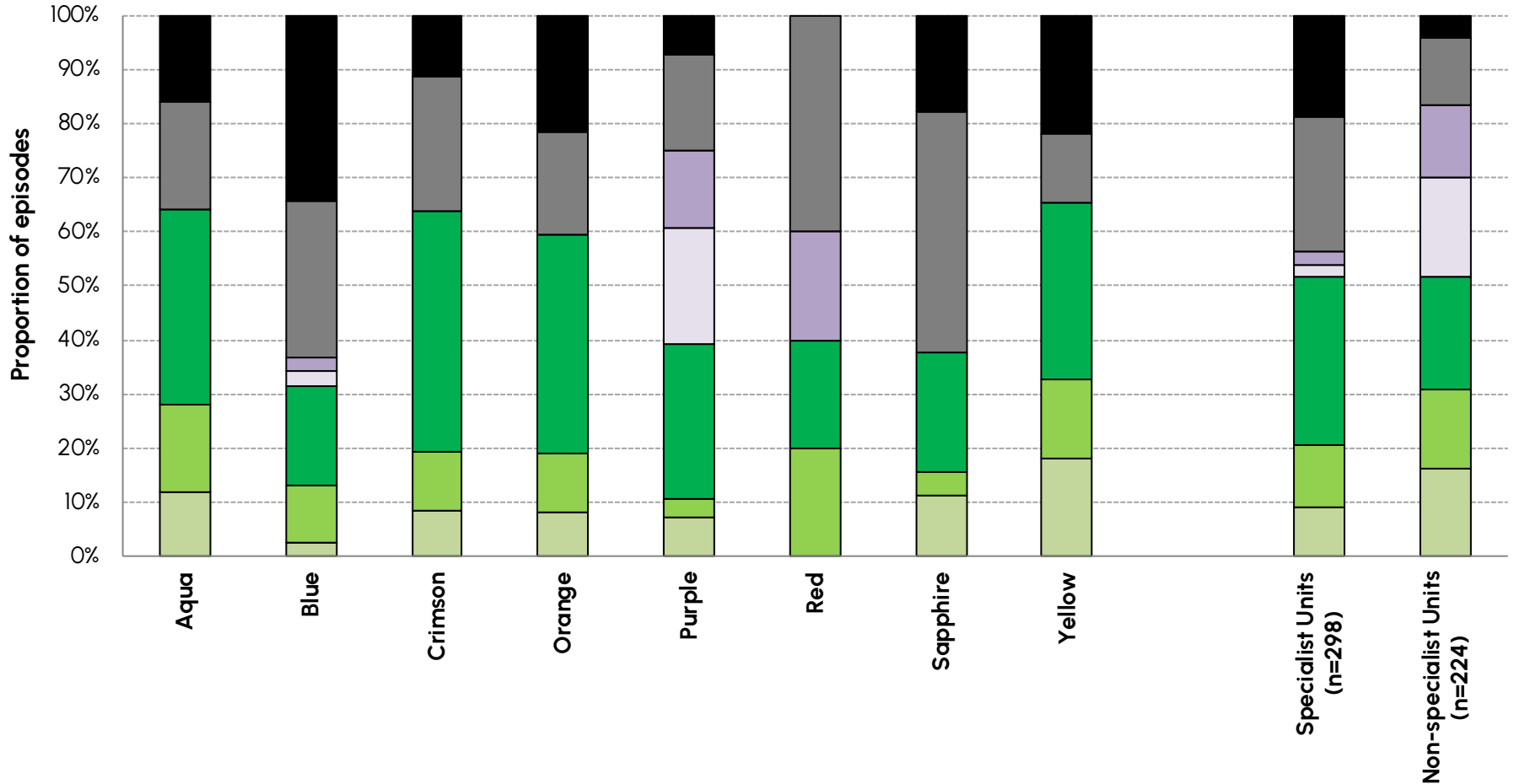
Impairment	YOUR FACILITY		SPECIALIST		NON-SPECIALIST	
	No.	%	No.	%	No.	%
<b><u>Traumatic impairments</u></b>						
4.211 Para-Inc	8	27.6	61	20.3	33	14.7
4.212 Para-Comp	1	3.4	39	13.0	18	8.0
4.2211 Quad-Inc C1-4	4	13.8	82	27.2	34	15.2
4.2212 Quad-Inc C5-8	6	20.7	52	17.3	13	5.8
4.2221 Quad-Comp C1-4	4	13.8	24	8.0	1	0.4
4.2222 Quad-Comp C5-8	0	0.0	16	5.3	3	1.3
4.23 Other TSCI	2	6.9	5	1.7	46	20.5
14.1 MMT: brain+spine	1	3.4	7	2.3	49	21.9
14.3 MMT: spine+other	3	10.3	15	5.0	27	12.1
<b>Total TSCI</b>	<b>29</b>	<b>100.0</b>	<b>301</b>	<b>100.0</b>	<b>224</b>	<b>100.0</b>
<b><u>Non-traumatic impairments</u></b>						
4.111 Para-Inc	18	54.5	164	58.4	152	31.8
4.112 Para-Comp	3	9.1	17	6.0	38	7.9
4.1211 Quad-Inc C1-4	1	3.0	31	11.0	29	6.1
4.1212 Quad-Inc C5-8	4	12.1	37	13.2	29	6.1
4.1221 Quad-Comp C1-4	2	6.1	6	2.1	3	0.6
4.1222 Quad-Comp C5-8	1	3.0	1	0.4	4	0.8
4.13 Other NTSCI	4	12.1	25	8.9	223	46.7
<b>Total NTSCI</b>	<b>33</b>	<b>100.0</b>	<b>281</b>	<b>100.0</b>	<b>478</b>	<b>100.0</b>
<b>TOTAL SCI</b>	<b>62</b>		<b>582</b>		<b>702</b>	

# Proportion of first admission episodes over time



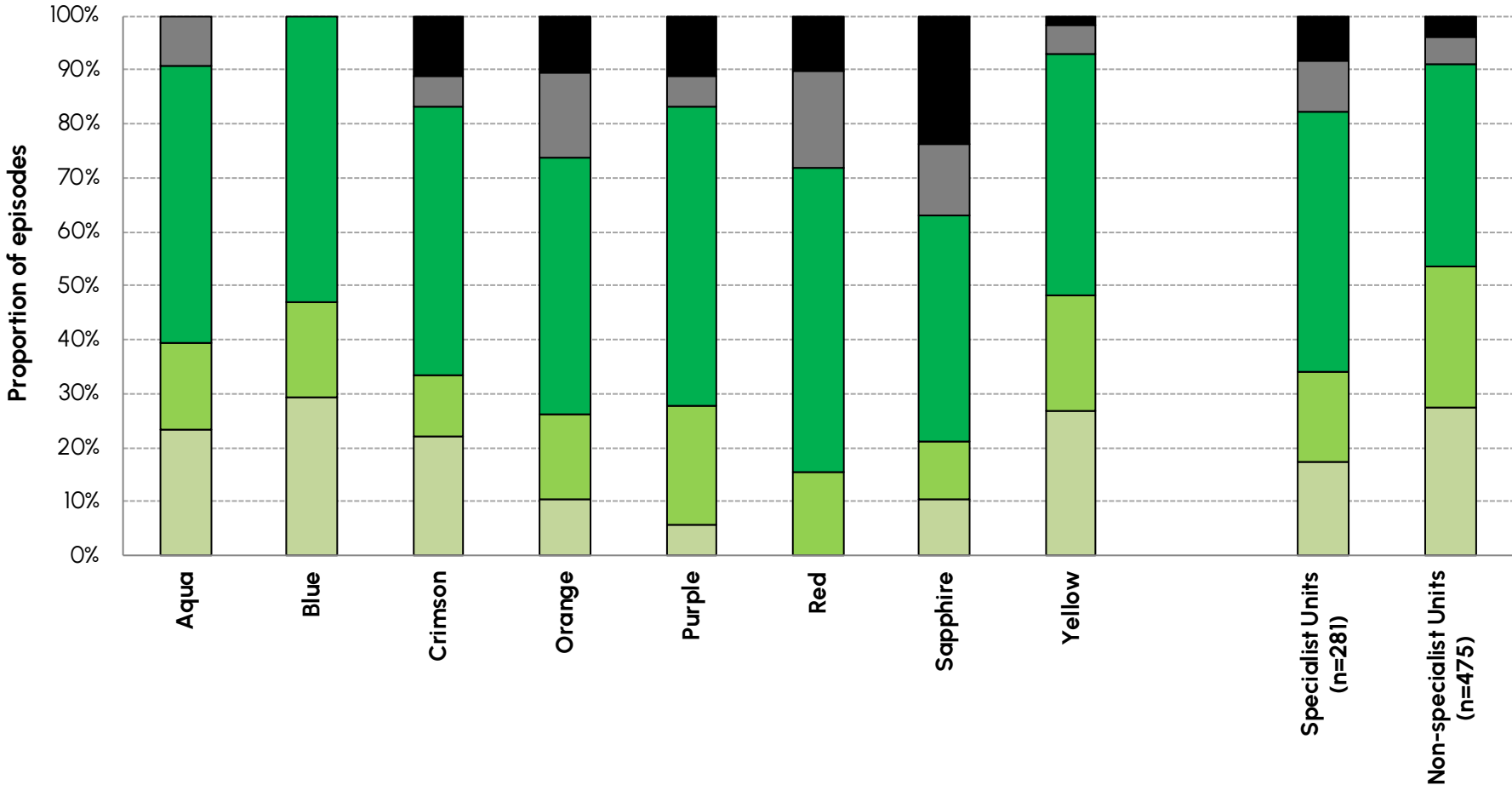
# Proportion of TSCI episodes by AN-SNAP class and specialist facility

■ 5AD1 SCI M:55-91   
 ■ 5AD2 SCI M:37-54   
 ■ 5AD3 SCI M:19-36   
 ■ 5AP1 MMT M:51-91   
 ■ 5AP2 MMT M:19-50   
 ■ 5AZ1 SCI MMT 59+ M:13-18   
 ■ 5AZ2 SCI MMT <59 M:13-18

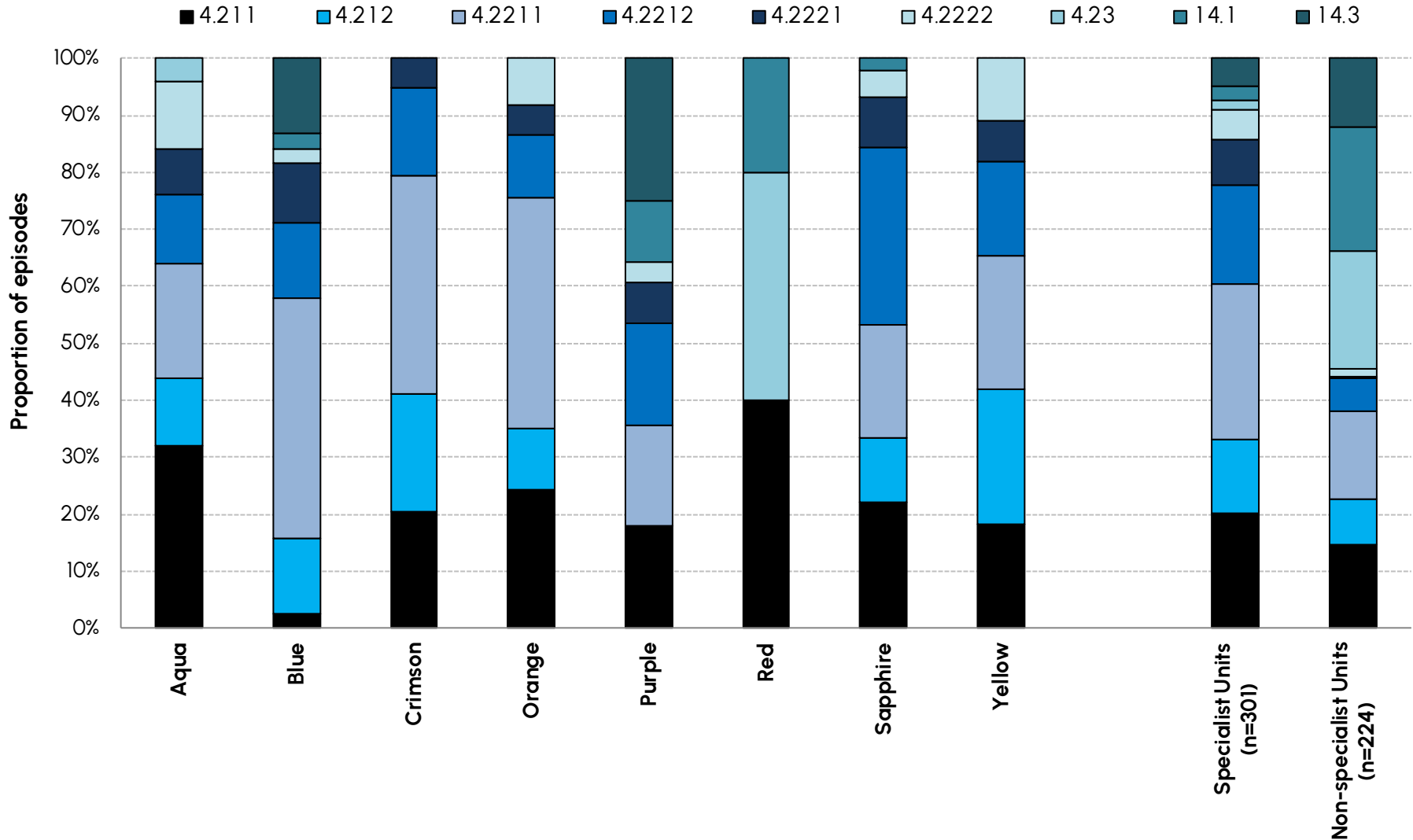


# Proportion of NTSCI episodes by AN-SNAP class and specialist facility

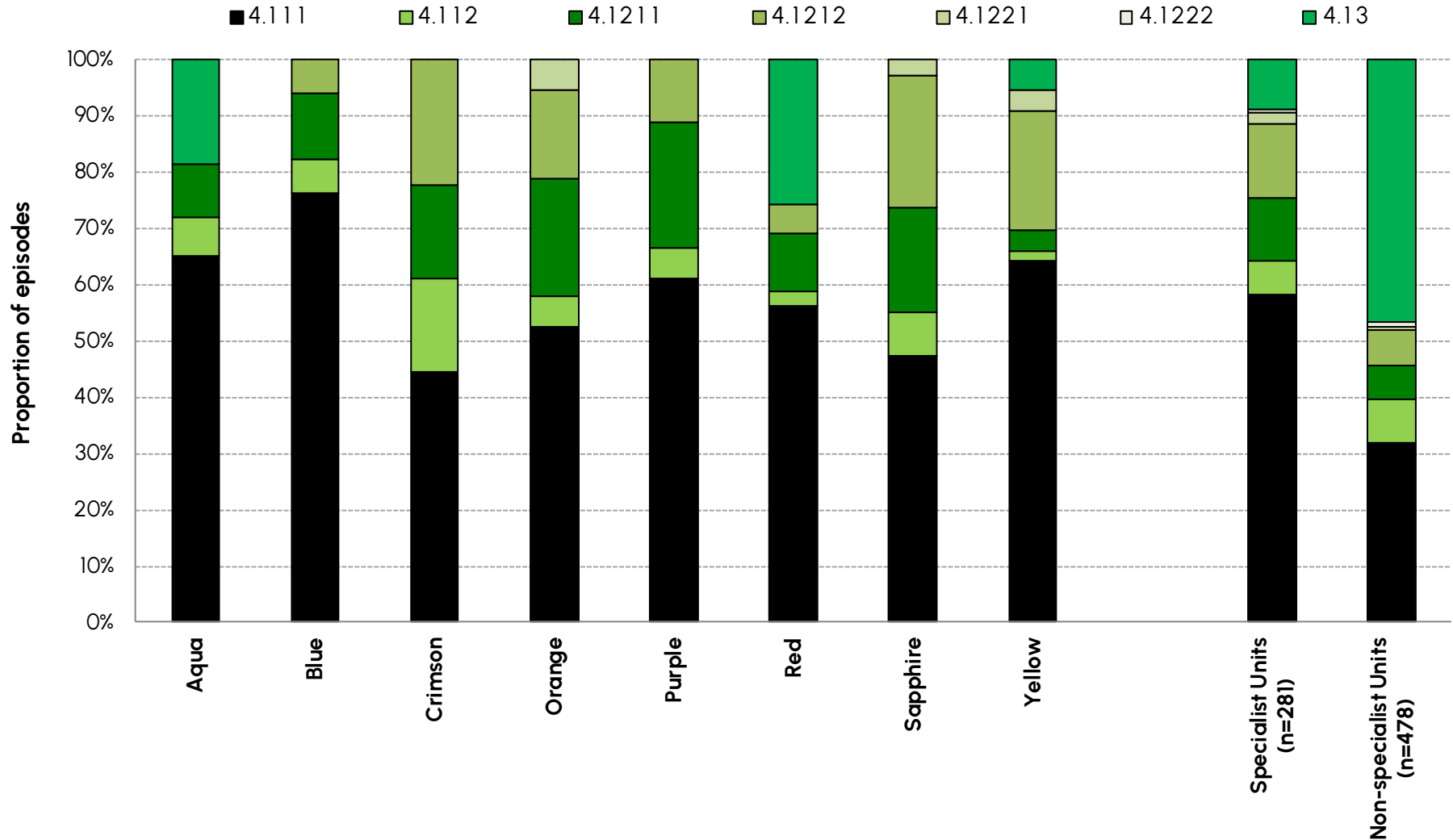
■ 5AD1 SCI M:55-91    
 ■ 5AD2 SCI M:37-54    
 ■ 5AD3 SCI M:19-36    
 ■ 5AZ1 SCI MMT 59+ M:13-18    
 ■ 5AZ2 SCI MMT <59 M:13-18



# Proportion of TSCI episodes by impairment and specialist facility



# Proportion of NTSCI episodes by impairment and specialist facility



# TSCI and NTSCI episodes by impairment and AN-SNAP class



Traumatic Impairment	YOUR FACILITY							NON-		
	5AD1	5AD2	5AD3	5AP1	5AP2	5AZ1	5AZ2	TOTAL SPECIALIST	SPECIALIST	
4.211 Para-Inc	0	3	2	0	0	2	1	8	60	33
4.212 Para-Comp	0	0	1	0	0	0	0	1	39	18
4.2211 Quad-Inc C1-4	0	1	1	0	0	2	0	4	81	34
4.2212 Quad-Inc C5-8	0	0	5	0	0	0	1	6	52	13
4.2221 Quad-Comp C1-4	0	1	0	0	0	2	1	4	23	1
4.2222 Quad-Comp C5-8	0	0	0	0	0	0	0	0	16	3
4.23 Other TSCI	0	1	0	0	0	1	0	2	5	46
14.1 MMT: brain+spine	0	0	0	0	0	0	1	1	7	49
14.3 MMT: spine+other	0	0	0	0	1	1	1	3	15	27
<b>Total</b>	<b>0</b>	<b>6</b>	<b>9</b>	<b>0</b>	<b>1</b>	<b>8</b>	<b>5</b>	<b>29</b>	<b>298</b>	<b>224</b>
<b>SPECIALIST</b>	<b>27</b>	<b>34</b>	<b>93</b>	<b>7</b>	<b>7</b>	<b>74</b>	<b>56</b>	<b>298</b>		
<b>NON-SPECIALIST</b>	<b>36</b>	<b>33</b>	<b>47</b>	<b>41</b>	<b>30</b>	<b>28</b>	<b>9</b>	<b>224</b>		

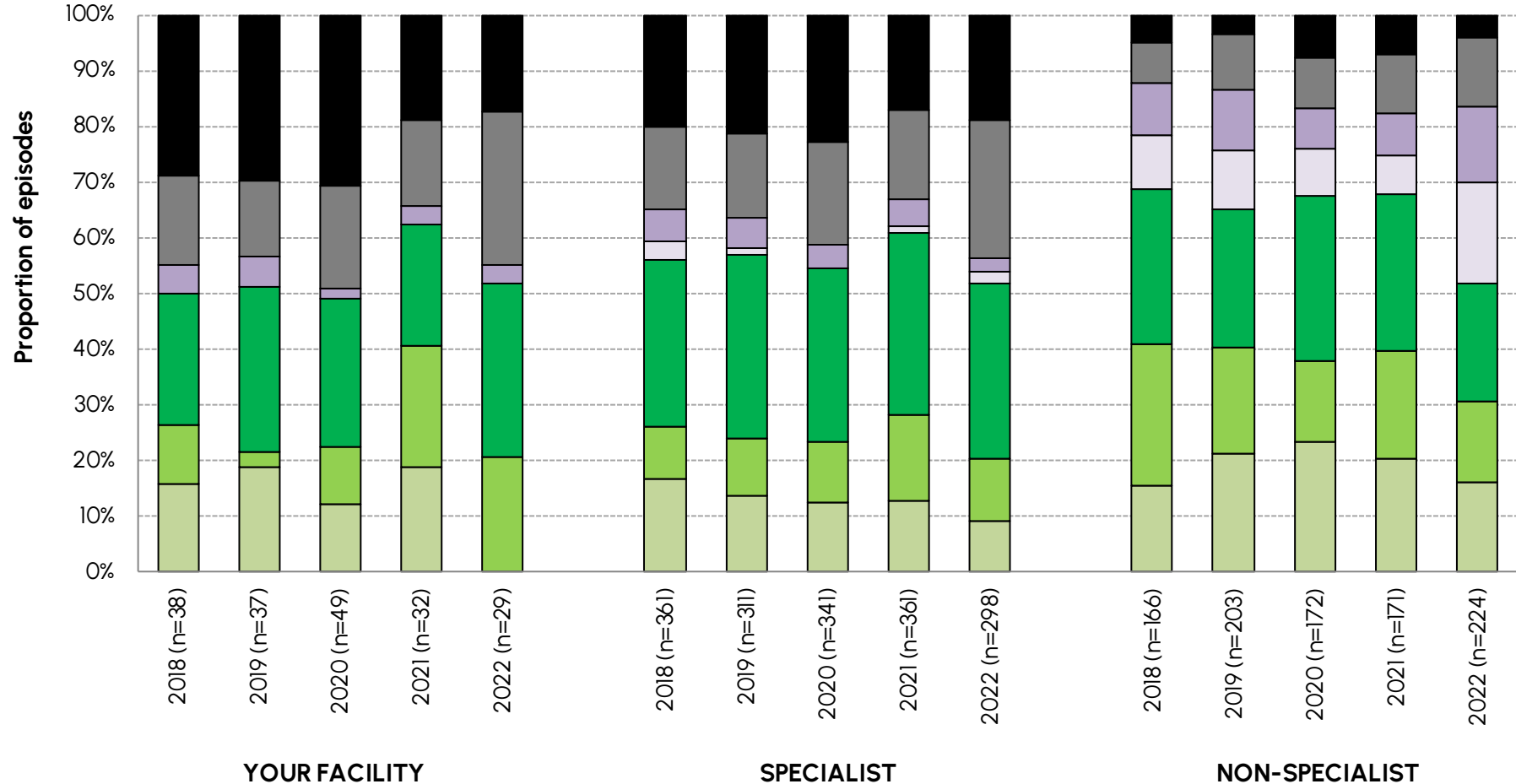
Non-traumatic Impairment	YOUR FACILITY					NON-		
	5AD1	5AD2	5AD3	5AZ1	5AZ2	TOTAL SPECIALIST	SPECIALIST	
4.111 Para-Inc	7	3	7	1	0	18	164	151
4.112 Para-Comp	0	2	1	0	0	3	17	38
4.1211 Quad-Inc C1-4	1	0	0	0	0	1	31	28
4.1212 Quad-Inc C5-8	0	0	2	2	0	4	37	29
4.1221 Quad-Comp C1-4	0	0	0	0	2	2	6	3
4.1222 Quad-Comp C5-8	0	0	0	0	1	1	1	4
4.13 Other NTSCI	0	1	3	0	0	4	25	222
<b>Total</b>	<b>8</b>	<b>6</b>	<b>13</b>	<b>3</b>	<b>3</b>	<b>33</b>	<b>281</b>	<b>475</b>
<b>SPECIALIST</b>	<b>49</b>	<b>47</b>	<b>135</b>	<b>27</b>	<b>23</b>	<b>281</b>		
<b>NON-SPECIALIST</b>	<b>130</b>	<b>125</b>	<b>177</b>	<b>24</b>	<b>19</b>	<b>475</b>		

Note: 0 episode(s) at YOUR FACILITY, 3 episode(s) at SPECIALIST facilities and 0 episode(s) at NON-SPECIALIST facilities had an AN-SNAP class of 599A.

# Proportion of TSCI episodes by AN-SNAP class over time



■ 5ADI SCI M:55-91   
 ■ 5AD2 SCI M:37-54   
 ■ 5AD3 SCI M:19-36   
 ■ 5API MMT M:51-91   
 ■ 5AP2 MMT M:19-50   
 ■ 5AZ1 SCI MMT 59+ M:13-18   
 ■ 5AZ2 SCI MMT <59 M:13-18

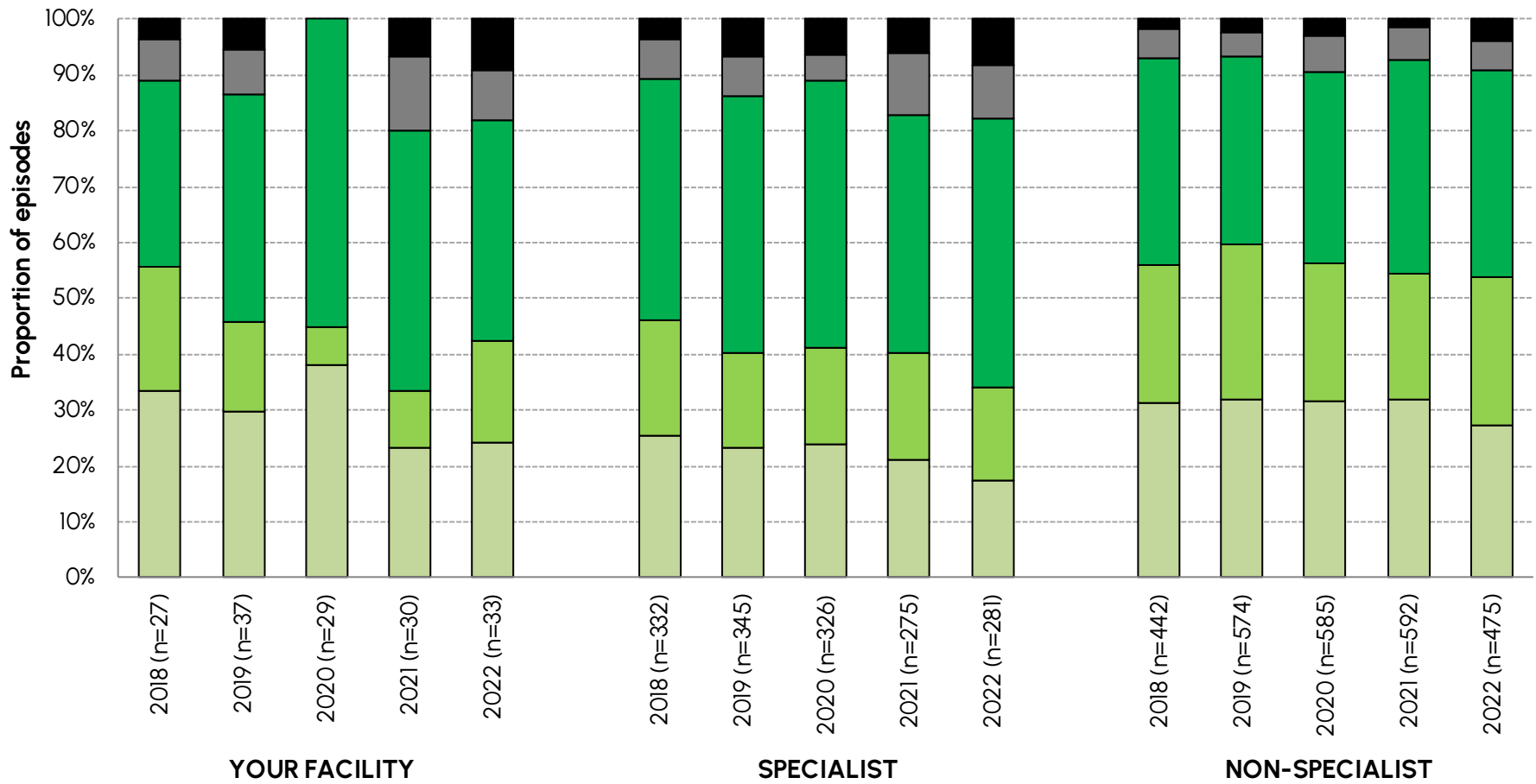




# Proportion of NTSCI episodes by AN-SNAP class over time



■ 5AD1 SCI M:55-91    
 ■ 5AD2 SCI M:37-54    
 ■ 5AD3 SCI M:19-36    
 ■ 5AZ1 SCI MMT 59+ M:13-18    
 ■ 5AZ2 SCI MMT <59 M:13-18



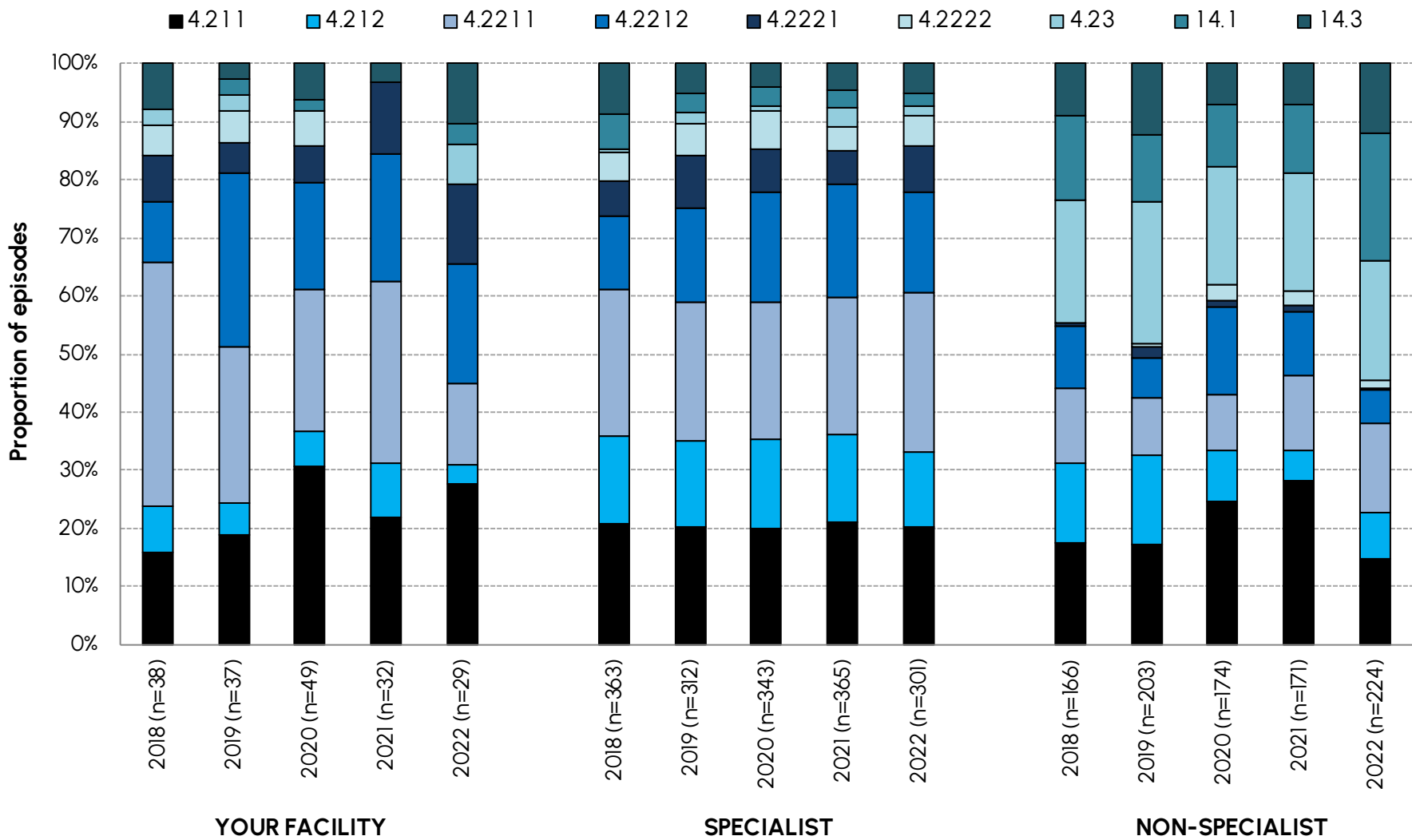
# TSCI and NTSCI episodes by AN-SNAP class over time



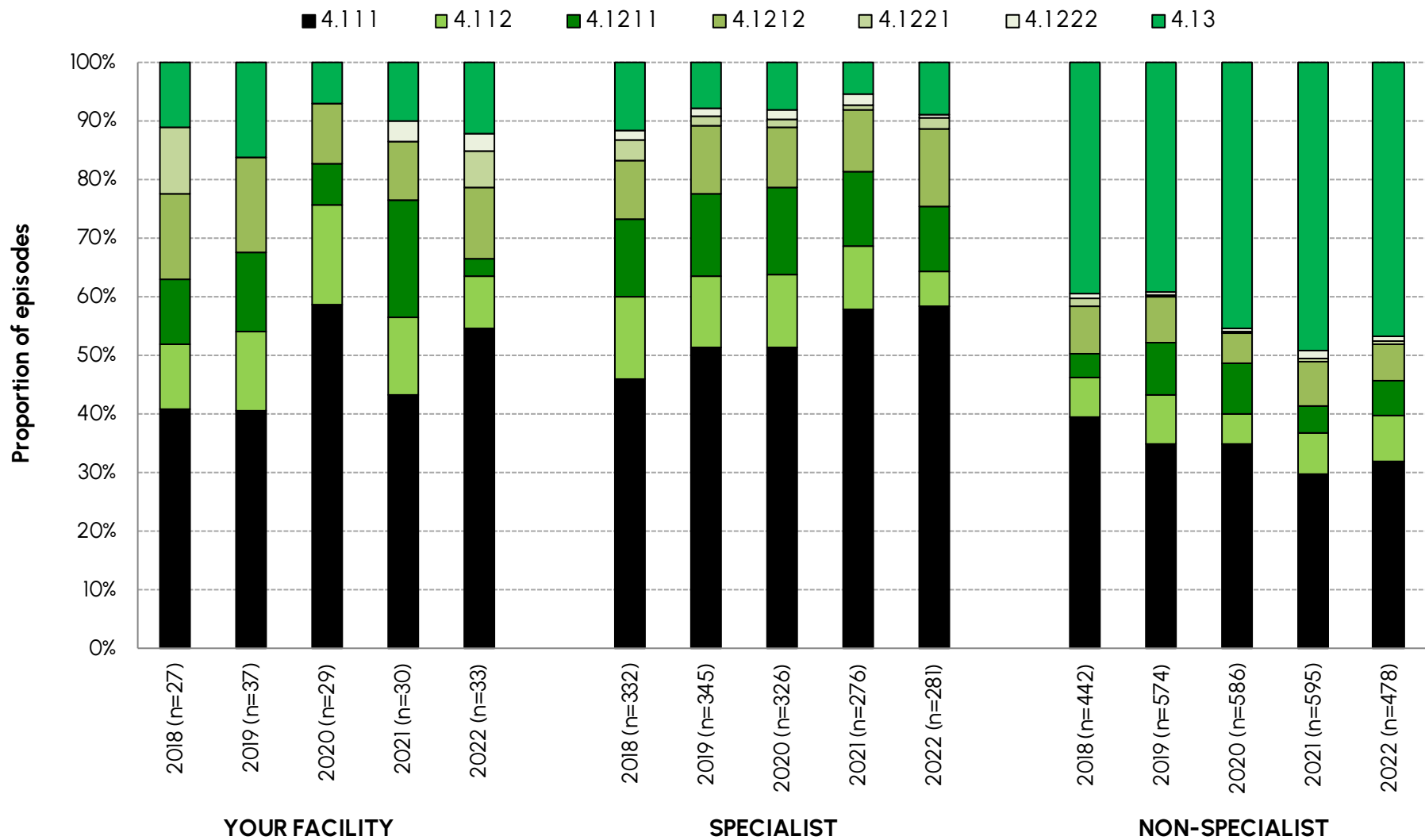
Traumatic AN-SNAP class	YOUR FACILITY					SPECIALIST					NON-SPECIALIST				
	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
5AD1 (SCI, Weighted FIM Motor 55 - 91)	6	7	6	6	0	60	43	43	46	27	26	43	40	35	36
5AD2 (SCI, Weighted FIM Motor 37 - 54)	4	1	5	7	6	34	32	37	56	34	42	39	25	33	33
5AD3 (SCI, Weighted FIM Motor 19 - 36)	9	11	13	7	9	108	102	106	118	93	46	50	51	48	47
5AP1 (MMT, Weighted FIM Motor 51 - 91)	0	0	0	0	0	12	4	0	4	7	16	22	15	12	41
5AP2 (MMT, Weighted FIM Motor 19 - 50)	2	2	1	1	1	21	17	14	18	7	16	22	12	13	30
5AZ1 (SCI or MMT, age ≥ 59, weighted FIM motor 13-18)	6	5	9	5	8	54	47	63	58	74	12	20	16	18	28
5AZ2 (SCI or MMT, age ≤ 58, weighted FIM motor 13-18)	11	11	15	6	5	72	66	78	61	56	8	7	13	12	9
<b>All Spinal AN-SNAP classes</b>	<b>38</b>	<b>37</b>	<b>49</b>	<b>32</b>	<b>29</b>	<b>361</b>	<b>311</b>	<b>341</b>	<b>361</b>	<b>298</b>	<b>166</b>	<b>203</b>	<b>172</b>	<b>171</b>	<b>224</b>

Non-traumatic AN-SNAP class	YOUR FACILITY					SPECIALIST					NON-SPECIALIST				
	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
5AD1 (SCI, Weighted FIM Motor 55 - 91)	9	11	11	7	8	84	80	78	58	49	138	184	185	188	130
5AD2 (SCI, Weighted FIM Motor 37 - 54)	6	6	2	3	6	69	59	56	53	47	109	159	145	135	125
5AD3 (SCI, Weighted FIM Motor 19 - 36)	9	15	16	14	13	144	159	156	117	135	164	193	199	225	177
5AZ1 (SCI or MMT, age ≥ 59, weighted FIM motor 13-18)	2	3	0	4	3	23	24	15	30	27	23	24	38	36	24
5AZ2 (SCI or MMT, age ≤ 58, weighted FIM motor 13-18)	1	2	0	2	3	12	23	21	17	23	8	14	18	8	19
<b>All Spinal AN-SNAP classes</b>	<b>27</b>	<b>37</b>	<b>29</b>	<b>30</b>	<b>33</b>	<b>332</b>	<b>345</b>	<b>326</b>	<b>275</b>	<b>281</b>	<b>442</b>	<b>574</b>	<b>585</b>	<b>592</b>	<b>475</b>

# Proportion of TSCI episodes by impairment over time



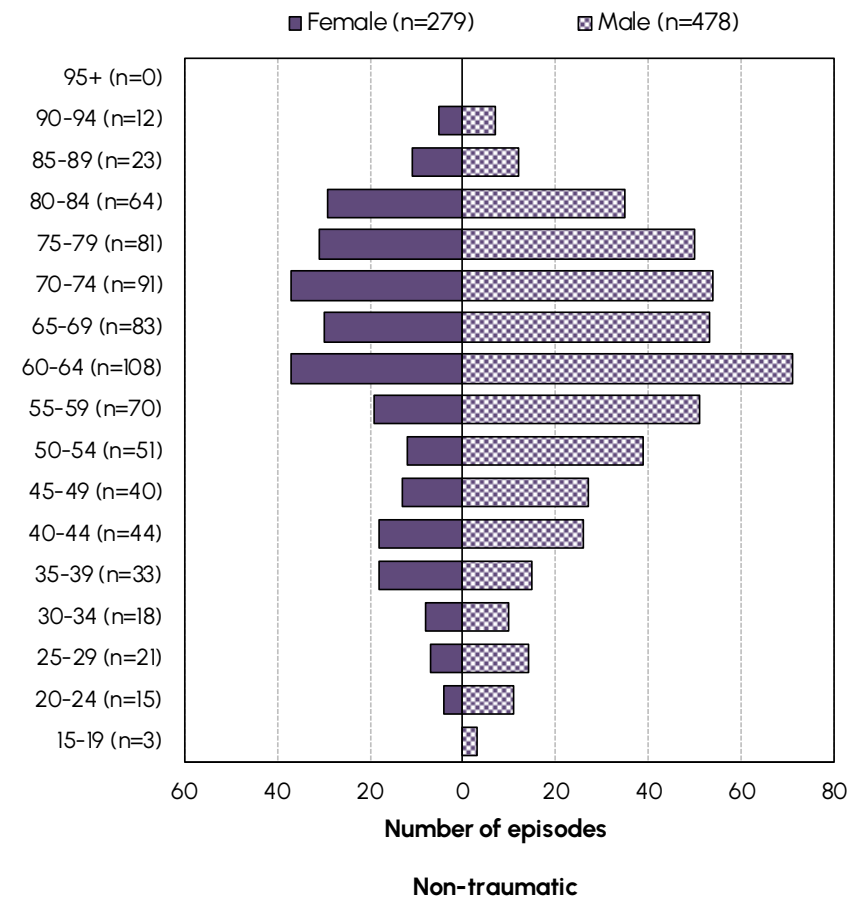
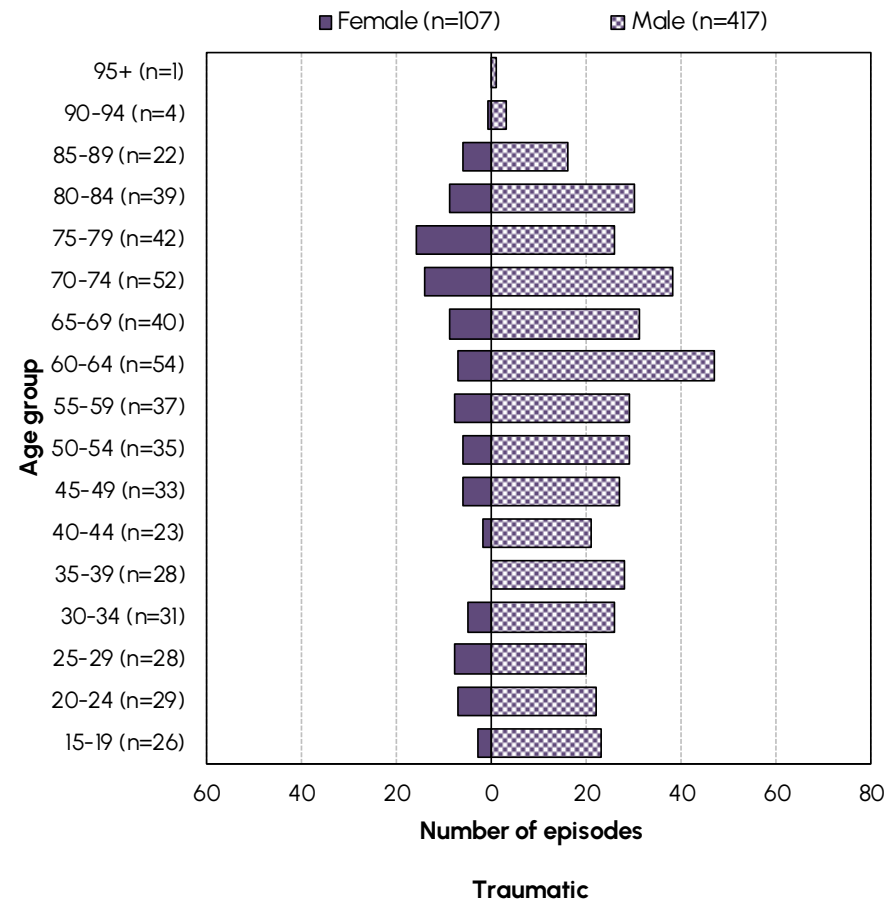
# Proportion of NTSCI episodes by impairment over time



