

Dear Sir/Madam,

Thank you for your interest in Recolo. We are pleased to provide you with an overview of what we do and a summary of the types of services we provide.

Who are Recolo?

Recolo provides expert, high quality and effective community-based neuropsychological, cognitive and behavioural neuro-rehabilitation service to children, young people up to the age of 30 and their families. We work with those who have or are impacted by an acquired or traumatic brain injury.

Recolo is clinically led by experienced paediatric neuropsychologists, (clinical psychologists and educational psychologists) and our clinical focus is holistic in nature. In practice, this means that Recolo always aims to work with not just the child or young person in isolation, but with the whole family, their school and in the social context in which they live.

The Recolo team is always pleased to work in partnership with other services and disciplines relevant to the child or young person's life including case managers, allied health professionals, schools, colleges, CAMHS, employers and any other relevant personnel.

About ABI

Acquired Brain Injury (ABI) is one of the most common causes of disability and mortality amongst children and young people in the UK. It is estimated that every 30 minutes in this country a child or young person will have an ABI. ABI is generally defined as an injury to the brain which happens at some stage subsequent to birth. It could result from trauma in an accident (e.g. Road traffic collision, fall, assault, etc.), an illness (e.g. meningitis or encephalitis), or from another neurological event (e.g. stroke, tumour, hypoxic or anoxic event, etc.) ABI is usually unpredictable in nature and is therefore impossible to prepare for. The consequences, however, can be devastating and long-lasting for the individual, the family, and the wider context within which the child functions.

Our Model

We apply our 'PEDS' holistic model to our assessments and rehabilitation work. PEDS is a framework that encompasses, P-physical, E- executive and neuropsychological, D-developmental and S-systemic aspects of the child's functioning. Our recent peer-reviewed paper outlines the latest developments in evidence and greater detail about how we apply our model. A copy of the full article is available on request (Byard et al, 2021). A summary is available here: summary-of-peds-framework-final.pdf (recolo.co.uk)



How does Recolo work?

When a case is referred to Recolo, information is initially gathered through a brief standardised Recolo referral questionnaire completed by the case manager/referrer. We do require a completed referral form before we can offer a Recolo associate for the assessment. This enables a good match for the family. We can provide CVs as required.

Once the best Recolo practitioner for the case is agreed, they will then conduct an assessment with the young person and their family at the home location and will include school visits and liaison as required. This is our 'core neuropsychology rehabilitation assessment' and provides a holistic picture of the child and family's current neuropsychological needs, recommendations, objectives and goals for the proposed intervention. This is essential for the practitioner to gain a full picture of the child and family's needs. A comprehensive assessment report with recommendations and costs for intervention is provided to the commissioning party.

What Recolo can provide for case managers

At all stages throughout a case Recolo understands the need for effective communication and proactivity with the wider supporting network. We believe that through this approach we can provide a good working partnership with all involved, with clear strategies for progressing rehabilitation, providing the best in client care and using the clinical expertise and experience of our team of neuropsychologists. We understand the need for good communication and sensitivity towards the patients and wider family's needs.

Following assessment, we will provide a report that is clear, succinct and with well explained recommendations. The report will contain a thorough consideration of the background details and presenting needs, including a brief general history, educational history, cognitive abilities, social, emotional and behavioural functioning, plus family functioning, observations and interviews carried out at home or at school. The report may also include findings from liaison with you and other supporting health and social care professionals in both private and public sectors.

As we have worked through the pandemic, we have built skills in providing input online. As restrictions lift, we continue to consider the best ways to provide interventions and can continue to offer some online input when this is appropriate, agreed with the family and in the best interests of the child. We envisage that some MDT/IDT meetings may also continue to be held online, at the discretion of the case manager.

The report will conclude with recommendations for on-going work, including costs. Listed are examples of some of the types of treatments:

- Specific and specialised psychological/neuropsychological input to the child, family system, and wider support network caring for and supporting a child with a brain injury.
- Understanding and support of challenging behaviour using the antecedent behavioural management model and positive behaviour supports.



- Liaison with school/educational establishment and personnel, including support, consultation and training.
- The use of neuropsychological assessment, standardised outcome measures, interviews and observations, to monitor progress and outcome.
- Trauma interventions for family members
- Training and consultation to support workers
- We can also act in the role of Clinical Lead for the case. Costs and duties for this role would be provided. Please request our 'Clinical Lead' document for more details

Please note that we are unable to send sample reports due to the risk of identifying information breach our confidentiality guidelines.

Recolo costs

Rehabilitation assessment including up to 6 hours contact time with client and family, accompanied by report with recommendations:

• Associate Psychologist: £2,350 - £2550

Intervention £180 - £225 per hour per session.

Each session usually comprised of 3 hours, of which 2 hours is client contact time and up to 1-hour admin (to include report writing, professional liaison).

Additional clinical work £180 - £225 per hour (e.g MDT meeting attendance during the assessment period).

Travel costs are based from our nearest psychologist location at £175 per hour.

I hope that this information is of use to you. Please do not hesitate to contact us with any additional queries you may have, either by phone or email as below. We look forward to working with you in the near future.

Yours sincerely Lois Shafik-Hooper

COO

cc. Abby Stewart - Practice Operations Manager