

Summary



In this report, we examine the availability of neurological rehabilitation. Our findings are partly based on analyses from the Swedish regions of whether they offer neurological rehabilitation according to national guidelines. First and foremost, however, they are based on the experiences of our members, and our latest membership survey, conducted in early 2021.

The report may be regarded as a direct continuation of *the Neuro Report 2020 – In-depth study: rehabilitation*. In its first chapter, we describe the contents of the report; more specifically, its discourse in regards to:

- what rehabilitation is
- coherent team rehabilitation
- individual rehabilitation plans
- continuous function-maintenance exercise.

In the following chapters, chapters two to four, we examine, in different ways, the availability of neurological rehabilitation. In chapter two, we examine the availability of coherent team rehabilitation, as well as cohesive rehabilitation periods. Afterwards, in chapter three, we

move on to the establishment and utilization of individual rehabilitation plans. And lastly, in chapter four, we examine the conditions for function-maintenance exercise, or adapted physical activity, for our members.

In chapter five, we take a closer look at a highly topical rehabilitation study, and the lessons it presents. Here, we identify and expand upon three success factors:

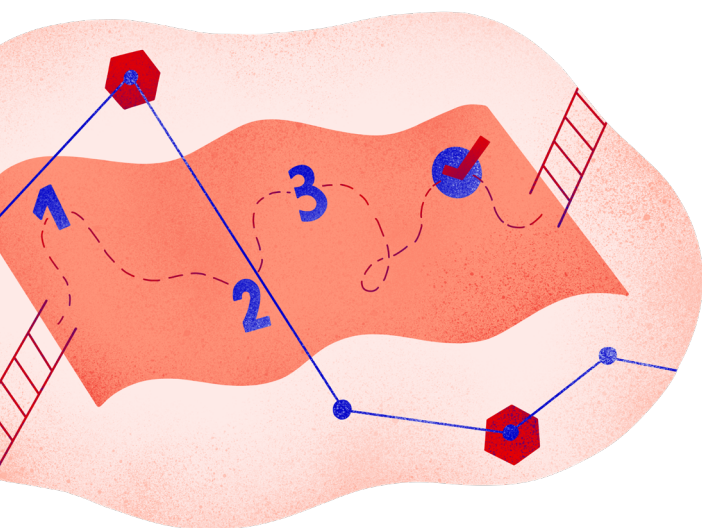
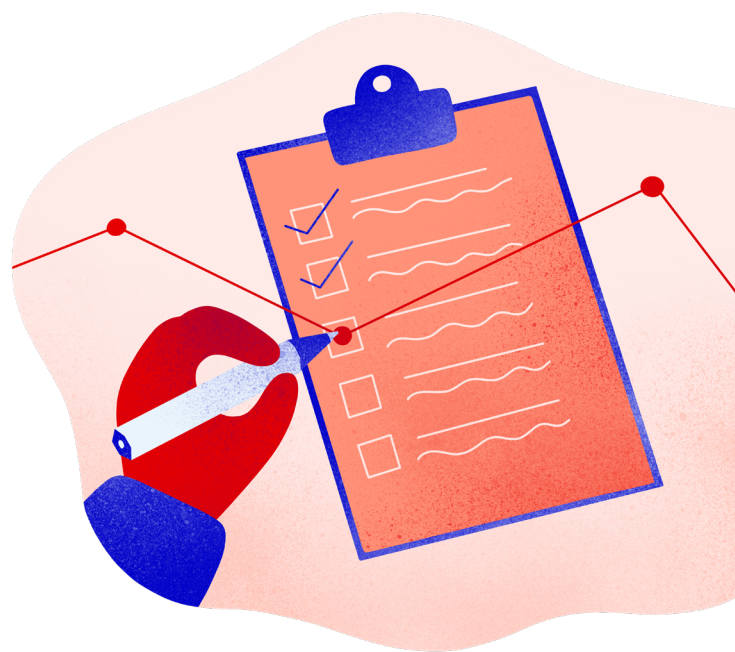
- recurring rehabilitation periods
- continuous support
- flexible exercise opportunities.

In chapter six, we discuss the effects of the corona pandemic in regards to the availability of neurological rehabilitation. Here, too, we have as our basis the experiences of our members, as well as the answers to a membership survey, this time from 2020.

In chapter seven, the chairman of the Swedish Speech Therapists' Association reflects on the role and mission of the speech therapist, as well as the importance of speech therapists being part of multi-professional teams, working with neurological rehabilitation.

RESULTS

- **The analyses from the Swedish regions show major shortcomings in terms of access to neurological rehabilitation – further attention is needed.** The regions have previously stated that they do not offer neurological rehabilitation in accordance to national guidelines, and they have identified a need for change. Now, further analyses are required to determine whether or not changes have been implemented; the effects of such, as well as any improvements. At the very least, it is vital that we identify what remains to be done.
- **Too few are offered continuous team rehabilitation, or recurring rehabilitation periods that correspond to their needs.** Over 40 percent of the respondents in our membership survey have either never participated in coherent team rehabilitation, but would like to do so, or they have been denied the recurring rehabilitation periods that correspond to their needs.
- **Too few have received an individual rehabilitation plan.** Only one in ten in our latest membership survey has a plan that remains relevant to this day. A majority of those who do not, about 60 percent, believe that they would benefit from receiving a plan today. Another 30 percent are unsure if they would.
- **Rehabilitation plans and needs must be maintained to a greater extent than is done today.** Many of our members lack, but are in need of, lasting supervision as well as new assessments and efforts, for life. Access to a multi-professional team for regular appointments would promote a more structured approach to supervision and care.



- **Better conditions are needed for people with a neurological diagnosis to carry out regular function-maintenance exercise.** For example, many respondents lack instructions from, or supervision of, knowledgeable health care professionals.
- **For many people, being physically active together with other people is a rewarding experience.** This could result in additional health benefits, compared to exercising alone. Regions and municipalities need to support adapted wellness activities organized by, for example, Neuro's associations or county associations. This could mean offering facilities for exercising, and pools.
- **We are facing a pent-up and higher need for rehabilitation as a result of the corona pandemic.** The funds that are put aside to manage the debt of care should be used wisely. It is vital that the work of the health service regarding health promotion, prevention and rehabilitation, is given special priority. It is crucial for people's independence and their quality of life. Moreover, it is, from a purely socio-economic point of view, the most sustainable way of working.