

| | | | |
|--------------|---|----------------|-----------|
| Title | Support a person physically affected by a brain injury | | |
| Level | 4 | Credits | 10 |

| | |
|----------------|---|
| Purpose | <p>A person credited with this standard can:</p> <ul style="list-style-type: none"> • describe how physical impairment can affect a person following a brain injury; • describe how to support a person physically affected by a brain injury; • support a person physically affected by a brain injury; and • maintain, clean, and store equipment and items used by a person whose physical functions have been affected by a brain injury. |
|----------------|---|

| | |
|-----------------------|---|
| Classification | Health, Disability, and Aged Support > Brain Injury Support |
|-----------------------|---|

| | |
|------------------------|----------|
| Available grade | Achieved |
|------------------------|----------|

Guidance Information

1 Assessment conditions
Evidence for the practical components of this unit standard must be generated in a health or wellbeing setting.

2 Assessment notes
Evidence generated for assessment against this standard must reflect workplace requirements specified in:

- any applicable personal plan
- documented workplace procedures, policies, and methodologies
- applicable health and safety plans.

Evidence generated for assessment against this standard must reflect the values, processes, and protocols required to work with Māori, Pacific peoples, and people from diverse cultures.

Evidence generated for assessment against this standard must reflect the best practice guidelines and principles specified in:

- NZS 8158:2012 *Home and Community Support Sector Standard*;
 - *Traumatic brain injury: Diagnosis, acute management and rehabilitation*.
- NZS and SNZ standards can be retrieved from <http://www.standards.co.nz/>.

3 Definitions
Engagement means a person's deliberate effort and commitment to working toward recovery by participating fully in their rehabilitation.
Participation means seeking improvement in a persons' ability to participate in meaningful life situations, such as living independently, driving or using public

transport, returning to work or education, participating in leisure and social activities, fulfilling family roles, and maintaining personal, sexual and family relationships.

Personal plan is a plan that details support requirements for a client, patient, or resident. A *personal plan* can also be called a *care plan*, *service plan*, *personal care plan*, or *rehabilitation plan*. A *personal plan* can include goals; preferred activities; other preferences or dislikes; specific interventions; and mobility, nutrition, continence, hygiene, communication, requirements. It may also include guidance about a person's sexuality, culture, spirituality, and social preferences. A *personal plan* often follows a model of care, such as a strengths-based model, recovery model, or medical model.

4 Reference

New Zealand Guidelines Group. (2006). *Traumatic brain injury: Diagnosis, acute management and rehabilitation*. Wellington: New Zealand: Accident Compensation Corporation. Available from the Ministry of Health library at <https://www.health.govt.nz/about-ministry/ministry-health-library>.

5 Resources

Accident Compensation Corporation publish resources at <https://www.acc.co.nz/resources/#/> under Injury support > Traumatic brain injury (TBI).

Outcomes and performance criteria

Outcome 1

Describe how physical impairment can affect a person following a brain injury.

Range impairments may include but are not limited to – weakness, paresis, increased/decreased tone, balance and gait abnormalities, sensory impairment, co-ordination problems, swallowing difficulties, fatigue, incontinence, headache, nausea, dizziness, vestibular dysfunction, epilepsy, pain.

Performance criteria

1.1 The ways that physical impairments caused by a brain injury can affect engagement are described for a person with a brain injury.

1.2 The ways that physical impairments caused by a brain injury can affect participation are described for a person with a brain injury.

Outcome 2

Describe how to support a person physically affected by a brain injury.

Range engagement, participation.

Performance criteria

2.1 Mobility support for a person physically impaired following a brain injury is described.

Range support may include but is not limited to – transfers, mobility aids, splinting, strengthening, passive stretches, positioning, prompting, supervision, exercise programmes.

2.2 Support for a person whose senses have become impaired following a brain injury is described.

Range sensory impairment may include but is not limited to – visual, auditory, altered sensation, taste, smell; support may include but is not limited to – environmental management, education, use of supportive devices, supervision, therapy.

2.3 Support for a person with swallowing difficulties following a brain injury is described.

Range swallowing difficulties may include but are not limited to – aspiration, oromotor function, choking; support may include but is not limited to – education, managing consistency and texture of food, positioning, supervision, prompting, nutritional supplements, therapy.

2.4 Nutritional support for a person affected by a brain injury is described.

Range the effects of a brain injury may include but are not limited to – appetite changes, impulsivity, side effects of medication, satiety, taste changes, oromotor dysfunction; support may include but is not limited to – prompting to eat, weight management, nutritional supplements.

2.5 Support for a person with managing incontinence after a brain injury is described.

Range support may include but is not limited to – prompting, routine, continence plan, use of continence products, orientation, fluid and diet management, education, medication.

Outcome 3

Support a person physically affected by a brain injury.

Performance criteria

Range two of – mobility, sensory impairment, swallowing difficulties, nutrition, continence.

- 3.1 Strategies to facilitate engagement for a person physically affected by a brain injury are implemented.
- 3.2 Strategies to support participation for a person affected by a brain injury are implemented.
- 3.3 Safety strategies to support participation for a person affected by a brain injury are implemented.
 Range strategies include – safety of the person affected by injury, own safety, safety of others.
- 3.4 Any physical changes are documented in the personal plan. Recommendations are made for any changes to the personal plan required to address physical change.

Outcome 4

Maintain, clean, and store equipment and items used by a person whose physical functions have been affected by a brain injury.

Performance criteria

- 4.1 Equipment and items used by a person with impaired physical functions are maintained, cleaned, and stored according to manufacturer instructions and the person’s personal plan.
 Range equipment and items may include but are not limited to – batteries, safety checks, cushions, items used for hygiene.

| | |
|----------------------------|------------------|
| Planned review date | 31 December 2026 |
|----------------------------|------------------|

Status information and last date for assessment for superseded versions

| Process | Version | Date | Last Date for Assessment |
|-----------------------|---------|------------------|--------------------------|
| Registration | 1 | 19 November 2010 | 31 December 2023 |
| Rollover and Revision | 2 | 24 October 2019 | 31 December 2023 |
| Review | 3 | 27 May 2021 | N/A |

| | |
|--|------|
| Consent and Moderation Requirements (CMR) reference | 0024 |
|--|------|

This CMR can be accessed at <http://www.nzqa.govt.nz/framework/search/index.do>.

Comments on this unit standard

Please contact Careerforce info@careerforce.org.nz if you wish to suggest changes to the content of this unit standard.