

Center for Transitional Neuro-Rehabilitation (CTN) Home Independence Program



For More Information

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Who We Are

The Center for Transitional Neuro-Rehabilitation (CTN) is often the final step in a patient's neuro-rehabilitation journey. CTN offers holistic, milieu outpatient programs to help patients return to independence and productivity in the home, community, school, and work. Predicated on compassion, dignity, respect, and expertise, the CTN provides guidance and support for patients and their families – enabling lasting, positive results of comprehensive neuro-rehabilitation

Who We Serve

Older adolescents and adults (ages 14 and older) with moderate to severe acquired brain injuries, who are leaving the acute care hospital, neuro-rehabilitation facility, or are living in the community may be considered for admission to the Home Independence Program. At this stage, patients often require 24-hour supervision at home.

Purpose

Our purpose is to help patients become independent at home and in their community, and function as productive members of their family. This program is designed to help patients gradually become as self-sufficient as possible, improving their level of functioning and family life.

What We Do

Assessment

Comprehensive multidisciplinary evaluations to identify strengths, challenges, and home and community independence goals, and establish length of treatment.

Therapy

Therapy includes intensive individual and group therapies up to five days per week, including: Physical Therapy, Occupational Therapy, Speech Therapy, Psychotherapy, Psychiatry, Social Work, Nutrition Therapy, and Recreational Therapy to build strengths, address deficits, and introduce compensations or strategies to improve function. Regular home visits and weekly incremental Home Independence Checklists are utilized to evaluate and monitor progress.

Transition to Independence

Support is provided by the therapy team, family/friends, and the community to transition to independence in multiple domains.

Transition to Independence



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Admission Criteria

- Patients must be referred and followed regularly by a physician (e.g., Rehabilitation Medicine Physician, Neurologist, Primary Care Physician) during their treatment in the Home Independence Program.
- Patients have sustained a moderate to severe acquired brain injury.
- Patients must have the capacity to progress to staying unsupervised in their homes for a minimum of four hours per day by the time of discharge.
- Generally, patients should have sufficient cognitive and social skills to allow participation in small group interactions within approximately four to six weeks of entry into the program.
- In general, patients should have achieved bowel and bladder control before entry to the program and be independent in toilet transfers.
- Patients should not have extensive medical or surgical needs that would result in absence from the program more than four hours per week.
- Patients must be independent with cueing to take their medication, including insulin, during their treatment day.
- There should be no major psychiatric disturbance that interferes with the patient's ability to function and benefit from the program, including substance abuse. Patients with a history of drug/alcohol use will be required to take random drug/alcohol screens, if deemed appropriate by their treating physician or CTN psychiatrist.
- Patients should not be experiencing significant confusion and disorientation (e.g. post-traumatic amnesia).
- In general, patients must be able to tolerate four to six sessions per day of therapy within one month of admission to the program and be open to recommendations from all treatment disciplines.
- Patients must be willing to cooperate in a milieu-oriented program and act as responsible community members.
- Patients must have the capacity to increase their awareness and acceptance of their problem areas and develop realistic goals with respect to independent functioning in the home and community.
- Family members must be willing to attend regular family meetings with a Neuropsychologist, Rehabilitation Psychologist, or other relevant therapists, the weekly Relatives' Group, and participate in Home Visits.

Outcomes at Discharge

Data was compiled from patients who participated in the Home Independence Program from 2022-2025.



Unsupervised Time

Greater than or equal to **4 hours unsupervised** at discharge:

94%

Increased unsupervised time at discharge:

94%



Caregiver Burden

Caregivers reporting **reduced burden** at discharge:

