

Vocational rehabilitation at Reykjalundur Rehabilitation Center

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Introduction: Reykjalundur is a medical rehabilitation center in Mosfellsbaer, on the outskirts of Reykjavik, with 11-1200 admissions per year. Reykjalundur was founded in 1945 as a vocational rehabilitation center for TBC patients and is therefore owned by the Icelandic Association of Tuberculosis and Chest Patients and run as a nonprofit organization. The clinic is part of the Icelandic health care system, financed by the state, with attendance free of charge. Today Reykjalundur has a broad profile in rehabilitation, including a unit for vocational rehabilitation. All our patients are referred by physicians and the majority have multi-morbidity, often combining physical disability with psychiatric problems and a stressed social situation. The center is frequently a last resort of rehabilitation after years of vocational rehabilitation elsewhere. It is a prerequisite that people attending the program are willing to participate on the labor market.

Evaluation: The team's physician begins the evaluation process as soon as possible with an appointment, assessing the patient's clinical problems and motivation. If appropriate the patient then meets all the members of the team. ICF evaluation is carried out based on function tests for the various disciplines. There is a joint team decision as to whether the patient is suitable for vocational rehabilitation in the unit. At the end of the treatment an ICF assessment is again carried out.

Treatment: Initially there is a team meeting with the client for setting the treatment goals. In most cases there are also scheduled meetings with family members. The program is based on an interdisciplinary approach, combining physiotherapy, condition training, psychological treatment, and vocational training in work adjustment facilities and with support from our social worker, nurse and physician. The patients attend various theoretical courses according to their illnesses, in fields such as pain management education, cognitive behavioral therapy, mindfulness, or lifestyle orientation. The patients attend the clinic 6 hours a day, 5 days of the week. If the patient is not fit for the labor market after a period of rehabilitation, the process of getting a permanent disability pension is initiated and the patient's livelihood secured by connecting the patient with social services.

Results: In 2015 thirty-eight individuals attended the clinic, 21 males and 17 females, with a mean age of 43 and in an age range of 27- 58. The 38 clients had been out of work for an average of 2.2 years up to 7 years before being as to the program. Of the patients, 31 had mental diseases, 28 muscle skeletal disorders and three had brain injuries. The educational level of the patients was varied; 15 had only an elementary education, 11 had technical education, 4 had finished the gymnasium or pre-college level and 8 had university education. The mean time for rehabilitation was around 4 months. The shortest period was 4 weeks and the longest 16 months. After the treatment, 22 out of the 38 were at work (19) or at school (3), for a total of 58%.

Conclusion: Reykjalundur Rehabilitation Center has a vocational rehabilitation unit with a long tradition of serving individuals with multi-morbidity with an interdisciplinary team approach. Thirty-eight individuals attended the unit in 2015 with a mean age of 43 years, and 58% of the patients were working after the rehabilitation period.