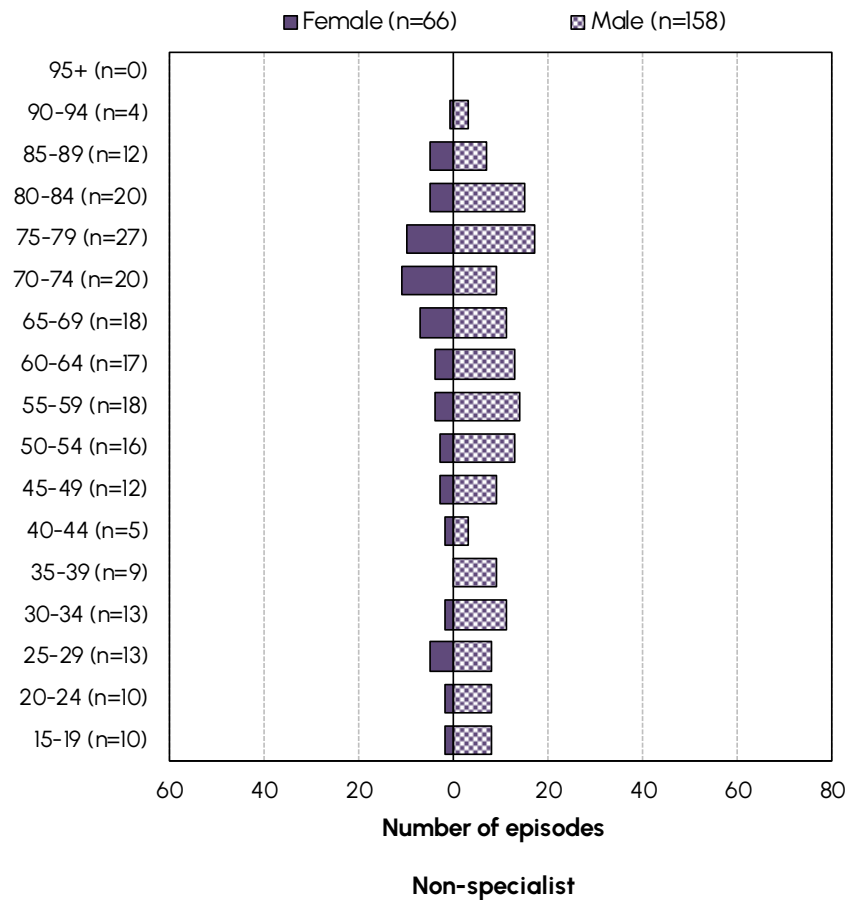
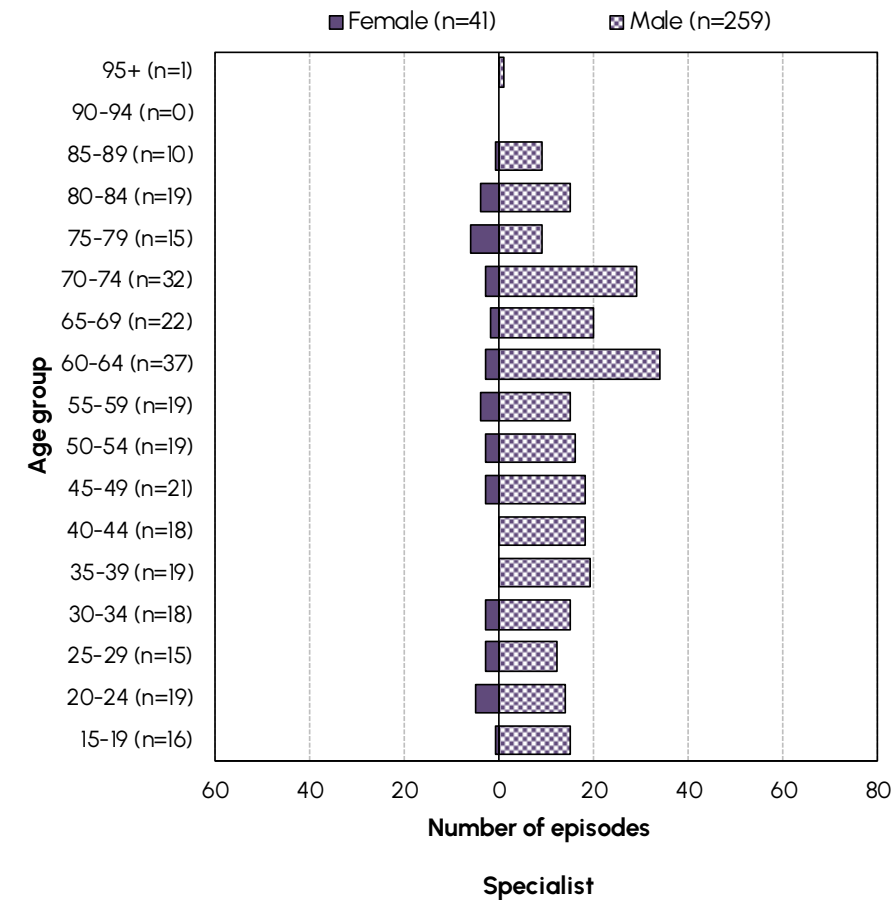
# TSCI and NTSCI episodes by impairment over time

Impairment	YOUR FACILITY					SPECIALIST					NON-SPECIALIST				
	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
<b>Traumatic impairments</b>															
4.211 Para-Inc	6	7	15	7	8	75	63	68	77	61	29	35	43	48	33
4.212 Para-Comp	3	2	3	3	1	55	46	53	55	39	23	31	15	9	18
4.2211 Quad-Inc C1-4	16	10	12	10	4	92	75	81	86	82	21	20	17	22	34
4.2212 Quad-Inc C5-8	4	11	9	7	6	46	50	65	71	52	18	14	26	19	13
4.2221 Quad-Comp C1-4	3	2	3	4	4	22	29	26	21	24	1	4	2	2	1
4.2222 Quad-Comp C5-8	2	2	3	0	0	18	17	22	15	16	0	1	5	4	3
4.23 Other TSCI	1	1	0	0	2	2	6	3	12	5	35	50	35	35	46
14.1 MMT: brain+spine	0	1	1	0	1	22	10	11	11	7	24	23	19	20	49
14.3 MMT: spine+other	3	1	3	1	3	31	16	14	17	15	15	25	12	12	27
<b>Total TSCI</b>	<b>38</b>	<b>37</b>	<b>49</b>	<b>32</b>	<b>29</b>	<b>363</b>	<b>312</b>	<b>343</b>	<b>365</b>	<b>301</b>	<b>166</b>	<b>203</b>	<b>174</b>	<b>171</b>	<b>224</b>
<b>Non-traumatic impairments</b>															
4.111 Para-Inc	11	15	17	13	18	153	177	168	160	164	175	200	204	177	152
4.112 Para-Comp	3	5	5	4	3	46	42	40	30	17	29	49	30	42	38
4.1211 Quad-Inc C1-4	3	5	2	6	1	44	49	49	35	31	19	50	51	27	29
4.1212 Quad-Inc C5-8	4	6	3	3	4	34	40	33	29	37	35	46	31	45	29
4.1221 Quad-Comp C1-4	3	0	0	0	2	11	6	5	2	6	6	1	1	4	3
4.1222 Quad-Comp C5-8	0	0	0	1	1	6	4	5	5	1	4	3	4	7	4
4.13 Other NTSCI	3	6	2	3	4	38	27	26	15	25	174	225	265	293	223
<b>Total NTSCI</b>	<b>27</b>	<b>37</b>	<b>29</b>	<b>30</b>	<b>33</b>	<b>332</b>	<b>345</b>	<b>326</b>	<b>276</b>	<b>281</b>	<b>442</b>	<b>574</b>	<b>586</b>	<b>595</b>	<b>478</b>
<b>TOTAL SCI</b>	<b>65</b>	<b>74</b>	<b>78</b>	<b>62</b>	<b>62</b>	<b>695</b>	<b>657</b>	<b>669</b>	<b>641</b>	<b>582</b>	<b>608</b>	<b>777</b>	<b>760</b>	<b>766</b>	<b>702</b>

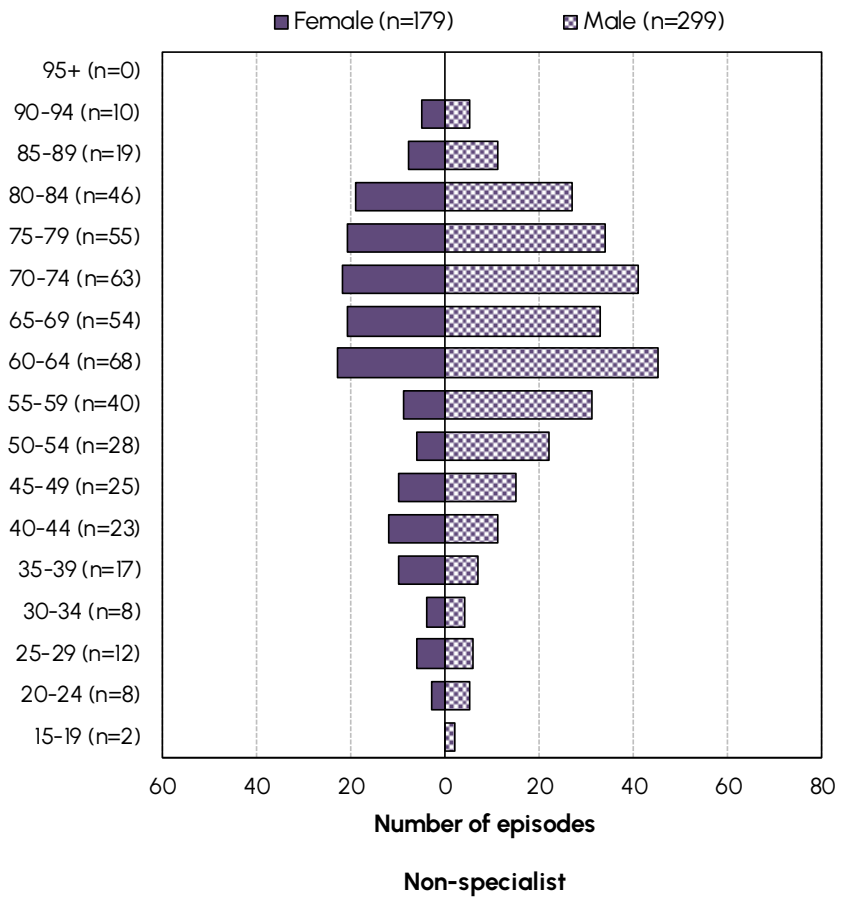
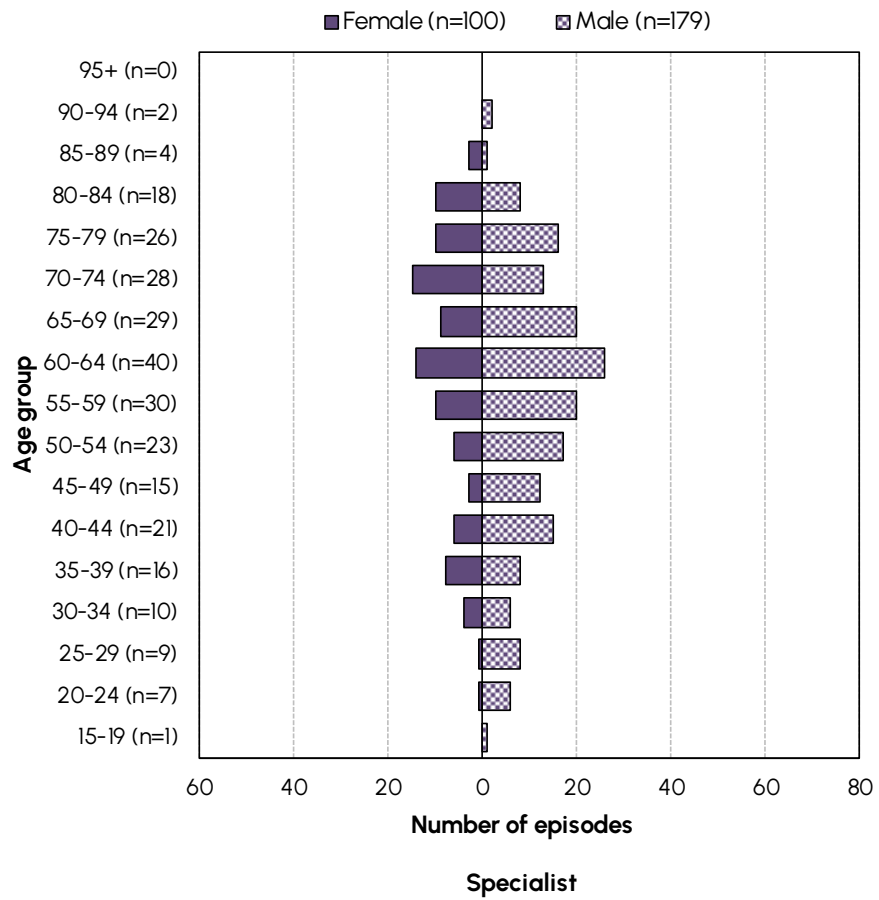
# Number of episodes by age group and sex – TSCI and NTSCI



# Number of TSCI episodes by age group and sex – specialist and non-specialist

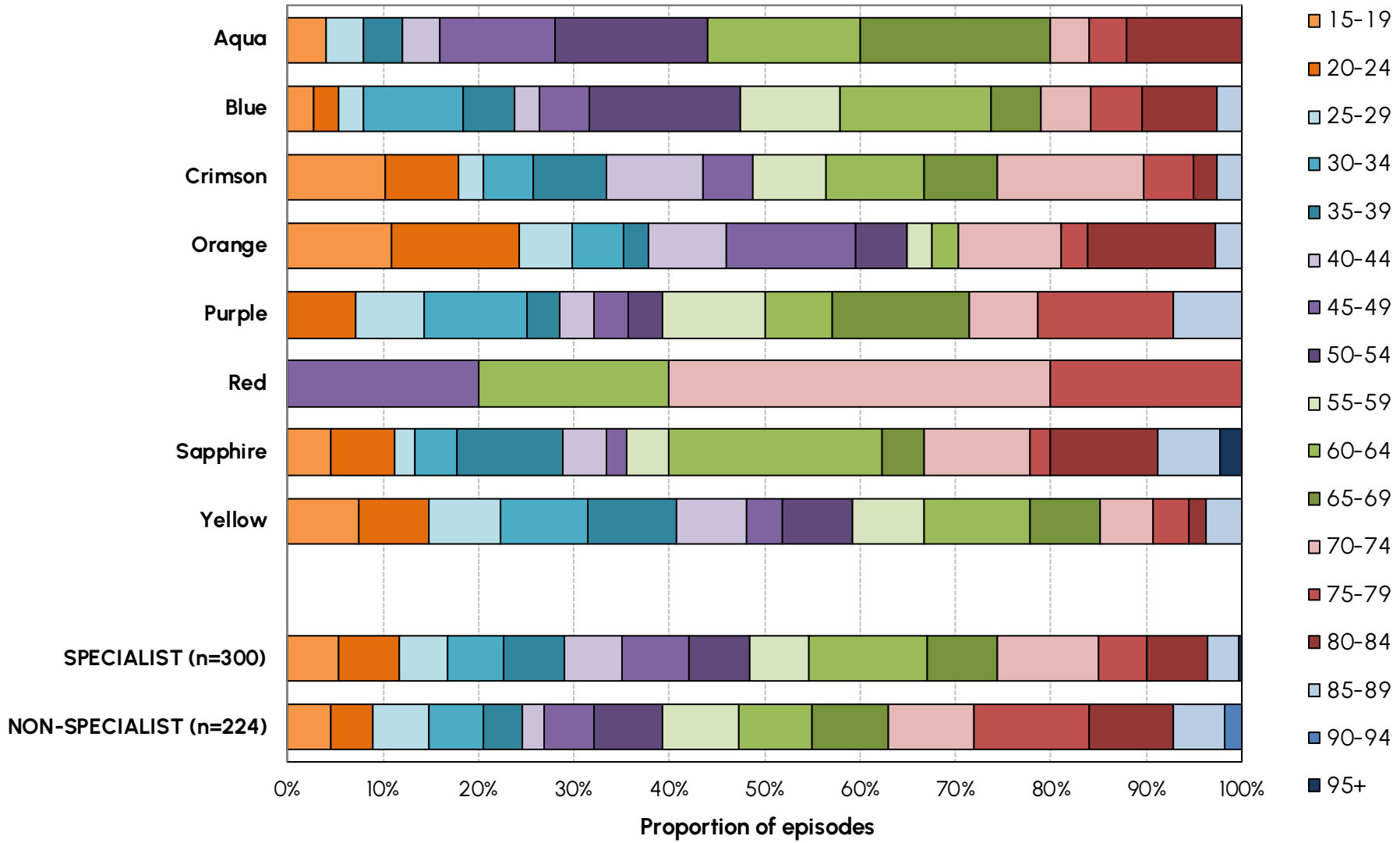


# Number of NTSCI episodes by age group and sex – specialist and non-specialist

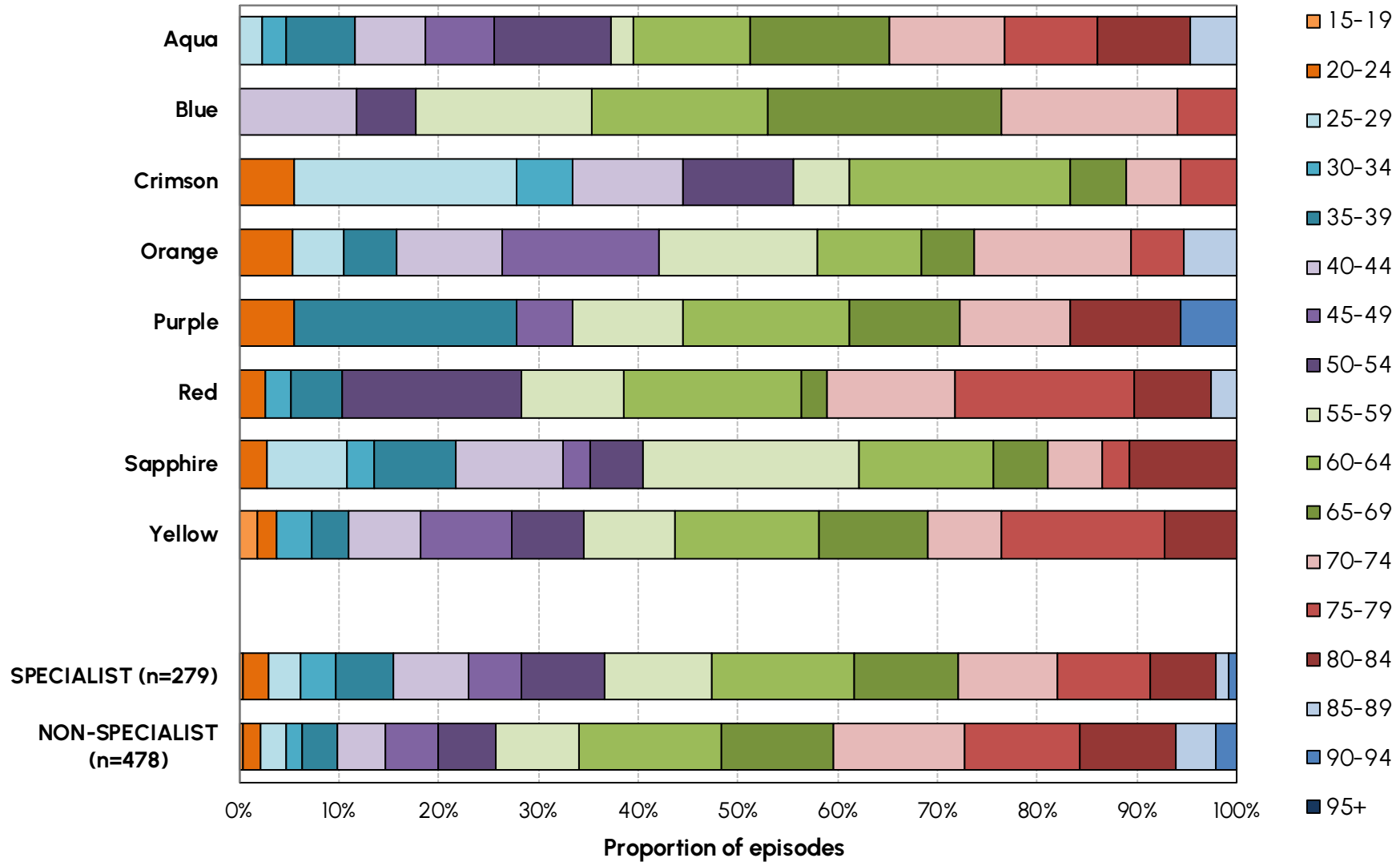




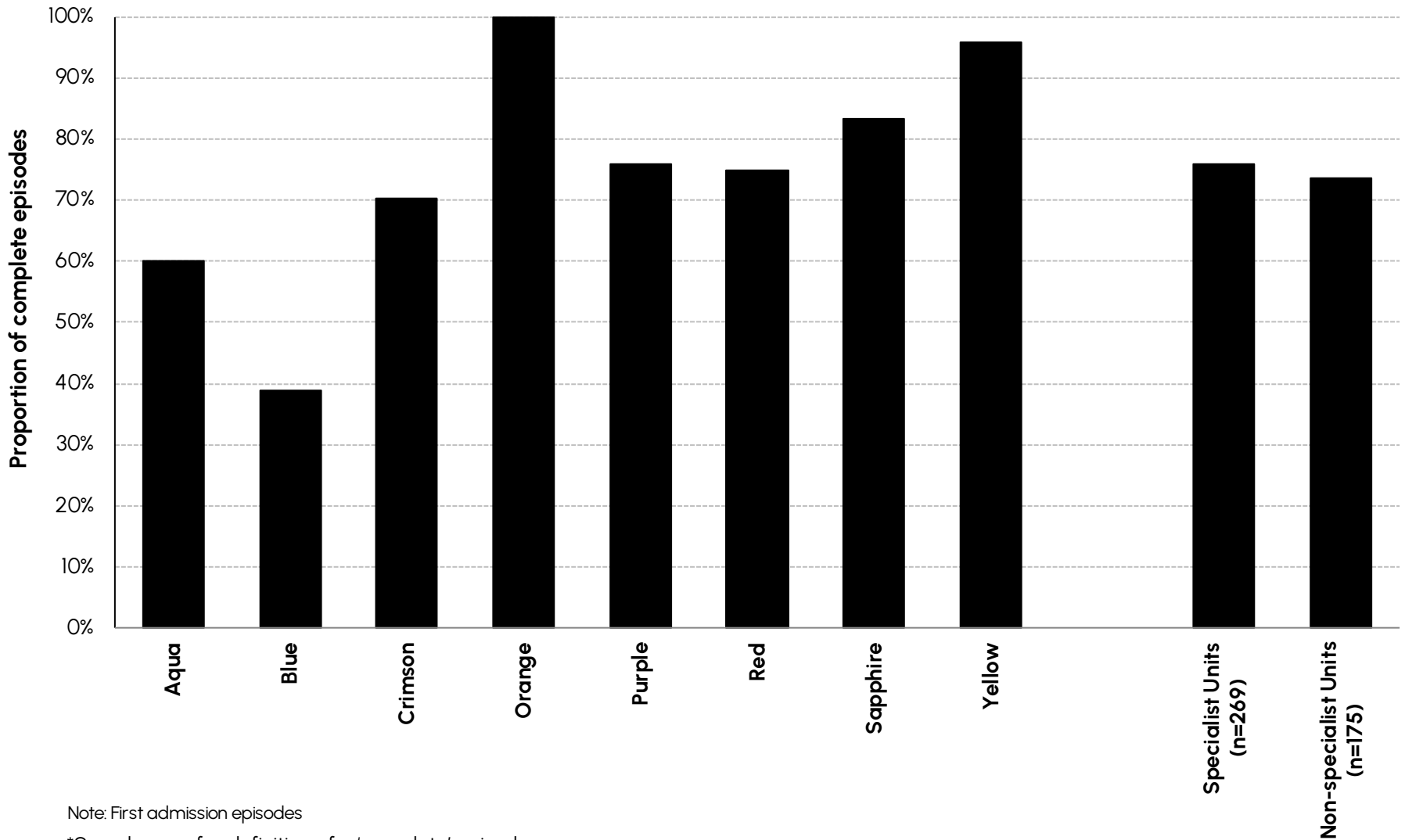
# TSCI episodes by age group and specialist facility



# NTSCI episodes by age group and specialist facility



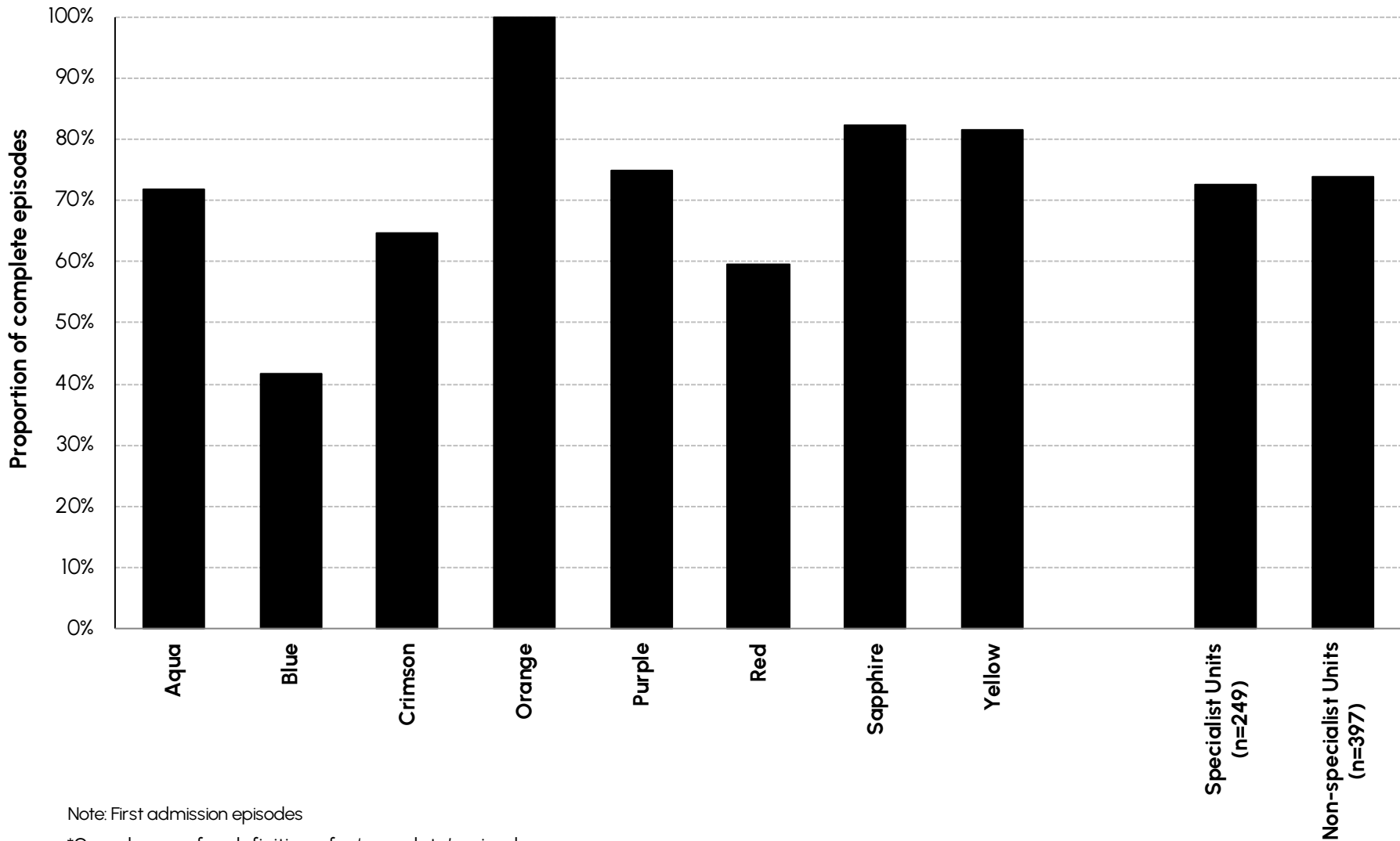
# Proportion of complete\* first admission TSCI episodes by specialist facility



Note: First admission episodes

\*See glossary for definition of a 'complete' episode

# Proportion of complete\* first admission NTSCI episodes by specialist facility



Note: First admission episodes

\*See glossary for definition of a 'complete' episode

# Complete first admission TSCI and NTSCI episodes by AN-SNAP class and impairment

AN-SNAP class	YOUR FACILITY			SPECIALIST			NON-SPECIALIST		
	All episodes	Completed episodes	%Complete	All episodes	Completed episodes	%Complete	All episodes	Completed episodes	%Complete
5AD1 (SCI, Weighted FIM Motor 55 - 91)	6	4	66.7	62	54	87.1	135	121	89.6
5AD2 (SCI, Weighted FIM Motor 37 - 54)	10	5	50.0	71	57	80.3	132	105	79.5
5AD3 (SCI, Weighted FIM Motor 19 - 36)	20	16	80.0	212	158	74.5	181	109	60.2
5AP1 (MMT, Weighted FIM Motor 51 - 91)	0	0	—	6	5	83.3	38	36	94.7
5AP2 (MMT, Weighted FIM Motor 19 - 50)	1	1	100.0	6	5	83.3	23	14	60.9
5AZ1 (SCI or MMT, age ≥ 59, weighted FIM motor 13-18)	10	4	40.0	90	60	66.7	41	24	58.5
5AZ2 (SCI or MMT, age ≤ 58, weighted FIM motor 13-18)	5	3	60.0	68	45	66.2	20	13	65.0
<b>All Spinal AN-SNAP classes</b>	<b>52</b>	<b>33</b>	<b>63.5</b>	<b>515</b>	<b>384</b>	<b>74.6</b>	<b>570</b>	<b>422</b>	<b>74.0</b>

Note: First Admission Only (excludes AN-SNAP class 599A)

Impairment	YOUR FACILITY			SPECIALIST			NON-SPECIALIST		
	All episodes	Completed episodes	%Complete	All episodes	Completed episodes	%Complete	All episodes	Completed episodes	%Complete
<b>Traumatic impairments</b>									
4.211 Para-Inc	7	4	57.1	55	41	74.5	29	20	69.0
4.212 Para-Comp	1	1	100.0	36	29	80.6	9	8	88.9
4.2211 Quad-Inc C1-4	4	4	100.0	76	60	78.9	25	15	60.0
4.2212 Quad-Inc C5-8	6	5	83.3	47	38	80.9	11	7	63.6
4.2221 Quad-Comp C1-4	3	1	33.3	18	10	55.6	0	0	—
4.2222 Quad-Comp C5-8	0	0	—	13	12	92.3	1	1	100.0
4.23 Other TSCI	2	0	0.0	5	1	20.0	34	24	70.6
14.1 MMT: brain+spine	1	1	100.0	6	4	66.7	45	39	86.7
14.3 MMT: spine+other	2	1	50.0	13	9	69.2	21	15	71.4
<b>Total TSCI</b>	<b>26</b>	<b>17</b>	<b>65.4</b>	<b>269</b>	<b>204</b>	<b>75.8</b>	<b>175</b>	<b>129</b>	<b>73.7</b>
<b>Non-traumatic impairments</b>									
4.111 Para-Inc	15	8	53.3	147	106	72.1	127	90	70.9
4.112 Para-Comp	2	1	50.0	16	11	68.8	26	15	57.7
4.1211 Quad-Inc C1-4	0	0	—	29	21	72.4	24	17	70.8
4.1212 Quad-Inc C5-8	4	3	75.0	32	23	71.9	22	14	63.6
4.1221 Quad-Comp C1-4	2	2	100.0	5	5	100.0	2	1	50.0
4.1222 Quad-Comp C5-8	0	0	—	0	0	—	4	3	75.0
4.13 Other NTSCI	3	2	66.7	20	15	75.0	192	153	79.7
<b>Total NTSCI</b>	<b>26</b>	<b>16</b>	<b>61.5</b>	<b>249</b>	<b>181</b>	<b>72.7</b>	<b>397</b>	<b>293</b>	<b>73.8</b>
<b>TOTAL SCI</b>	<b>52</b>	<b>33</b>	<b>63.5</b>	<b>518</b>	<b>385</b>	<b>74.3</b>	<b>572</b>	<b>422</b>	<b>73.8</b>

\*First Admission Only

# Summary of incomplete episodes

	YOUR FACILITY		SPECIALIST		NON-SPECIALIST		ALL SPINE	
	No.	(%)	No.	(%)	No.	(%)	No.	(%)
Total reporting episodes	62		582		702		1,284	
Incomplete episodes	21	(33.9)	152	(26.1)	195	(27.8)	347	(27.0)

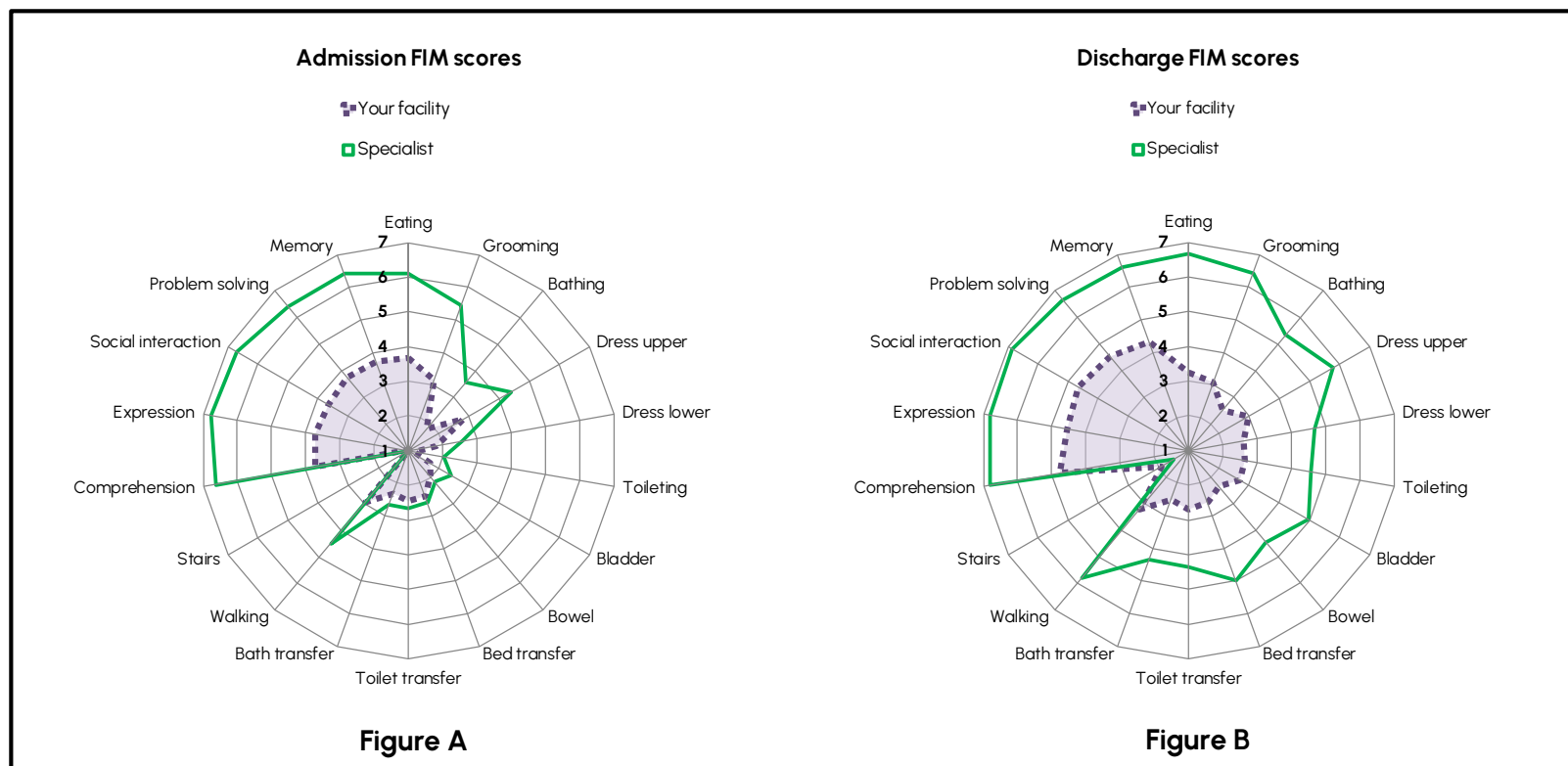
## Reason for incomplete:

Discharged home with end FIM=18	1	(4.8)	3	(2.0)	1	(0.5)	4	(1.2)
Discharged home with no end FIM	1	(4.8)	8	(5.3)	1	(0.5)	9	(2.6)
Discharged to another hospital	9	(42.9)	72	(47.4)	122	(62.6)	194	(55.9)
Discharged back to acute same hospital	5	(23.8)	31	(20.4)	47	(24.1)	78	(22.5)
Discharged at own risk	2	(9.5)	3	(2.0)	12	(6.2)	15	(4.3)
Change of care type (LOS<1 week)	0	(0.0)	0	(0.0)	1	(0.5)	1	(0.3)
Died	0	(0.0)	2	(1.3)	4	(2.1)	6	(1.7)
Other/Unknown Discharge	3	(14.3)	33	(21.7)	7	(3.6)	40	(11.5)

	YOUR FACILITY			
	Incomplete Episodes		Complete episodes	
<b>Impairment Code:</b>				
4.111 Para-Inc	7	(33.3)	11	(26.8)
4.112 Para-Comp	1	(4.8)	2	(4.9)
4.1211 Quad-Inc C1-4	0	(0.0)	1	(2.4)
4.1212 Quad-Inc C5-8	1	(4.8)	3	(7.3)
4.1221 Quad-Comp C1-4	0	(0.0)	2	(4.9)
4.1222 Quad-Comp C5-8	0	(0.0)	1	(2.4)
4.13 Other NTSCI	2	(9.5)	2	(4.9)
4.211 Para-Inc	3	(14.3)	5	(12.2)
4.212 Para-Comp	0	(0.0)	1	(2.4)
4.2211 Quad-Inc C1-4	0	(0.0)	4	(9.8)
4.2212 Quad-Inc C5-8	1	(4.8)	5	(12.2)
4.2221 Quad-Comp C1-4	2	(9.5)	2	(4.9)
4.2222 Quad-Comp C5-8	0	(0.0)	0	(0.0)
4.23 Other TSCI	2	(9.5)	0	(0.0)
14.1 MMT: brain+spine	0	(0.0)	1	(2.4)
14.3 MMT: spine+other	2	(9.5)	1	(2.4)
<b>AN-SNAP Class:</b>				
5AD1 (SCI, Weighted FIM Motor 55 - 91)	2	(9.5)	6	(14.6)
5AD2 (SCI, Weighted FIM Motor 37 - 54)	5	(23.8)	7	(17.1)
5AD3 (SCI, Weighted FIM Motor 19 - 36)	5	(23.8)	17	(41.5)
5AP1 (MMT, Weighted FIM Motor 51 - 91)	0	(0.0)	0	(0.0)
5AP2 (MMT, Weighted FIM Motor 19 - 50)	0	(0.0)	1	(2.4)
5AZ1 (SCI or MMT, age ≥ 59, weighted FIM motor 13-18)	6	(28.6)	5	(12.2)
5AZ2 (SCI or MMT, age ≤ 58, weighted FIM motor 13-18)	3	(14.3)	5	(12.2)

# Review of FIM item scoring by AN-SNAP class

# Interpreting the comparative FIM item scoring charts



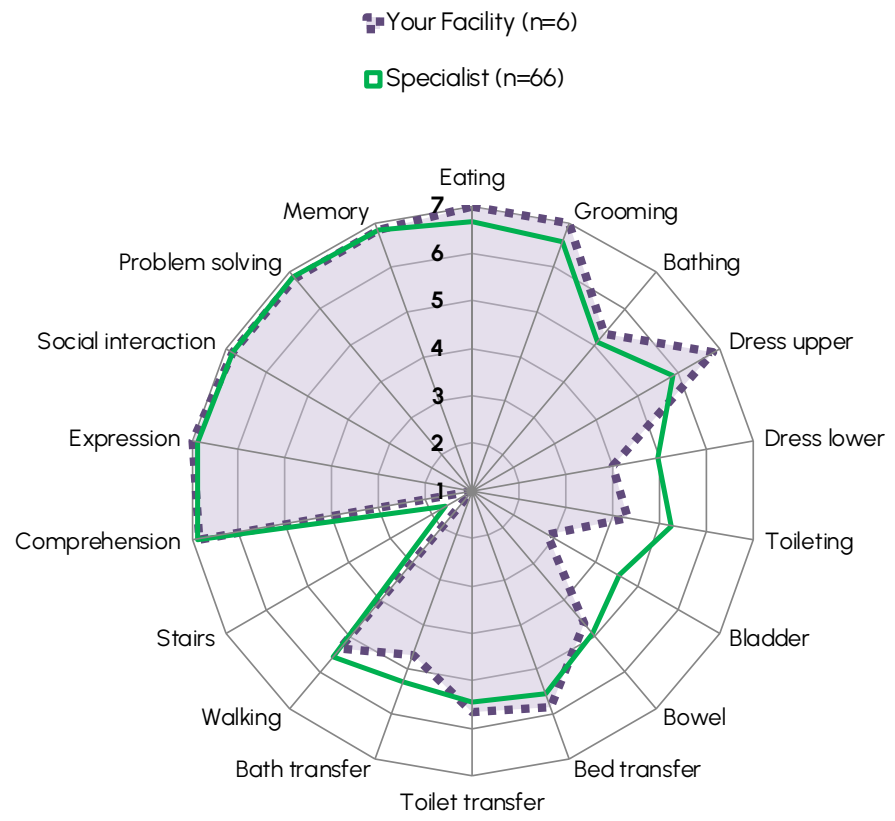
The FIM splat provides a graphic presentation of functional status in a radar chart. The 18 FIM items are arranged in order as 'spokes' of a wheel and the scoring levels from 1 (total dependence) to 7 (total independence) run from the centre outwards. The mean FIM item score for each item is indicated — a perfect score would be demonstrated as a large circle. The two FIM splats compare FIM scoring on admission (Figure A) and discharge (Figure B) between YOUR FACILITY and SPECIALIST data — differences in the two shaded areas indicate differences in mean admission/discharge scoring. Graphs include completed episodes with valid FIM scoring.



