The return hand continued Royal Rehabilitation Centre in Sydney (RRCS). Through...

• Formal Transfer Guidelines\(^1\) to facilitate the smooth transition of the burn patient from the acute to the rehabilitation setting.
• The S. H. A. R. E Peer Support Program\(^2\) that links patients with a burn injury to a burn injury survivor.
• A Burns Rehabilitation Course, initially for staff at RRCS, as a means of efficient dissemination of burn specific education.

Scheduled meetings ensure the constant re-evaluation and reassessment of the needs of both the staff and the burn injured population.

**Challenges ahead**

As of September 2013, the unit at Royal Rehabilitation Centre Sydney will be moving to the new Graythwaite Rehabilitation Centre at Ryde Hospital. The move includes only a limited number of staff with burns experience. In the short term we anticipate many more cross-site visits and joint treatment sessions between burns specialists and rehabilitation staff. Priority will also be given to new staff working at Graythwaite to attend the Burns Rehabilitation Series in May 2014.

We look forward to building a new collaborative working group with the Graythwaite team and will endeavour to continue the high level of burn rehabilitation care and good outcomes for our severe burn injured patients.

**Conclusion**

So are we achieving the Gold Standard of burns rehabilitation in NSW? The ANZBA Allied Health Guidelines state that the “health professional should consistently and repeatedly provide ongoing education and support to patient, staff and care providers, throughout recovery.”\(^{[2]}\)

Collaboration with our local rehabilitation hospital and the further “spread of word” via the burns education series has certainly widened the network of burns experienced clinicians in NSW. This can only serve to optimise burn patients’ rehabilitation throughout their continuum of care, wherever they may live.

As demonstrated with the change of our local rehabilitation facility, the circumstances of burn patients and staff is ever changing. The need for ongoing education, frequent review of transfer guidelines, continuation of collaborative working parties, and re-evaluation of patient and clinician needs is essential.

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\(^1\) Burns Series Lecture

\(^2\) Graythwaite Rehabilitation Centre

\(^3\) ANZBA 2013

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References: