

# Rehabilitation After Trauma: A Case Study by Andrea Hemingway



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## Introduction to Andrea

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Andrea is a highly skilled physiotherapist with nearly 30 years of experience in managing complex orthopaedic trauma, musculoskeletal injuries, amputations, and brain injuries. Her extensive background includes both clinical practice and serving as a Rehabilitation Manager at a prominent law firm.

Driven by a passion for patient-centred care, Andrea's expertise enables her to customise interventions that address the distinct needs of each client, thereby optimising their recovery and overall well-being. Andrea is committed to continuously exploring innovative solutions and collaborating with multidisciplinary teams to improve treatment outcomes. Her ability to integrate evidence-based practices with a compassionate approach ensures that clients receive the support and understanding they need throughout their rehabilitation journey.

Andrea's dedication to continuous learning ensures she remains at the forefront of advancements in her field, allowing her to implement the most current practices. Her colleagues and clients alike appreciate her approachable nature and unwavering commitment to achieving the best possible outcomes. Whether working independently or as part of a team, Andrea consistently delivers excellence, demonstrating both leadership and a supportive spirit that inspires those around her.

Andrea demonstrates exceptional efficiency and quickly assimilates new information. Her communication skills are characterised by clarity, compassion, and conciseness. She prioritises her clients' goals and needs, adopting a caring approach in her interactions. Over the past few years, Andrea has actively participated in numerous multidisciplinary teams (MDT)

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## Introduction to the Case

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The client is a 52-year-old retired firefighter who was employed as a swimming coach at a private school. They were involved in a road traffic collision as a cyclist, resulting in a collision with a motor vehicle. The incident led to multiple injuries, including fractures to the clavicle, pelvis, and lumbar spine.

At the time of instruction, the client was solely accessing NHS services due to limited access to private treatment. They were receiving ongoing support from their GP, orthopaedic and neurology teams, as well as hydrotherapy and physiotherapy services. Additionally, the client was able to attend a firefighters' rehabilitation facility for short periods, where they engaged in intensive therapy, including physiotherapy, hydrotherapy, and counselling.

The client presented with reduced range of movement in the lumbar spine and shoulder, accompanied by diminished muscular strength. The primary aim of the rehabilitation programme was to improve functional mobility and restore strength in these areas to enable a safe and sustainable return to work.

The client also reported symptoms including tinnitus and balance disturbances. These concerns were integrated into a holistic rehabilitation plan to ensure a comprehensive approach to recovery.

Following the trauma of the incident, the client experienced significant mental health challenges. They reported difficulty accepting the extent to which their injuries were affecting their life and future plans. Emotional distress intensified in relation to the legal proceedings, particularly as the third party involved proceeded to court.

The client expressed feelings of frustration, fear of reliving the trauma, and uncertainty about the legal outcome. These psychological factors contributed to symptoms of low mood, anxiety, disrupted sleep patterns, and persistent fatigue. The client's family also reported difficulty understanding and processing the impact of the situation, particularly in relation to what they perceived as an extended and disproportionate legal process compared to the client's visible symptoms.

“I knew it was important to have a thorough assessment of his injuries and needs and to understand his goals and what he wanted from therapy. I knew it was important was important to work with NHS providers to devise a robust rehabilitation plan to assist with good physical function, driving, work, cycling and swimming as well as his role in the family unit.”

**- Andrea Hemingway (Case Manager)**

## Summary

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The Client's rehab journey was not just about the physical injuries he'd sustained as a result of the index injury but was significantly about the impact of the incident on his mental health and family support system. It was also important to recognise the impact on his place and role within his family. Considerable time invested into consideration for his wife and teenage children, their fears and worries. His family remained engaged and supportive throughout.

The client was able to return to work after a year of rehab. He returned on a phased return to work initially and increased his hours and responsibilities as his condition improved.

## Conclusion

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While the severity of the clients' physical injuries was acknowledged, equal attention was given to the significant impact on his mental health. Addressing these psychological factors was deemed essential, and the rehabilitation process was carefully paced in alignment with his individual concerns and his rehabilitation goals.

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**For questions and  
enquiries, reach out to  
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