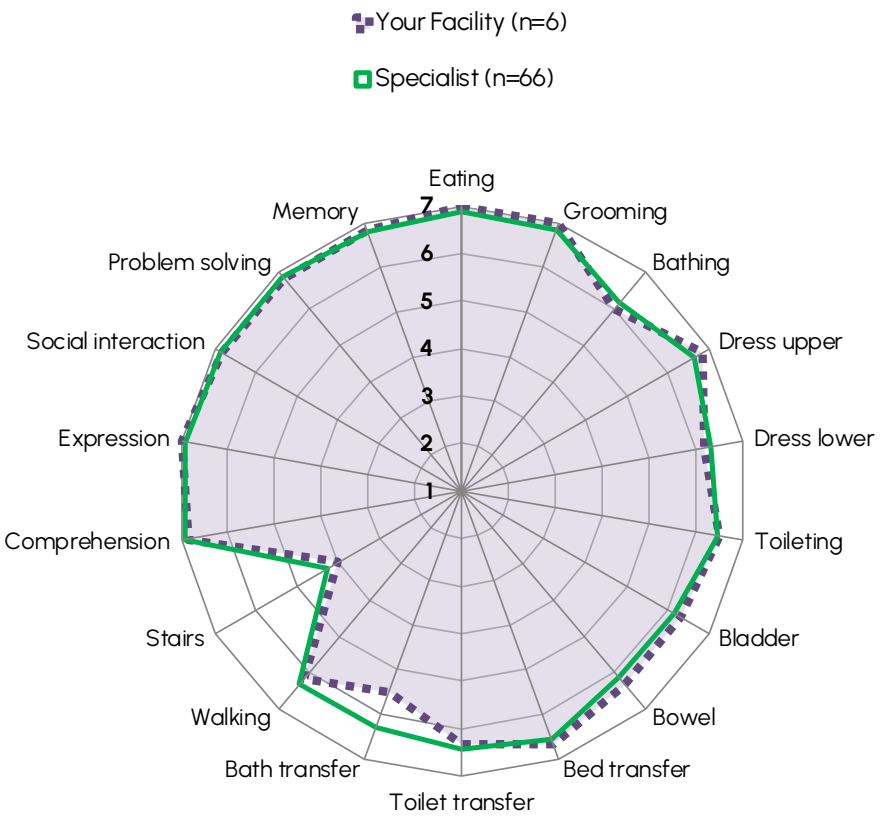
# Comparative FIM item scoring AN-SNAP class 5AD1



**5ADI Admission FIM scores**



**5ADI Discharge FIM scores**



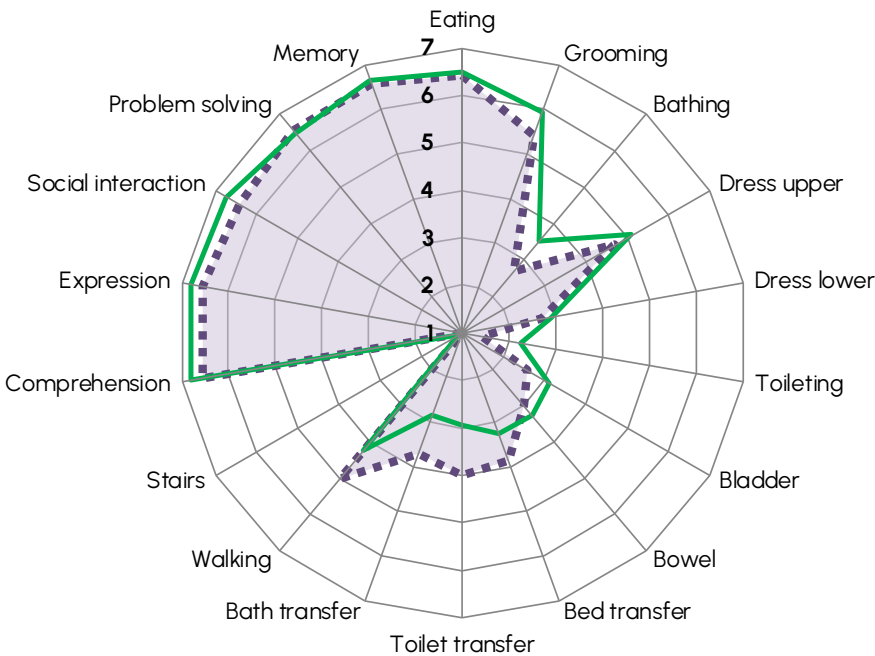
Note: Includes only completed episodes with valid FIM scores

# Comparative FIM item scoring AN-SNAP class 5AD2



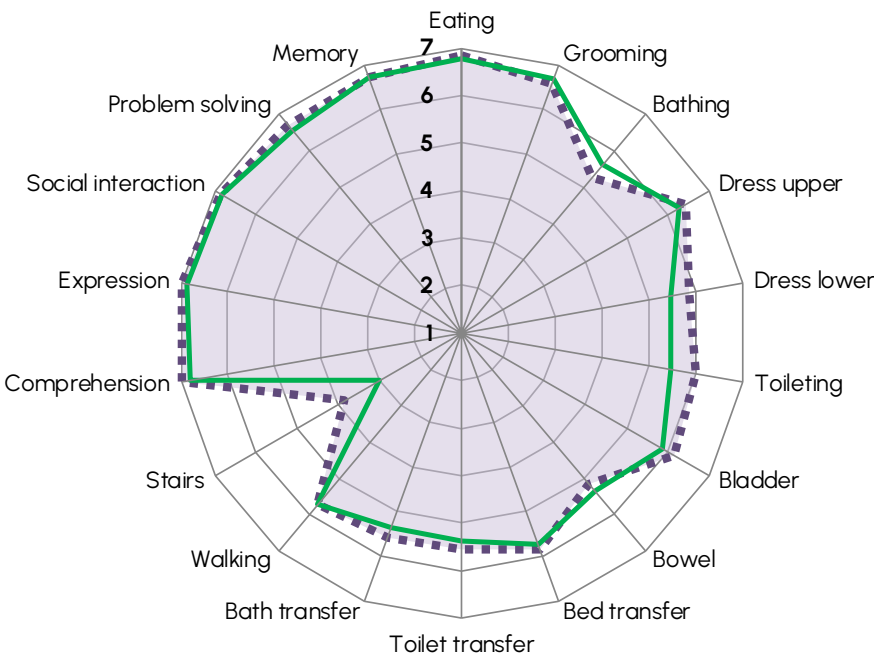
5AD2 Admission FIM scores

- Your Facility (n=7)
- Specialist (n=66)



5AD2 Discharge FIM scores

- Your Facility (n=7)
- Specialist (n=66)



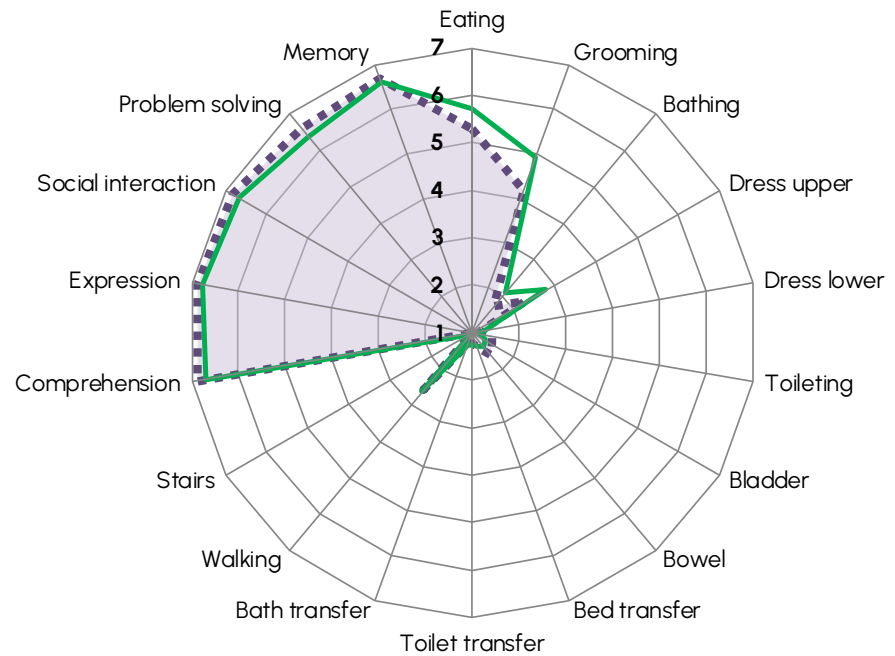
Note: Includes only completed episodes with valid FIM scores

# Comparative FIM item scoring AN-SNAP class 5AD3



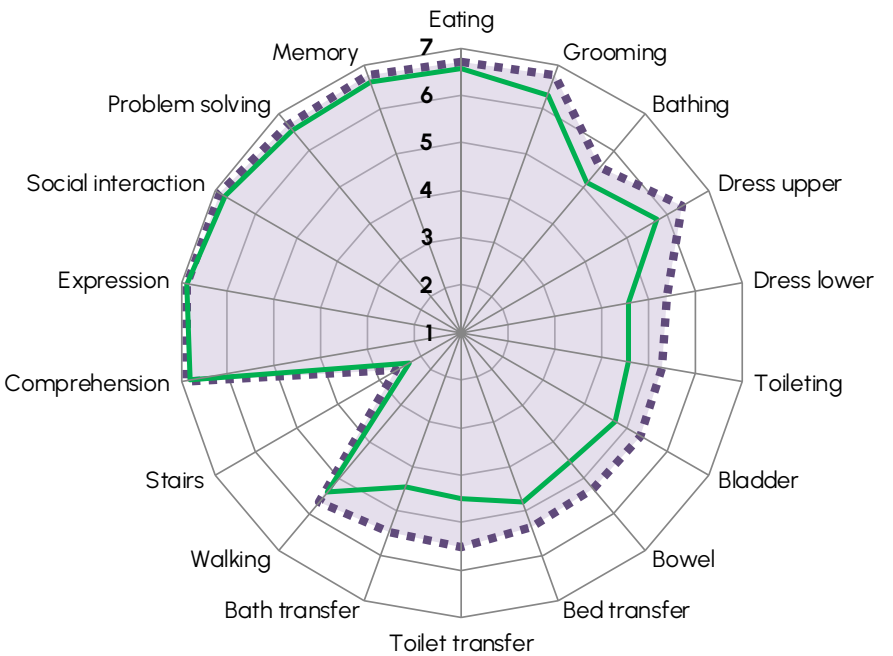
## 5AD3 Admission FIM scores

- Your Facility (n=17)
- Specialist (n=167)



## 5AD3 Discharge FIM scores

- Your Facility (n=17)
- Specialist (n=167)

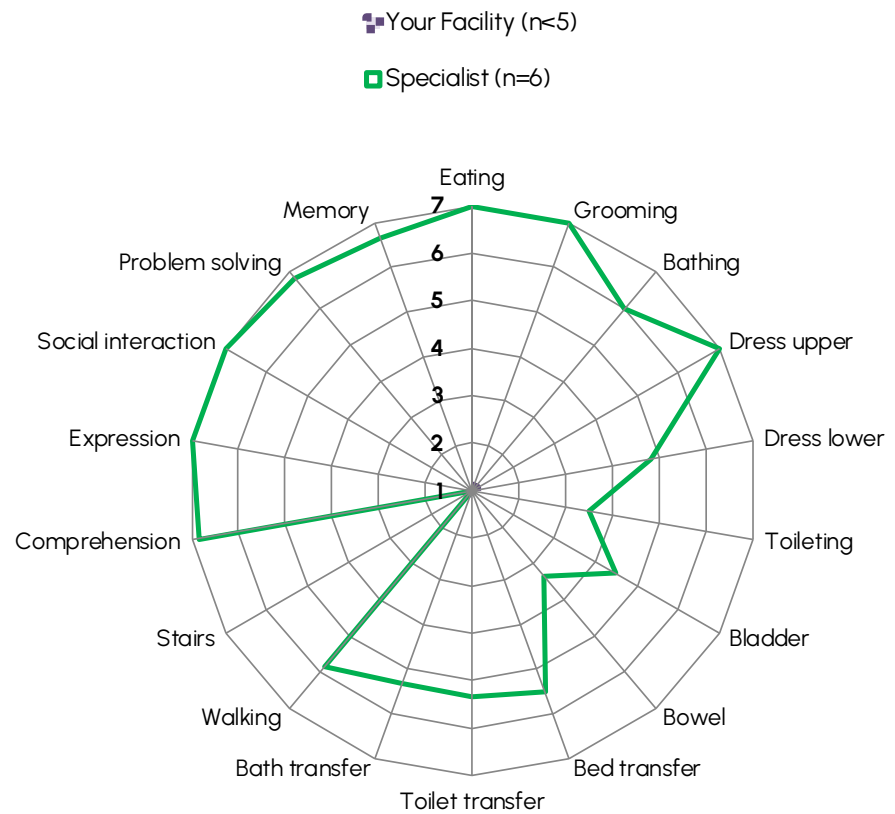


Note: Includes only completed episodes with valid FIM scores

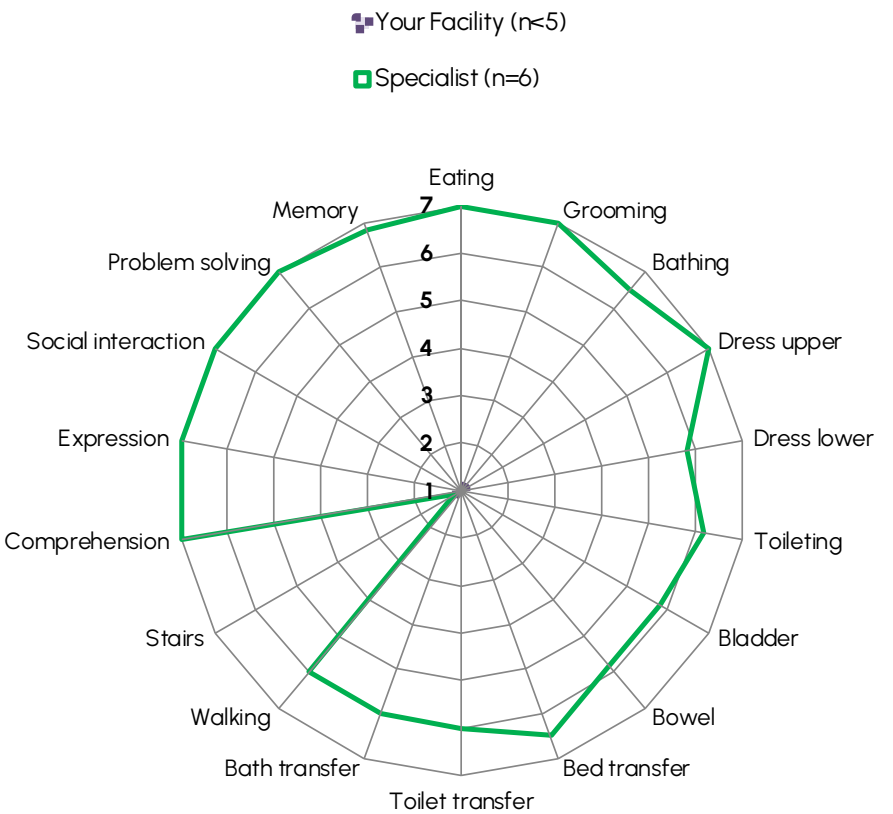
# Comparative FIM item scoring AN-SNAP class 5API



### 5API Admission FIM scores



### 5API Discharge FIM scores

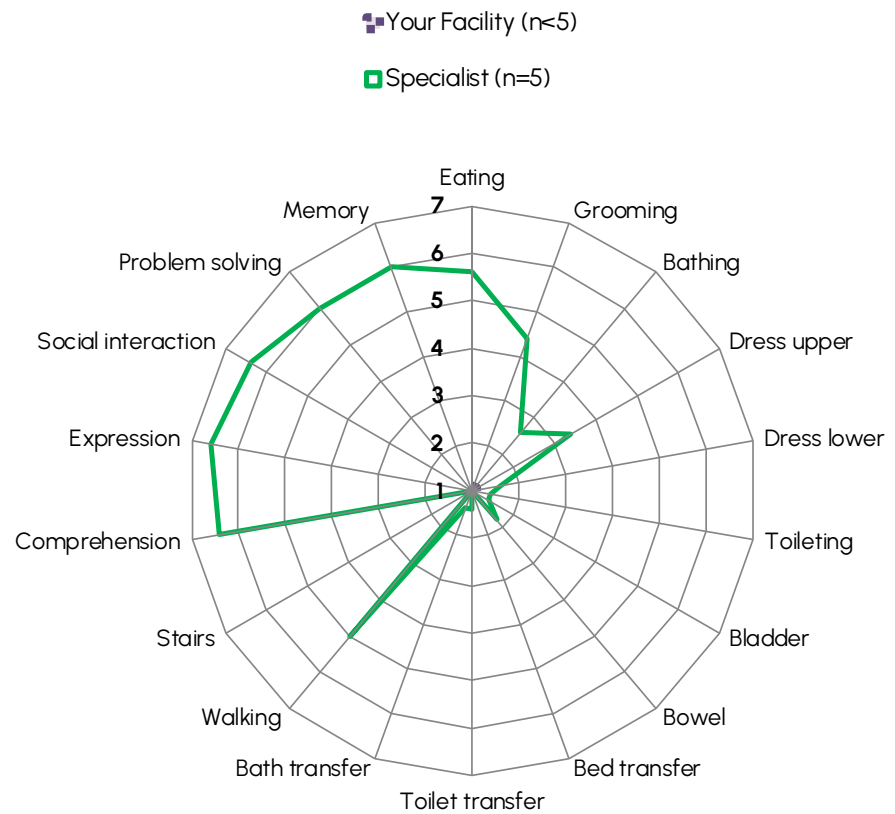


Note: Includes only completed episodes with valid FIM scores

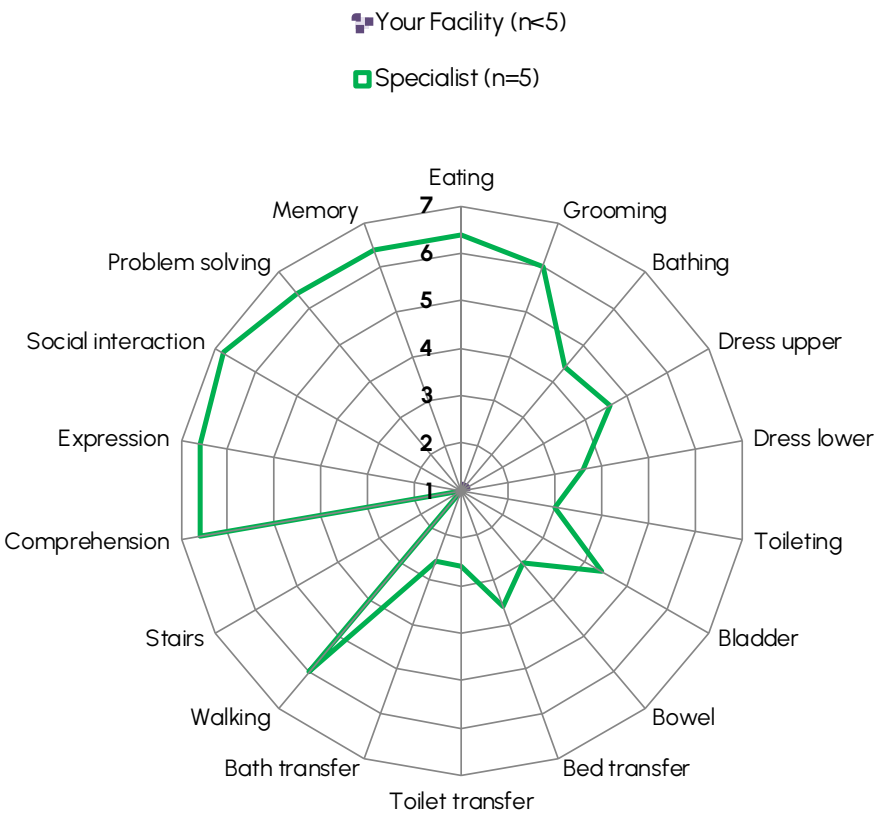
# Comparative FIM item scoring AN-SNAP class 5AP2



### 5AP2 Admission FIM scores



### 5AP2 Discharge FIM scores

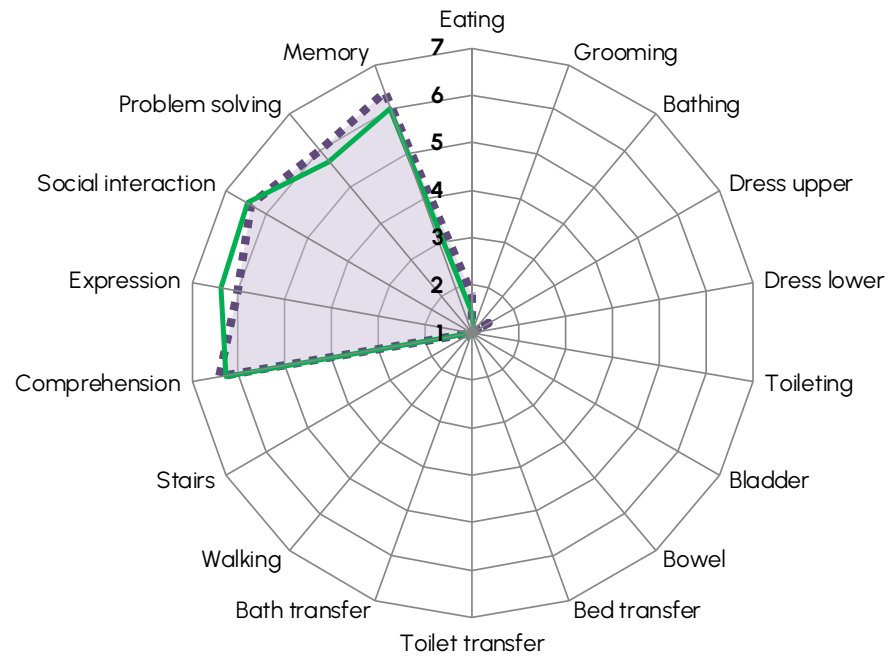


Note: Includes only completed episodes with valid FIM scores

# Comparative FIM item scoring AN-SNAP class 5AZI

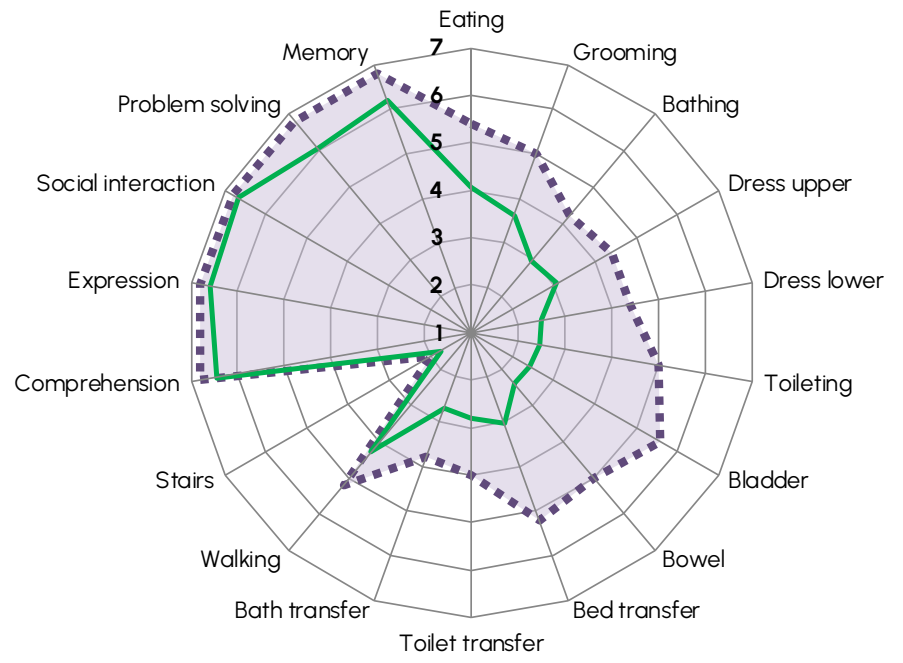
### 5AZI Admission FIM scores

■ Your Facility (n=5)  
■ Specialist (n=67)



### 5AZI Discharge FIM scores

■ Your Facility (n=5)  
■ Specialist (n=67)



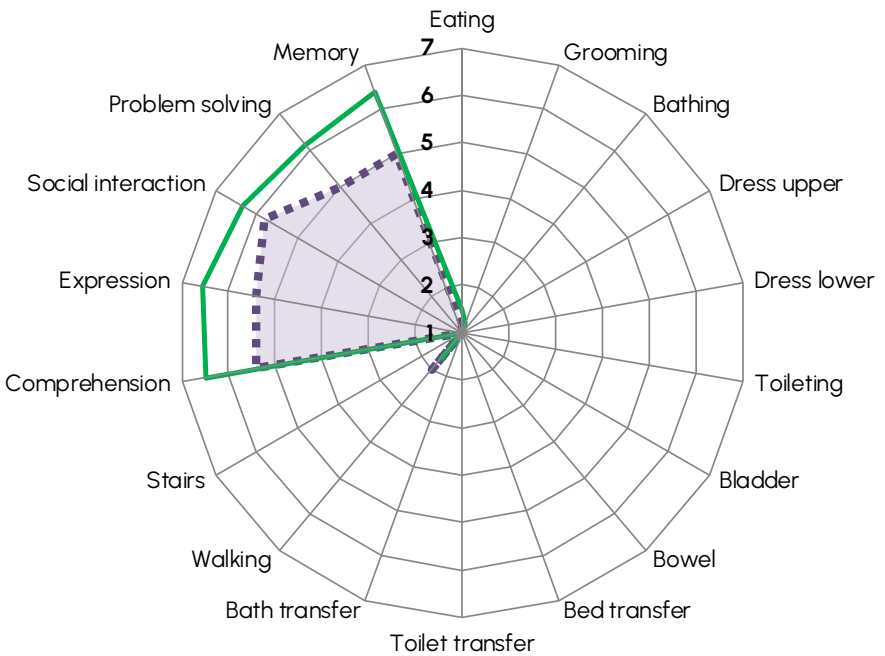
Note: Includes only completed episodes with valid FIM scores

# Comparative FIM item scoring AN-SNAP class 5AZ2



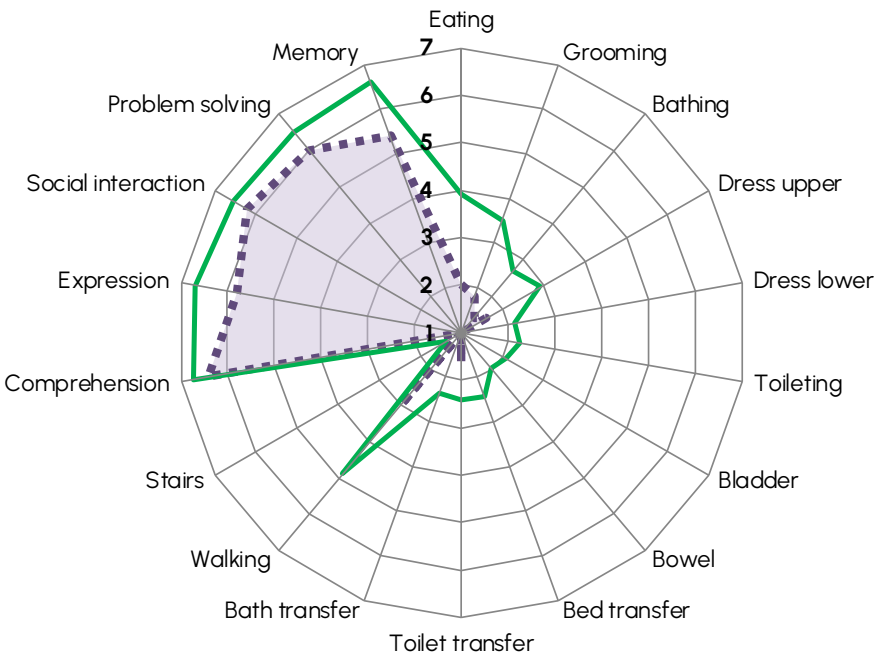
**5AZ2 Admission FIM scores**

■ Your Facility (n=5)  
 ■ Specialist (n=52)



**5AZ2 Discharge FIM scores**

■ Your Facility (n=5)  
 ■ Specialist (n=52)

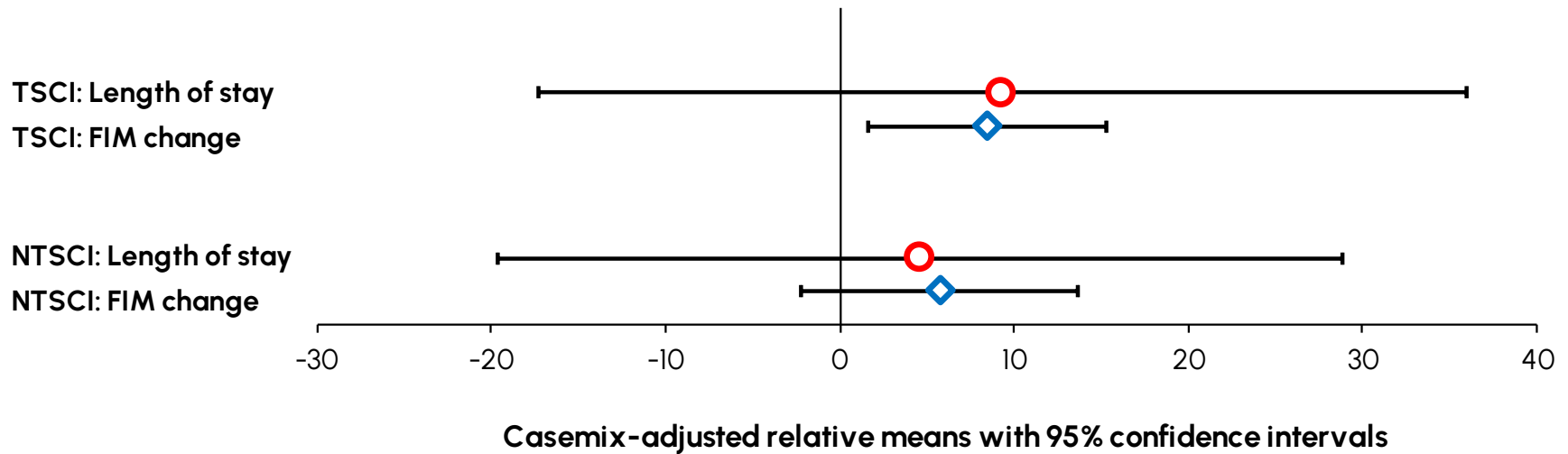


Note: Includes only completed episodes with valid FIM scores

# Outcome analysis



# Casemix-adjusted\* relative means



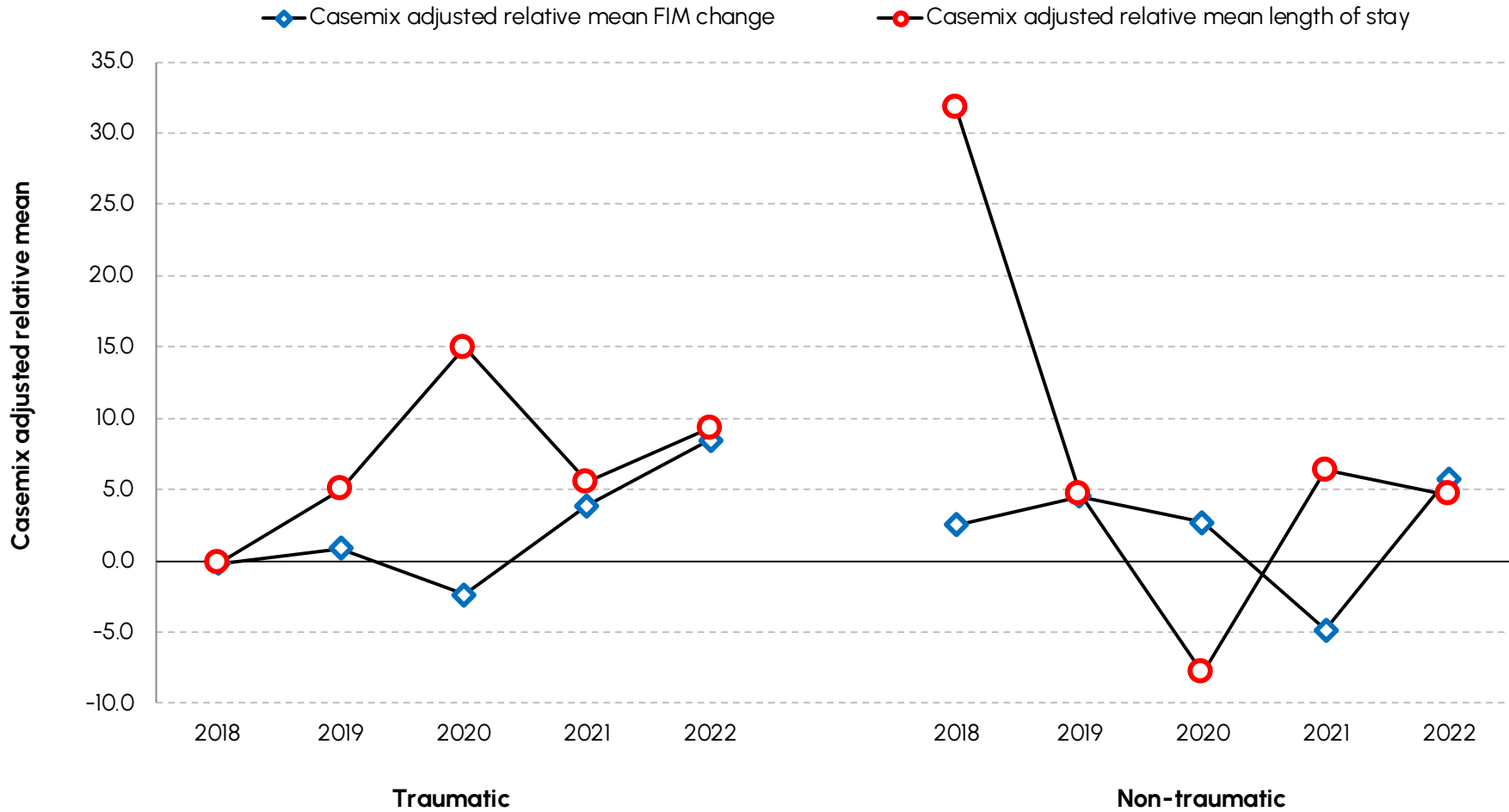
Outcome measure	Traumatic		YOUR FACILITY		Non-traumatic	
	Casemix-adjusted* relative mean	95% CI	Casemix-adjusted* relative mean	95% CI	Casemix-adjusted* relative mean	95% CI
Length of stay	9.3	-17.4 to 35.9	4.6	-19.6 to 28.9	4.6	-19.6 to 28.9
FIM change	8.4	1.6 to 15.3	5.7	-2.3 to 13.7	5.7	-2.3 to 13.7

Note: First admission, completed episodes

\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

# TSCI and NTSCI casemix-adjusted\* relative means over time

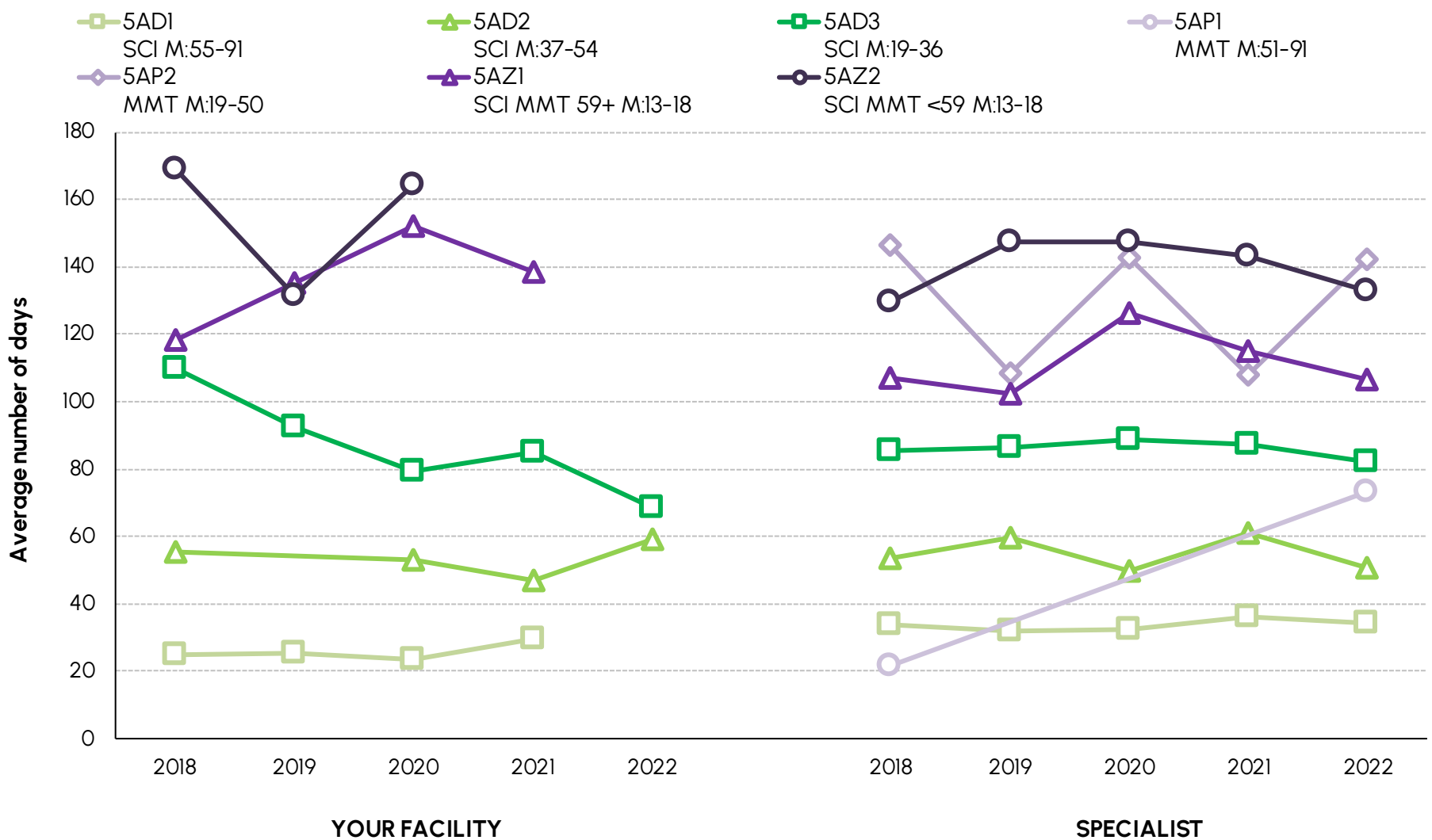
(base year = 2022)



Note: First admission, completed episodes

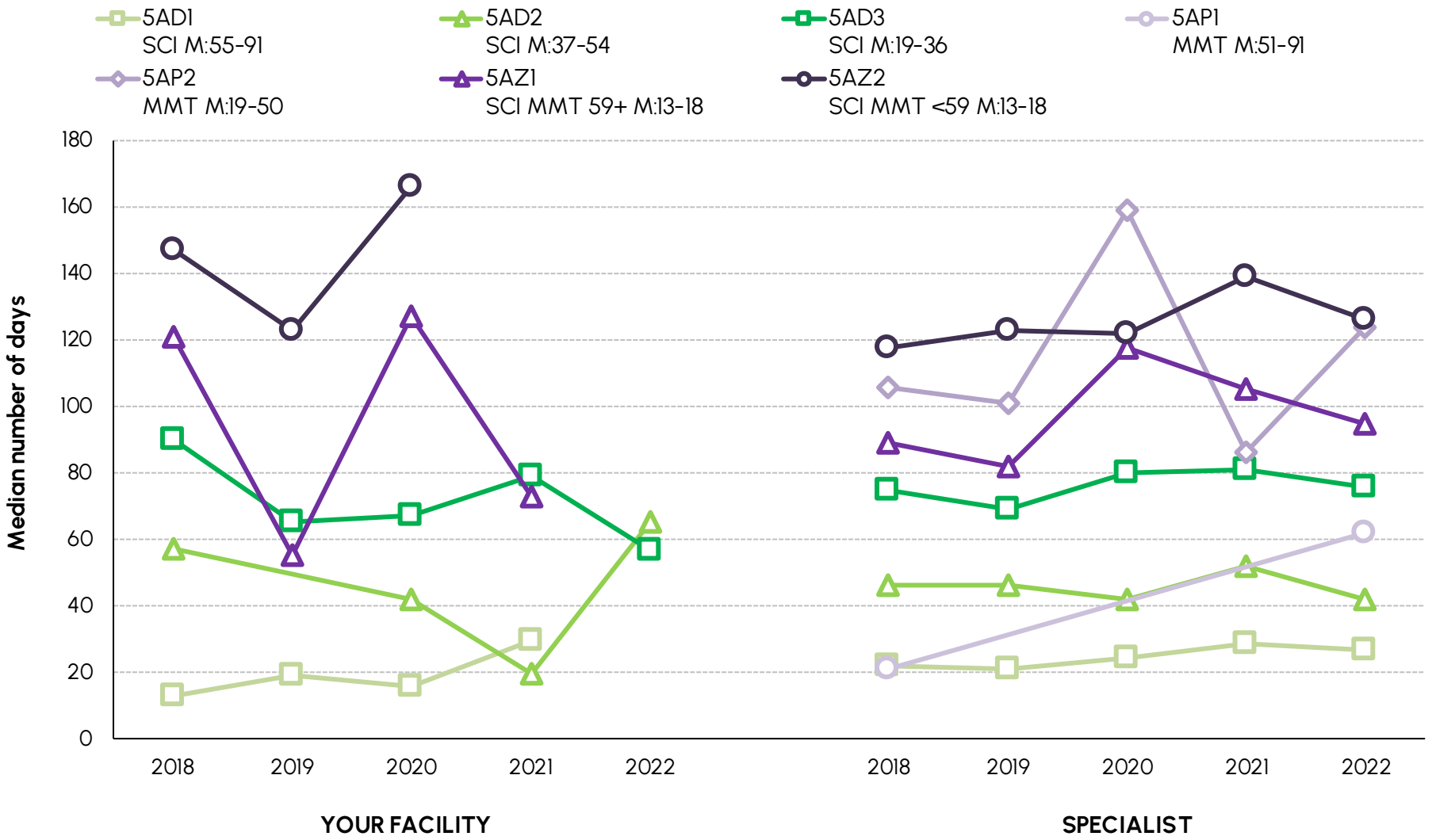
\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

# Average length of stay by AN-SNAP class over time



Note: First admission, completed episodes

# Median length of stay by AN-SNAP class over time



Note: First admission, completed episodes

# Average and median length of stay by AN-SNAP class over time

## AVERAGE

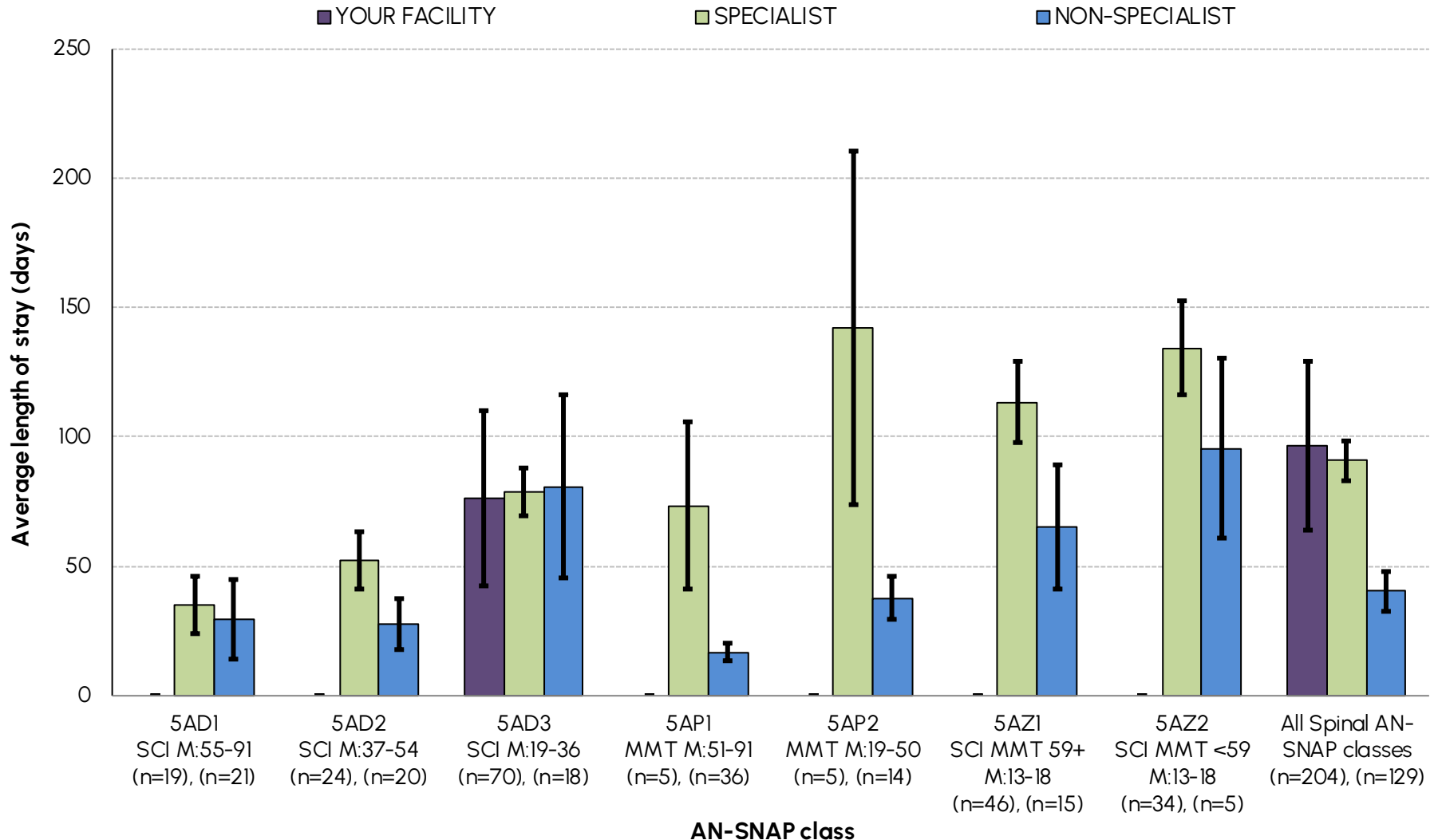
AN-SNAP class	YOUR FACILITY					SPECIALIST					NON-SPECIALIST				
	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
5AD1 (SCI, Weighted FIM Motor 55 - 91)	24.9	25.2	23.4	29.5	—	33.9	31.7	32.3	36.0	34.1	19.9	19.3	18.8	17.7	19.2
5AD2 (SCI, Weighted FIM Motor 37 - 54)	55.4	—	53.2	46.8	59.2	53.7	59.8	49.7	61.1	50.8	30.6	31.3	28.6	31.7	31.2
5AD3 (SCI, Weighted FIM Motor 19 - 36)	109.9	92.4	79.3	85.1	68.3	85.6	86.3	88.5	87.2	82.3	51.8	48.7	51.1	49.9	56.7
5AP1 (MMT, Weighted FIM Motor 51 - 91)	—	—	—	—	—	21.4	—	—	—	73.4	30.9	14.4	16.5	26.3	16.6
5AP2 (MMT, Weighted FIM Motor 19 - 50)	—	—	—	—	—	146.7	108.3	142.8	108.2	142.2	51.9	50.8	37.4	44.3	37.6
5AZ1 (SCI or MMT, age ≥ 59, weighted FIM motor 13-18)	118.2	135.4	152.0	138.3	—	107.1	102.5	126.3	115.0	106.5	43.6	63.8	54.6	59.3	73.6
5AZ2 (SCI or MMT, age ≤ 58, weighted FIM motor 13-18)	169.2	131.6	164.5	—	—	129.6	147.3	147.4	143.1	133.0	81.9	51.5	79.7	36.8	92.9
<b>All Spinal AN-SNAP classes</b>	<b>91.7</b>	<b>85.0</b>	<b>84.7</b>	<b>80.3</b>	<b>87.4</b>	<b>79.7</b>	<b>82.2</b>	<b>84.5</b>	<b>84.8</b>	<b>81.7</b>	<b>35.5</b>	<b>32.1</b>	<b>33.9</b>	<b>34.2</b>	<b>37.6</b>

## MEDIAN

AN-SNAP class	YOUR FACILITY					SPECIALIST					NON-SPECIALIST				
	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
5AD1 (SCI, Weighted FIM Motor 55 - 91)	13.0	19.0	15.5	29.5	—	22.0	21.0	24.5	28.5	26.5	17.0	16.0	14.0	15.0	14.0
5AD2 (SCI, Weighted FIM Motor 37 - 54)	57.0	—	42.0	19.5	65.0	46.0	46.0	42.0	52.0	42.0	24.0	24.5	25.0	26.0	26.0
5AD3 (SCI, Weighted FIM Motor 19 - 36)	90.0	65.0	67.0	79.0	56.5	74.5	69.0	80.0	81.0	75.5	36.0	40.0	35.0	41.5	43.0
5AP1 (MMT, Weighted FIM Motor 51 - 91)	—	—	—	—	—	21.0	—	—	—	62.0	23.0	12.5	15.0	19.0	15.0
5AP2 (MMT, Weighted FIM Motor 19 - 50)	—	—	—	—	—	105.5	101.0	159.0	86.0	124.0	37.0	43.0	32.0	49.0	39.0
5AZ1 (SCI or MMT, age ≥ 59, weighted FIM motor 13-18)	121.0	55.0	127.0	73.0	—	89.0	82.0	117.5	105.0	94.5	36.0	60.5	45.0	51.0	65.0
5AZ2 (SCI or MMT, age ≤ 58, weighted FIM motor 13-18)	147.0	123.0	166.0	—	—	117.5	123.0	122.0	139.0	126.0	48.0	43.5	60.0	43.0	81.0
<b>All Spinal AN-SNAP classes</b>	<b>64.5</b>	<b>58.0</b>	<b>67.0</b>	<b>64.0</b>	<b>65.0</b>	<b>66.0</b>	<b>64.0</b>	<b>70.0</b>	<b>72.0</b>	<b>71.0</b>	<b>26.0</b>	<b>23.0</b>	<b>22.0</b>	<b>25.0</b>	<b>25.0</b>

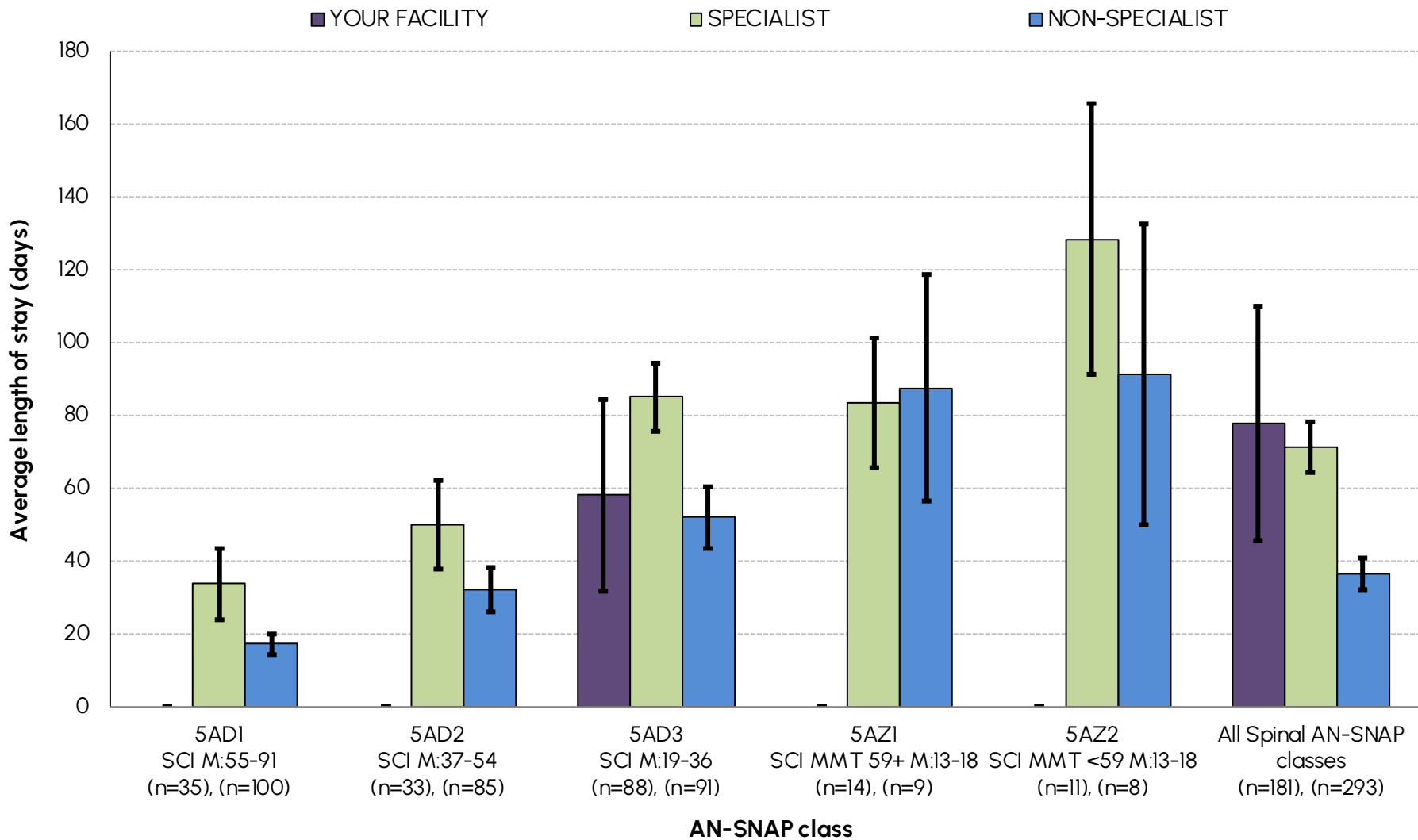
Note: First admission, completed episodes

# TSCI average length of stay by AN-SNAP class



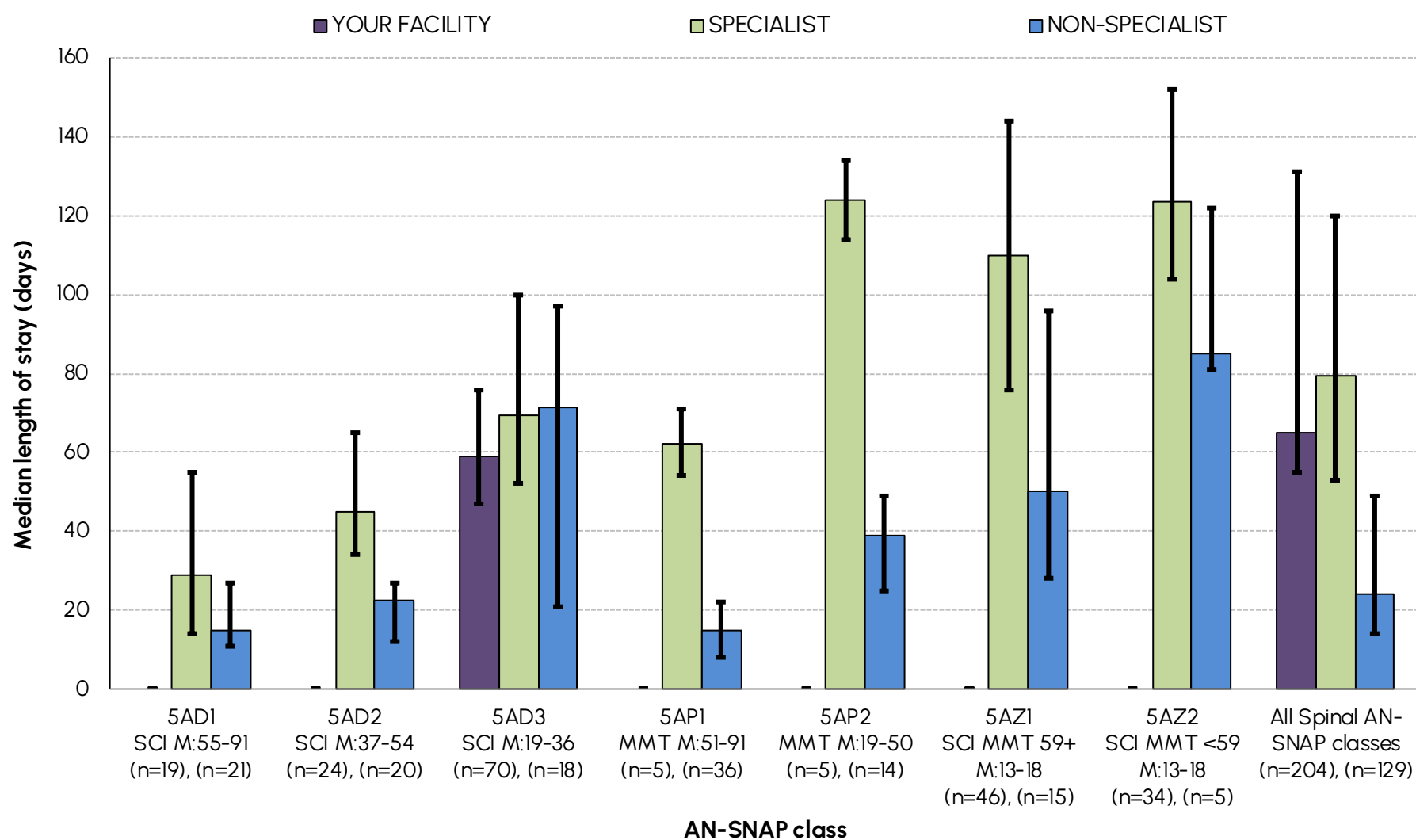
Note: First admission, completed episodes

# NTSCI average length of stay by AN-SNAP class



Note: First admission, completed episodes

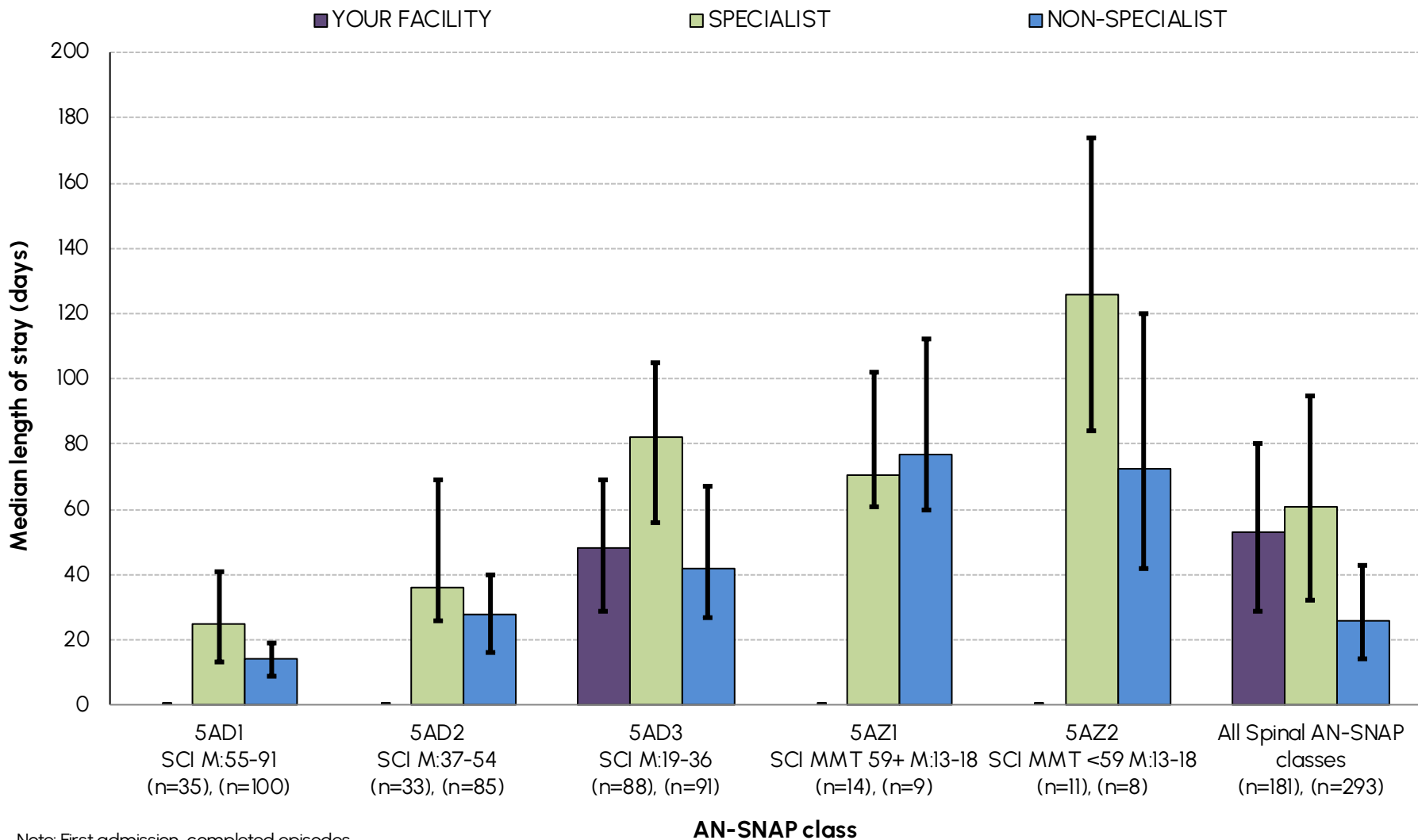
# TSCI median length of stay by AN-SNAP class



Note: First admission, completed episodes

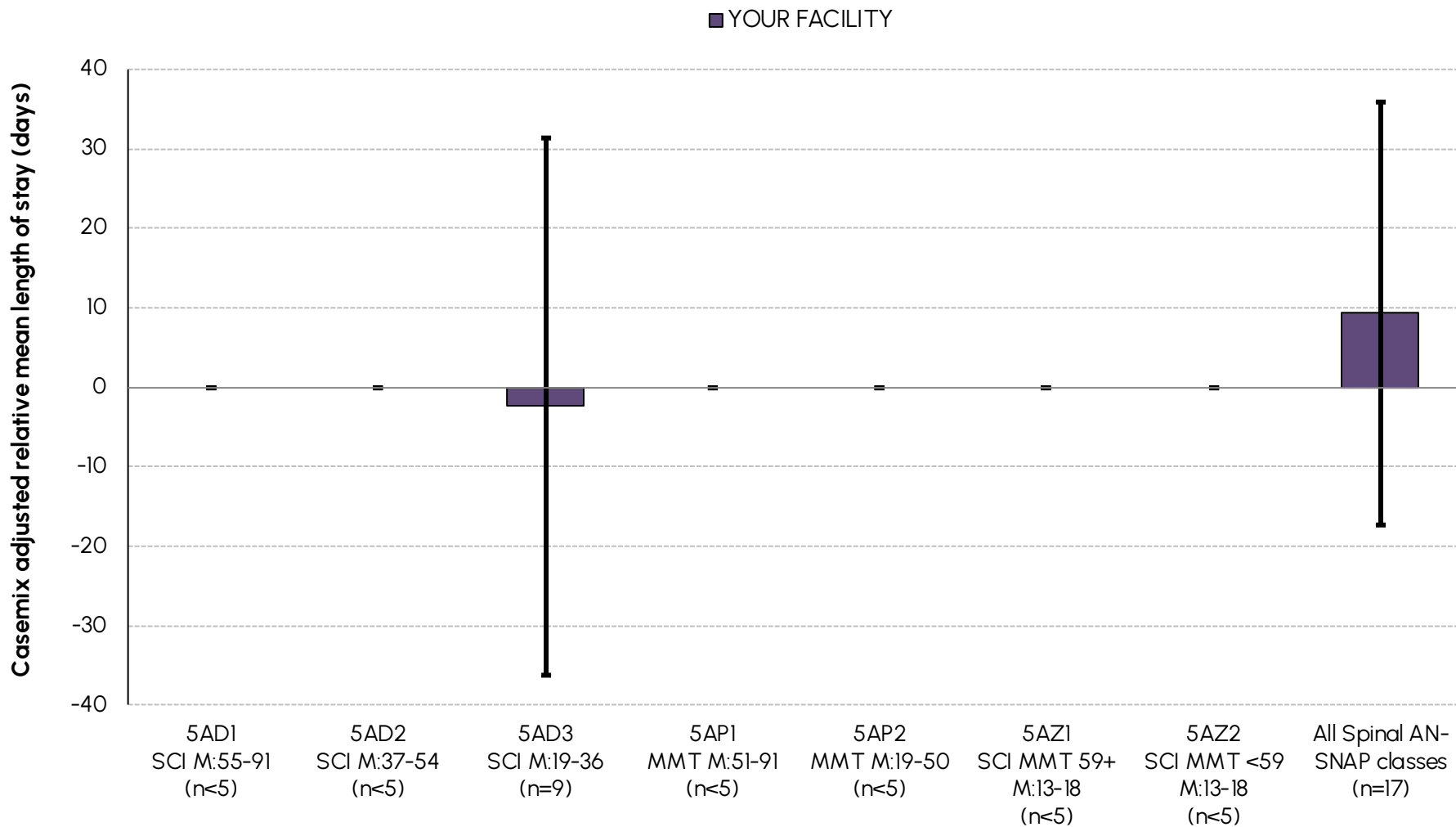


# NTSCI median length of stay by AN-SNAP class



Note: First admission, completed episodes

# TSCI casemix-adjusted\* relative mean length of stay by AN-SNAP class

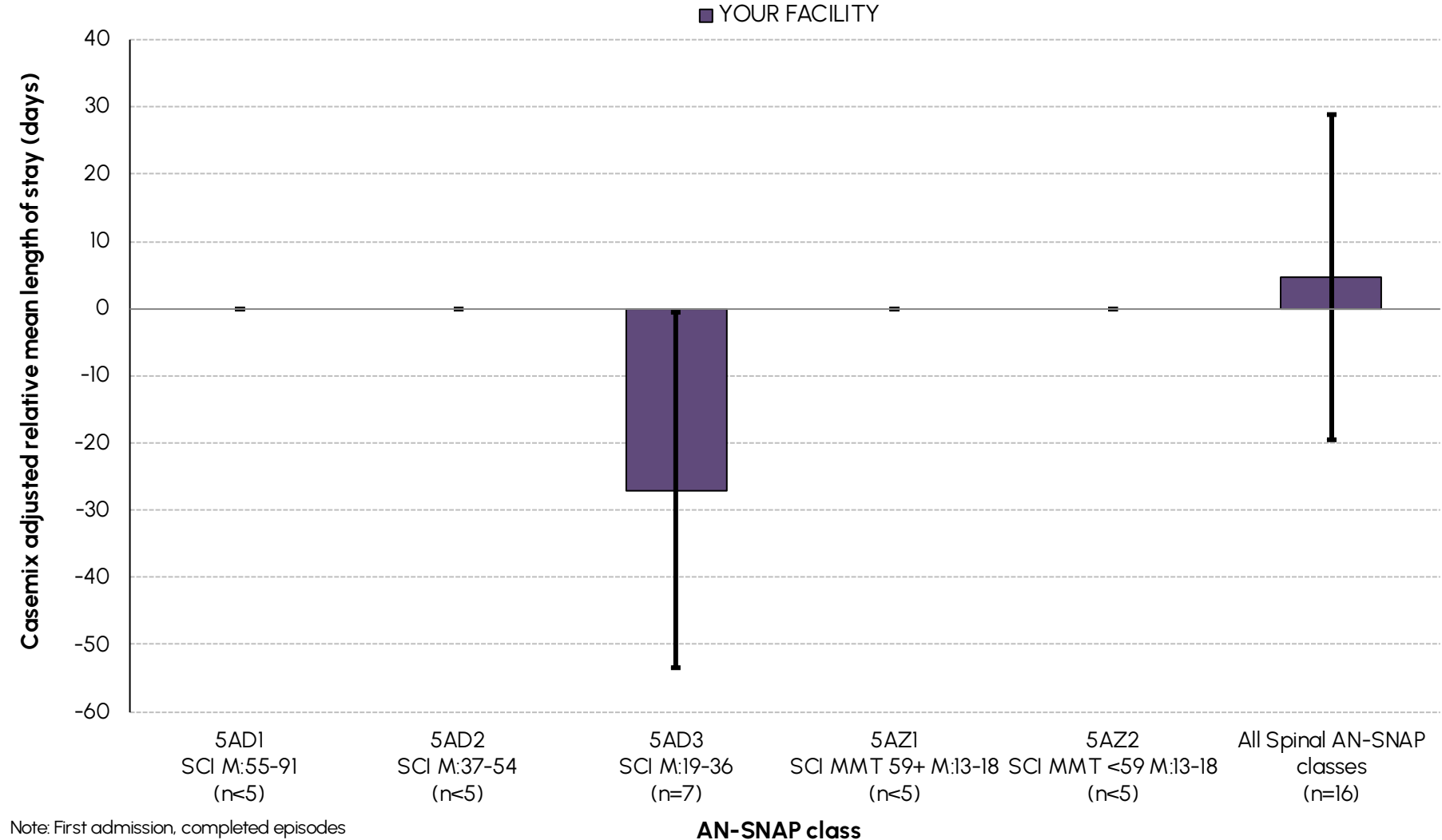


Note: First admission, completed episodes

### AN-SNAP class

\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

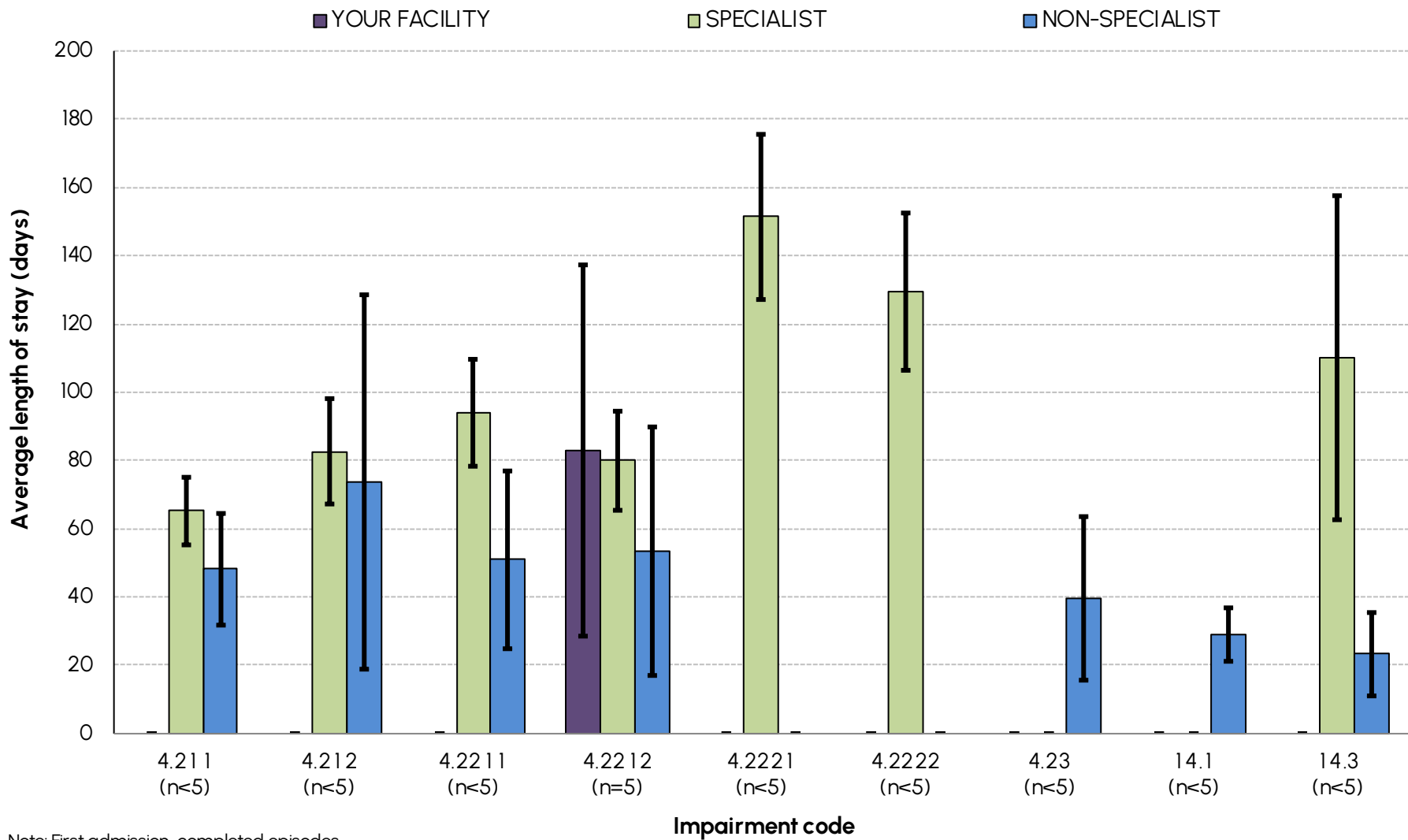
# NTSCI casemix-adjusted\* relative mean length of stay by AN-SNAP class



Note: First admission, completed episodes

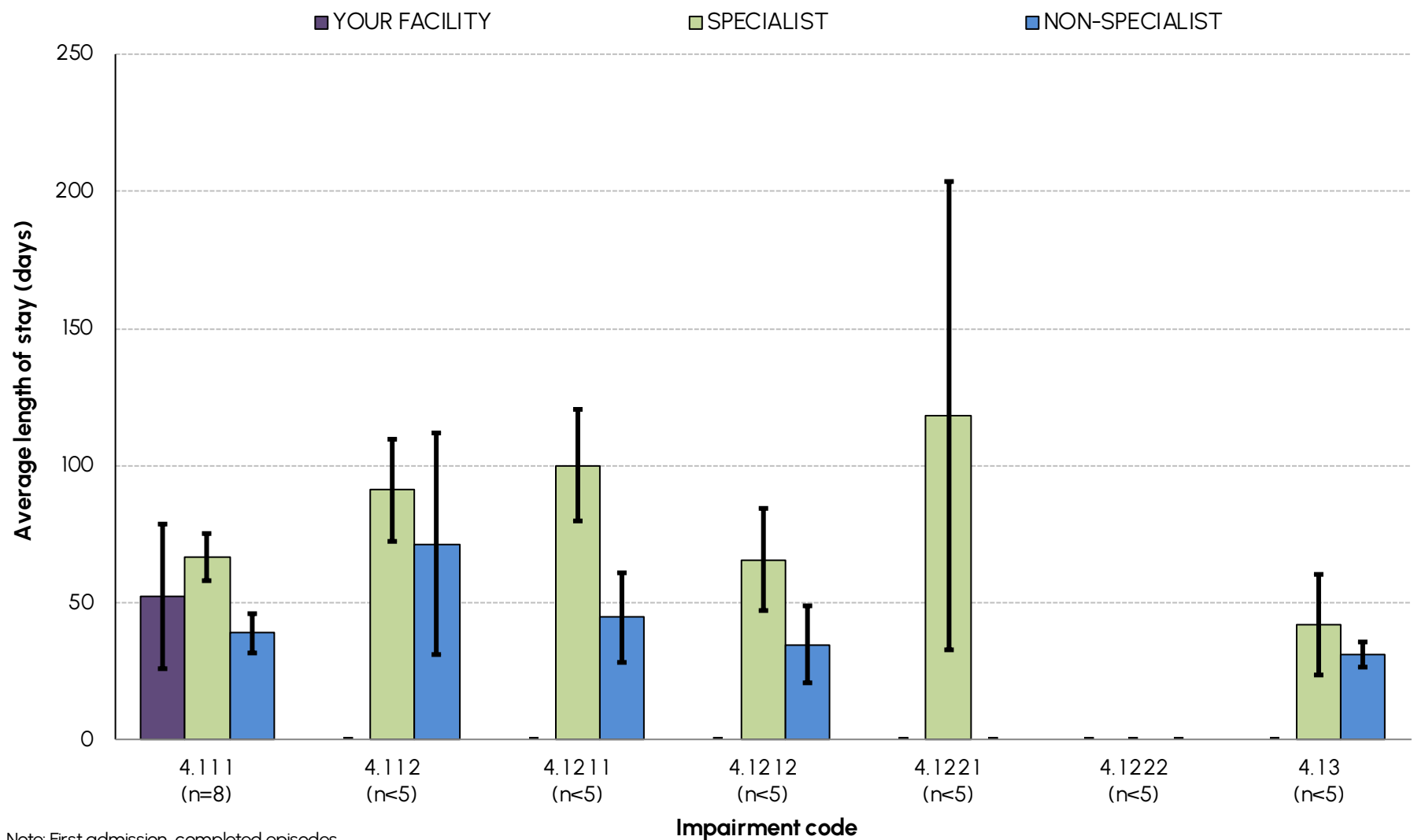
\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

# TSCI average length of stay by impairment



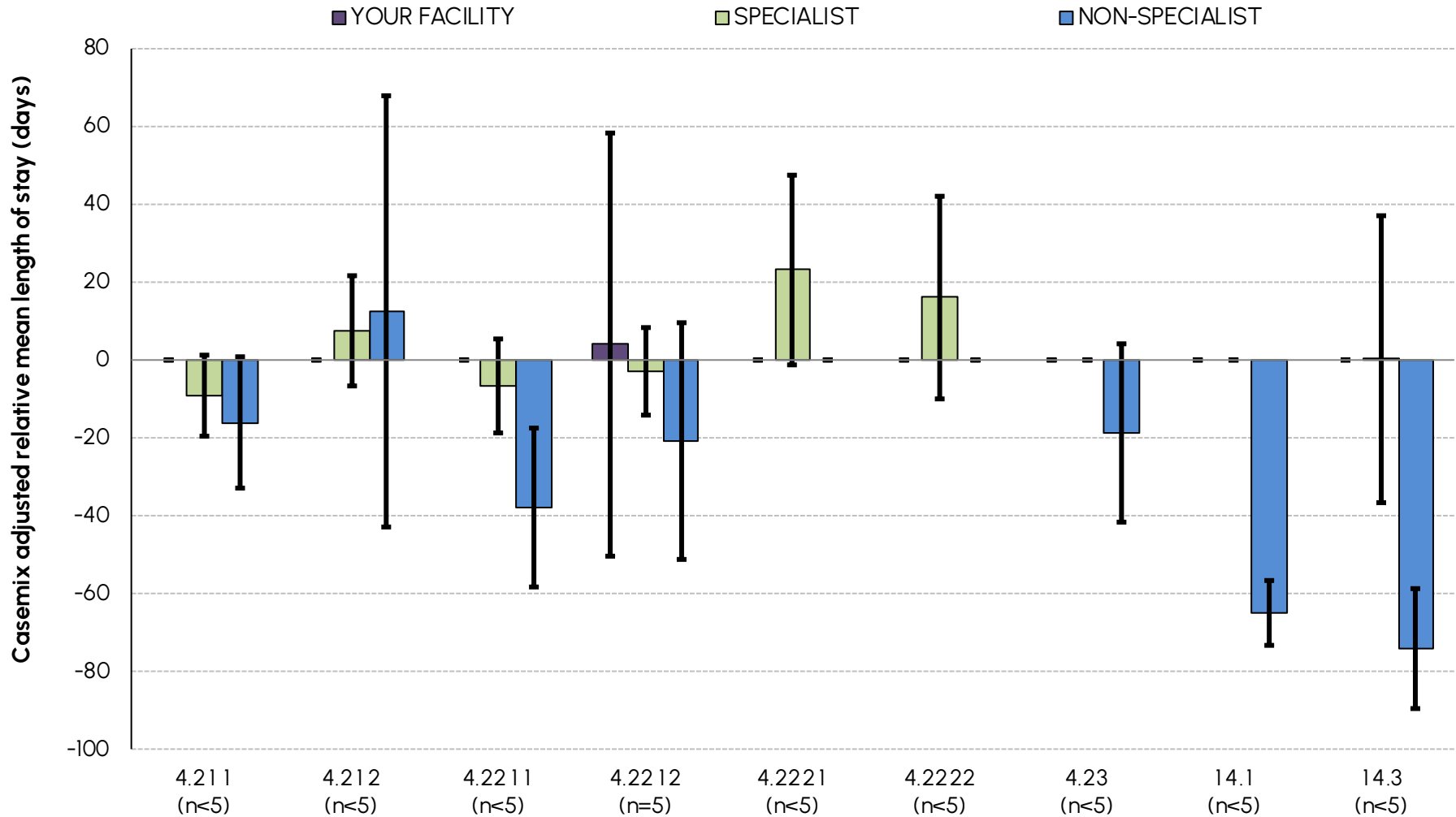
Note: First admission, completed episodes

# NTSCI average length of stay by impairment



Note: First admission, completed episodes

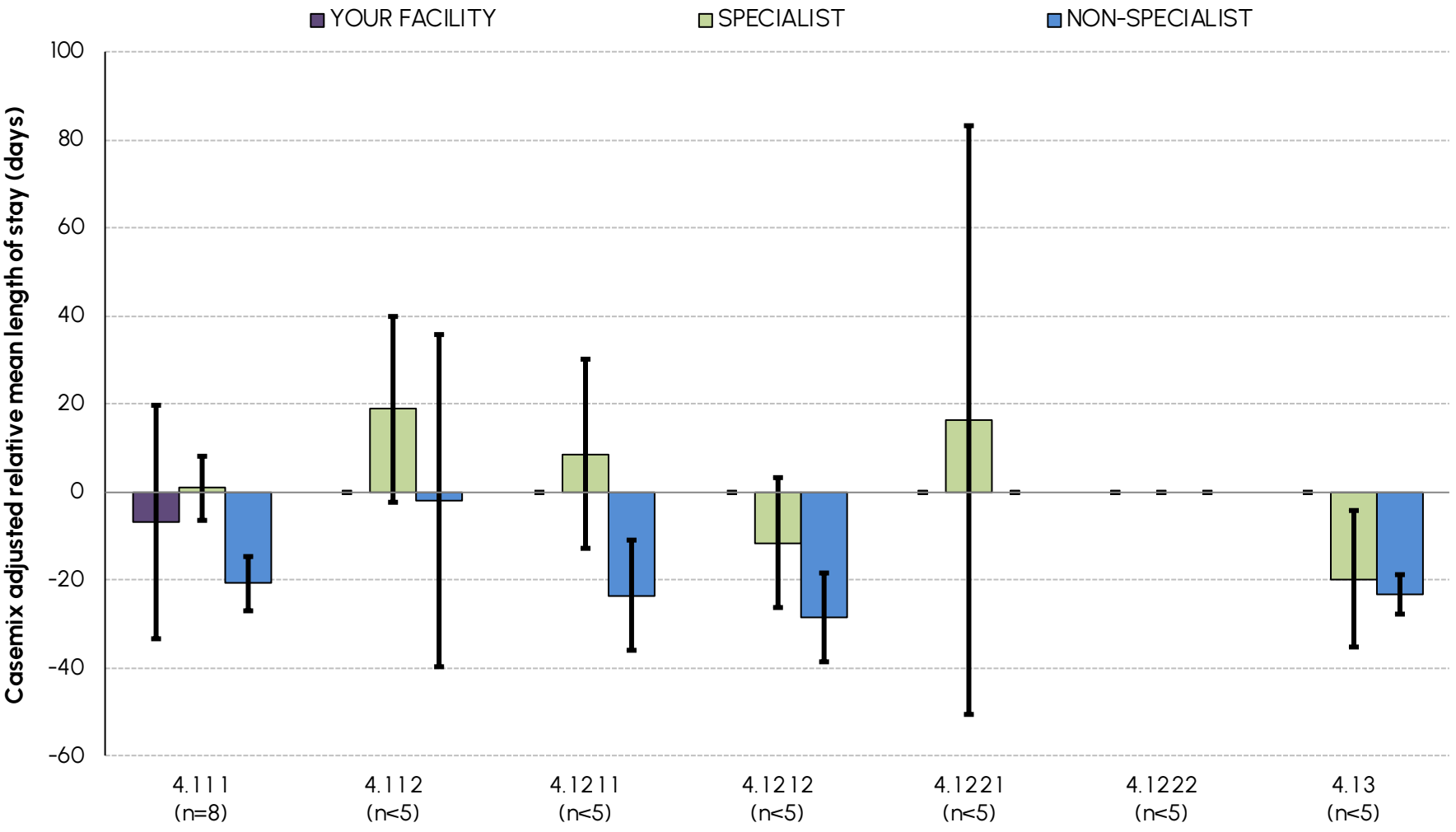
# TSCI casemix-adjusted\* relative mean length of stay by impairment



Note: First admission, completed episodes

\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

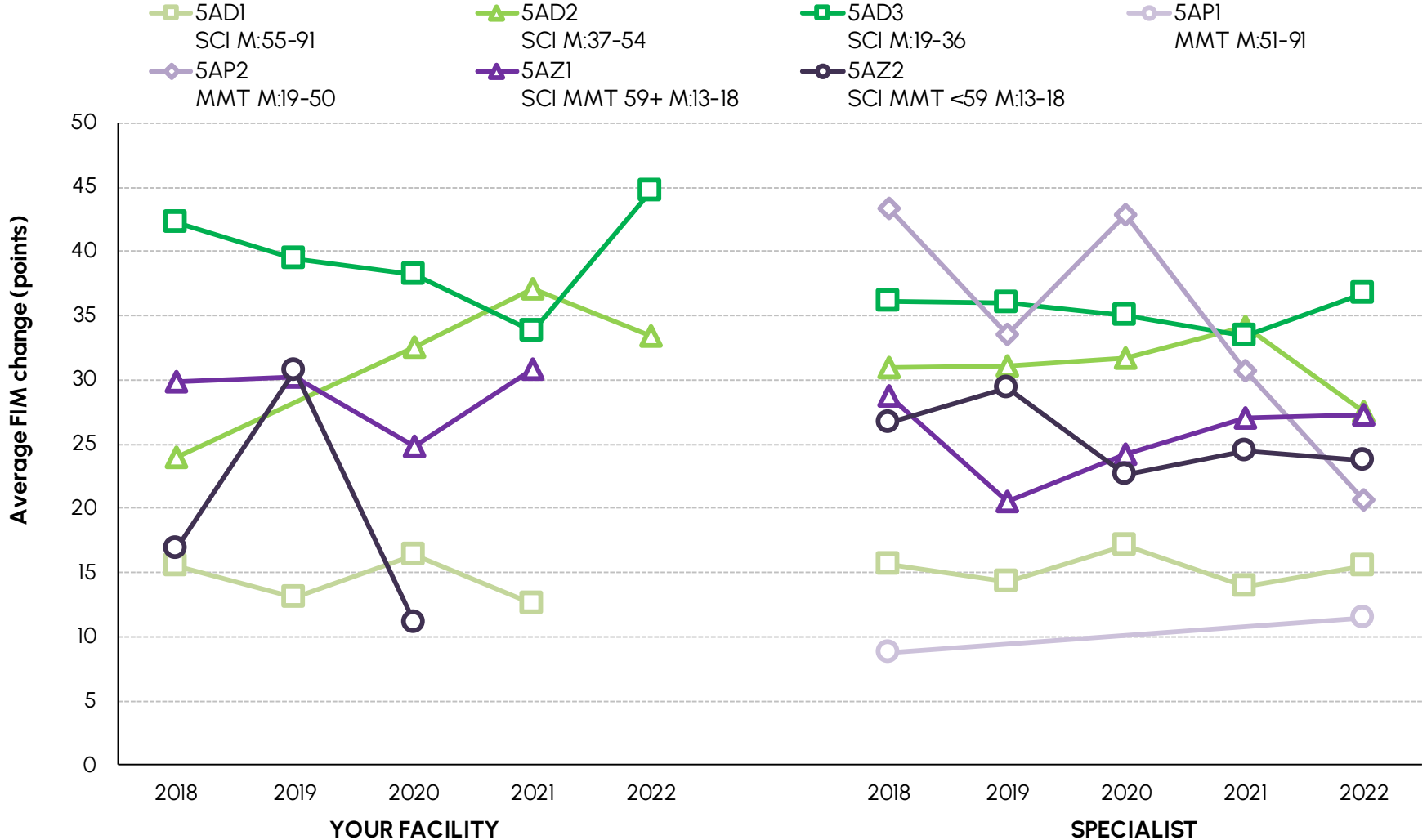
# NTSCI casemix-adjusted\* relative mean length of stay by impairment



Note: First admission, completed episodes

\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

# Average FIM change by AN-SNAP class over time



Note: First admission, completed episodes

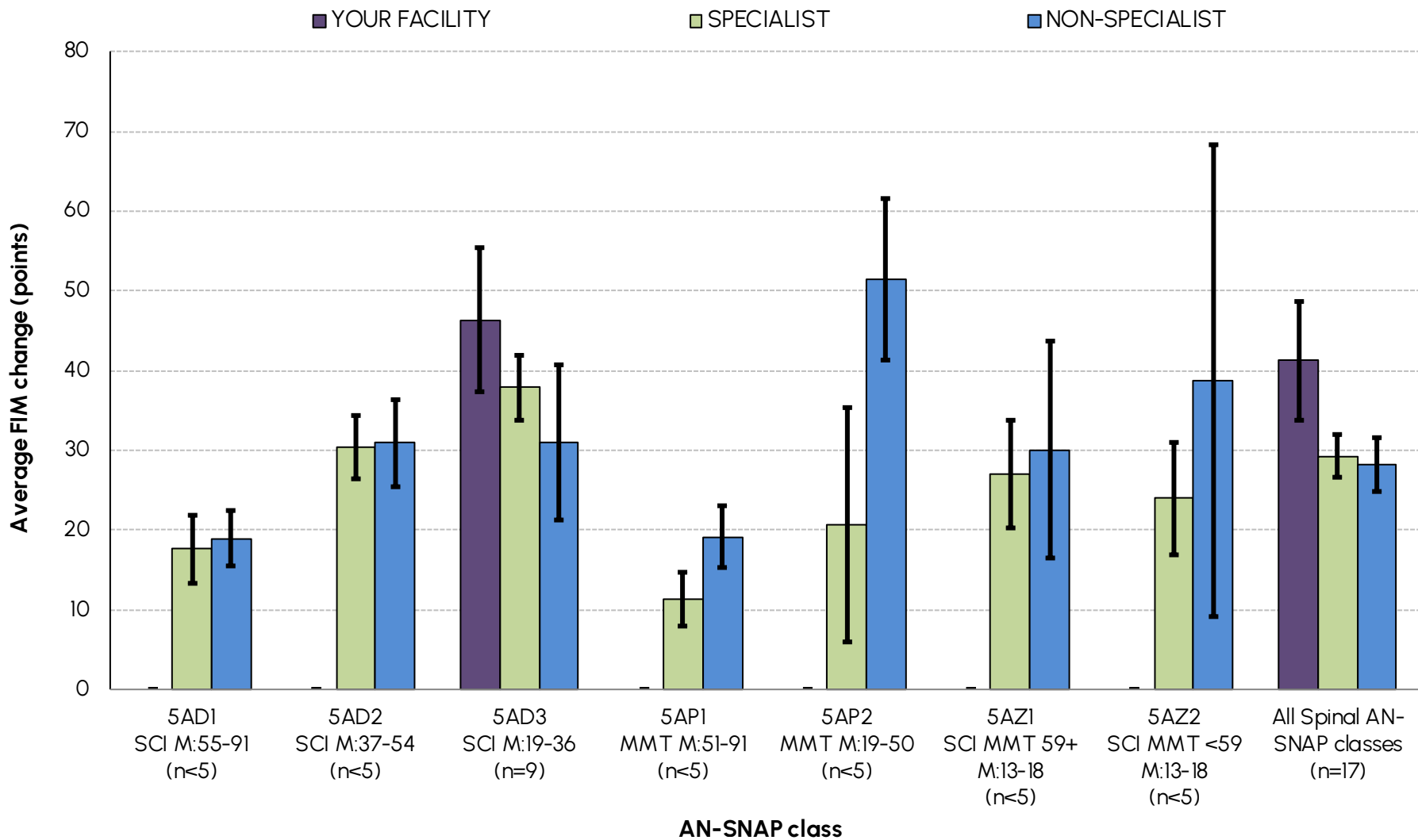


# Average FIM change by AN-SNAP class over time

AN-SNAP class	YOUR FACILITY					SPECIALIST					NON-SPECIALIST				
	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
5AD1 (SCI, Weighted FIM Motor 55 - 91)	15.5	13.0	16.4	12.5	—	15.6	14.2	17.2	14.0	15.6	15.5	14.9	15.9	15.2	16.1
5AD2 (SCI, Weighted FIM Motor 37 - 54)	24.0	—	32.6	37.1	33.4	30.9	31.1	31.7	34.1	27.6	26.2	27.9	29.2	27.6	28.1
5AD3 (SCI, Weighted FIM Motor 19 - 36)	42.2	39.4	38.2	33.8	44.7	36.1	36.0	35.1	33.4	36.8	26.2	31.3	32.0	27.8	28.5
5AP1 (MMT, Weighted FIM Motor 51 - 91)	—	—	—	—	—	8.8	—	—	—	11.4	19.5	15.3	17.5	24.4	19.1
5AP2 (MMT, Weighted FIM Motor 19 - 50)	—	—	—	—	—	43.3	33.5	42.9	30.7	20.6	40.4	36.3	45.5	39.6	51.4
5AZ1 (SCI or MMT, age ≥ 59, weighted FIM motor 13-18)	29.8	30.2	24.8	30.8	—	28.8	20.6	24.2	27.0	27.3	16.4	30.9	21.9	26.9	26.9
5AZ2 (SCI or MMT, age ≤ 58, weighted FIM motor 13-18)	16.9	30.7	11.1	—	—	26.6	29.3	22.6	24.4	23.8	32.0	15.3	17.4	28.4	30.5
<b>All Spinal AN-SNAP classes</b>	<b>27.0</b>	<b>28.8</b>	<b>26.5</b>	<b>28.0</b>	<b>37.2</b>	<b>28.9</b>	<b>28.2</b>	<b>28.4</b>	<b>27.8</b>	<b>28.9</b>	<b>22.4</b>	<b>23.4</b>	<b>24.4</b>	<b>23.5</b>	<b>24.8</b>

