



[MyCraig.org Website for Alums](#) | [Site Map](#)
| [Help](#)

- [Home](#)
 - [Campus Map](#)
- [Colorado and Denver Area Information](#)
 - [Directions To Craig](#)
 - [Local Flower Shops](#)
 - [Nearby Accommodations](#)
 - [Quick Photo Tour](#)
- [Transportation/Rental Information](#)
 - [About Us](#)
 - [Overview](#)
 - [Craig's Leadership](#)
 - [Medical Staff](#)
- [Mission Statement, Values, and Our Commitment](#)
 - [History](#)
 - [Family Housing](#)
 - [Volunteering](#)
 - [Why Craig](#)
 - [Why Choose a Specialty Hospital](#)
 - [How to Choose a Specialty Hospital](#)
 - [Why Choose Craig Hospital](#)
- [Treatment Philosophy and Patient Expectations](#)
 - [What's New](#)

- [Contact Us](#)
- [Contact Information](#)
- [Directions To Craig](#)
- [Feedback Form](#)



101 Years of Rebuilding Lives

- [Referral & Admission](#)
 - [Admission](#)

Traumatic Brain Injury

- [Criteria](#)
 - [Request for Referral Information](#)
 - [Spinal Cord Injury Referral Process](#)
 - [Traumatic Brain Injury Referral Process](#)
 - [Contact Admissions Staff](#)
 - [Insurance Information](#)
 - [Accreditations and Licensing](#)
 - [Reference Information](#)
 - [Notice of Privacy Practices](#)
 - [Spinal Cord Injury](#)
 - [Inpatient SCI Rehabilitation](#)
 - [Ventilator Dependent and Weaning Programs](#)
 - [Rehabilitative Neurosurgery](#)
 - [Re-evaluations, Follow-up, and Clinic Services](#)
 - [Health and Wellness Information](#)
 - [Spinal Cord Injury Research](#)
 - [Spinal Cord Injury Video](#)
 - [Nurse Advice line * NEW](#)
 - [Traumatic Brain Injury](#)
 - [Traumatic Brain Injury Inpatient](#)

Program

Outpatient Traumatic Brain Injury Rehabilitation

Craig Hospital's Brain Injury Outpatient Program is a combination of multiple individual patient programs, not a prescribed day treatment model. It is a process-- of improvement, often of adjustment, uniquely designed and delivered for each patient based on individual medical, functional and clinical needs. Outpatients commute from home or stay in our Craig apartments.

The outpatient program recognizes that much of a patient's recovery occurs after discharge from inpatient hospitalization. Immediately following inpatient brain injury rehabilitation, outpatient treatment is usually intensive, followed by a systematic and gradual reduction or change in therapy as clinically appropriate for the individual. As therapy goals are met, or clinical conditions change, certain therapies may be discontinued, while others may intensify. Out of necessity, outpatient rehabilitation has become very functional and direct. At Craig Hospital, outpatient therapy is delivered by highly trained and experienced professionals in the context of a cutting-edge Model Systems program.

"Craig to Community": The Outpatient Team

Home and community reintegration is a crucial component of the outpatient program at Craig Hospital. We recognize that skills and strategies should be taught in the environment where they will be used. Thus, as patients are prepared for discharge from the inpatient rehabilitation program, Craig Hospital therapists begin implementing individual home and community-based treatment in conjunction with the hospital-based out-patient program.

At Craig Hospital, a multidisciplinary outpatient team uses an individualized approach to provide a wide range of services. This core team consists of Physical Therapy, Occupational Therapy, Speech and Language/Cognition Therapy, Patient and Family Service Counselors, and Therapeutic Recreation. Also available on the team are Neuropsychology, the Community Reintegration Program, the Driving Program, the Teacher, a Follow Up Services Case Coordinator and a Community Resource Coordinator.

Outpatient treatment at Craig Hospital maintains the Continuum of Care from inpatient. The inpatient model of physician, counselor and team management of the treatment program, team rounds, patient scheduling, setting goals, meeting time frames, patient-family-insurance conferences, and documentation are employed.

- [Program](#)
 - [Traumatic Brain Injury Outpatient Program](#)
 - [Educational Information](#)
 - [Traumatic Brain Injury Research](#)
 - [Traumatic Brain Injury Video](#)
- [Research](#)
 - [Meet the Staff](#)
 - [Current Projects](#)
 - [Instruments](#)
- [Career Opportunities](#)
 - [General Information](#)
 - [Benefits](#)
 - [How to Apply](#)
 - [Employment Application](#)
 - [Current Opportunities](#)
 - [Internships](#)
- [Nursing Opportunities](#)
 - [Introduction](#)
 - [Employment Opportunities](#)
 - [Career Advancement](#)
- [Foundation & Donations](#)
 - [100th Anniversary](#)
 - [About Us](#)
 - [Areas Of Need](#)
 - [Donate Now](#)
 - [Events](#)
 - [Planned Giving](#)
 - [Ways to Give](#)
- [Information & Resources](#)
 - [MyCraig.org Website for](#)

Outpatient Clinic

The Outpatient Clinic is the home base for Craig Hospital outpatients. All outpatient laboratory tests and radiographic studies are scheduled here, as are appointments with consulting physicians. This is where outpatients come for an appointment with their Craig Hospital physician. The Outpatient Clinic has rehabilitation nurses and nurse practitioners on staff Monday through Friday. Outpatients with emergency medical needs are sent to the Emergency Room at Swedish Medical Center, next door.

The Outpatient Coordinator

The Outpatient Coordinator for the Brain Injury Service manages the individualized, goal directed outpatient programs, supervises the scheduling and logistical needs for the Outpatients, and serves as the liaison for outpatients, their families, physicians and outpatient staff. The Outpatient Coordinator also manages all Outpatient Re-evaluations and Group Evaluations, and provides continuity and direction during transition periods, such as from Inpatient to Outpatient.

Reintegration into the Community: Functional Evaluation and Training

Usually the first step toward re-integration into the community is a functional evaluation followed by goal-directed training. These evaluations provide a "real life" assessment of independence in the community, capabilities and functional limitations prior to an individual's attempt to return to pre-injury activities or employment. Outpatient evaluation and training is designed not only to monitor progress towards rehabilitation goals, but also to build skills, confidence, self awareness and compensation strategies in a variety of settings.

Neuropsychological Evaluations, Driving Evaluations, Physical Capacity Evaluations and Situational Assessments are part of the evaluation process. Personal Adjustment Evaluations and Training, Rehabilitation Technology Evaluations and Training, Community Mobility Training, Work Adjustment Training and Job Coaching are all services that can be provided by the Craig Hospital Outpatient Team.

Outpatient training is provided using a wide range of activities. There is collaboration between disciplines, and between agencies and service providers. Goals are developed in context of the client's community.

Reintegration into the community is the most commonly accepted outcome factor for successful rehabilitation. At Craig Hospital, the

- [Alums](#)
- [Alumni Updates for Movin' On](#)
- [Craig Hospital Alumni Scholarship Program](#)
- [Prevention Information Program](#)
- [Therapeutic Recreation Programs](#)
- [Support for Police Officers](#)
- [Other Web Sites of Interest](#)

Outpatient team assists patients and families to build lifelong, self sustaining strategies and supports.

Focus on Functional Goals:

- Self care
- Functional Communication
- Mobility at home and in the community
- Employment
- School
- Homemaking/Child care
- Independence
- Time Management
- Structured day
- Safety/Consistency
- Self Advocacy
- Health and Fitness
- Recreation and Socialization
- Money Management
- Transportation

Vocational Rehabilitation

Productivity is crucial for reintegration and life satisfaction, and vocational activities are initiated early in the treatment process. The Community Reintegration Specialist, skilled in career planning and job reintegration, represents the first level of the system's vocational rehabilitation program. This specialist consults with both in- and out-patient teams to develop and initiate a pre-vocational plan. Frequently this involves education and planning with the patient's pre-injury employer.

If return to a pre-injury job is not an option, an alternative vocational plan can be developed that includes retraining. The Community Reintegration Specialist assists the patient and the family in identifying funding for vocational training, college programs or on the job training in both competitive and supported settings. Vocational interest exploration testing and career development activities are also available. Helping outpatients and their families understand their disability benefits and resources is also a feature of the outpatient program.

Additional support and guidance from the Colorado Division of Vocational Rehabilitation (DVR) for this phase of an outpatient's training increase the likelihood of success. Funding for evaluations, work trials, equipment, training, and job placement services may be available through DVR.

Community Based Programs: Denver Metro

For those who require a less vocationally-focused post-acute rehabilitation program, the Outpatient Team works with community-



based programs that offer services and opportunities in such areas as recreation, the arts, and post-secondary education. By maintaining a close and effective liaison with these programs, Craig Hospital extends the breadth of its comprehensive Model System beyond the traditional rehabilitation program.

A few of the programs with which Craig Hospital has worked closely include: a choice of innovative Day Programs for people with adult-onset neurological disabilities; the Community College Consortium for People with Disabilities which provides special classroom accommodations, computer classes, and counseling and support for people with disabilities in Colorado's community colleges; Community Recreation Centers, where Craig Hospital physical and recreational therapists provide consultations to assist and train staff in program development and accessibility issues for TBI survivors in the community; Outdoor Education programs providing supported sports and recreational opportunities for people with disabilities, the Brain Injury Association of Colorado and The Hangout Resource Center, a client driven variant of the TBI Clubhouse Model.

Other Communities: Regional and National

Some of our patients don't live in the Denver Metro area. They require an outpatient or community reintegration program in their home community. Craig Hospital's Family Service and Follow-up Service counselors provide referrals to programs and resources near the patient's home.

Craig Hospital has close working relationships with numerous regional and national residentially-based, transitional living and community reintegration programs for people with traumatic brain injury. All of these programs strive to extend the Craig Hospital program by systematically reinforcing and improving skills necessary for self-reliance and advocacy within the individual's home and community.

Follow-up Services

For all of its outpatients, Craig Hospital provides long-term support. Past experience at Craig Hospital - substantiated by other programs, researchers and consumers - has taught us that many people with brain injury continue to have ongoing or episodic needs. The need for education, services and support exists independently of discharge dates, and so Follow up Services continues for patients and families after outpatient rehabilitation ends.

The key component in this network involves Craig Hospital's two Follow-up coordinators: the Community Resource Coordinator and Case Coordinator. These master and social work trained counselors

assist individuals and their families in locating services and interventions in the areas of housing, mental health, socialization, home health, transitional living, changing family support, transportation and unmet medical needs at any time after they finish rehabilitation.

They work with governmental agencies and independent living centers throughout the region, as well as with accessible and subsidized housing programs, assisted living programs, home health care, and community services. They are also active in statewide initiatives and legislation to benefit people living with brain injury.

Specialty Clinics and Services

Craig Hospital has the following Specialty Services Available:

- Hand Clinic
- Spasticity Management Clinic
- Brace/Orthotic Clinic
- Orthopedic Manual Physical Therapy
- Light gait program
- FES Bike
- Neuro-Optometry "Vision" Clinic
- Transportation Clinic/Driving Program
- Swallowing evaluations
- Urodynamics
- Skin Clinic
- Horticulture Therapy
- Wheelchair Seating Clinic
- Adaptive Technology Lab
- Volunteer Workstations
- Rehabilitation Engineering
- Pool Therapy

In addition, Craig Hospital refers patients to the following:

- Balance clinics
- Movement Disorder Clinic
- Gait Lab
- Smell and Taste Disorder Clinic
- Work Hardening Program
- Adapted Sports and Recreation Programs
- Equestrian programs
- Alternative Therapies- Massage, Acupuncture, etc..

Outpatient "Group" Evaluations

For patients who have been out of the Craig Hospital program for more than a year, some for as long as 10-20 years post injury, we offer re-evaluations in response to specific questions or needs that may have arisen, such as medical changes, behavioral changes,

changes in function, aging of family caregivers, need for new equipment, need for alternative placement, etc. Many of our clinical staff have worked in this field of aging and traumatic brain injury for two decades or more, have significant experience from working with former patients, and are uniquely qualified to provide valuable problem-solving strategies and recommendations for these long-term patients and families who face similar situations.

Evaluation of outpatients with traumatic brain injury who are new to Craig are considered on a case-by-case basis. Typically such evaluations are considered for persons who require evaluations by all members of the interdisciplinary team.

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