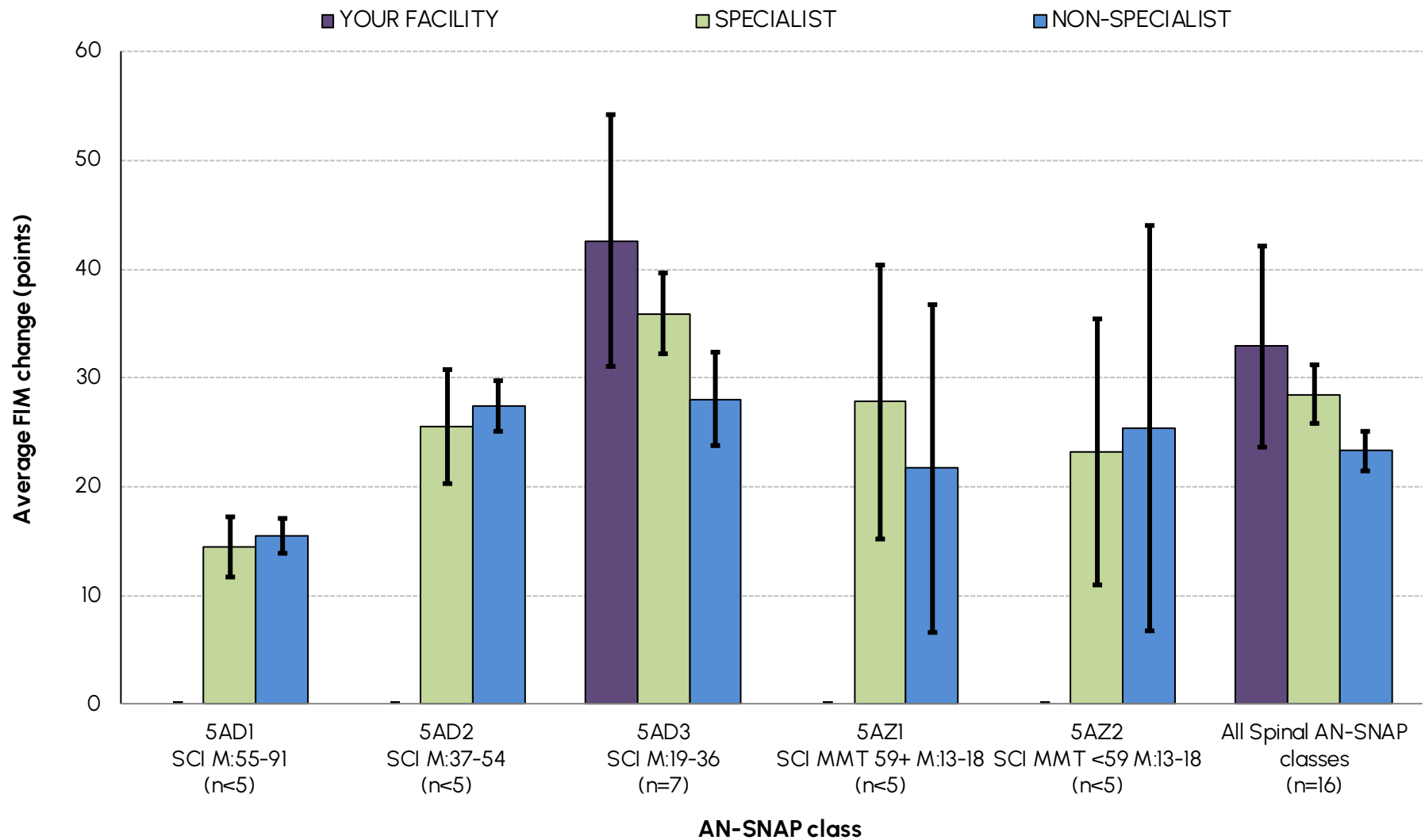
Note: First admission, completed episodes

# TSCI average FIM change by AN-SNAP class



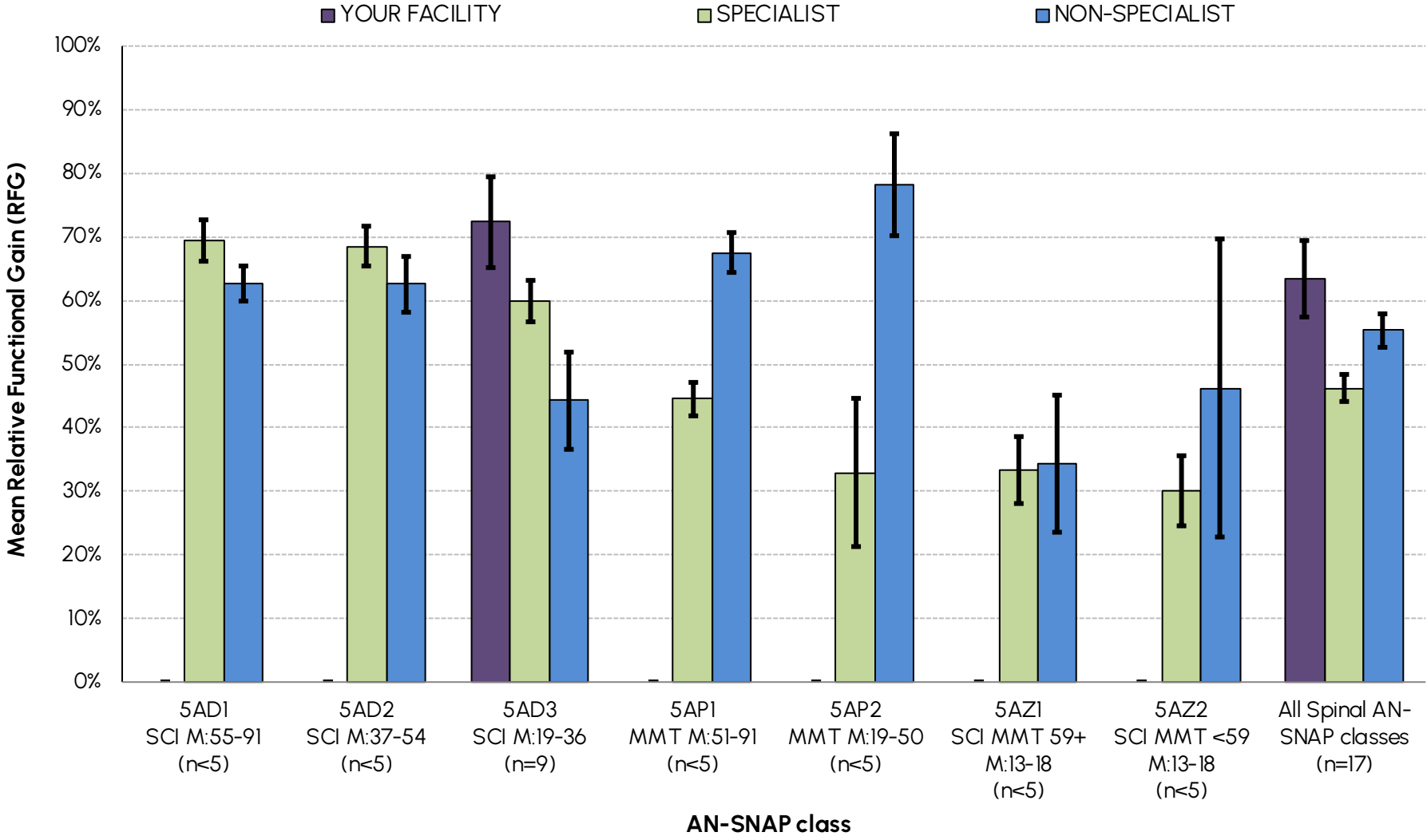
Note: First admission, completed episodes

# NTSCI average FIM change by AN-SNAP class



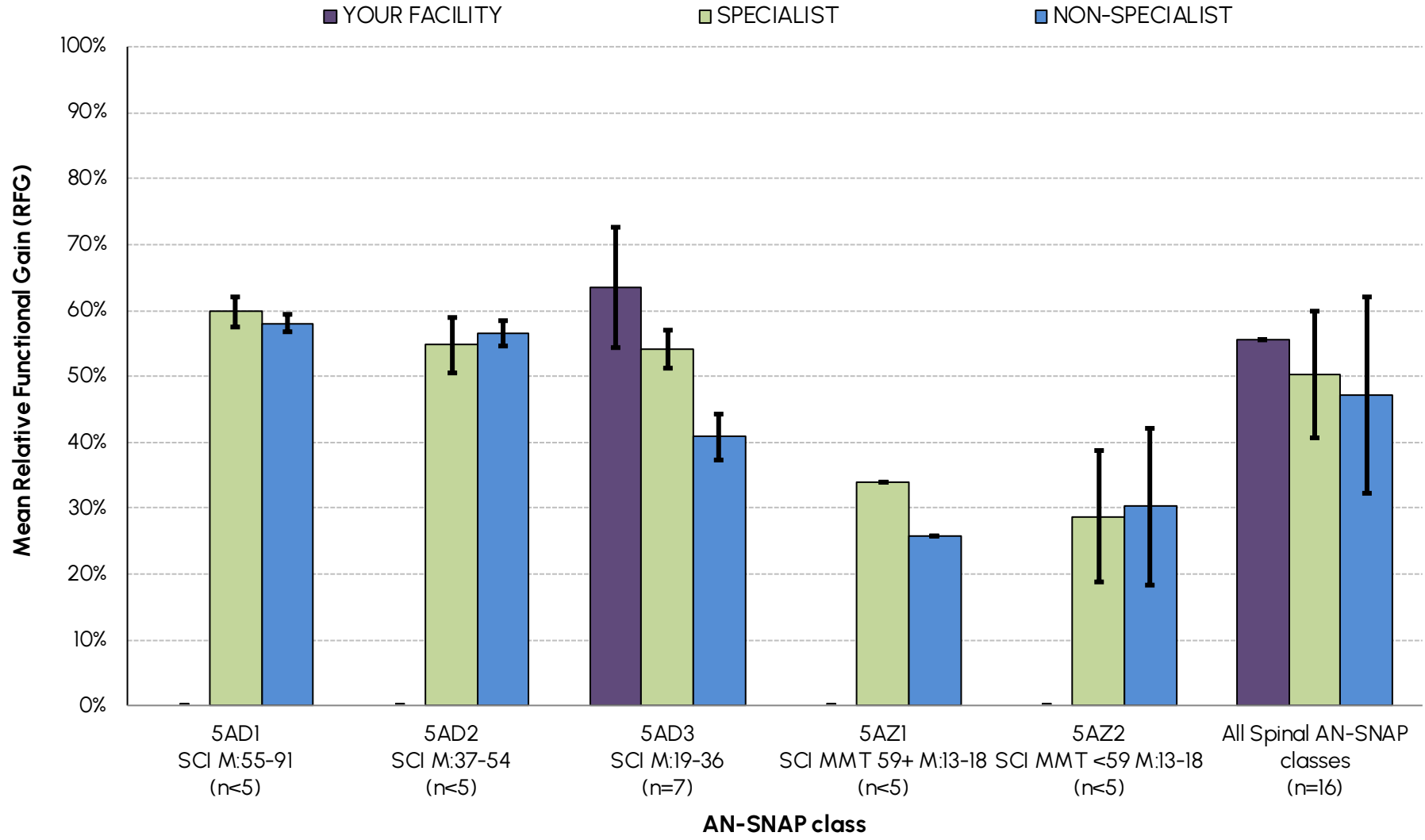
Note: First admission, completed episodes

# TSCI average relative functional gain by AN-SNAP class



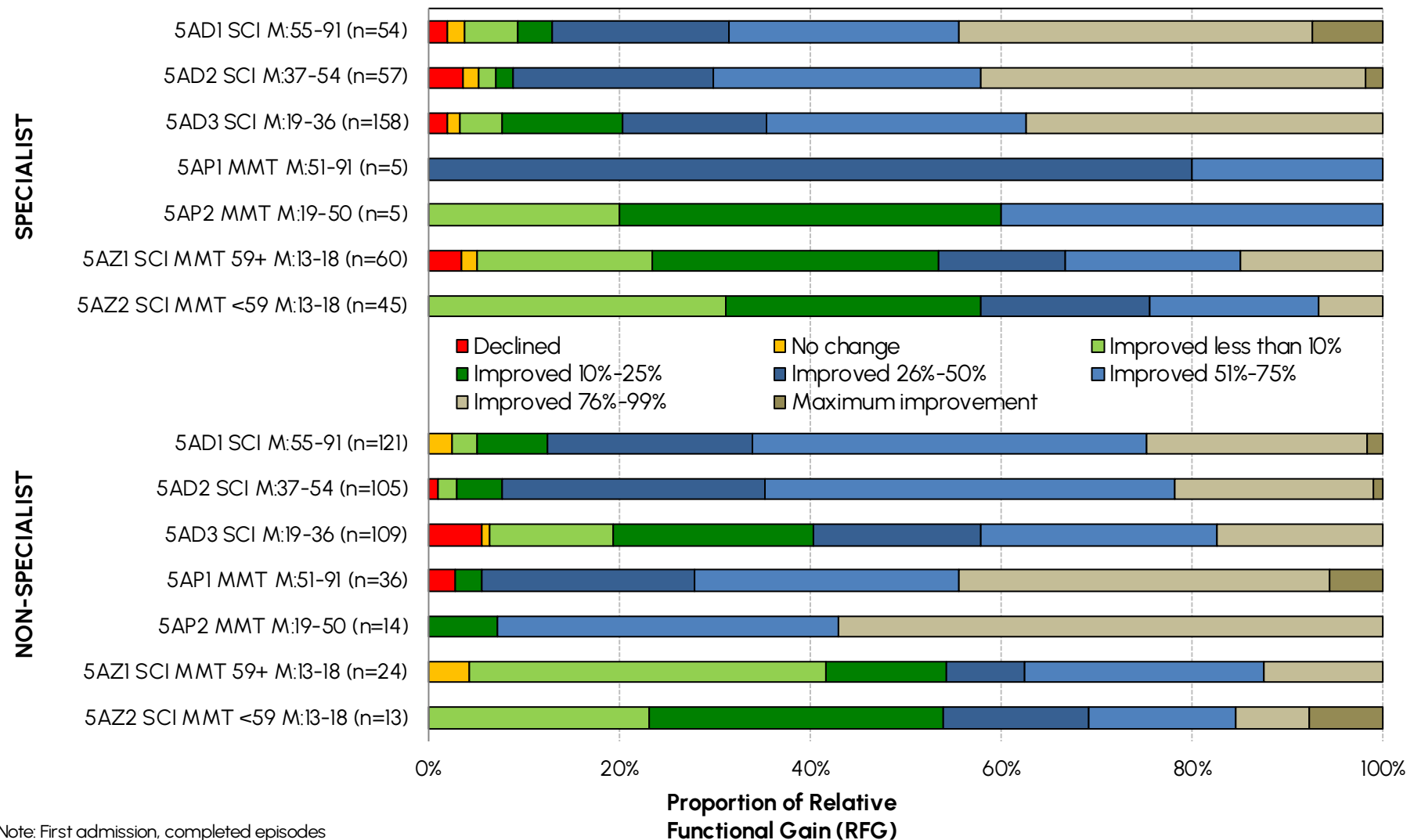
Note: First admission, completed episodes

# NTSCI average relative functional gain by AN-SNAP class



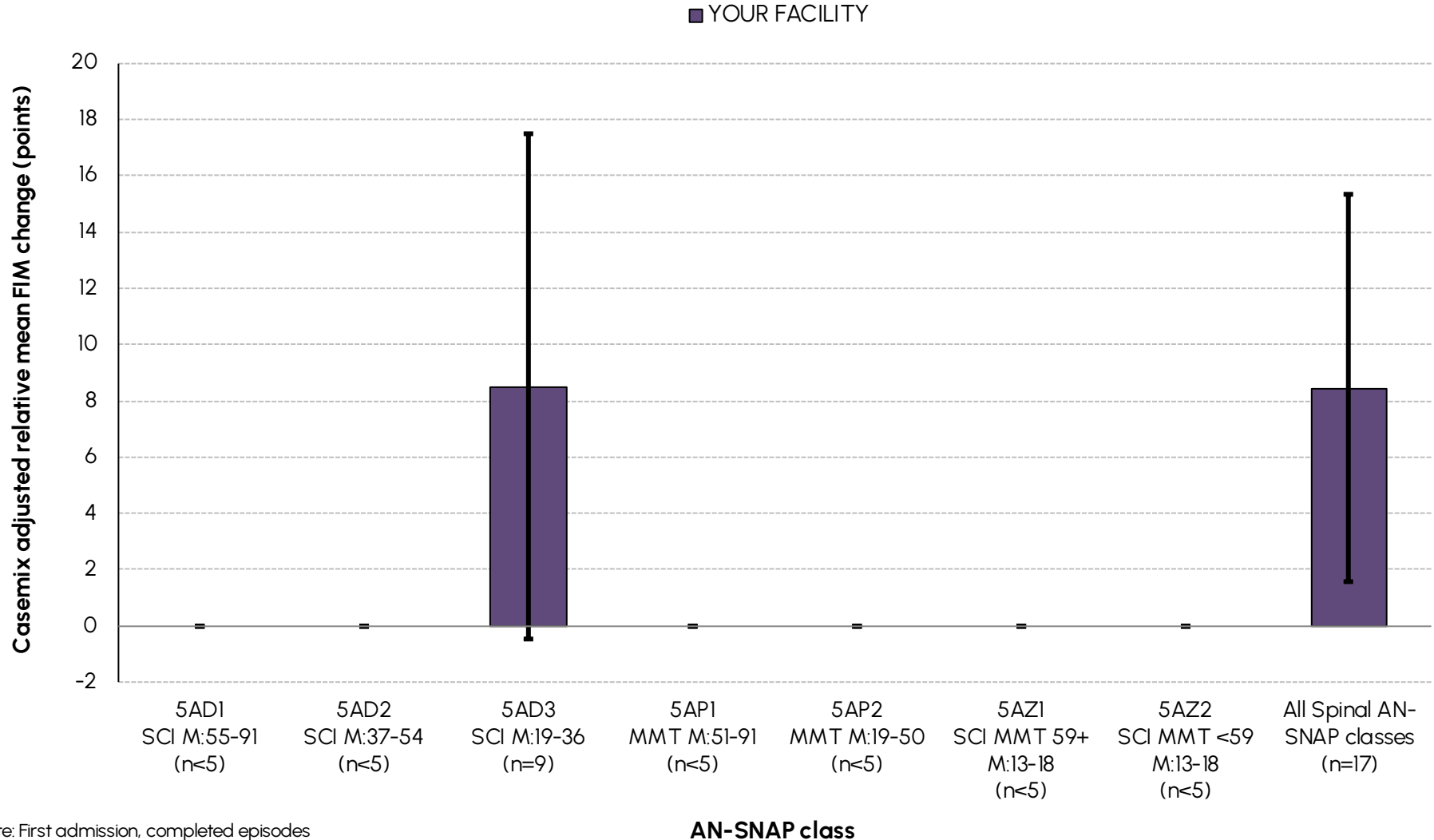
Note: First admission, completed episodes

# Relative functional gain by AN-SNAP class



Note: First admission, completed episodes

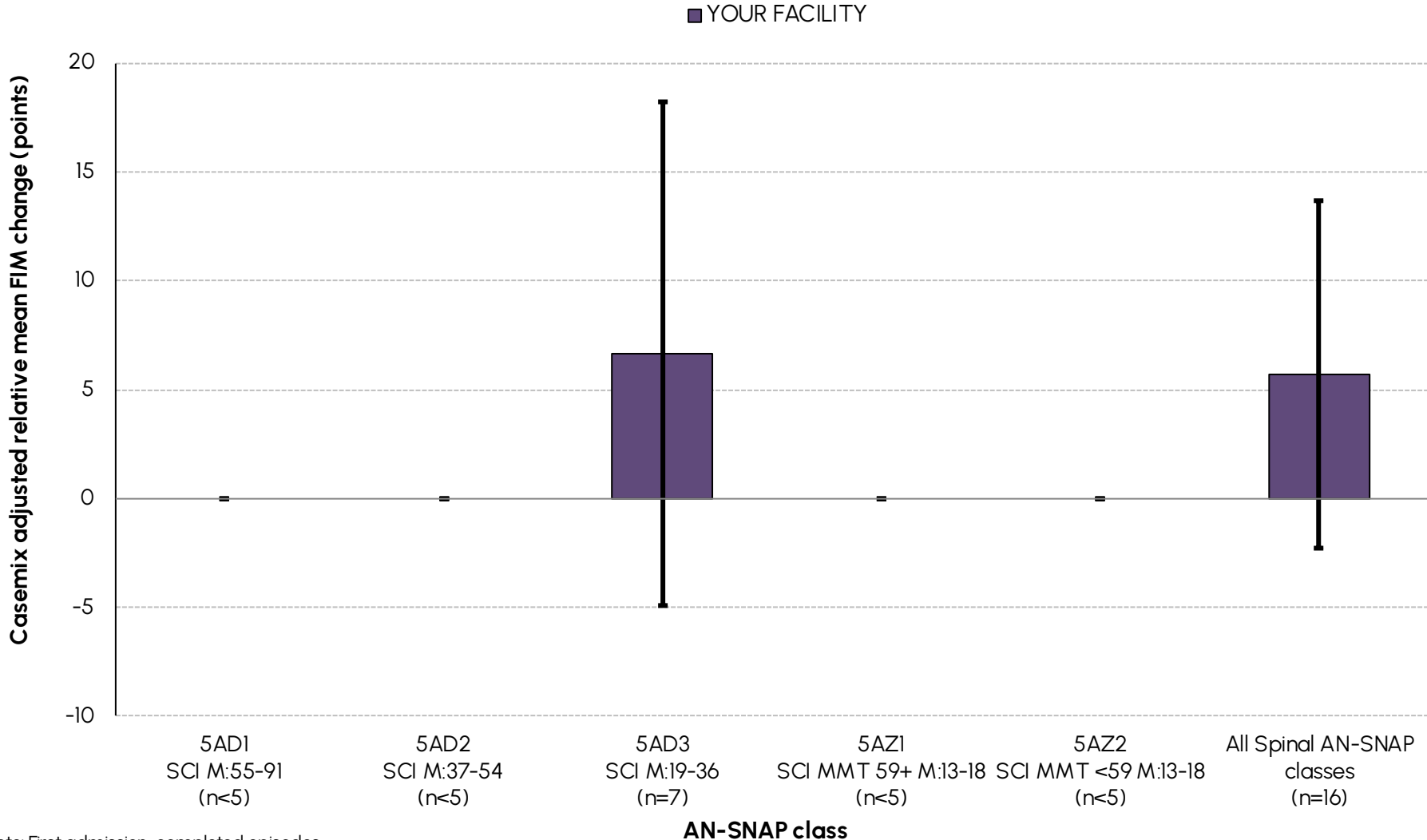
# TSCI casemix-adjusted\* relative mean FIM change by AN-SNAP class



Note: First admission, completed episodes

\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

# NTSCI casemix-adjusted\* relative mean FIM change by AN-SNAP class

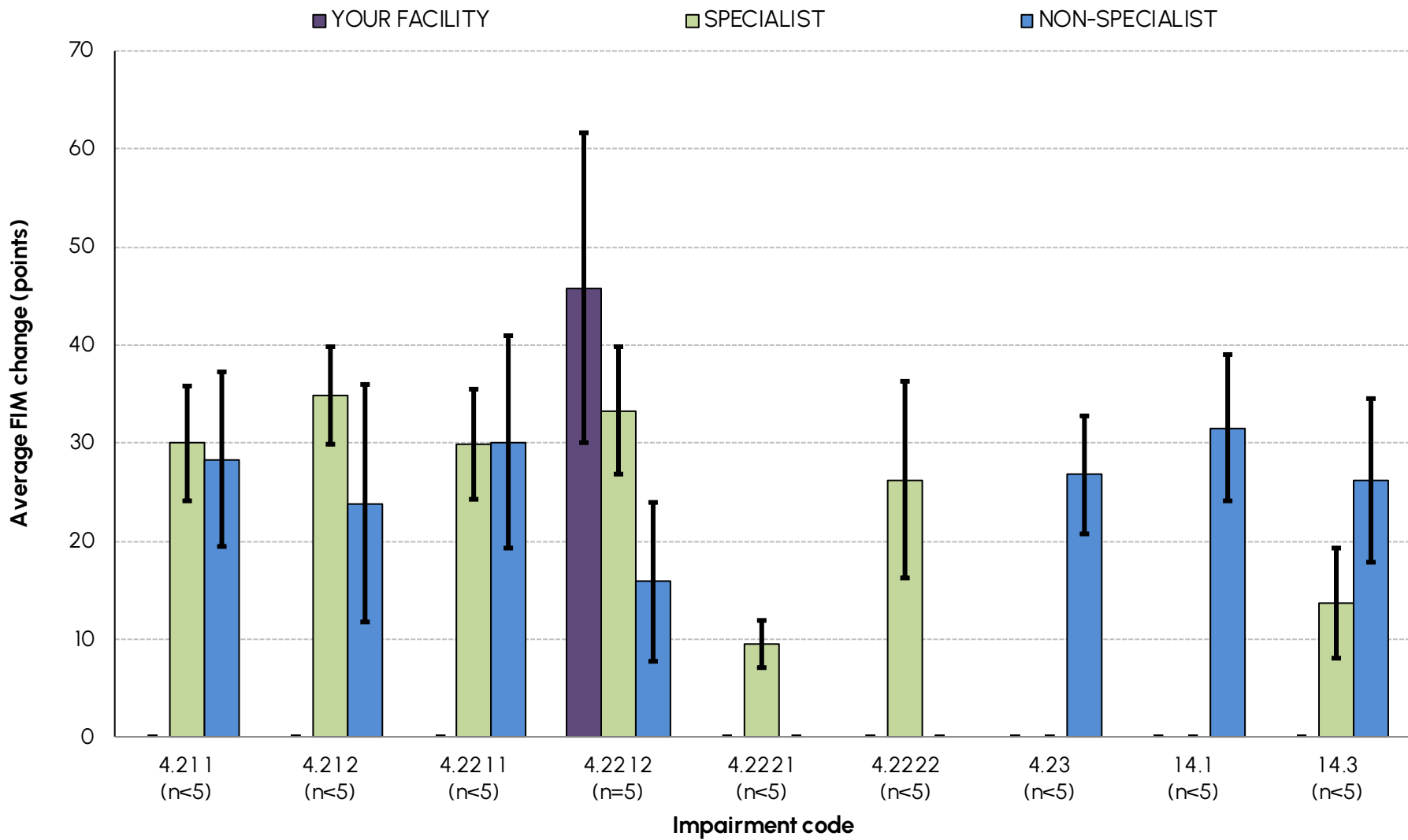


Note: First admission, completed episodes

\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

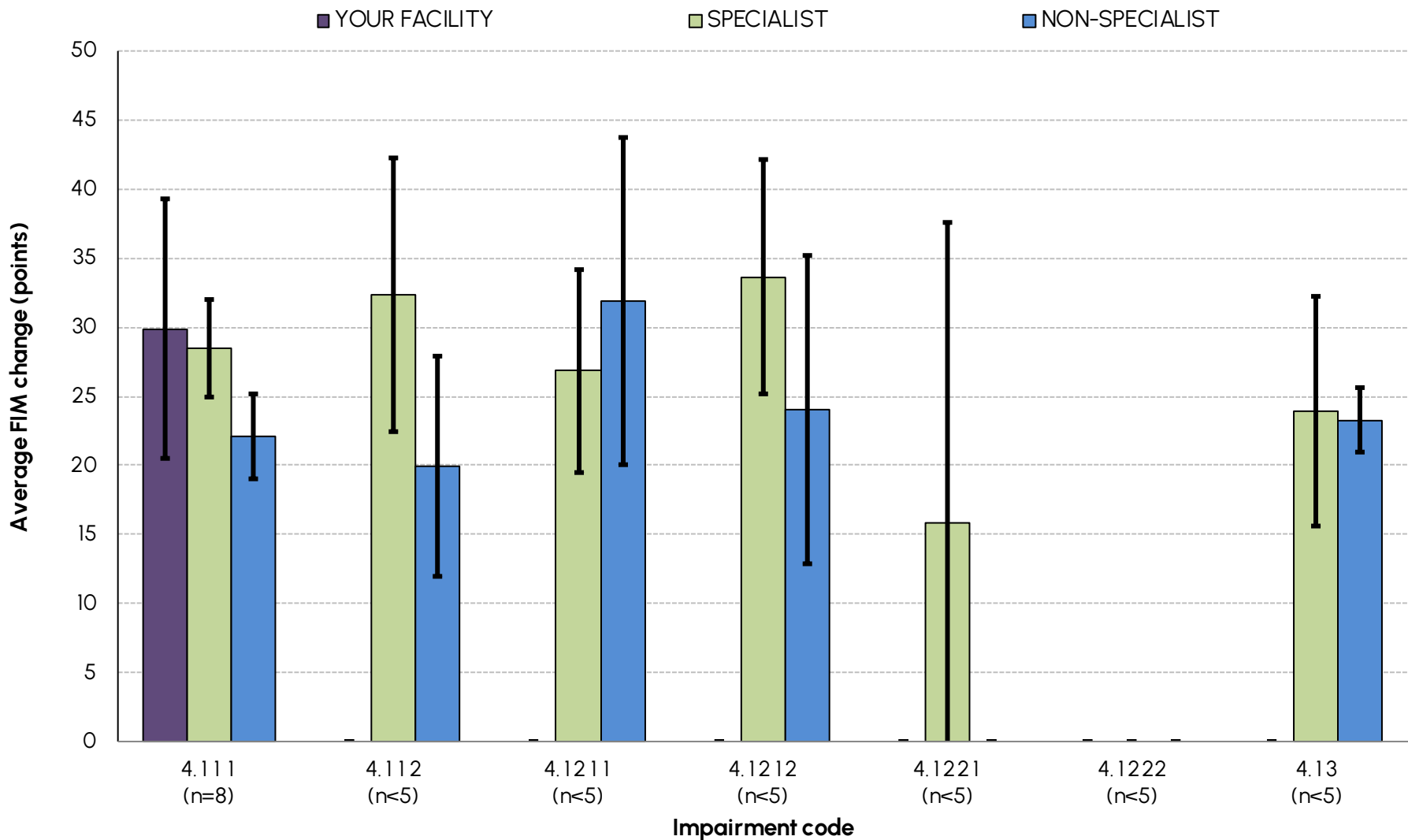


# TSCI average FIM change by impairment



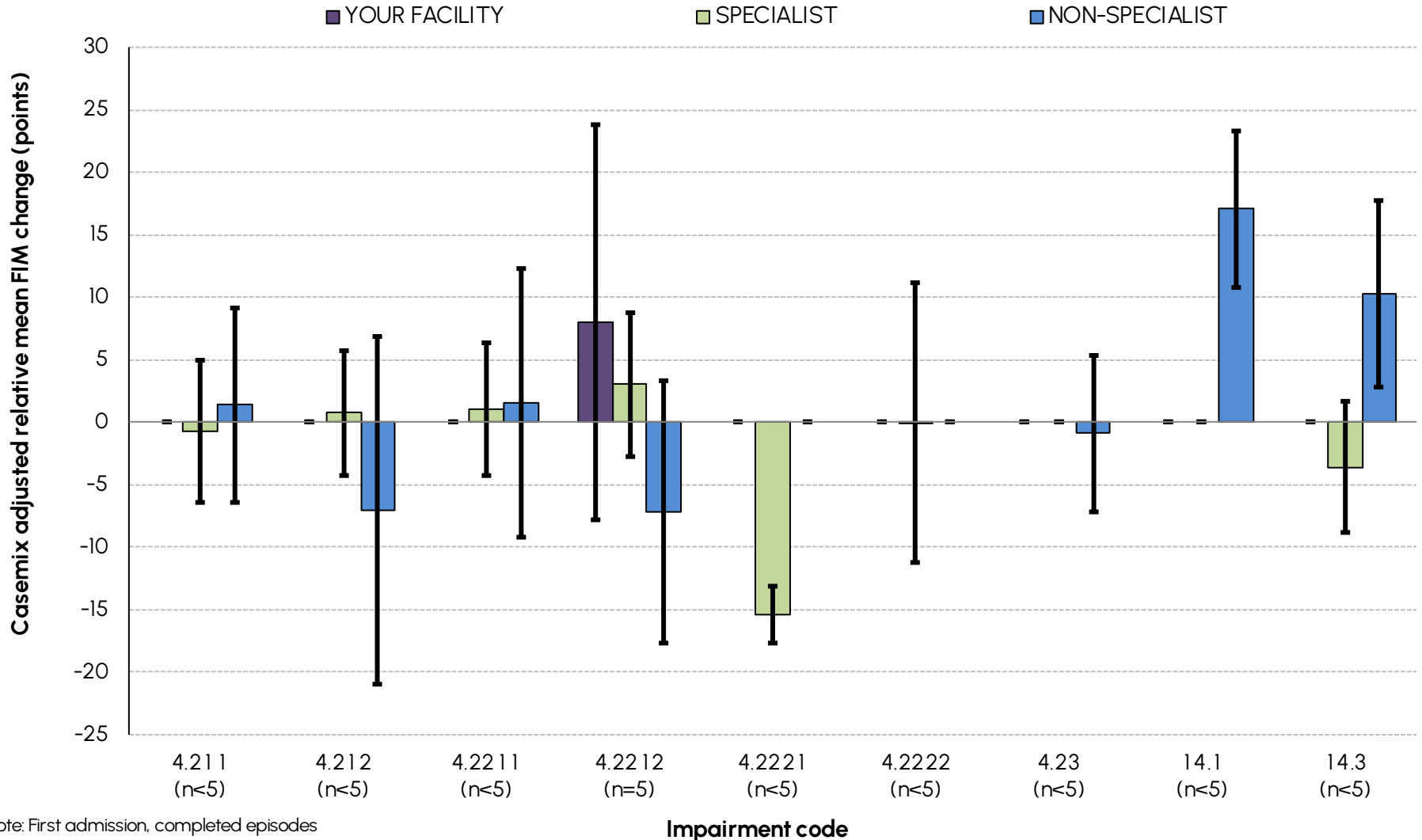
Note: First admission, completed episodes

# NTSCI average FIM change by impairment



Note: First admission, completed episodes

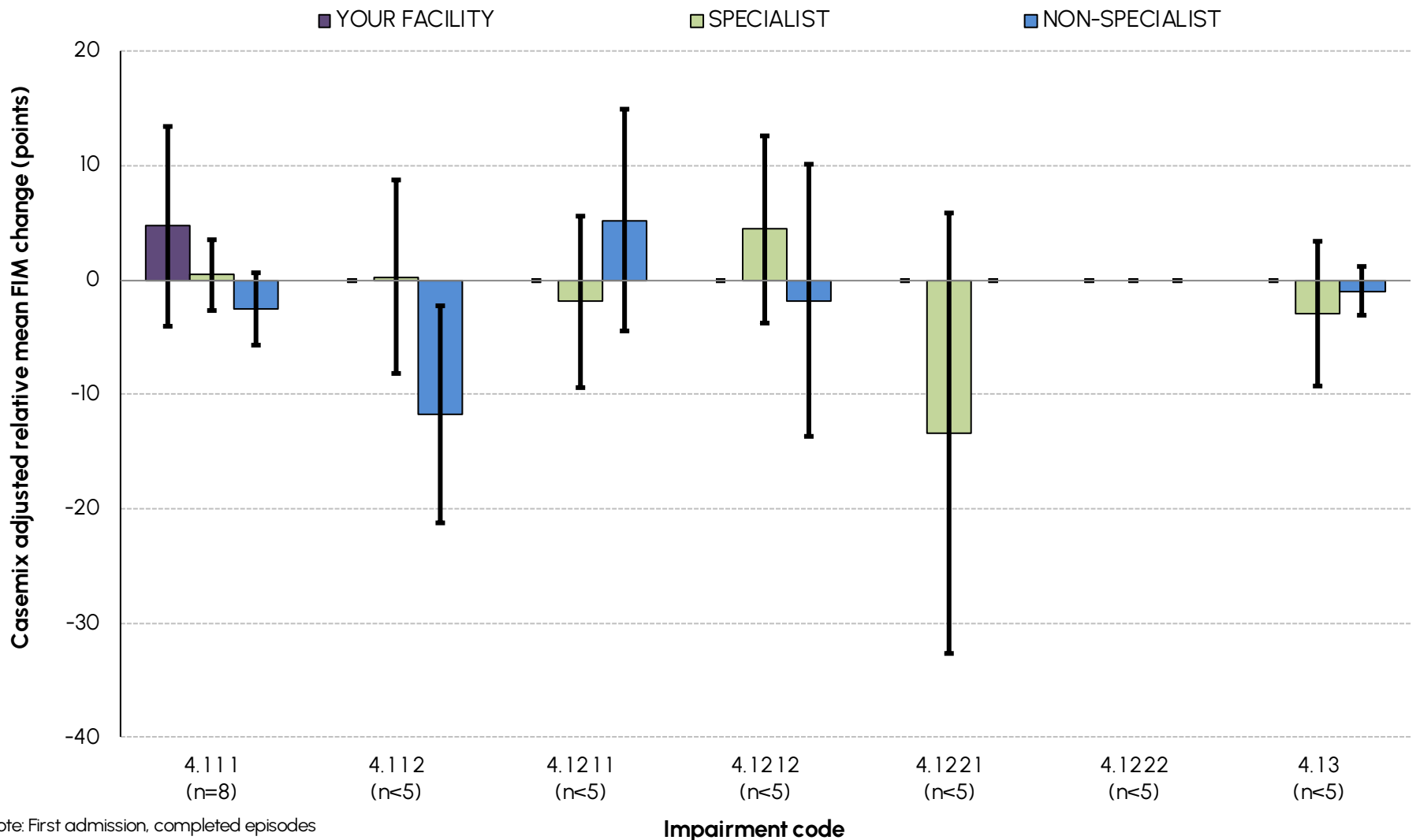
# TSCI casemix-adjusted\* relative mean FIM change by impairment



Note: First admission, completed episodes

\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

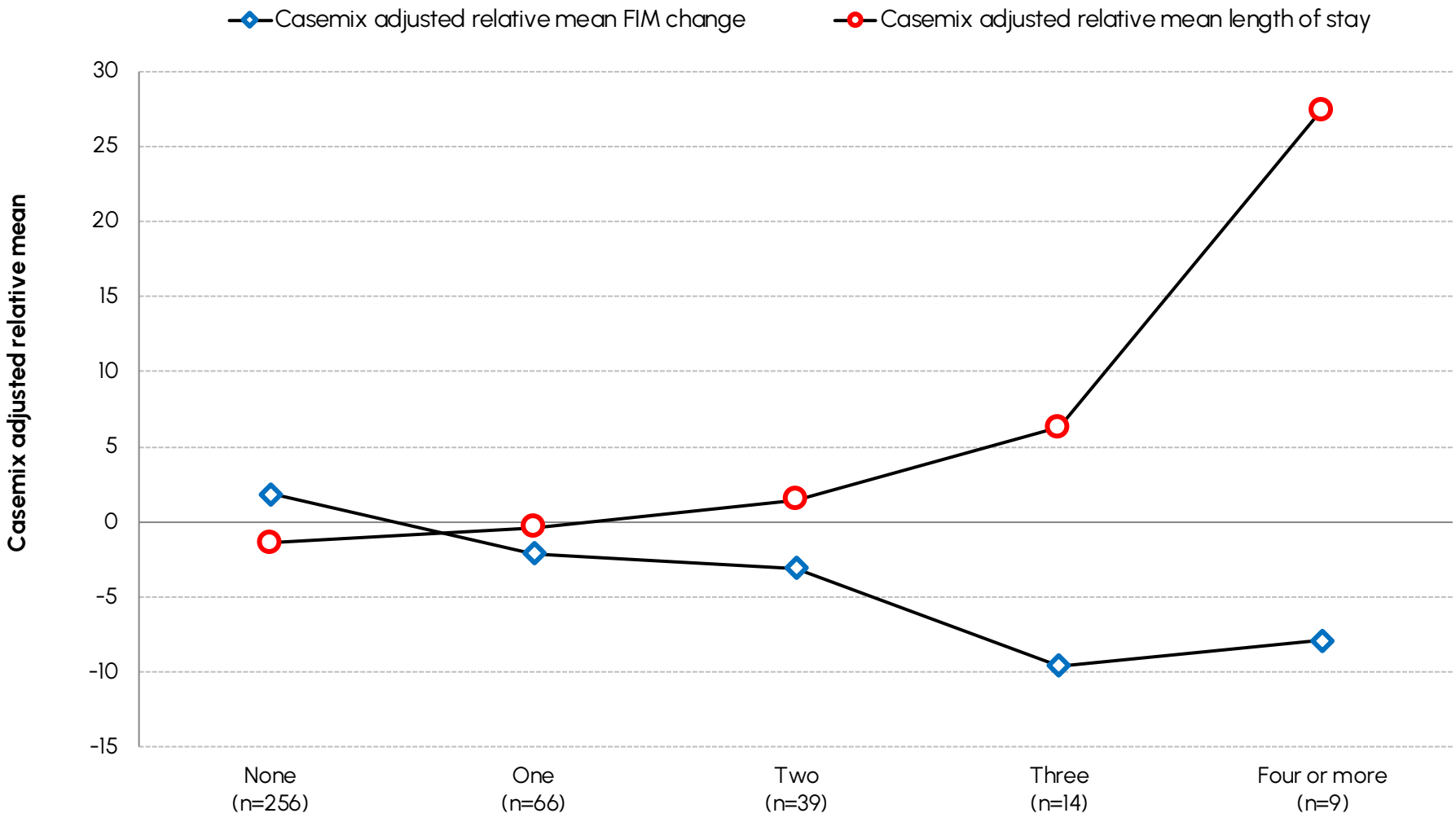
# NTSCI casemix-adjusted\* relative mean FIM change by impairment



Note: First admission, completed episodes

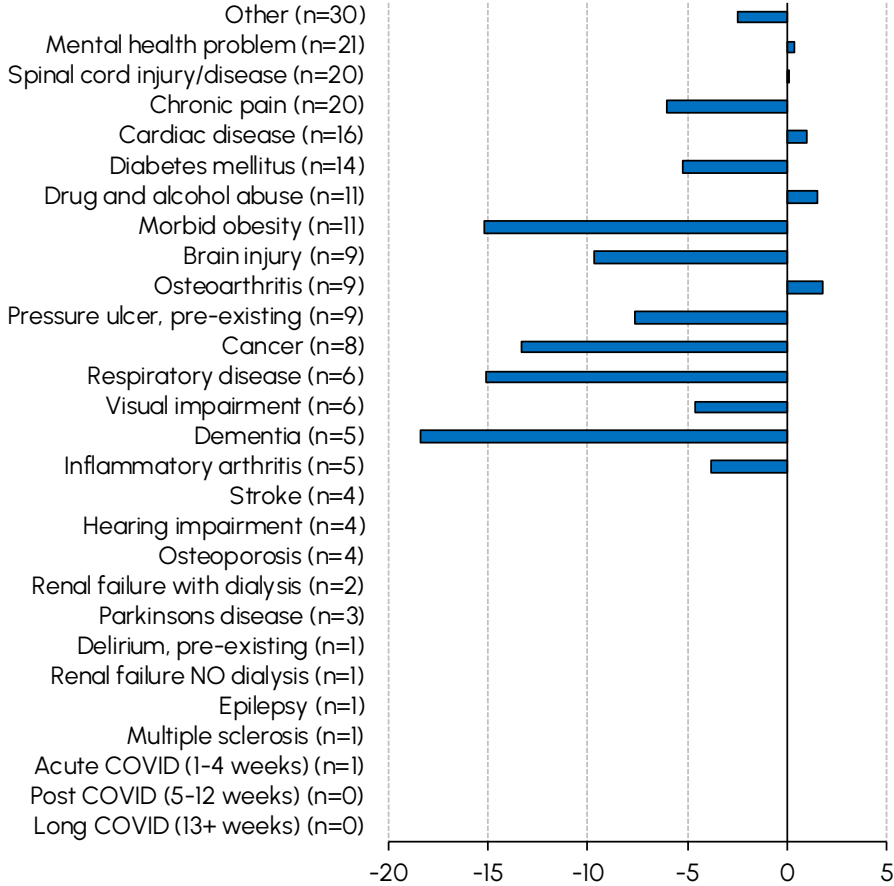
\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

# Casemix-adjusted\* relative mean length of stay and FIM change by number of comorbidities

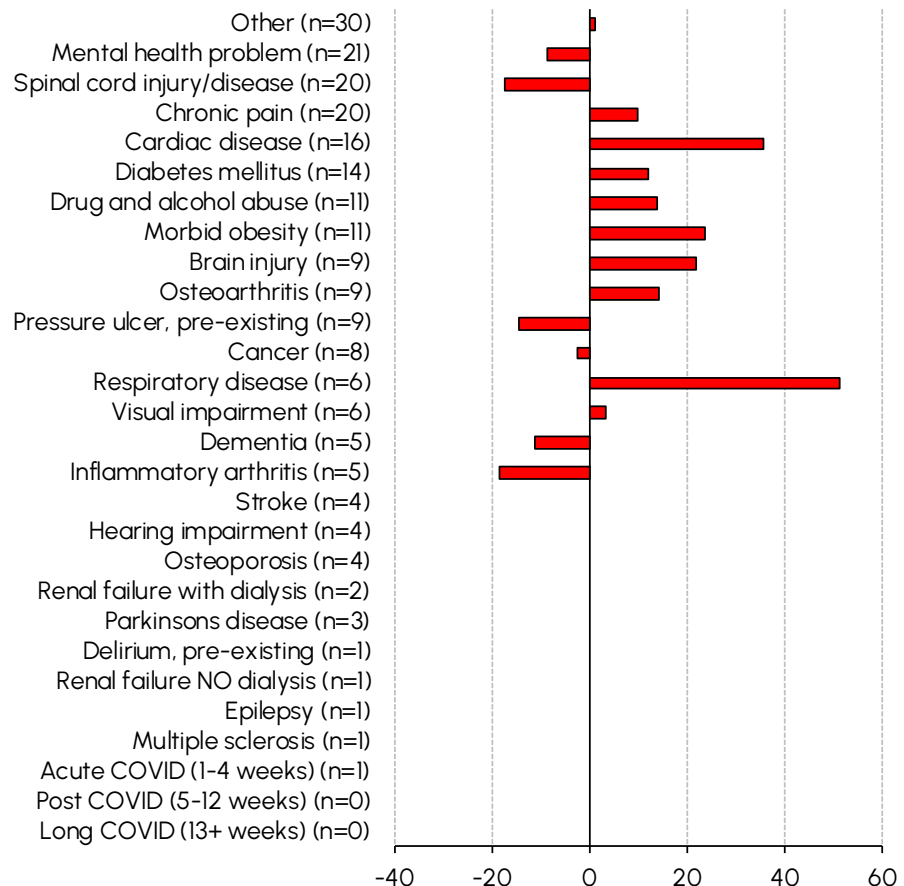


Note: First admission, completed episodes  
 \*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

# Casemix-adjusted\* relative mean length of stay and FIM change by type of comorbidity



Casemix adjusted relative mean FIM change — SPECIALIST

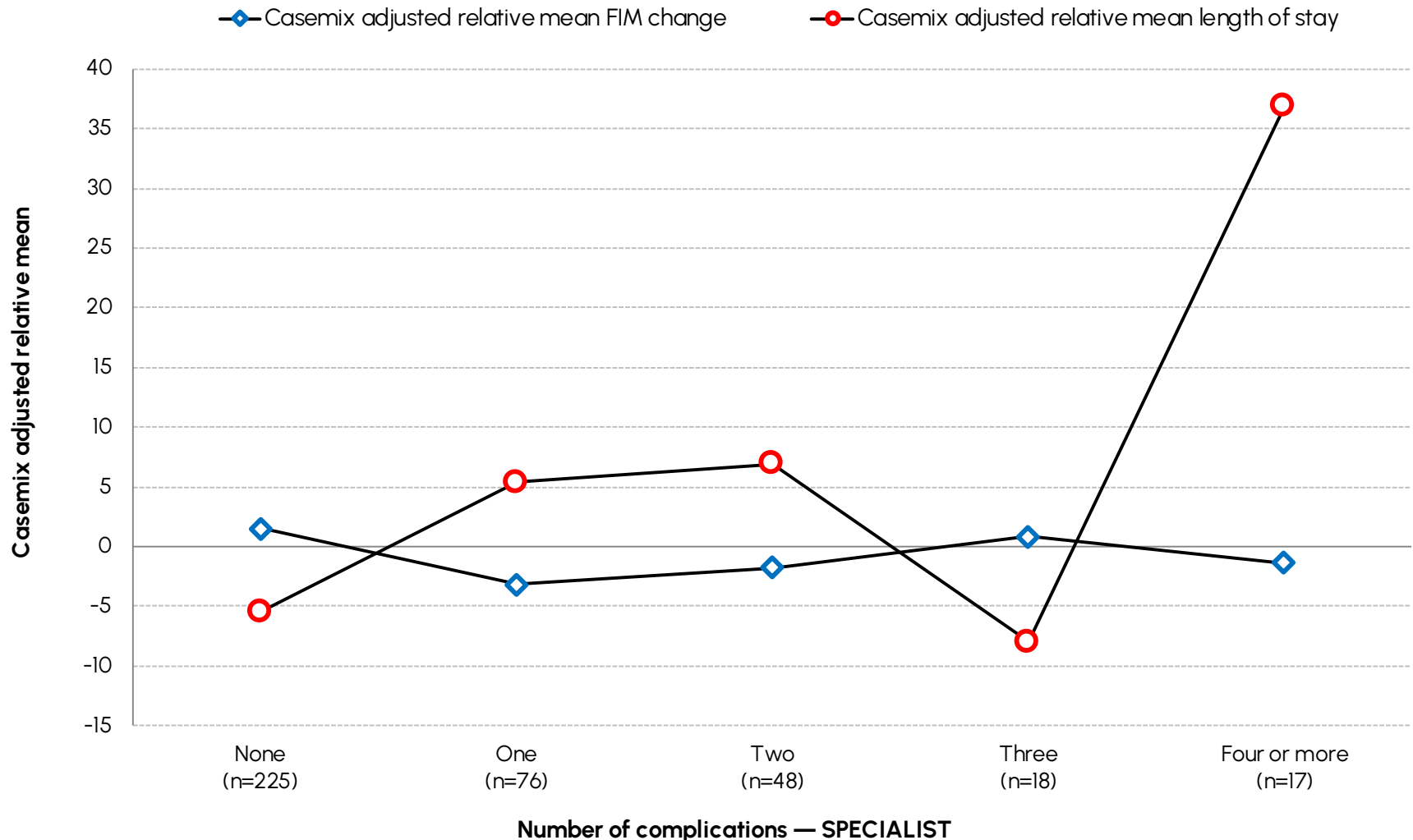


Casemix adjusted relative mean LOS — SPECIALIST

Note: First admission, completed episodes

\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

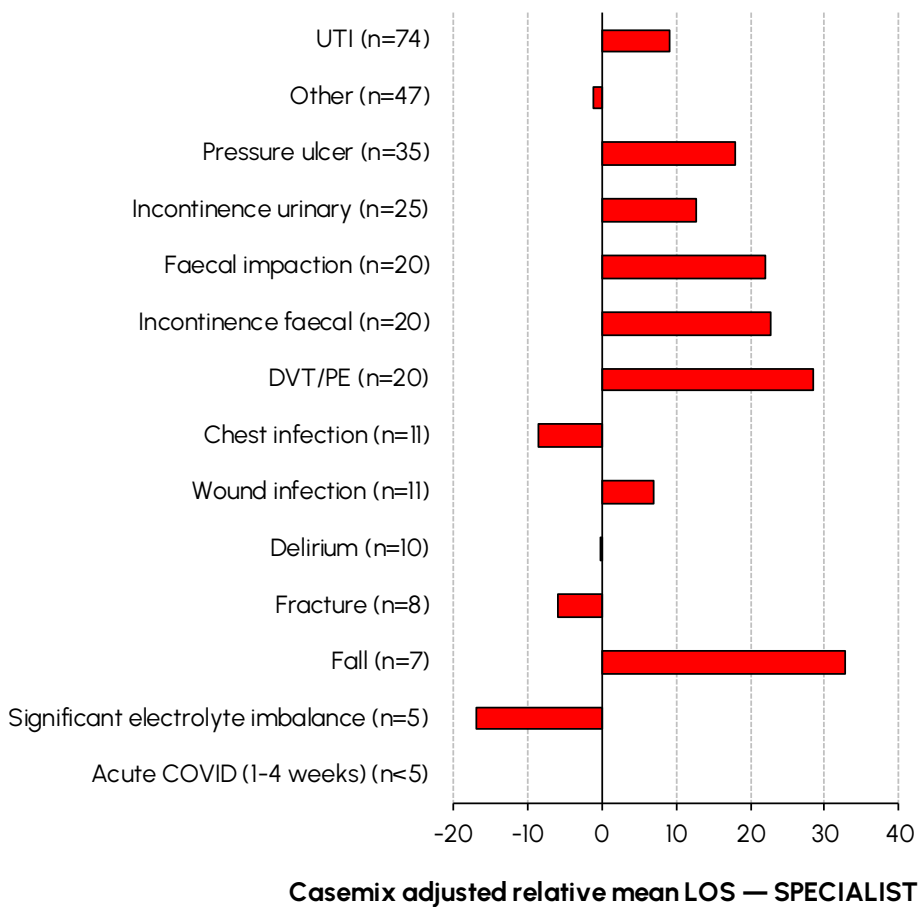
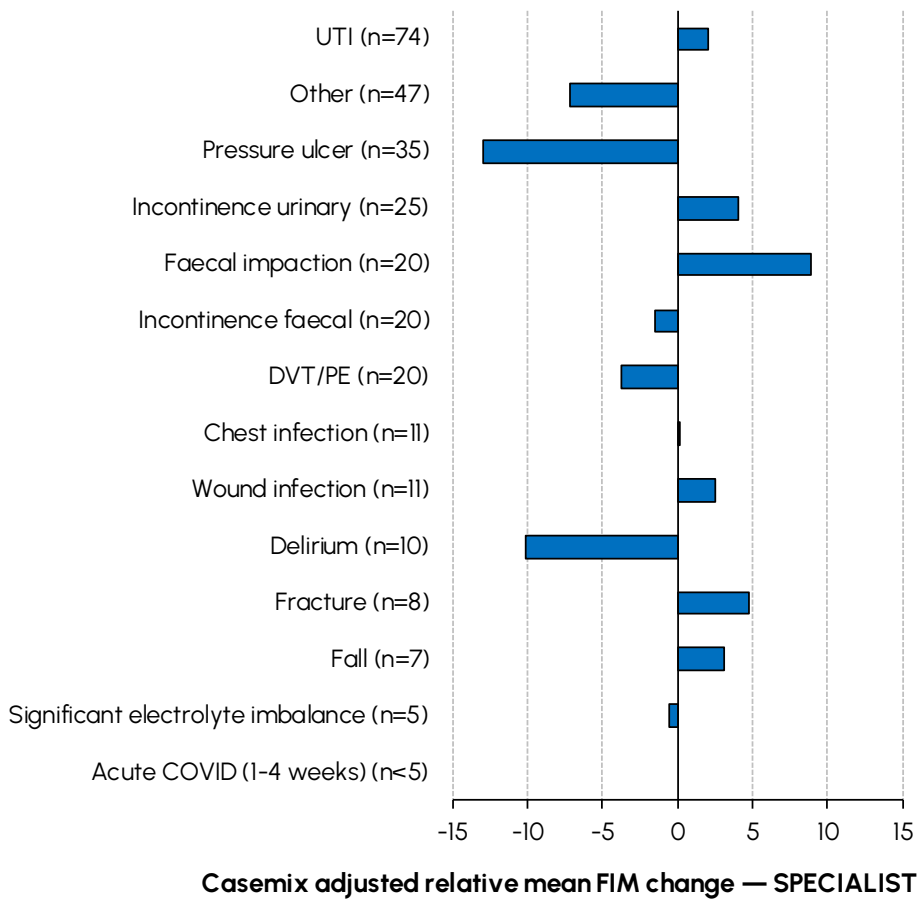
# Casemix-adjusted\* relative mean length of stay and FIM change by number of complications



Note: First admission, completed episodes

\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI

# Casemix-adjusted\* relative mean length of stay and FIM change by type of complication



Note: First admission, completed episodes

\*Casemix-adjustment uses specialist unit first admissions calculated separately for TSCI and NTSCI





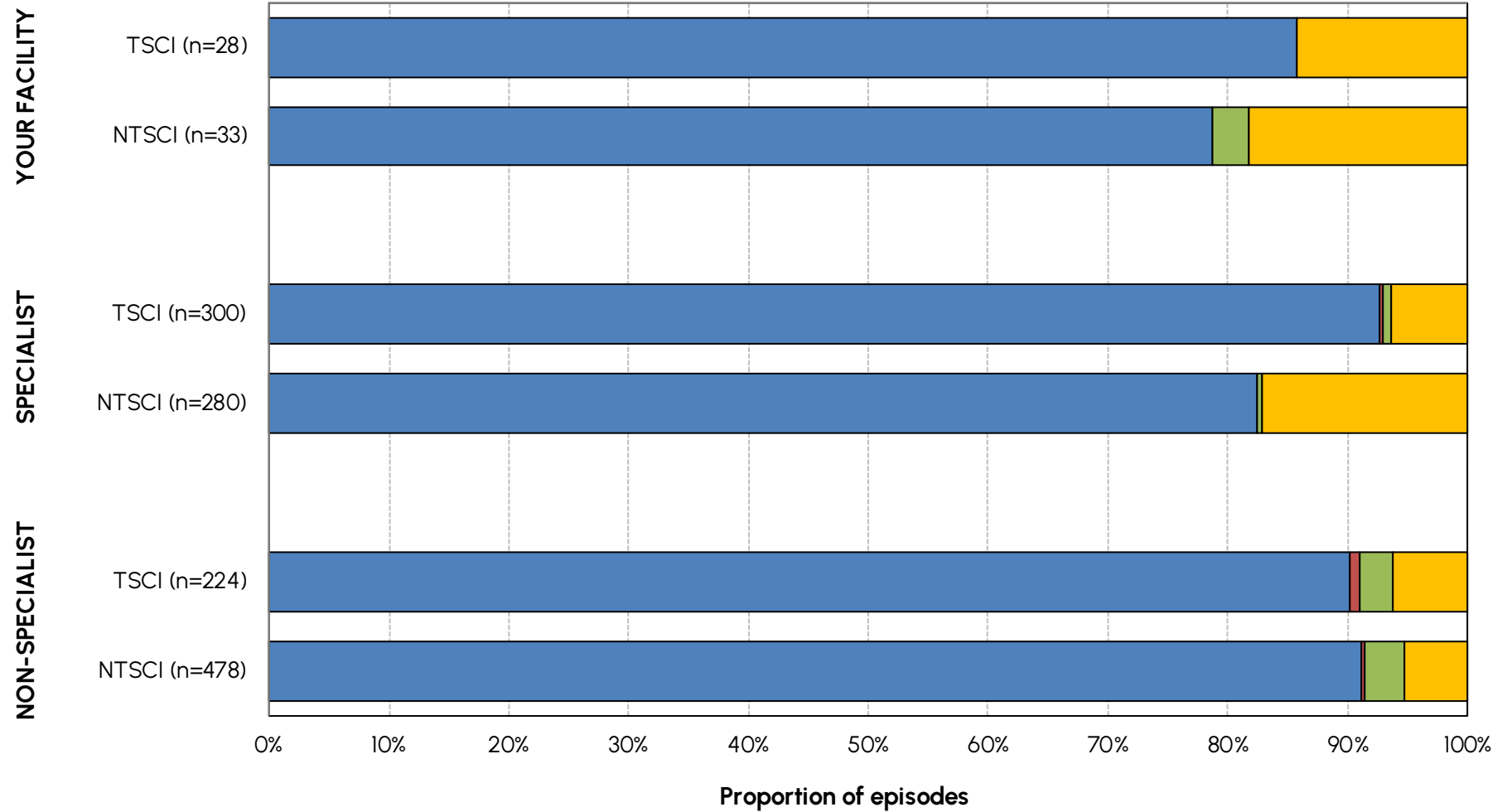
# Explanatory data



# Type of accommodation prior to impairment

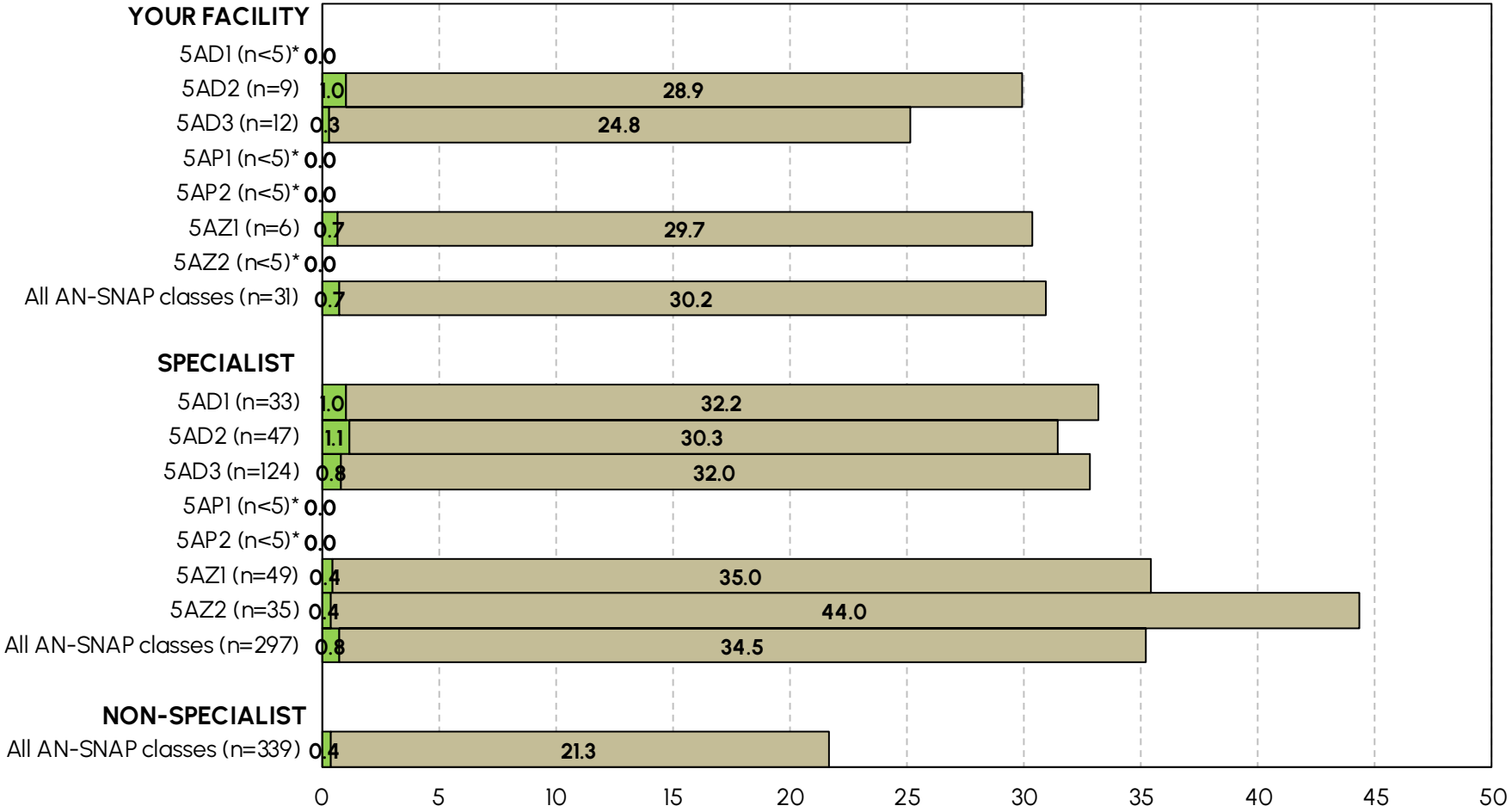


■ Private Residence    
 ■ Rest home (NZ only)    
 ■ Residential Aged Care (AU) / 24hr Nursing Care (NZ)    
 ■ Other



# Days from injury to episode start with an acute admission by AN-SNAP class

■ Days from injury to acute admission     
 ■ Days from acute admission to rehabilitation episode start



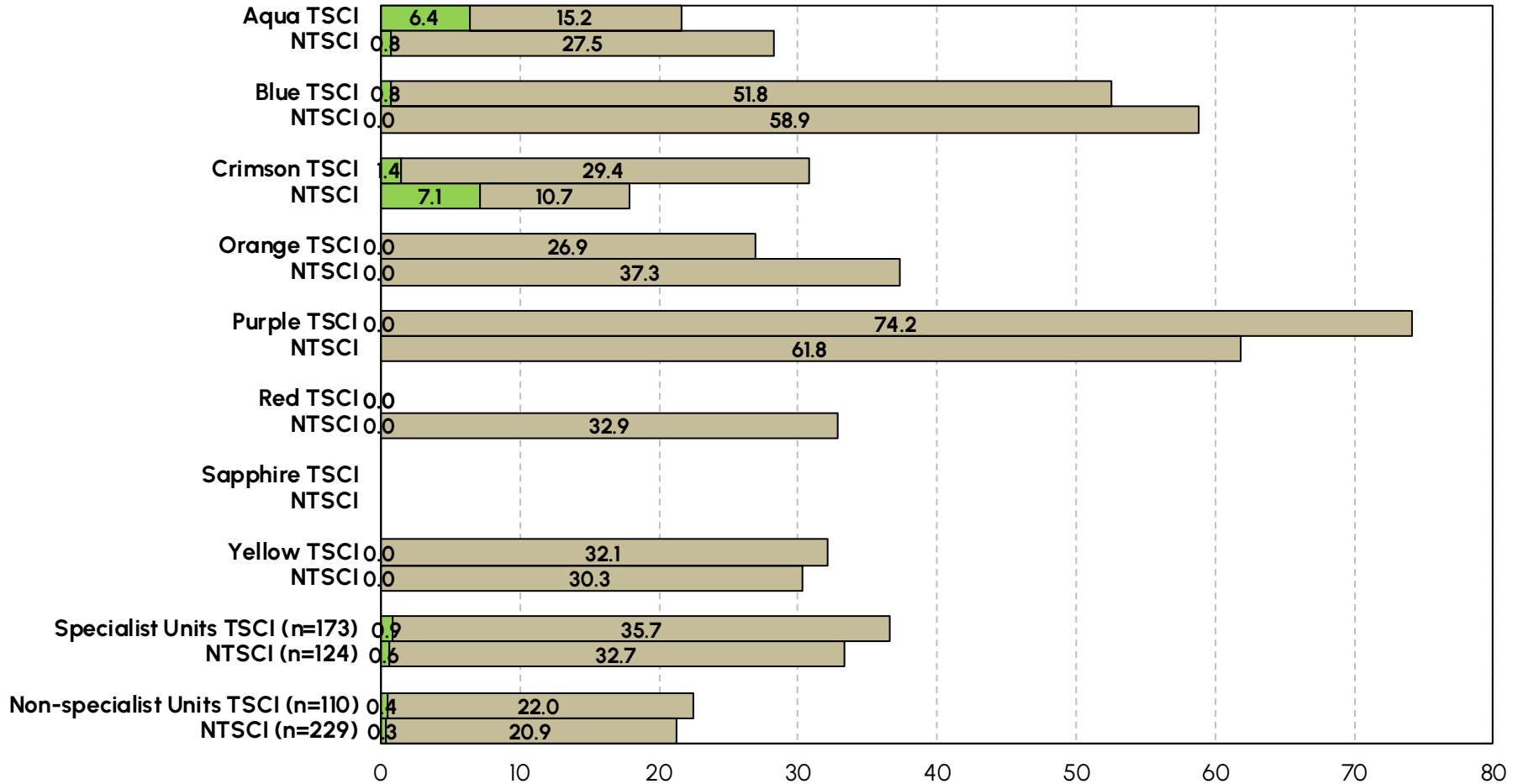
\*No data provided when less than 5 episodes have dates

Note: First admission episodes

Average number of days

# Days from injury to episode start with an acute admission by specialist facility

■ Days from injury to acute admission     
 ■ Days from acute admission to rehabilitation episode start

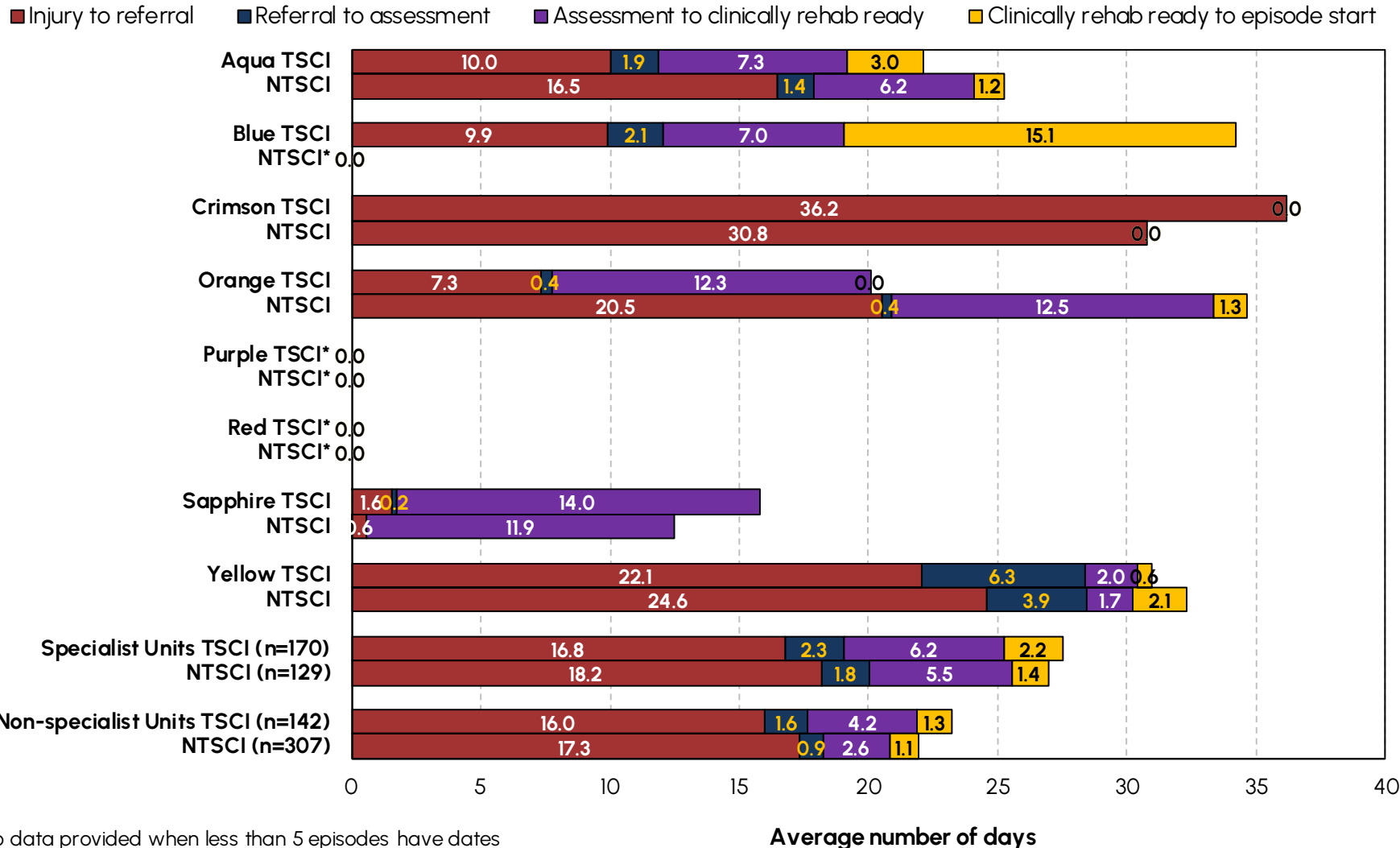


\*No data provided when less than 5 episodes have dates

Note: First admission episodes

Average number of days

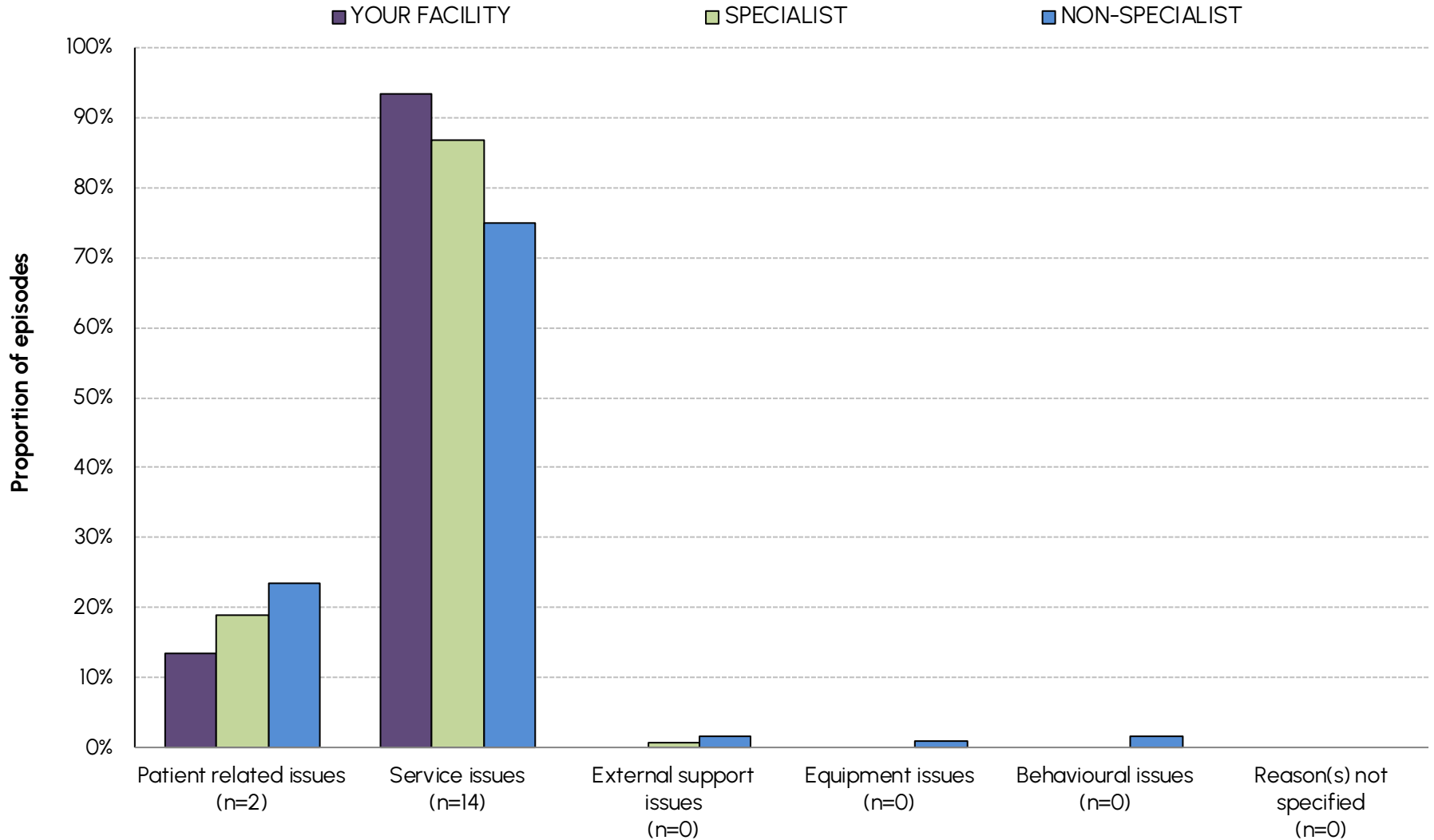
# Days from injury to episode start by specialist facility



\*No data provided when less than 5 episodes have dates

Note: First admission episodes, where each date supplied is valid

# Reason for delay in episode start

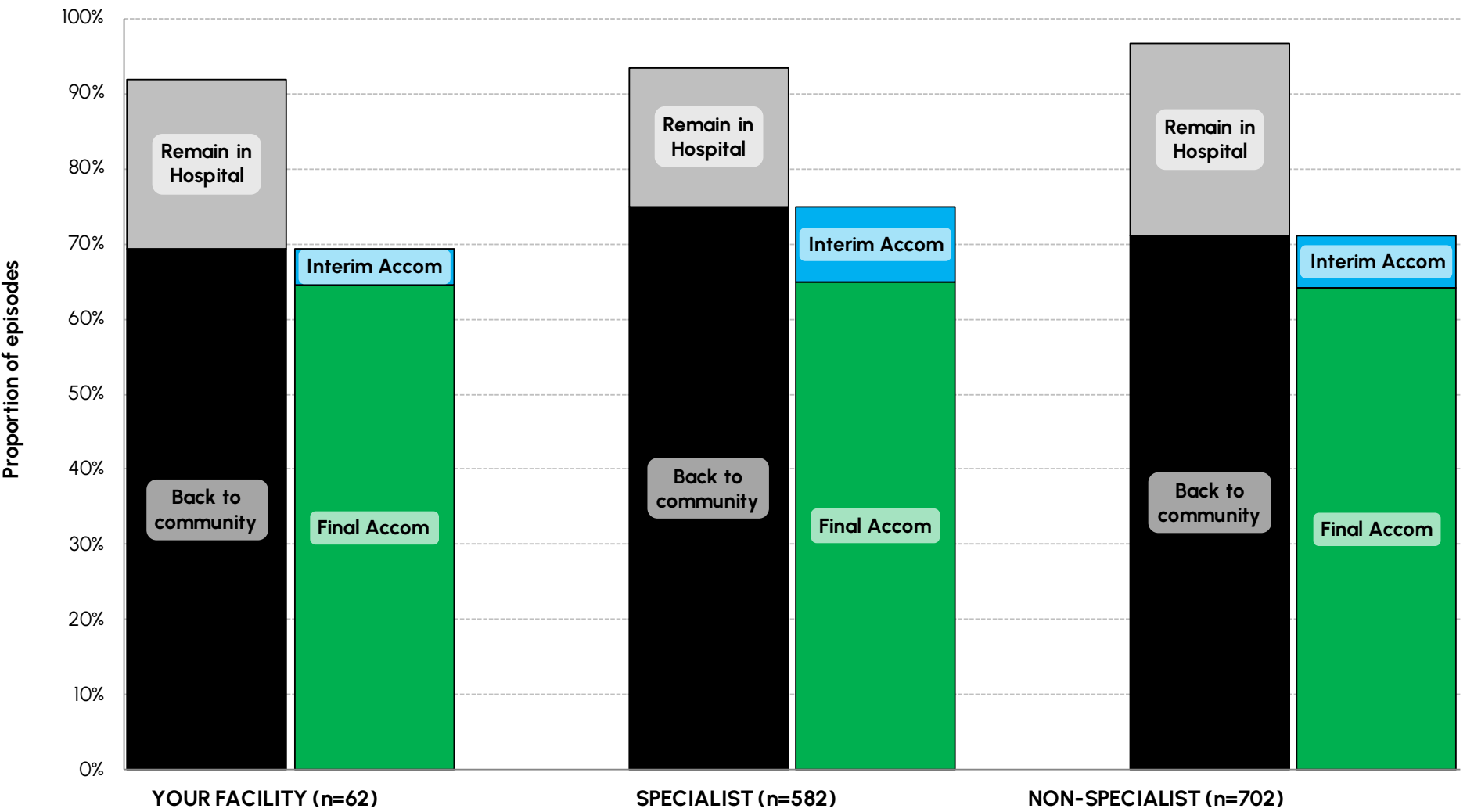


# Delays in episode start

Delay in episode start	YOUR FACILITY		SPECIALIST		NON-SPECIALIST	
	No.	%	No.	%	No.	%
No delay	37	71.2	389	74.0	538	81.3
Delay in episode start	15	28.8	137	26.0	124	18.7
Missing	10		56		40	
<b>All episodes</b>	<b>62</b>	<b>100.0</b>	<b>582</b>	<b>100.0</b>	<b>702</b>	<b>100.0</b>

Delay in episode start	YOUR FACILITY		SPECIALIST		NON-SPECIALIST	
	No.	%	No.	%	No.	%
Patient related issues	2	13.3	26	19.0	29	23.4
Service issues	14	93.3	119	86.9	93	75.0
External support issues	0	0.0	1	0.7	2	1.6
Equipment issues	0	0.0	0	0.0	1	0.8
Behavioural issues	0	0.0	0	0.0	2	1.6
Reason(s) not specified	0	0.0	0	0.0	0	0.0

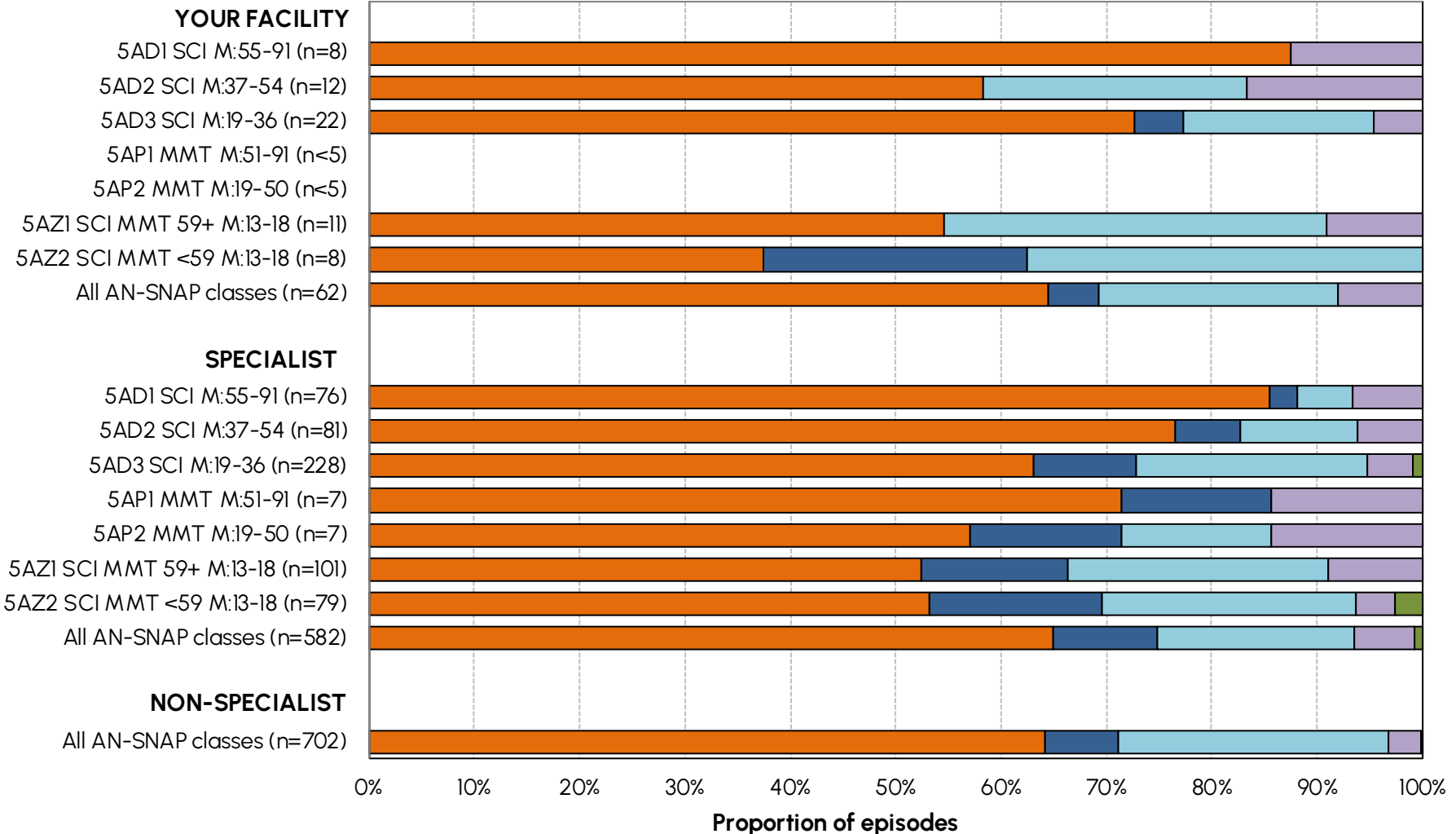
# Discharge destination





# Discharge destination by AN-SNAP class

■ Final Accommodation    
 ■ Interim Accommodation    
 ■ Remaining in Hospital    
 ■ Other    
 ■ Unknown



# Discharge destination by AN-SNAP class

AN-SNAP class	Final	Interim	Remaining	Other	Unknown	Final	Interim	Remaining	Other	Unknown	
	Accom	Accom	in Hospital			Accom	Accom	in Hospital			
	No.					%					
<b>Your Facility</b>											
5AD1 SCI M:55-91	7	0	0	1	0	87.5	0.0	0.0	12.5	0.0	
5AD2 SCI M:37-54	7	0	3	2	0	58.3	0.0	25.0	16.7	0.0	
5AD3 SCI M:19-36	16	1	4	1	0	72.7	4.5	18.2	4.5	0.0	
5AP1 MMT M:51-91	0	0	0	0	0	—	—	—	—	—	
5AP2 MMT M:19-50	1	0	0	0	0	100.0	0.0	0.0	0.0	0.0	
5AZ1 SCI MMT 59+ M:13-18	6	0	4	1	0	54.5	0.0	36.4	9.1	0.0	
5AZ2 SCI MMT <59 M:13-18	3	2	3	0	0	37.5	25.0	37.5	0.0	0.0	
<b>All AN-SNAP classes</b>	<b>40</b>	<b>3</b>	<b>14</b>	<b>5</b>	<b>0</b>	<b>64.5</b>	<b>4.8</b>	<b>22.6</b>	<b>8.1</b>	<b>0.0</b>	
<b>SPECIALIST Units</b>	<b>378</b>	<b>58</b>	<b>108</b>	<b>34</b>	<b>4</b>	<b>64.9</b>	<b>10.0</b>	<b>18.6</b>	<b>5.8</b>	<b>0.7</b>	
<b>NON-SPECIALIST Units</b>	<b>450</b>	<b>49</b>	<b>180</b>	<b>22</b>	<b>1</b>	<b>64.1</b>	<b>7.0</b>	<b>25.6</b>	<b>3.1</b>	<b>0.1</b>	

# Discharge destination by TSCI and NTSCI

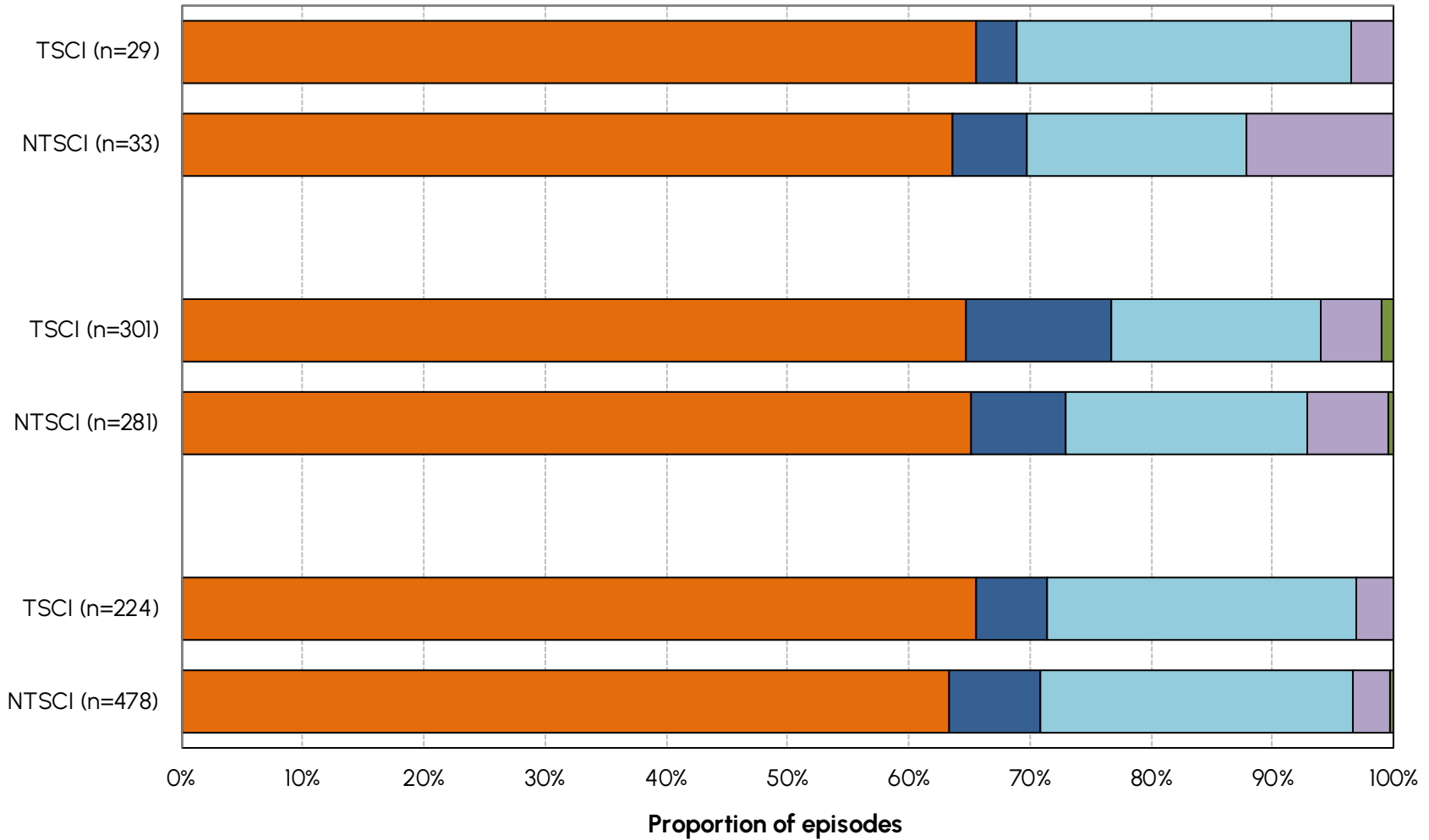


■ Final Accommodation    
 ■ Interim Accommodation    
 ■ Remaining in Hospital    
 ■ Other    
 ■ Unknown

YOUR FACILITY

SPECIALIST

NON-SPECIALIST



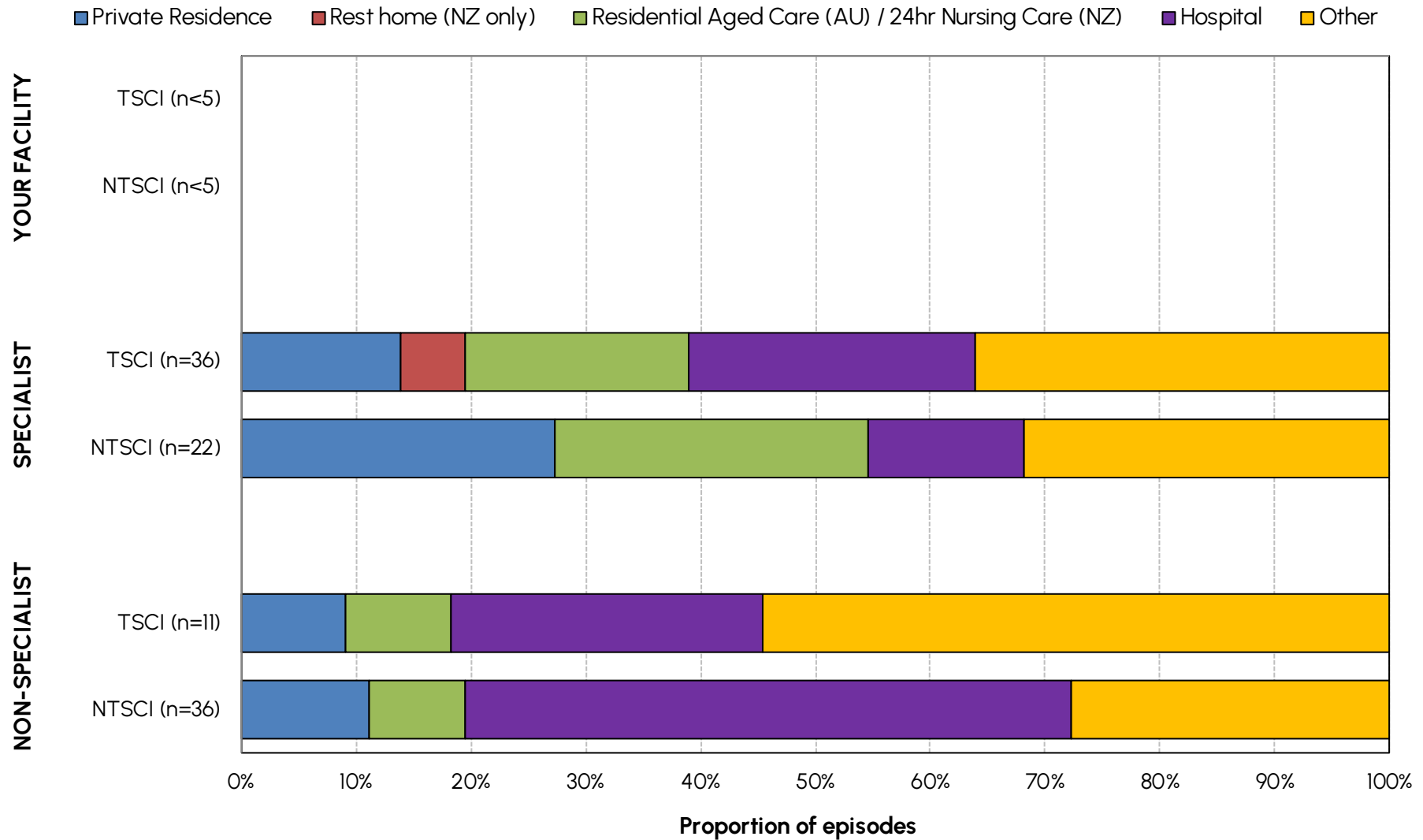
# Employment status prior and post spinal cord injury



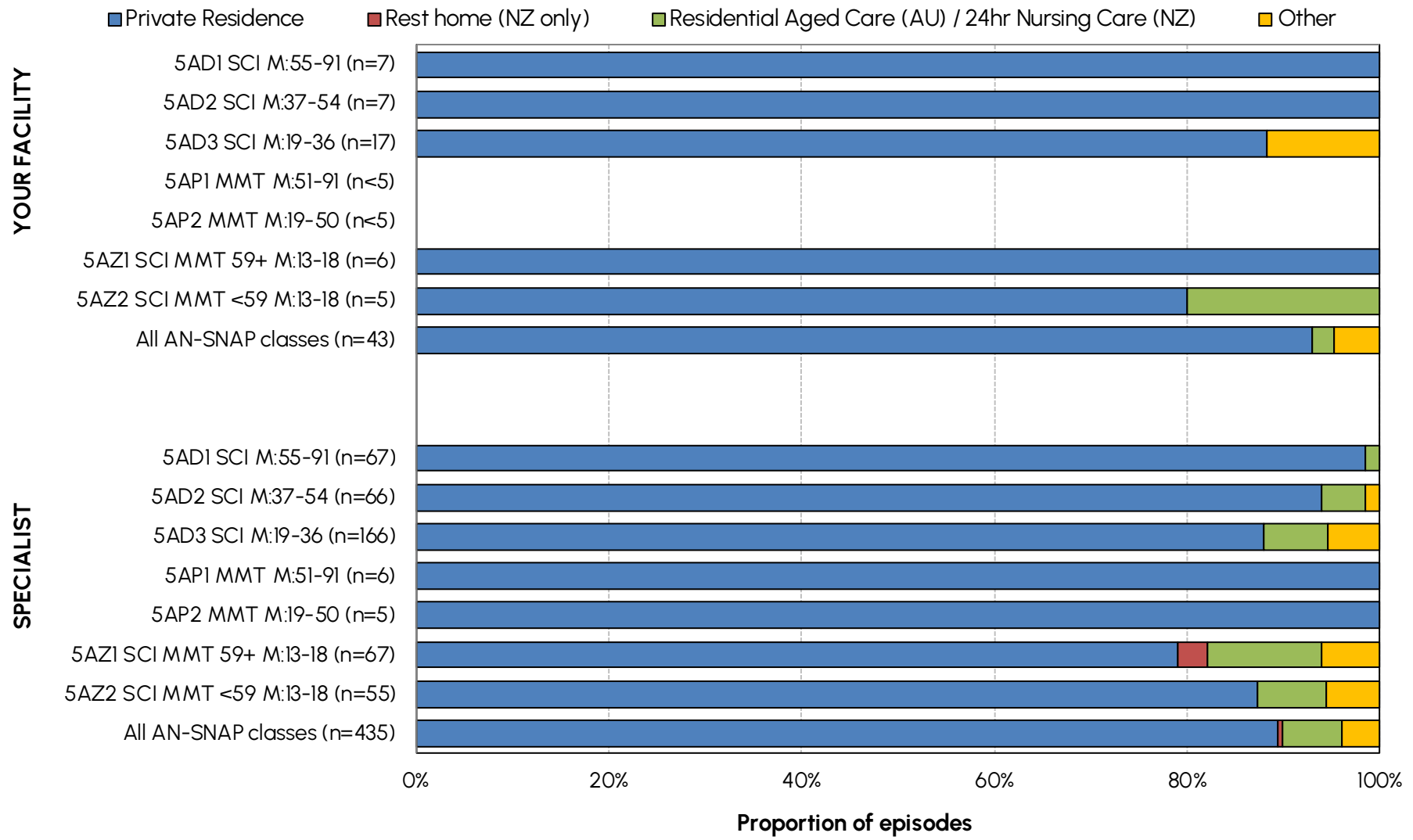
# Employment status prior and post spinal cord injury

Employment status	YOUR FACILITY		SPECIALIST		NON-SPECIALIST	
	No.	%	No.	%	No.	%
<b><u>Prior to this spinal cord injury:</u></b>						
Employed	28	46.7	232	40.1	179	26.5
Unemployed	4	6.7	74	12.8	58	8.6
Student/child	0	0.0	18	3.1	12	1.8
Not in the labour force	14	23.3	104	18.0	92	13.6
Retired for age	13	21.7	130	22.5	271	40.1
Retired for disability	1	1.7	20	3.5	64	9.5
Not answered	2		4		26	
<b>Total</b>	<b>62</b>	<b>100.0</b>	<b>582</b>	<b>100.0</b>	<b>702</b>	<b>100.0</b>
<b><u>After discharge (if previously employed):</u></b>						
Same or similar job, same or similar hours	1	4.0	23	10.6	12	7.8
Same or similar job, reduced hours	2	8.0	14	6.5	24	15.6
Different job by choice	1	4.0	2	0.9	2	1.3
Different job due to reduced function	1	4.0	8	3.7	4	2.6
Not able to work	1	4.0	19	8.8	16	10.4
Chosen to retire	1	4.0	5	2.3	3	1.9
Too early to determine	18	72.0	146	67.3	93	60.4
Not answered	3		15		25	
<b>Total employed prior</b>	<b>28</b>	<b>100.0</b>	<b>232</b>	<b>100.0</b>	<b>179</b>	<b>100.0</b>

# Interim accommodation post discharge by TSCI and NTSCI



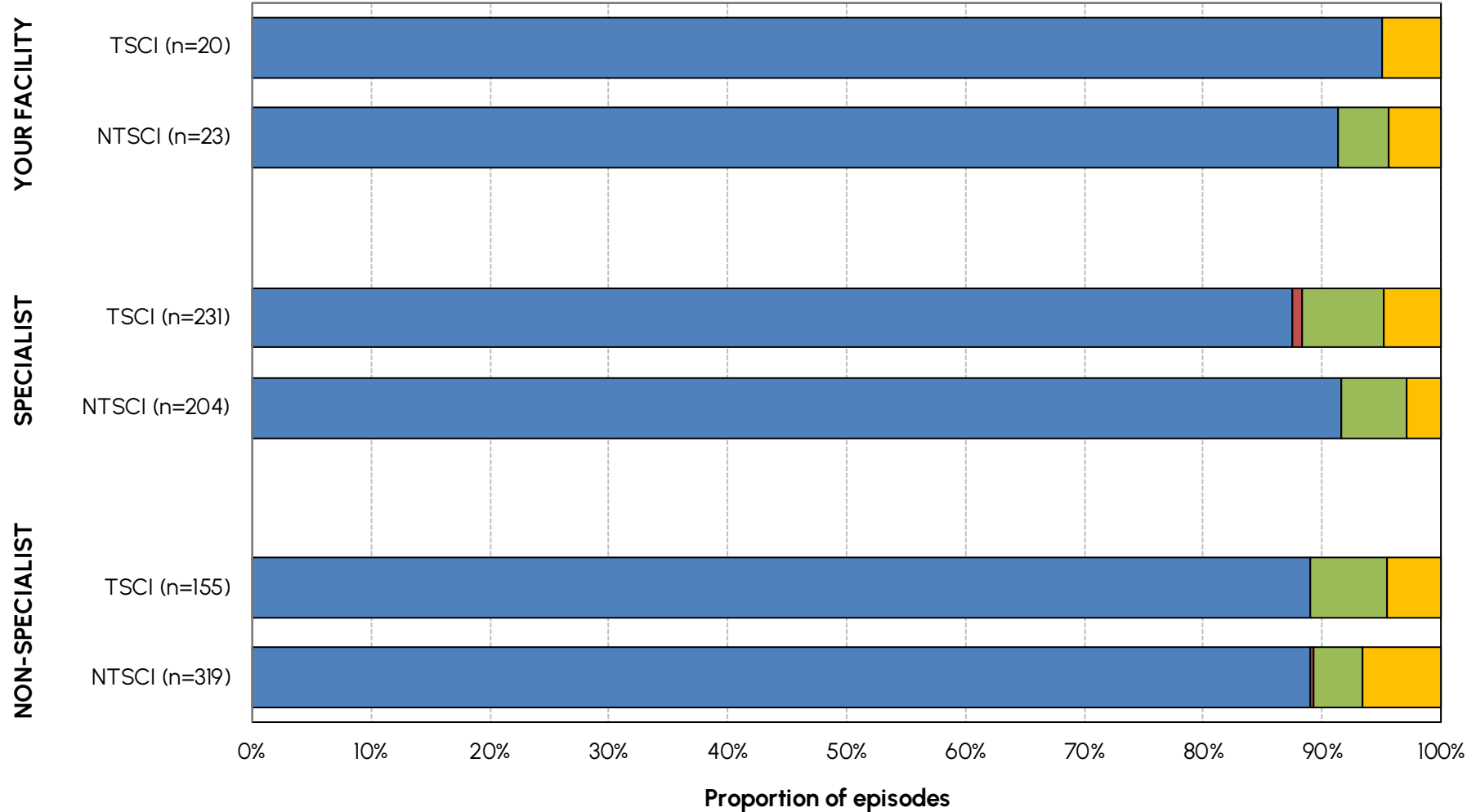
# Final accommodation post discharge by AN-SNAP class



# Final accommodation post discharge by TSCI and NTSCI

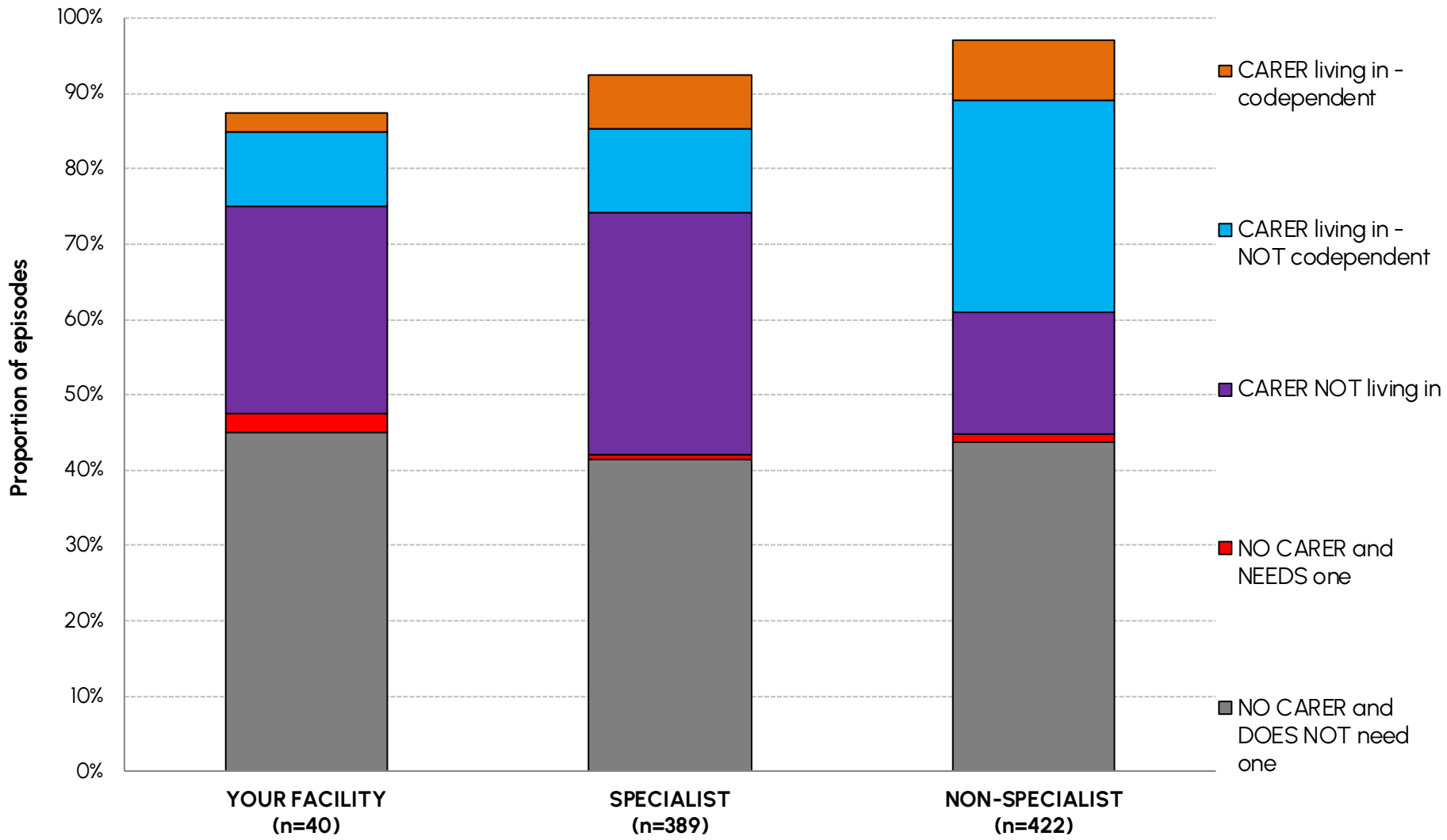


■ Private Residence    
 ■ Rest home (NZ only)    
 ■ Residential Aged Care (AU) / 24hr Nursing Care (NZ)    
 ■ Other



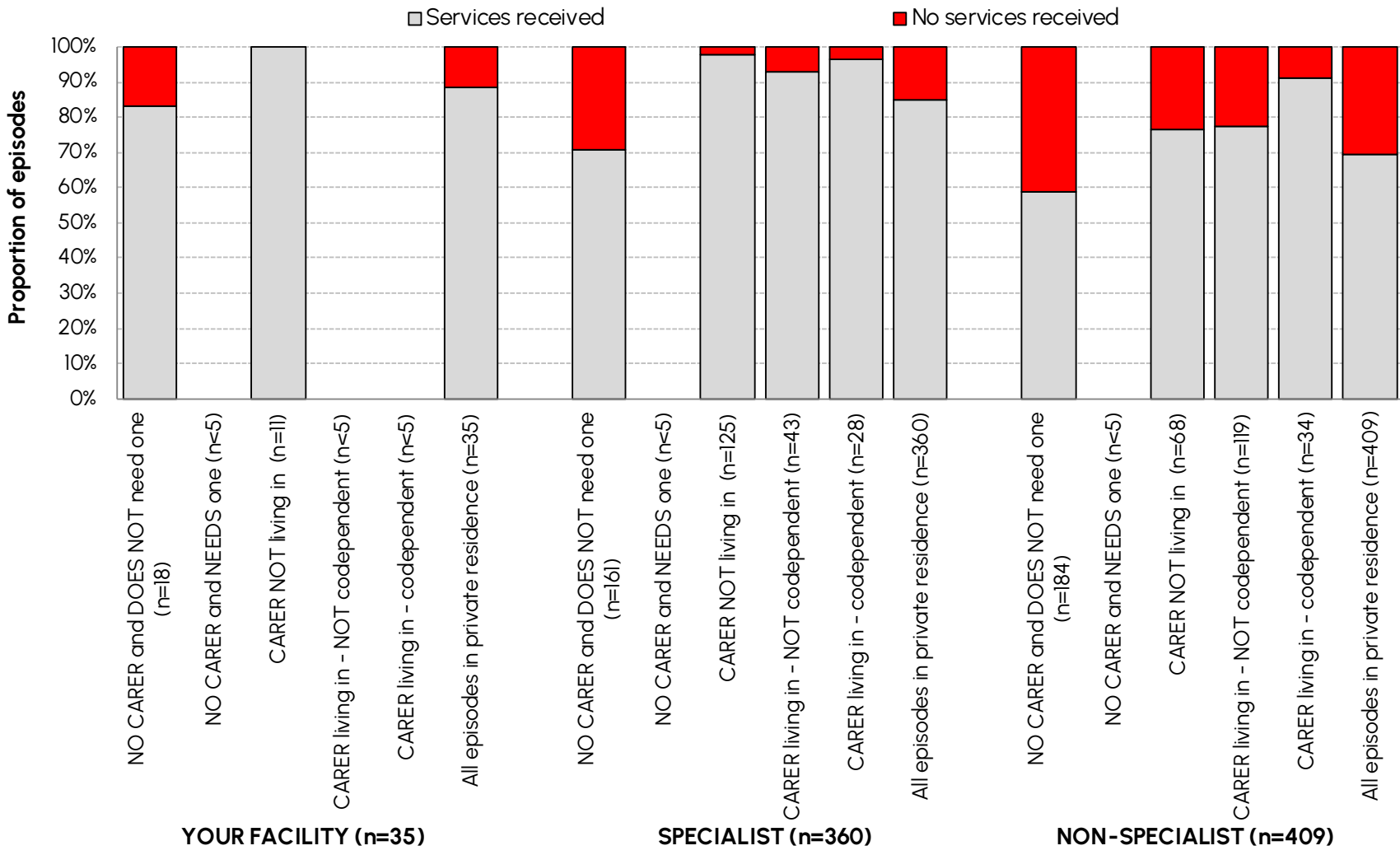


# Carer status post discharge



Note: Final accommodation is private residence.

# Any services received post discharge by carer status



Note: Final accommodation is private residence.

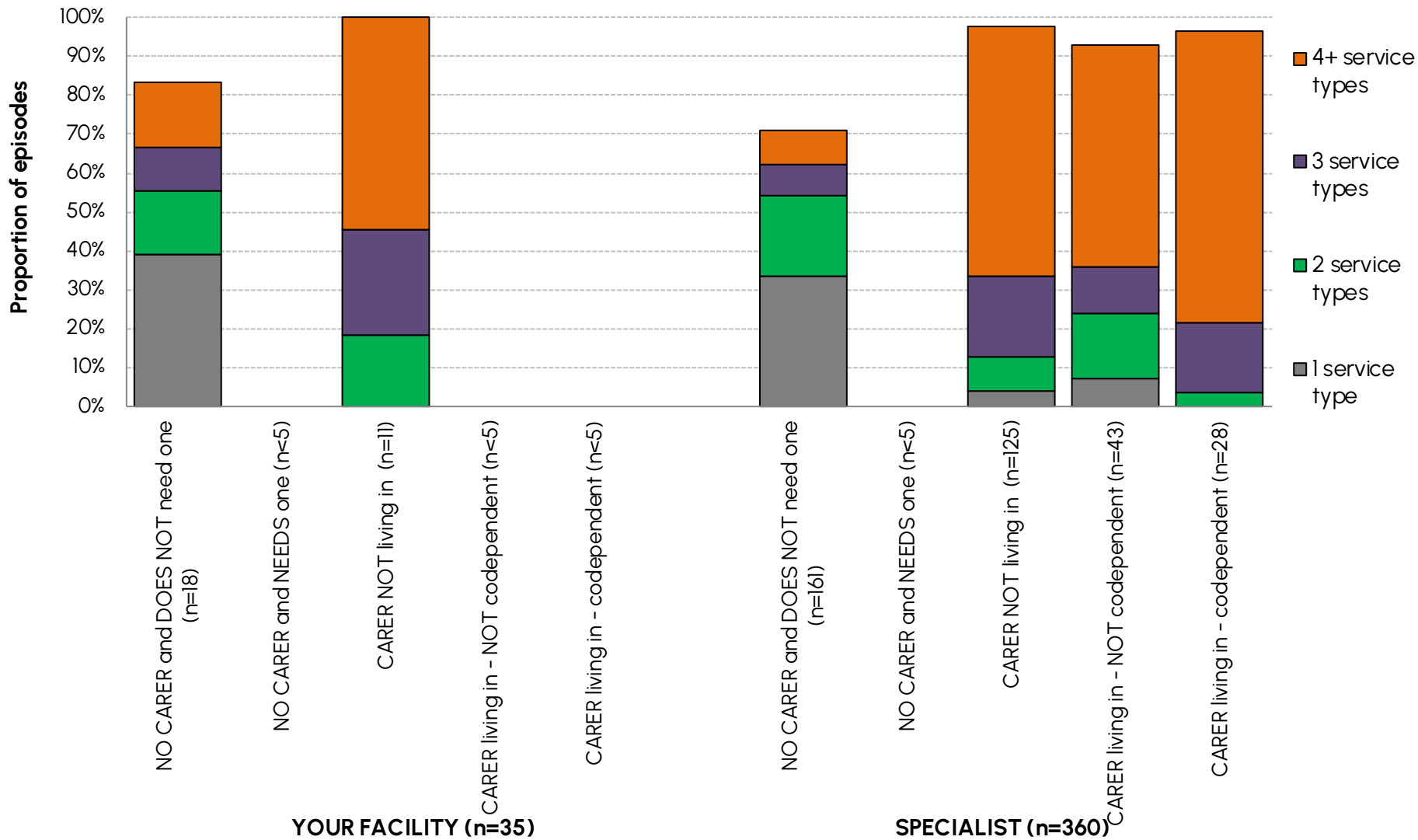
# Carer status and any services received post discharge

Carer status post discharge	YOUR FACILITY		SPECIALIST		ON-SPECIALIST	
	No.	%	No.	%	No.	%
NO CARER and DOES NOT need one	18	51.4	161	44.7	185	45.1
NO CARER and NEEDS one	1	2.9	3	0.8	4	1.0
CARER NOT living in	11	31.4	125	34.7	68	16.6
CARER living in - NOT codependent	4	11.4	43	11.9	119	29.0
CARER living in - codependent	1	2.9	28	7.8	34	8.3
Missing	5		29		12	
<b>All episodes in private residence</b>	<b>40</b>	<b>100.0</b>	<b>389</b>	<b>100.0</b>	<b>422</b>	<b>100.0</b>

Any services received post discharge?						
Carer status post discharge	YOUR FACILITY		SPECIALIST		ON-SPECIALIST	
	Yes (%)	No (%)	Yes (%)	No (%)	Yes (%)	No (%)
NO CARER and DOES NOT need one	83.3	16.7	70.8	29.2	58.4	41.1
NO CARER and NEEDS one	100.0	0.0	100.0	0.0	50.0	50.0
CARER NOT living in	100.0	0.0	97.6	2.4	76.5	23.5
CARER living in - NOT codependent	75.0	25.0	93.0	7.0	77.3	22.7
CARER living in - codependent	100.0	0.0	96.4	3.6	91.2	8.8
<b>All episodes in private residence</b>	<b>88.6</b>	<b>11.4</b>	<b>85.0</b>	<b>15.0</b>	<b>69.5</b>	<b>30.2</b>

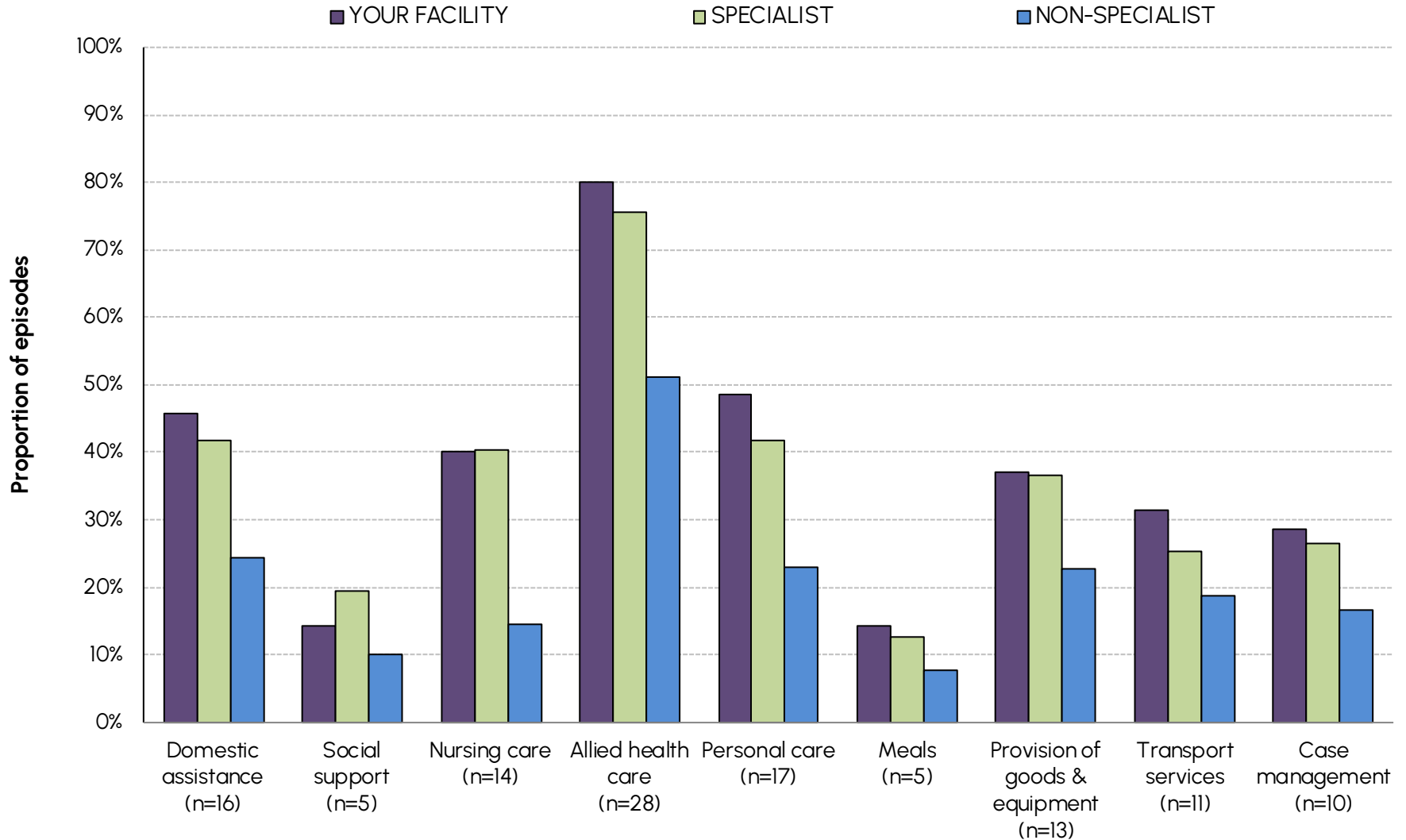
Note: Final accommodation is private residence.

# Number of services received post discharge by carer status



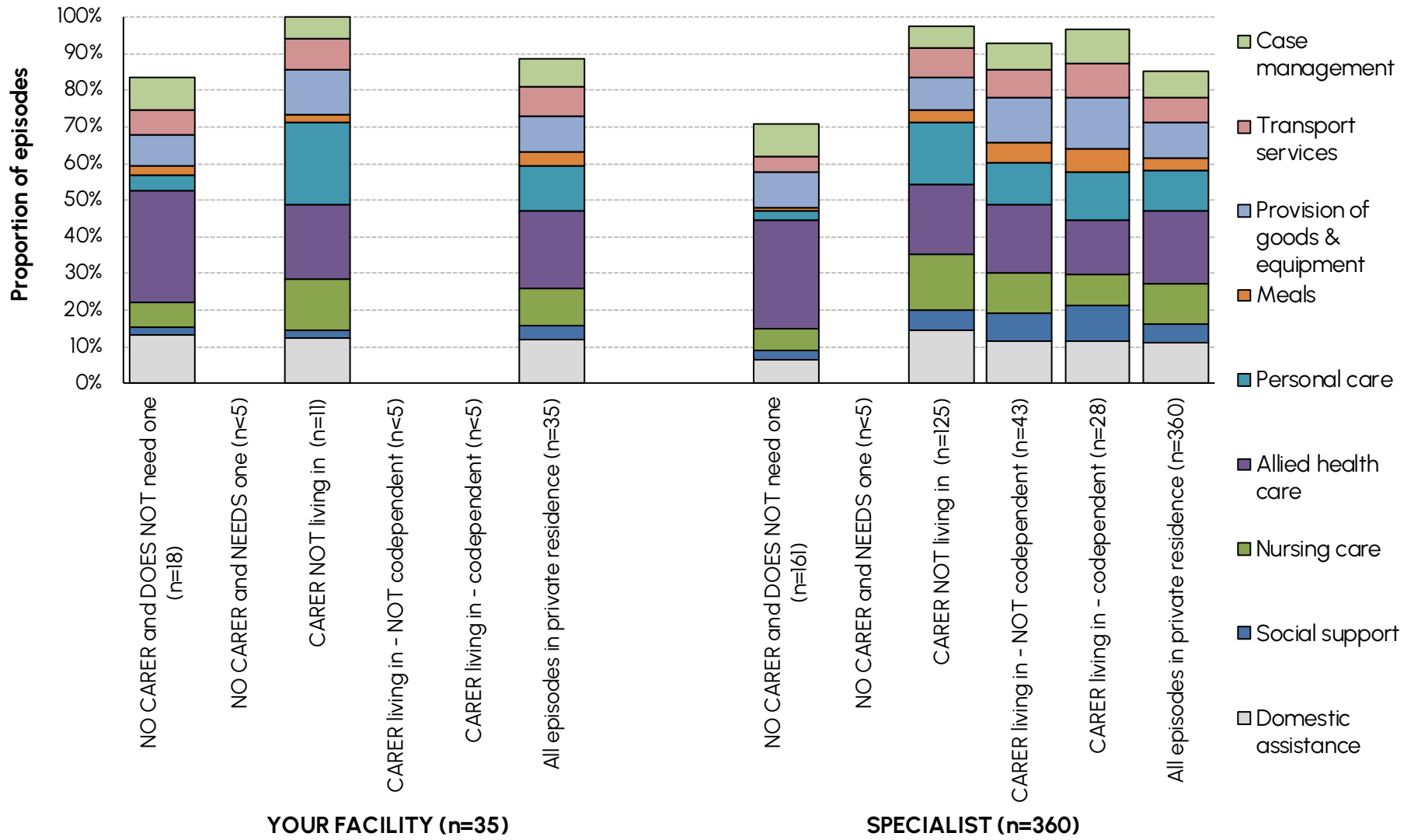
Note: Final accommodation is private residence.

# Type of services received post discharge



Note: Final accommodation is private residence.

# Type of services received post discharge by carer status



Note: Final accommodation is private residence.

# Number and type of services received post discharge by carer status

Carer status post discharge - YOUR FACILITY						
Services received post discharge	NO CARER and DOES NOT need one	NO CARER and NEEDS one	CARER NOT living in	CARER living in - NOT codependent	CARER living in - codependent	All episodes in private residence
Number of episodes in private residence	18	1	11	4	1	
<b>Percent of episodes receiving:</b>						
No services	16.7	0.0	0.0	25.0	0.0	11.4
1 service type	38.9	0.0	0.0	0.0	0.0	20.0
2 service types	16.7	0.0	18.2	0.0	0.0	14.3
3 service types	11.1	0.0	27.3	0.0	0.0	14.3
4 or more service types	16.7	100.0	54.5	50.0	100.0	37.1
<b>Service Type received</b>						
Domestic assistance	33.3	100.0	54.5	50.0	100.0	45.7
Social support	5.6	0.0	9.1	50.0	100.0	14.3
Nursing care	16.7	100.0	63.6	50.0	100.0	40.0
Allied health care	77.8	100.0	90.9	50.0	100.0	80.0
Personal care	11.1	100.0	100.0	50.0	100.0	48.6
Meals	5.6	0.0	9.1	50.0	100.0	14.3
Provision of goods & equipment	22.2	0.0	54.5	50.0	100.0	37.1
Transport services	16.7	100.0	36.4	50.0	100.0	31.4
Case management	22.2	0.0	27.3	50.0	100.0	28.6

Note: Final accommodation is private residence.

# Number and type of services received post discharge by carer status

Carer status post discharge - SPECIALIST						
Services received post discharge	NO CARER and DOES NOT need one	NO CARER and NEEDS one	CARER NOT living in	CARER living in - NOT codependent	CARER living in - codependent	All episodes in private residence
Number of episodes in private residence	161	3	125	43	28	
<b>Percent of episodes receiving:</b>						
No services	29.2	0.0	2.4	7.0	3.6	15.0
1 service type	33.5	0.0	4.0	7.0	0.0	17.2
2 service types	20.5	33.3	8.8	16.3	3.6	14.7
3 service types	8.1	0.0	20.8	11.6	17.9	13.6
4 or more service types	8.7	66.7	64.0	55.8	75.0	39.2
<b>Service Type received</b>						
Domestic assistance	13.7	100.0	66.4	51.2	71.4	41.7
Social support	5.6	0.0	24.0	32.6	60.7	19.4
Nursing care	12.4	66.7	69.6	48.8	53.6	40.3
Allied health care	62.1	66.7	87.2	81.4	92.9	75.6
Personal care	5.0	66.7	76.8	48.8	82.1	41.7
Meals	1.9	0.0	16.0	25.6	39.3	12.5
Provision of goods & equipment	20.5	33.3	40.0	53.5	89.3	36.7
Transport services	8.7	33.3	36.8	32.6	57.1	25.3
Case management	18.6	33.3	27.2	32.6	57.1	26.4

Note: Final accommodation is private residence.



# Number and type of services received post discharge by carer status

## Carer status post discharge - NON-SPECIALIST

Services received post discharge	NO CARER and DOES NOT need one	NO CARER and NEEDS one	CARER NOT living in	CARER living in - NOT codependent	CARER living in - codependent	All episodes in private residence
Number of episodes in private residence	185	4	68	119	34	
<b>Percent of episodes receiving:</b>						
No services	41.1	50.0	23.5	22.7	8.8	30.2
1 service type	30.3	25.0	17.6	28.6	29.4	27.6
2 service types	15.1	0.0	14.7	17.6	17.6	15.9
3 service types	3.8	0.0	7.4	10.9	14.7	7.3
4 or more service types	9.2	25.0	36.8	20.2	29.4	18.8
<b>Service Type received</b>						
Domestic assistance	14.1	0.0	45.6	26.9	32.4	24.4
Social support	4.3	25.0	20.6	10.1	17.6	10.0
Nursing care	5.4	0.0	20.6	20.2	32.4	14.4
Allied health care	49.2	50.0	42.6	53.8	64.7	51.2
Personal care	9.2	25.0	44.1	26.9	41.2	22.9
Meals	0.5	0.0	16.2	13.4	8.8	7.6
Provision of goods & equipment	13.0	25.0	35.3	31.9	17.6	22.7
Transport services	10.8	25.0	39.7	18.5	20.6	18.8
Case management	8.1	25.0	38.2	13.4	29.4	16.6

Note: Final accommodation is private residence.

# Spinal cord injury specific data

# TSCI AIS grade at admission and discharge at specialist facilities

Begin AIS grade	Primary admission		Subsequent admission		All admissions	
	Episodes	%	Episodes	%	Episodes	%
A	80	31.4	10	33.3	90	31.6
B	31	12.2	5	16.7	36	12.6
C	40	15.7	7	23.3	47	16.5
D	104	40.8	8	26.7	112	39.3
E	0	0.0	0	0.0	0	0.0

End AIS grade	Primary admission		Subsequent admission		All admissions	
	Episodes	%	Episodes	%	Episodes	%
A	74	29.2	9	30.0	83	29.3
B	30	11.9	5	16.7	35	12.4
C	27	10.7	7	23.3	34	12.0
D	121	47.8	9	30.0	130	45.9
E	1	0.4	0	0.0	1	0.4

Note 1: 0 episode(s) did not record admission status.

Note 2: 18 episode(s) did not record AIS scores.

# TSCI AIS grade at admission and discharge at non-specialist facilities



Begin AIS grade	Primary admission		Subsequent admission		All admissions	
	Episodes	%	Episodes	%	Episodes	%
A	15	14.9	7	19.4	22	16.1
B	10	9.9	7	19.4	17	12.4
C	23	22.8	3	8.3	26	19.0
D	47	46.5	19	52.8	66	48.2
E	6	5.9	0	0.0	6	4.4

End AIS grade	Primary admission		Subsequent admission		All admissions	
	Episodes	%	Episodes	%	Episodes	%
A	10	10.2	6	17.1	16	12.0
B	10	10.2	6	17.1	16	12.0
C	14	14.3	4	11.4	18	13.5
D	56	57.1	19	54.3	75	56.4
E	8	8.2	0	0.0	8	6.0

Note 1: 6 episode(s) did not record admission status.

Note 2: 90 episode(s) did not record AIS scores.

# TSCI change in AIS grade from admission to discharge



Admission AIS grade	Discharge AIS grade - SPECIALIST					Discharge AIS grade - NON-SPECIALIST				
	A	B	C	D	E	A	B	C	D	E
A	80	6	3	0	0	16	1	0	2	0
B	1	27	6	2	0	0	14	1	2	0
C	2	2	25	17	1	0	1	15	9	0
D	0	0	0	109	0	0	0	2	61	2
E	0	0	0	0	0	0	0	0	0	6

Note: 18 SPECIALIST and 90 NON-SPECIALIST episode(s) did not record AIS scores.

# Change in level of TSCI from admission to discharge at specialist facilities

Level of injury	Discharge																															
	Admission	C1	C2	C3	C4	C5	C6	C7	C8	T1	T2	T3	T4	T5	T6	T7	T8	T9	T10	T11	T12	L1	L2	L3	L4	L5	S1	S2	S3	S4	S5	
C1		0	2	0	4	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	
C2		0	3	3	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	
C3		0	4	17	8	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
C4		1	1	3	43	3	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
C5		0	1	0	1	25	6	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
C6		0	0	0	0	1	11	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
C7		0	0	0	0	0	0	3	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
C8		0	0	0	0	0	1	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
T1		0	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
T2		0	0	0	0	1	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T3		0	0	0	0	0	0	0	0	0	0	4	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T4		0	1	0	0	0	0	0	0	0	0	1	3	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T5		0	0	0	0	0	0	0	0	0	0	0	0	5	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T6		0	0	0	0	0	0	0	0	0	0	1	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T7		0	0	0	0	0	0	0	0	0	0	0	1	3	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T8		0	0	0	0	0	0	0	0	0	0	0	1	0	1	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T9		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T10		0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	7	2	0	0	1	0	0	0	0	0	0	0	0	0	0
T11		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
T12		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	9	0	1	0	0	0	0	0	0	0	0	0	0
L1		0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	3	0	0	0	0	0	0	0	0	0	0
L2		0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	0	0	0	0	0	0
L3		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0
L4		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0
L5		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
S1		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
S2		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
S3		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
S4		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
S5		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

# Change in level of NTSCI from admission to discharge at specialist facilities

Level of injury Admission	Discharge																													
	C1	C2	C3	C4	C5	C6	C7	C8	T1	T2	T3	T4	T5	T6	T7	T8	T9	T10	T11	T12	L1	L2	L3	L4	L5	S1	S2	S3	S4	S5
C1	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C2	0	5	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C3	0	1	7	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C4	0	0	1	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C5	0	0	0	1	8	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C6	0	0	0	0	0	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C7	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T2	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T3	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T5	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T6	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0
T9	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0
T10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0
T11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0
T12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	1	0	0	0	0	0	0	0	0	0
L1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6	0	0	0	0	0	0	0	0	0
L2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	7	0	0	0	0	0	0	0	0
L3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0
L4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	1	0	0	0	0	0	0
L5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
S1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
S2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0
S3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
S4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0
S5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

# TSCI ventilator dependence



Completed ventilator data item - SPECIALIST	250	83.1%
No. ventilator dependent	0	
Completed ventilator data item - NON-SPECIALIST	102	45.5%
No. ventilator dependent	1	



# Low FIM score summary report

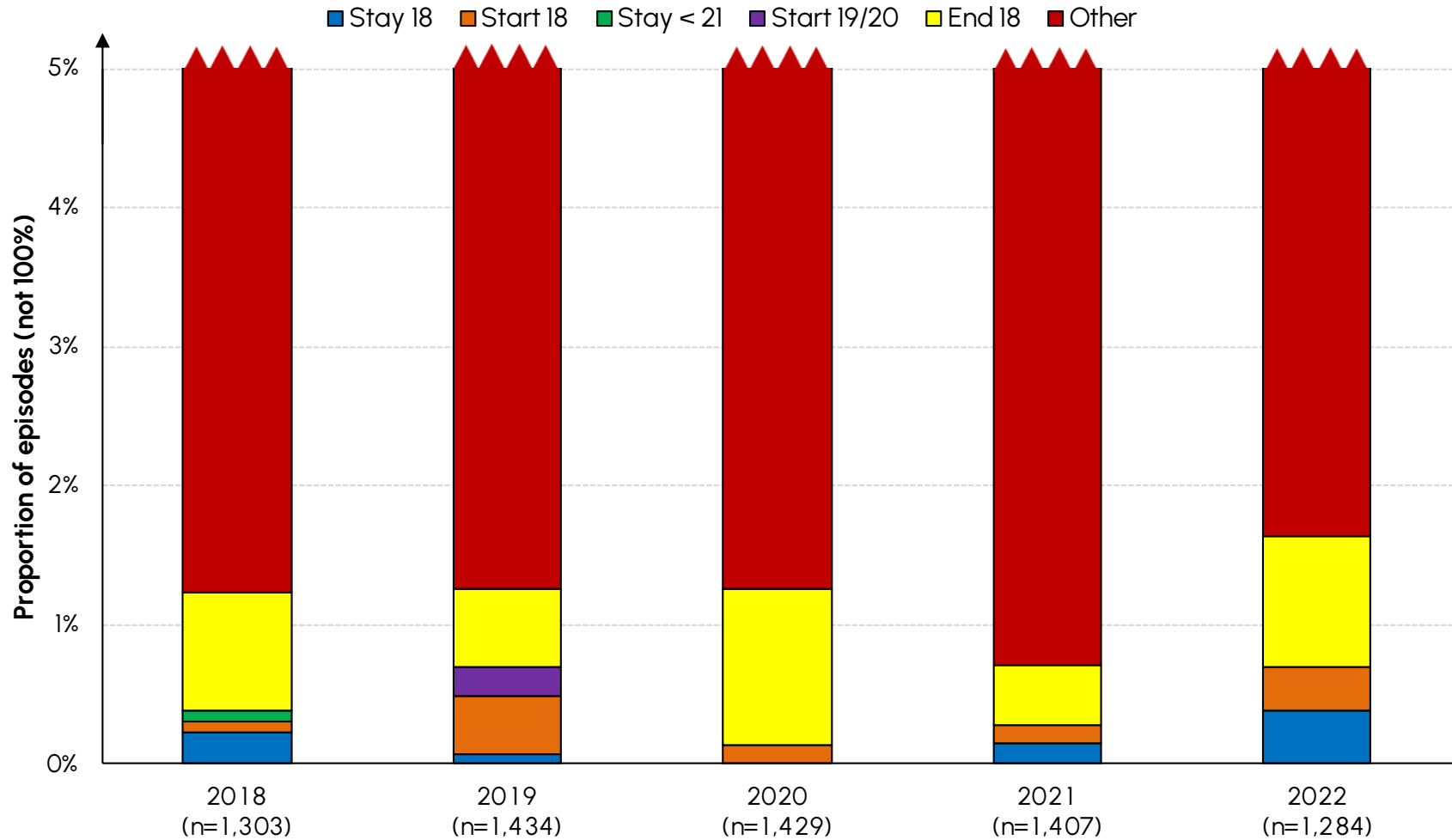
# Low FIM score Category Definitions

The FIM18 categories are divided as follows:

- **Stay 18** – FIM score of 18 on admission AND discharge.
- **Start 18** – FIM score of 18 on admission, FIM score >18 on discharge
- **Stay <21** – FIM score of 19 or 20 on admission, score of  $\leq 20$  on discharge
- **Start 19/20** – FIM score of 19 or 20 on admission, score of >20 on discharge
- **End 18** – FIM score of >20 on admission, score of 18 on discharge
- **Other**

All information displayed in this section includes all Spine (TSCI and NTSCI) episodes, unless otherwise stated.

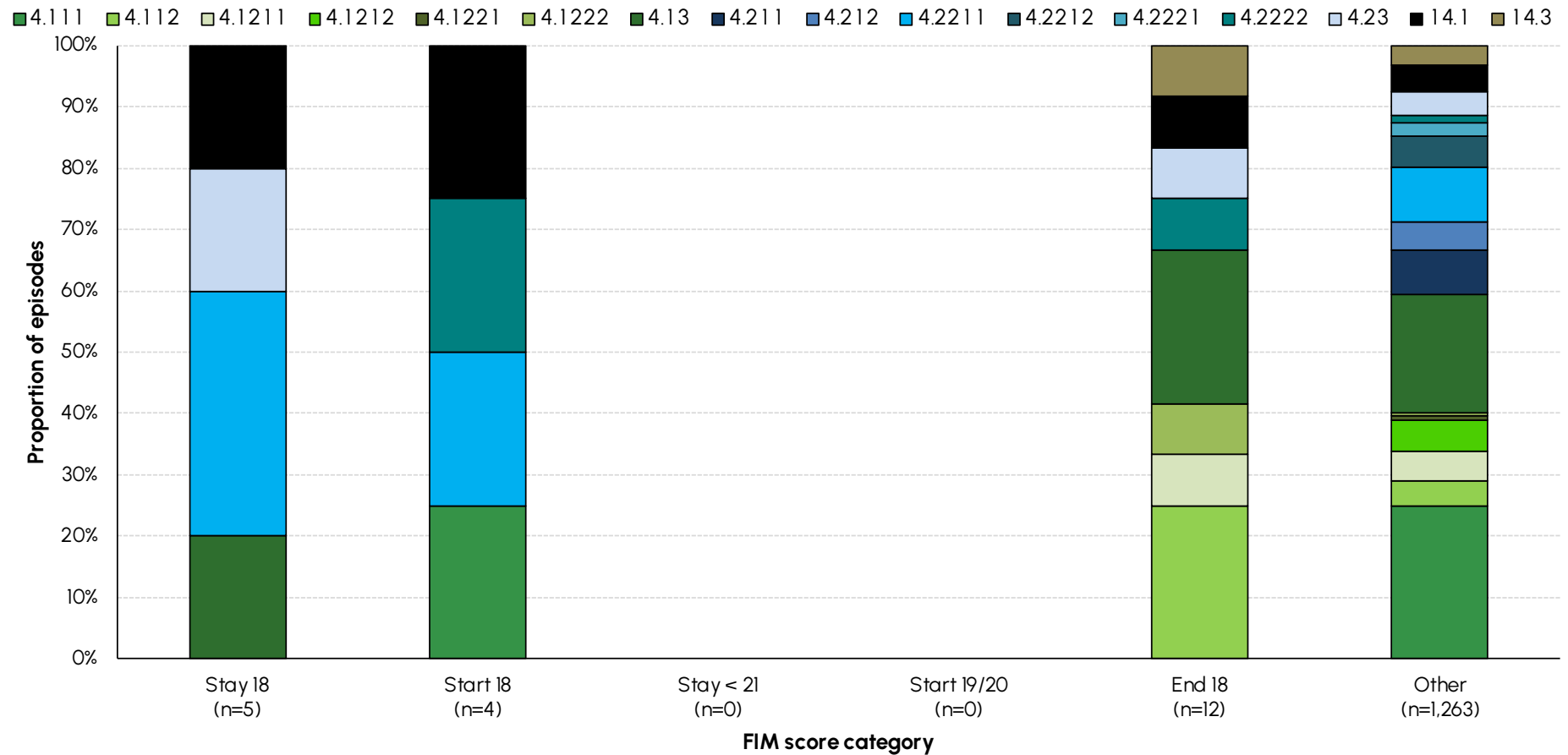
# Low FIM score episodes over time



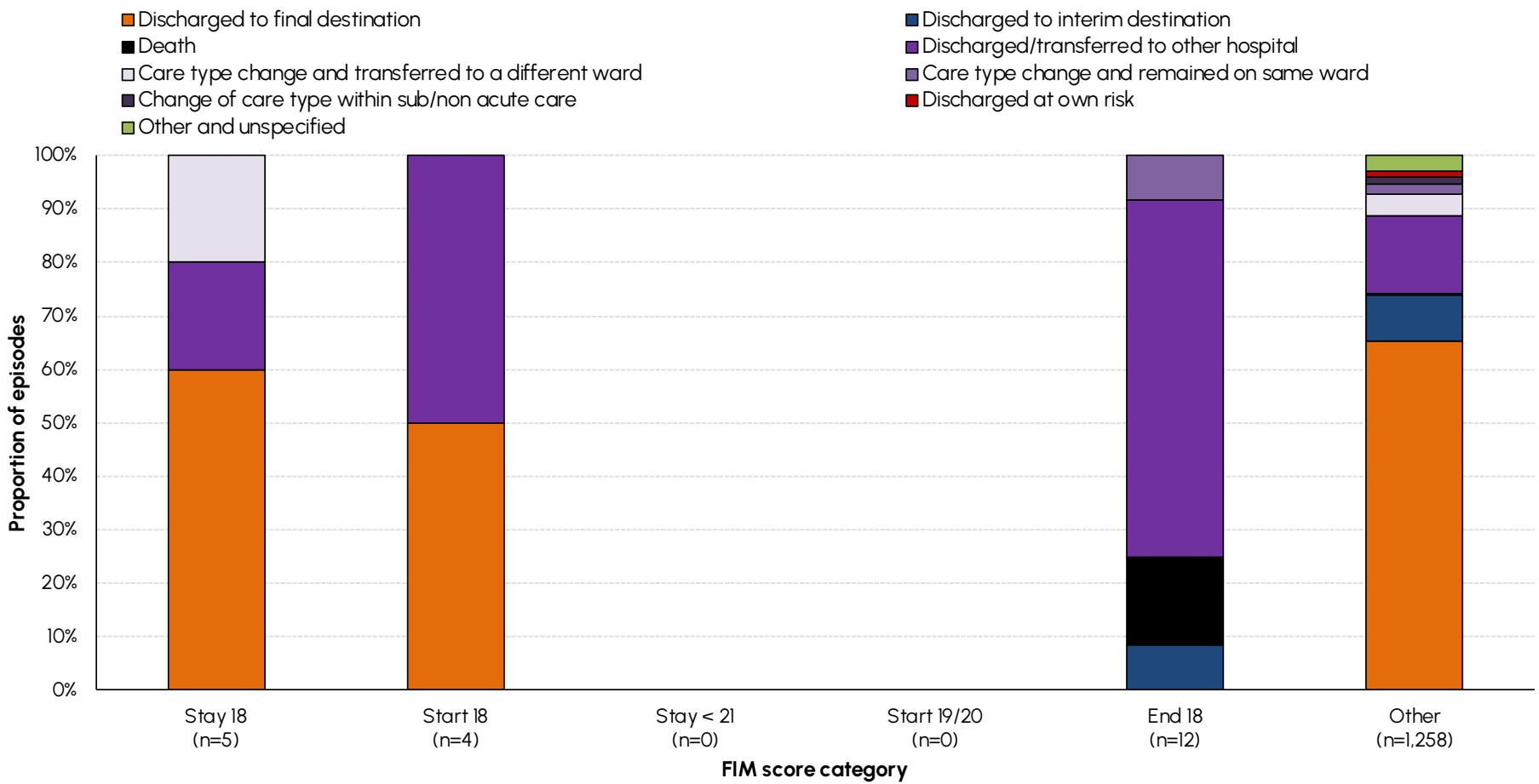
# Low FIM score episodes over time

Year	Stay 18	Start 18	Stay < 21	Start 19/20	End 18	Other
<b>YOUR FACILITY</b>						
2018	0	0	0	0	0	65
2019	0	0	0	2	0	72
2020	0	0	0	0	0	78
2021	1	0	0	0	0	61
2022	1	0	0	0	0	61
<b>SPECIALISTS</b>						
2018	0	0	1	0	2	692
2019	0	5	0	3	1	648
2020	0	1	0	0	6	662
2021	1	0	0	0	0	640
2022	3	2	0	0	2	575
<b>NON-SPECIALISTS</b>						
2018	3	1	0	0	9	595
2019	1	1	0	0	7	768
2020	0	1	0	0	10	749
2021	1	2	0	0	6	757
2022	2	2	0	0	10	688

# Low FIM score impairment distribution



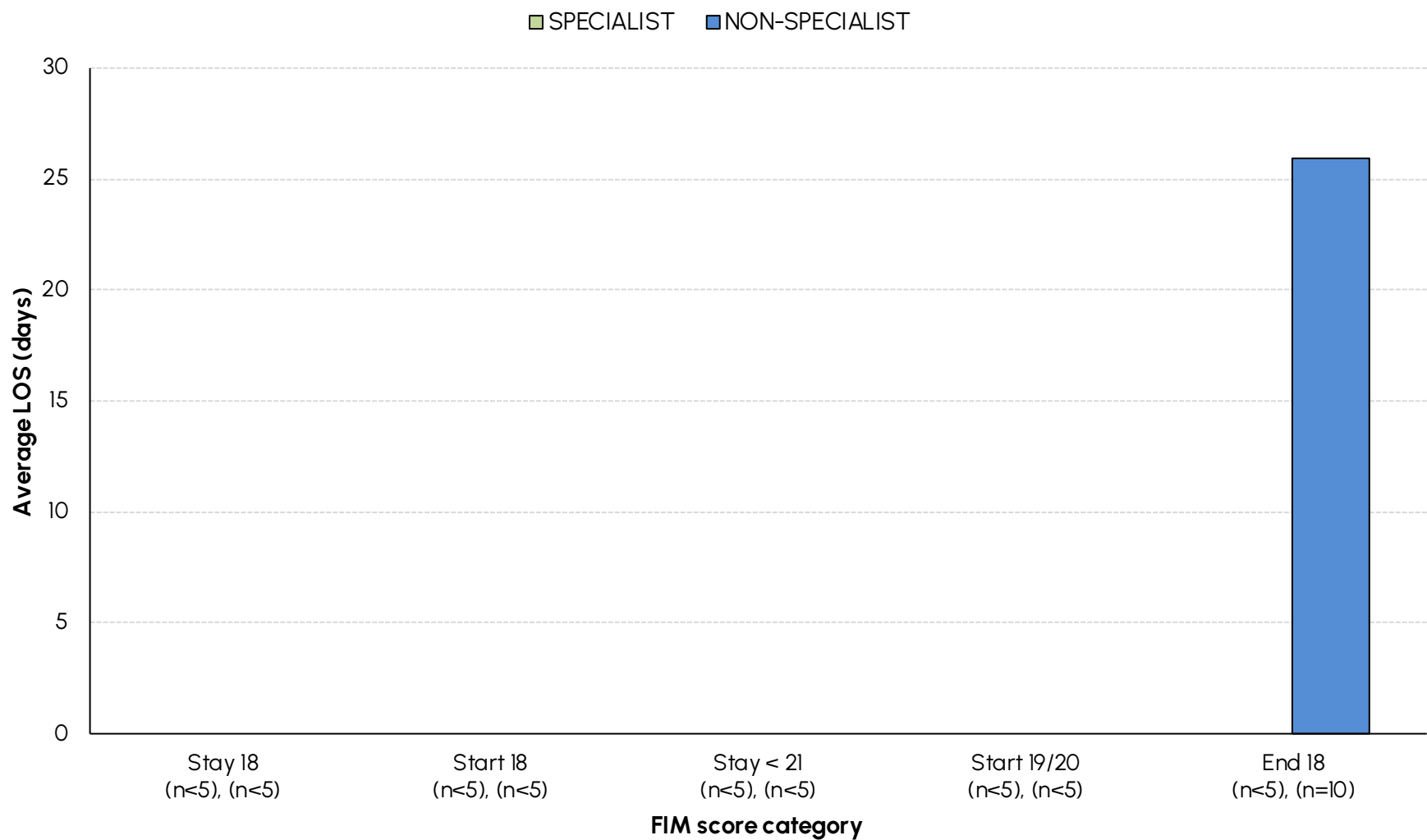
# Low FIM score Discharge Destination



# Low FIM score Discharge Destination

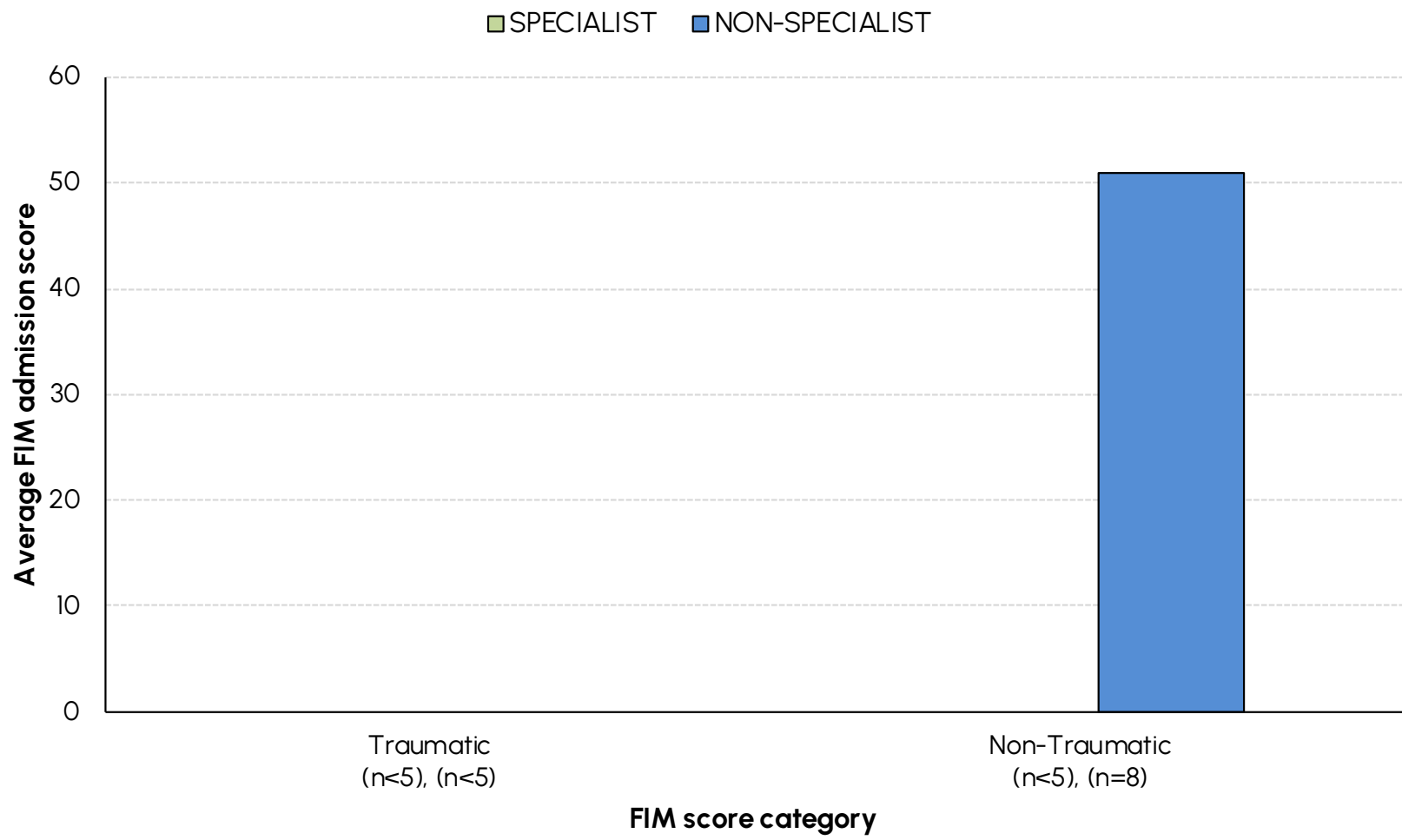
Discharge Destination	Stay 18	Start 18	Stay < 21	Start 19/20	End 18	Other
<b>YOUR FACILITY</b>						
Discharged to final destination	1	0	0	0	0	39
Discharged to interim destination	0	0	0	0	0	3
Death	0	0	0	0	0	0
Discharged/transferred to other hospital	0	0	0	0	0	9
Care type change and transferred to a different ward	0	0	0	0	0	5
Care type change and remained on same ward	0	0	0	0	0	0
Change of care type within sub/non acute care	0	0	0	0	0	0
Discharged at own risk	0	0	0	0	0	2
Other and unspecified	0	0	0	0	0	3
Total	1	0	0	0	0	61
<b>SPECIALIST (ALL FACILITIES)</b>						
Discharged to final destination	3	1	0	0	0	374
Discharged to interim destination	0	0	0	0	0	58
Death	0	0	0	0	0	2
Discharged/transferred to other hospital	0	1	0	0	2	69
Care type change and transferred to a different ward	0	0	0	0	0	22
Care type change and remained on same ward	0	0	0	0	0	9
Change of care type within sub/non acute care	0	0	0	0	0	5
Discharged at own risk	0	0	0	0	0	3
Other and unspecified	0	0	0	0	0	29
Total	3	2	0	0	2	571
<b>NON-SPECIALIST (ALL FACILITIES)</b>						
Discharged to final destination	0	1	0	0	0	449
Discharged to interim destination	0	0	0	0	1	48
Death	0	0	0	0	2	2
Discharged/transferred to other hospital	1	1	0	0	6	114
Care type change and transferred to a different ward	1	0	0	0	0	28
Care type change and remained on same ward	0	0	0	0	1	17
Change of care type within sub/non acute care	0	0	0	0	0	11
Discharged at own risk	0	0	0	0	0	12
Other and unspecified	0	0	0	0	0	6
Total	2	2	0	0	10	687

# Low FIM score average LOS

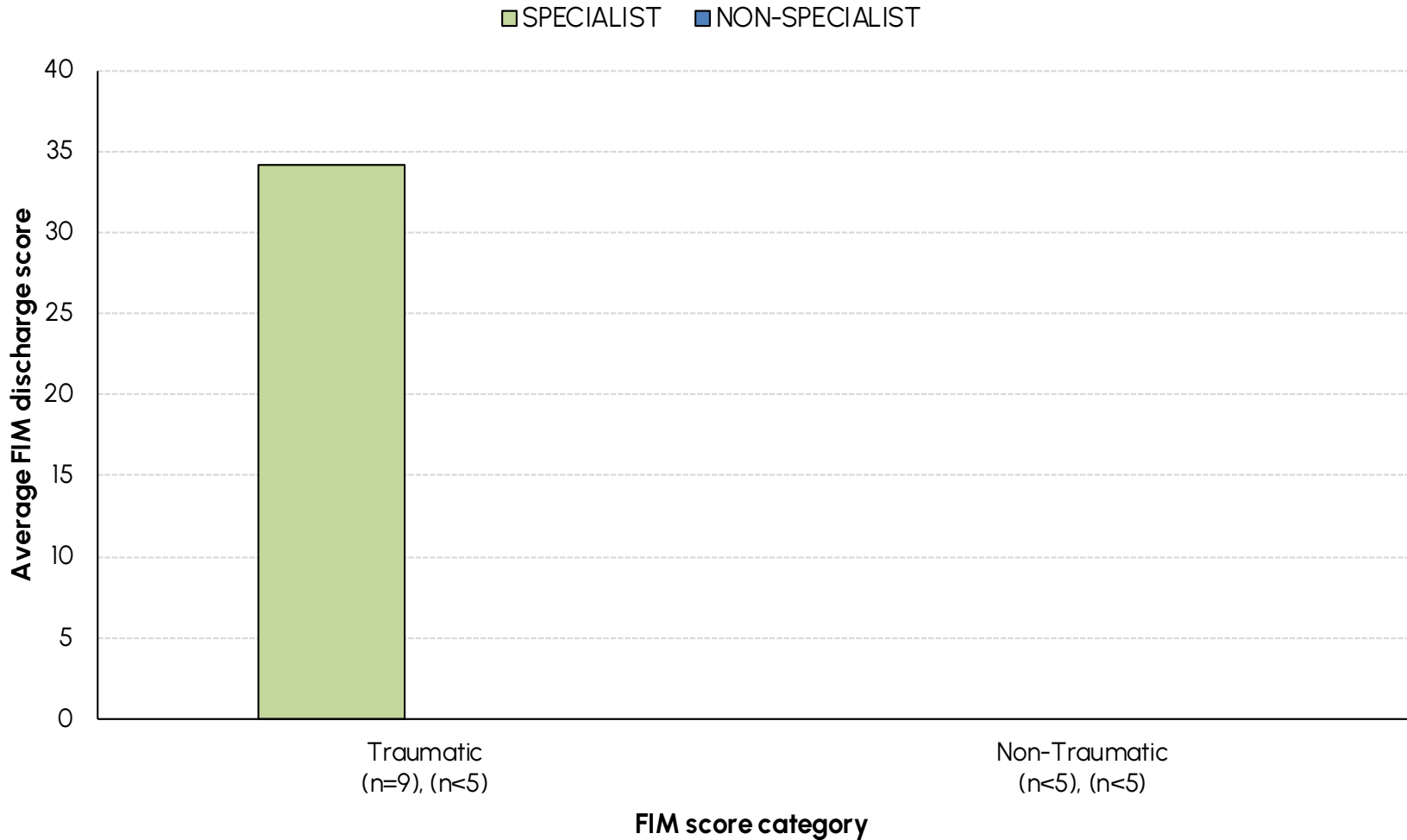




# Low FIM score average FIM admission — episodes with end FIM=18



# Low FIM score average FIM discharge — episodes with start FIM $\leq 20$



## AN-SNAP class

The Australian National Sub-Acute and Non-Acute Patient Classification (AN-SNAP) is a casemix classification for sub-acute and non-acute care provided in a variety of treatment settings. Version 5, introduced in July 2022 and used in these reports, uses the episode's impairment, age, weighted FIM motor admission score and FIM cognition score to determine which of 48 inpatient (admitted overnight adult) rehabilitation classes the episode should be assigned to.

Between AN-SNAP V4 and V5 there have been some minor refinements to the positioning of age and FIM score splits, and minor revisions to the impairment-specific weights used for the FIM item scores in the calculation of a motor score; orthopaedic replacement classes (lost in Version 4) have returned and brain injury classes are now split first on cognition FIM scores and second on motor FIM scores. Refer Appendix 3 for the full list of classes and the section Impairment specific weighted FIM scores below for more detail about how the items are weighted. For more information about AN-SNAP class V5 please refer to the AROC website.

## AROC

The Australasian Rehabilitation Outcomes Centre (AROC) is the Australian and New Zealand rehabilitation medicine **integrated outcomes centre** that collects rehabilitation outcome measures at point-of-care from both private and public rehabilitation services across both countries. Established in 2002 it is a joint initiative of the Australasian rehabilitation sector (providers, payers, regulators and consumers) and current membership encompasses close to 100% of all Australian and New Zealand rehabilitation services, who routinely submit deidentified data to AROC for each rehabilitation episode, including information about demographics, process indicators and functional status.

## Benchmark group

In Calendar Year 2015 new benchmark groups were introduced. With the exception of brain injury and spinal cord injury an episode's benchmark group is determined by the country of the submitting facility and can be either Australia or New Zealand. For episodes recorded as brain injury or spinal cord injury (or major multi trauma involving brain injury and/or spinal cord injury) the benchmark group is determined by first admission episodes reported by all specialist (brain/spinal) units in both Australia and New Zealand, calculated separately for traumatic and non-traumatic episodes. The benchmark data set is all episodes during the reporting period in the AROC database.

# Appendix 1: Glossary

## Casemix-adjusted relative mean

A comparison of some statistics such as length of stay and FIM change is only possible if the groups being compared comprise similar episodes. The specific impairment, level of functional independence, age and other factors relating to the episode have an impact on these statistics. If, for example, your average length of stay were different from the benchmark group, we could not tell if your episodes really were different or if the difference was merely due to the unique casemix.

To overcome this difficulty, it is possible to statistically control for casemix. This is achieved by adjusting measures such as length of stay and FIM change so that the comparison is only made between similar types of episodes.

In this report we have calculated casemix-adjusted relative mean length of stay and casemix-adjusted relative mean FIM change for completed episodes. To do this, we needed to know the LOS (or FIM change) and AN-SNAP class for each episode as well as the mean LOS (or FIM change) for the benchmark group for each AN-SNAP class. We then calculated the difference between each episode LOS (or FIM change) and the mean LOS (or FIM change) of the appropriate AN-SNAP class. These differences were then averaged to produce the casemix-adjusted relative mean. This may be easier to understand as a set of two equations illustrated below.

**For each episode calculate:**

**LOSdiff = episode’s LOS – mean LOS appropriate AN-SNAP class.**

**Casemix-adjusted relative mean = Sum of LOSdiff for all episodes divided by Number of episodes**

A casemix-adjusted relative mean length of stay of, say, -2 days would indicate that, on average, your facility has a LOS of 2 days less than similar episodes in the benchmark group. A casemix-adjusted relative mean FIM change of, say, 4 would indicate that, on average, your facility improved 4 FIM points more than similar episodes in the benchmark group. It is important to consider both of these statistics together. For example, your episodes may have stayed longer than similar episodes in the benchmark group, but they may also have achieved a greater functional improvement.

## Complete/incomplete episode

An episode is considered “complete” for the purpose of calculating outcome statistics in this report if (A) the mode of episode end was either 1 (discharged to usual accommodation) or 2 (discharged to interim accommodation) AND total FIM score at episode end was greater than 18, or (B) the mode of episode end was 7 (change of care type within sub-acute/non-acute care) AND length of stay greater than 6 days.

## Confidence interval for a mean

To decide if a difference between your facility's mean score and the benchmark group's mean is statistically significant, look at the two confidence intervals. If they overlap, the difference is not likely to be statistically significant. For example your facility's mean onset to first admission may be 16 days while the benchmark group's mean is 12 days. These values are certainly different, but the difference may not be statistically significant. If the 95% confidence interval of your data were (13 – 19) (i.e. 13 days to 19 days) and that of the benchmark group data set were (10.5 – 13.5) (i.e. 10.5 days to 13.5 days), the difference is not likely to be statistically significant as the two confidence intervals overlap. Note that this is a conservative comparison and is not as accurate as a formal statistical test.

## COVID-19

The immediate impact of COVID-19 on rehabilitation was a 12% decline in the number of rehabilitation episodes following temporary suspension of elective surgeries, ward re-assignments and closures, and fewer traumatic accidents. The ongoing impact of COVID-19 on rehabilitation from still reduced inpatient beds, increasing patient complexity and staffing issues has seen inpatient rehabilitation episodes decline 20% compared to the years prior to COVID.

The extent of the impact of COVID-19 on the demand for rehabilitation in both the inpatient or community rehabilitation is yet to be fully realised. To help measure the impact of COVID, and importantly long COVID, AROC added COVID specific impairment codes, comorbidity and complication codes to the AROC datasets effective July 2022. Appendix 2 lists the COVID impairment codes, which map to AN-SNAP V5 classes 5A91-5A93 & 5AZ3-5AZ4. COVID related data provided to AROC through the adjunct data collection along with entries in the patient comment field have been mapped to the new COVID codes.

- **Guidelines for the collection and coding of COVID-19 AROC data** can be found at <https://documents.uow.edu.au/content/groups/public/@web/@chsd/@aroc/documents/doc/uow272916.pdf>
- **The AROC COVID Coding Decision Tree** can be found at <https://documents.uow.edu.au/content/groups/public/@web/@chsd/@aroc/documents/doc/uow272917.pdf>
- Updated **Data Collection Forms** can be found at <https://ahsri.atlassian.net/wiki/spaces/AD/pages/17268778/Data+Collection+Forms>
- Services who do not have access to the new COVID codes are asked to identify patients who have had COVID-19 in the AROC data set services by entering the relevant **COVID-19 impairment code, comorbidity or complication** (as appropriate) in the patient comment field.

## COVID-19 (cont.)

The potential sequelae of COVID-19 appear to be numerous, so the functional deficits of these patients that result in the need for rehabilitation can be quite varied. To enable comprehensive reporting of rehabilitation outcomes for these patients, the National COVID-19 rehabilitation adjunct data collection was created, in collaboration with the NSW Agency for Clinical Innovation's Rehabilitation Community of Practice.

The national COVID-19 rehabilitation adjunct data collection covers all care settings – in-reach, inpatient and ambulatory – and services do not need to be an AROC member to participate. The data collection is to be completed for **ALL** patients who have received a positive diagnosis of COVID-19 and are now participating in rehabilitation in any care setting (even if COVID codes have been used in the AROC data collection). Where possible and appropriate, the National COVID-19 rehabilitation adjunct data will be linked with the AROC inpatient and/or ambulatory data collections.

The National COVID-19 rehabilitation adjunct data collection is entered online at <https://apps.ahsri.uow.edu.au/redcap/surveys/?s=DR4AE3FHAX>.

All relevant data items must be known prior to commencing data entry as there is no save and resume function. For convenience a data collection form is provided as an optional mechanism to collect the data (available here <https://apps.ahsri.uow.edu.au/downloads/CovidCollection.pdf>).

## Data Concatenation

Increasingly some jurisdictions have introduced business rules around data collection that have resulted in episodes of rehabilitation being ended and then re-commenced a few days later. AROC definitions would record these as one episode with the period in between defined as a suspension of rehabilitation. Such business rules result in two (or more) episodes of rehabilitation being reported to AROC when only one full episode should be reported.

Whilst this happens much more frequently in some impairment groups (e.g. spinal cord injury & brain injury) it does impact all impairments to some degree. Reporting of multiple episodes impacts outcomes analysis, resulting in shorter than real length of stays and reduced FIM change being reported.

Concatenated episodes will have a revised Length of stay and FIM change (start details will be taken from the identified primary episode; end details from the identified final episode), and will also have a revised number of suspensions (being the sum across all concatenated 'submitted episodes' plus the number of breaks between 'submitted episodes') and a revised number of suspension days (being the sum across all concatenated 'submitted episodes' plus the sum of all days between 'submitted episodes').

Submitted episodes to AROC are identified for concatenation based on the following rules:

- Subsequent episodes MUST have same impairment code and be from same reporting facility with same MRN and DOB.
- Leading episode must be discharged into the hospital system with following episode being admitted from hospital system.
- Number of days between episodes being 0-14 days for spinal and 0-7 days for all other impairments.

To make it easier for AROC to identify episodes that should be concatenated in January 2014 the data item Mode of Episode Start had an additional code set value added: **9 = recommenced rehabilitation episode following suspension**

# Appendix 1: Glossary

## Data completeness score

The data completeness score is the average percent reported for all AROC data items (including impairment specific items where relevant) with the exception of those items that are optional. Path, facility code, facility name, MRN and episode end date are not included as these fields are used to extract the data for reporting.

## Functional Independence Measure (FIM)

The Functional Independence Measure (FIM) is used as a tool to assess the functional independence of patients at episode start and end.

- The FIM motor score is the sum of the scores obtained for the first thirteen (13) items in the FIM instrument. A higher FIM motor score indicates a greater level of functional independence in motor skills.
- The FIM cognition score is the sum of the scores obtained for the final five (5) items in the FIM instrument. A higher FIM cognition score indicates better cognitive function.

## FIM change

The change in functional status from the beginning to the end of the episode is measured by the change in FIM score. This is calculated as the FIM score at the end of the episode minus the FIM score at the start of the episode. In some instances the change in total FIM score (the sum of items 1 to 18) is calculated. In other cases either the change in FIM motor score (the sum of items 1 to 13) or the change in FIM cognition score (the sum of items 14 to 18) is calculated.

A higher FIM score corresponds to higher level of function while a lower FIM score represents less functional independence. This means that a positive value for the change in FIM score indicates functional improvement during the episode. A negative value for the change in FIM score indicates a decline in functional independence during the episode.

## FIM efficiency

The FIM efficiency indicates the average FIM improvement per day. This statistic is calculated as the mean FIM change divided by the mean length of stay (LOS).



## Impairment-specific weighted FIM motor scores

AN-SNAP v5, like Version 4, uses impairment-specific weighted FIM motor scores in the inpatient (admitted overnight adult) rehabilitation classes. Weights reflect the relative impact of each item on the cost of caring for the rehabilitation patient. If an item has a weight of more than 1, it will have an impact on the cost of care that is more than average – a weight less than 1 implies the impact will be less than average. Within each impairment type, the weights are scaled to sum to 13 – thus both weighted and unweighted scores range from a minimum of 13 to a maximum of 91. Where impairments are grouped together in the classification, a single set of weights for that group has been derived. The exception is the FIM motor item stairs where all weights were set to 1.

## Interquartile range (IQR)

The middle 50% — between the 25% percentile and the 75% percentile.

## Length of stay (LOS)

The length of stay (LOS) of an episode is the number of days on which care has been provided. It is calculated as the end date minus the start date, minus the number of leave days during the episode.

## Mean

The mean, or average, is a measure of the "centre" of your data. It is calculated by adding all data values and dividing by the number of values. The mean can be used to calculate a total. For example, if the mean length of stay were 21 days for a group of 30 episodes, the total number of bed days could be calculated as 21 multiplied by 30.

## Mean or median - which to use?

The mean and the median are both measures of the "centre" of your data. For data that are symmetric about the mean (e.g. normally distributed data), the mean and the median will be close to each other. However they may have very different values for some data sets.

As an example, consider length of stay. Typically, most episodes within a class will have roughly the same length of stay. However, there will be a few episodes that are longer than the others and a smaller number that are very long. These longer lengths of stay have the effect of increasing the mean length of stay, but have little or no effect on the median.

If you want to know how long episodes in this class "typically" stay, you will probably be interested in the median as this gives you the middle value - half the episodes are longer and half the episodes are shorter. If, however, your interest is in allocation of resources and you want to know how long episodes stay on average, or if you want to get an idea of the total number of days of care provided to episodes in this class, you will need to look at the mean. (The total days can be calculated by multiplying the mean with the number in the class).

## Median

The median provides the middle value of your data – half the values lie above it and half the values lie below. For example, if your median length of stay were 20 days, half of your episodes would have stayed for 20 days or less, while the other half would have stayed 20 days or longer. Note that the median, unlike the mean, cannot be used to calculate the total number of bed days.

# Appendix 1: Glossary

## Relative Functional Gain (RFG) and Relative Functional Efficiency (RFE)

FIM change measures the absolute difference between admission FIM and discharge FIM scores, i.e. client 1 had a 10 point improvement (admission 46 - discharge 56) and client 2 also had a ten point improvement (admission 116 - discharge 126). FIM change does not take into account the proportion of FIM change possible, i.e. client 1 improved 10 points out of possible 80 (126-46) and client 2 improved 10 points out of a possible 10 (126-116). So not all patients that improve 10 FIM points are the same. This proportion of FIM change possible is known as the Relative Functional Gain (RFG) and tries to take into account the amount of FIM gain possible. RFG is calculated as follows:

- If actual FIM change > 0 [improved]
  - **(Discharge FIM - Admission FIM)/(126 - Admission FIM)**
    - e.g.  $(90 - 50)/(126-50) = 40/76 = 52.6\%$
- If actual FIM change < 0 [declined]
  - **(Discharge FIM - Admission FIM)/ (Admission FIM)**
    - e.g.  $(90 - 100)/100 = -10/100 = -10\%$
- If actual FIM change = 0 [no change]
  - 0%

FIM efficiency measures the absolute difference between admission FIM and discharge FIM scores per day, without taking into account the proportion of FIM change possible. The Relative Functional Gain per day is known as the Relative Functional Efficiency (RFE), and is calculated as the RFG divided by the length of stay (LOS).

## Submitted versus reporting episodes

Submitted episodes are those submitted to AROC either via direct data entry or upload through AROC Online Services. These episodes have not been concatenated.

The reporting data used by AROC in this report is made up of concatenated episodes. For most episodes there is no difference between the submitted episode and the one used for reporting.

# Appendix 1: Glossary



## **Valid FIM**

For an episode to have a Valid FIM flag it must be a complete episode and each of the 18 items on admission and discharge must have been answered with a valid response of 1-7. The Valid FIM flag is used in analysis which measures FIM scores as an outcome.

## **Valid LOS**

For an episode to have a Valid LOS flag it must be a complete episode with a length of stay ranging between 1 and 500 days. The Valid LOS flag is used in analysis which measures LOS as an outcome.

## **Version 4 data set**

The version 4 (V4) AROC dataset was introduced on 1 July 2012. V4 is designed as a bank of data items, combinations of which are used to describe 4 possible pathways of care (see the AROC website for more information about the different pathways). NOTE: This report utilises only Pathway 3 data (inpatient direct care).

# Appendix 2: AROC Impairment Codes

## STROKE

### Haemorrhagic

- 1.11 Left body involvement
- 1.12 Right body involvement
- 1.13 Bilateral involvement
- 1.14 No paresis
- 1.19 Other haemorrhagic stroke

### Ischaemic

- 1.21 Left body involvement (right brain)
- 1.22 Right body involvement (left brain)
- 1.23 Bilateral involvement
- 1.24 No paresis
- 1.29 Other ischaemic stroke

## BRAIN DYSFUNCTION

### Non-traumatic

- 2.11 Sub-arachnoid haemorrhage
- 2.12 Anoxic brain damage
- 2.13 Other non-traumatic brain dysfunction

### Traumatic

- 2.21 Open injury
- 2.22 Closed injury

## NEUROLOGICAL CONDITIONS

- 3.1 Multiple Sclerosis
- 3.2 Parkinsonism
- 3.3 Polyneuropathy
- 3.4 Guillian-Barre
- 3.5 Cerebral palsy
- 3.8 Neuromuscular disorders
- 3.9 Other neurological conditions

## SPINAL CORD DYSFUNCTION

### Non traumatic spinal cord dysfunction

- 4.111 Paraplegia, incomplete
- 4.112 Paraplegia, complete
- 4.1211 Quadriplegia, incomplete C1-4
- 4.1212 Quadriplegia, incomplete C5-8
- 4.1221 Quadriplegia, complete C1-4
- 4.1222 Quadriplegia, complete C5-8
- 4.13 Other non-traumatic spinal cord dysfunction

### Traumatic spinal cord dysfunction

- 4.211 Paraplegia, incomplete
- 4.212 Paraplegia, complete
- 4.2211 Quadriplegia, incomplete C1-4
- 4.2212 Quadriplegia, incomplete C5-8
- 4.2221 Quadriplegia, complete C1-4
- 4.2222 Quadriplegia, complete C5-8
- 4.23 Other traumatic spinal cord dysfunction

## AMPUTATION OF LIMB

### Not resulting from trauma

- 5.11 Single upper above elbow
- 5.12 Single upper below elbow
- 5.13 Single lower above knee (includes through knee)
- 5.14 Single lower below knee
- 5.15 Double lower above knee (includes through knee)
- 5.16 Double lower above/below knee
- 5.17 Double lower below knee
- 5.18 Partial foot (single or double)
- 5.19 Other amputation not from trauma

## AMPUTATION OF LIMB

### Resulting from trauma

- 5.21 Single upper above elbow
- 5.22 Single upper below elbow
- 5.23 Single lower above knee (includes through knee)
- 5.24 Single lower below knee
- 5.25 Double lower above knee (includes through knee)
- 5.26 Double lower above/below knee
- 5.27 Double lower below knee
- 5.28 Partial foot (single or double)
- 5.29 Other amputation from trauma

## ARTHRITIS

- 6.1 Rheumatoid arthritis
- 6.2 Osteoarthritis
- 6.9 Other arthritis

## PAIN SYNDROMES

- 7.1 Neck pain
- 7.2 Back Pain
- 7.3 Extremity pain
- 7.4 Headache (includes migraine)
- 7.5 Multi-site pain
- 7.9 Other pain (includes abdo/chest wall)

# Appendix 2: AROC Impairment Codes

## ORTHOPAEDIC CONDITIONS

### Fractures (includes dislocation)

- 8.111 Fracture of hip, unilateral (incl. #NOF)
- 8.112 Fracture of hip, bilateral (incl. #NOF)
- 8.12 Fracture of shaft of femur
- 8.13 Fracture of pelvis
- 8.141 Fracture of knee
- 8.142 Fracture of lower leg, ankle, foot
- 8.15 Fracture of upper limb
- 8.16 Fracture of spine
- 8.17 Fracture of multiple sites
- 8.19 Other orthopaedic fracture

### Post Orthopaedic Surgery

- 8.211 Unilateral hip replacement
- 8.212 Bilateral hip replacement
- 8.221 Unilateral knee replacement
- 8.222 Bilateral knee replacement
- 8.231 Knee and hip replacement, same side
- 8.232 Knee and hip replacement, diff sides
- 8.24 Shoulder replacement
- 8.25 Post spinal surgery
- 8.26 Other orthopaedic surgery

### Soft tissue injury

- 8.3 Soft tissue injury

## CARDIAC

- 9.1 Following recent onset of new cardiac impairment
- 9.2 Chronic cardiac insufficiency
- 9.3 Heart and heart/lung transplant

## PULMONARY

- 10.1 Chronic obstructive pulmonary disease
- 10.2 Lung transplant
- 10.9 Other pulmonary

## BURNS

- 11 Burns

## CONGENITAL DEFORMITIES

- 12.1 Spina bifida
- 12.9 Other congenital deformity

## OTHER DISABLING IMPAIRMENTS

- 13.1 Lymphoedema
- 13.3 Conversion disorder
- 13.9 Other disabling impairments that cannot be classified into a specific group

## MAJOR MULTIPLE TRAUMA

- 14.1 Brain + spinal cord injury
- 14.2 Brain + multiple fracture/amputation
- 14.3 Spinal cord + multi fracture/amputation
- 14.9 Other multiple trauma

## DEVELOPMENTAL DISABILITIES

- 15.1 Developmental disabilities (excludes cerebral palsy)

## RE-CONDITIONING/RESTORATIVE

- 16.1 Re-conditioning following surgery
- 16.2 Reconditioning following medical illness
- 16.3 Cancer rehabilitation

## COVID-19 CONDITIONS

- 18.1 COVID-19 with pulmonary issues
- 18.2 COVID-19 with deconditioning
- 18.9 COVID-19 all other

# Appendix 3: AN-SNAP V5 Overnight Rehabilitation Classes (Pathway 3)



## Class Description of AN-SNAP class

5AA1	Stroke, Weighted FIM Motor 63 - 91, FIM Cognition 30 - 35
5AA2	Stroke, Weighted FIM Motor 63 - 91, FIM Cognition 21 - 29
5AA3	Stroke, Weighted FIM Motor 63 - 91, FIM Cognition 5 - 20
5AA4	Stroke, Weighted FIM Motor 44 - 62, FIM Cognition 18 - 35
5AA5	Stroke, Weighted FIM Motor 44 - 62, FIM Cognition 5 - 17
5AA6	Stroke, Weighted FIM Motor 19 - 43, Age >= 80
5AA7	Stroke, Weighted FIM Motor 19 - 43, Age 67 - 79
5AA8	Stroke, Weighted FIM Motor 19 - 43 Age 18 - 66
5AB1	Brain dysfunction, FIM Cognition 27 - 35 Weighted FIM Motor 59 - 91
5AB2	Brain dysfunction, FIM Cognition 27 - 35 Weighted FIM Motor 19 - 58
5AB3	Brain dysfunction, FIM Cognition 19 - 26 Weighted FIM Motor 50 - 91
5AB4	Brain dysfunction, FIM Cognition 19 - 26 Weighted FIM Motor 19 - 49
5AB5	Brain dysfunction, FIM Cognition 5 - 18 Weighted FIM Motor 39 - 91
5AB6	Brain dysfunction, FIM Cognition 5 - 18 Weighted FIM Motor 19 - 38
5AC1	Neurological conditions, Weighted FIM Motor 70 - 91
5AC2	Neurological conditions, Weighted FIM Motor 50 - 69
5AC3	Neurological conditions, Weighted FIM Motor 19 - 49
5AD1	Spinal cord dysfunction, Weighted FIM Motor 55 - 91
5AD2	Spinal cord dysfunction, Weighted FIM Motor 37 - 54
5AD3	Spinal cord dysfunction, Weighted FIM Motor 19 - 36
5AE1	Amputation of limb, Weighted FIM Motor 19-91
5AH1	Orthopaedic conditions, fractures, Weighted FIM Motor 48 - 91, FIM Cognition 33 - 35
5AH2	Orthopaedic conditions, fractures, Weighted FIM Motor 48 - 91, FIM Cognition 21 - 32
5AH3	Orthopaedic conditions, fractures, Weighted FIM Motor 48 - 91, FIM Cognition 5 - 20

## Class Description of AN-SNAP class

5AH4	Orthopaedic conditions, fractures, Weighted FIM Motor 19 - 47
5A41	Orthopaedic conditions, replacement (knee, hip, shoulder), Weighted FIM Motor 61 - 91
5A42	Orthopaedic conditions, replacement (knee, hip, shoulder), Weighted FIM Motor 45 - 60
5A43	Orthopaedic conditions, replacement (knee, hip, shoulder), Weighted FIM Motor 19 - 44
5A21	Orthopaedic conditions, all other, Weighted FIM Motor 57 - 91
5A22	Orthopaedic conditions, all other, Weighted FIM Motor 41 - 56
5A23	Orthopaedic conditions, all other, Weighted FIM Motor 19 - 40
5A31	Cardiac, Pain syndromes, and Pulmonary, Weighted FIM Motor 66 - 91
5A32	Cardiac, Pain syndromes, and Pulmonary, Weighted FIM Motor 38 - 65
5A33	Cardiac, Pain syndromes, and Pulmonary, Weighted FIM Motor 19 - 37
5AP1	Major Multiple Trauma, Weighted FIM Motor 51 - 91
5AP2	Major Multiple Trauma, Weighted FIM Motor 19 - 50
5AR1	Reconditioning, Weighted FIM Motor 64 - 91, FIM Cognition 29 - 35
5AR2	Reconditioning, Weighted FIM Motor 64 - 91, FIM Cognition 5 - 28
5AR3	Reconditioning, Weighted FIM Motor 48 - 63, FIM Cognition 19 - 35
5AR4	Reconditioning, Weighted FIM Motor 48 - 63, FIM Cognition 5 - 18
5AR5	Reconditioning, Weighted FIM Motor 19 - 47
5A91	All other impairments, Weighted FIM Motor 61 - 91
5A92	All other impairments, Weighted FIM Motor 42 - 60
5A93	All other impairments, Weighted FIM Motor 19 - 41
5AZ1	Weighted FIM Motor score 13-18, Brain, Spine, MMT, Burns, Age >= 59
5AZ2	Weighted FIM Motor score 13-18, Brain, Spine, MMT, Burns, Age 18 - 58
5AZ3	Weighted FIM Motor score 13-18, All other impairments, Age >= 79
5AZ4	Weighted FIM Motor score 13-18, All other impairments, Age 18 - 78

- **AROC wish to acknowledge the valuable contributions made by:**
  - Members of the Management Advisory Group of the Australasian Rehabilitation Outcomes Centre
  - The many staff from the rehabilitation facilities who have spent a great deal of time and care to collect, collate and correct the data, without whose considerable effort these reports would not be possible.
- **Disclaimer**


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