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The role of rehabilitation in effective interdisciplinary management of the rehab-to-home client

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Given the numerous regulations and criteria imposed upon healthcare providers to manage the care of patients admitted to their facility for short course rehabilitation-to-home, the role of the rehabilitation professional can become a daunting task—to ensure quality care is provided in the most cost efficient manner, while simultaneously ensuring excellent clinical outcomes. The audience will be taken through the journey of the rehabilitationist's role in effectively managing the rehabtohome client. This journey begins with the discharge planning process, which is the pivotal framework (built at the time of admission) for the course of the rehab stay. Critical roles of the rehabilitation professional, in standardized, objective testing, as it relates to the client's functional abilities and goals are delineated. This objective data will become a key part of the Success Story and Outcome Reporting at the time of discharge. Due to the fact that the client spends a large portion of their day in rehab, a positive client-therapist relationship is crucial, and the therapists' role in gathering and relaying critical information to the interdisciplinary team is essential. To ensure a successful and safe discharge home, all areas must be evaluated and any barriers addressed prior to the discharge date. The Post-Discharge Follow-Up components with development of future process improvement plans to close the loop of the continuum of quality care and thus redefine the role of rehabilitation in effectively managing the rehab-to-home client.

Background-

Traumatic spinal cord injury (TSCI) has profound effects on the patient's health condition and function. However current treatment strategies fail in terms of cure. Thus, rehabilitative management has become the main gadget to promote patients' residual function. The most challenging aspect of rehabilitation is high costs of inpatient rehabilitation programs and poor continuity of care while patients are transferred to home. In this regard, numerous home based rehabilitation programs have been introduced.

Introduction-

Traumatic spinal cord injury (TSCI) has profound effects on survivors' health condition and function. Patients with TSCI face many difficulties while returning to their previous social roles. They would experience daily struggles with physical, psychological, and financial problems. Given the high rate of traffic accidents leading to a high number of spinal cord-injured patients in Iran and many other countries, it is necessary to pay special attention to the management of these patients.

Great efforts have been made to develop functional performance along with quality of life of patients with TSCI. The primary goal is to initiate rehabilitation programs as soon as possible after the patient's spinal cord problems have been

stabilized. In this regard, there have been rehabilitation centers around the world in which both new technologies and expert staff are gathered to provide the highest level of patient care. The ultimate goal is to help patients return to their previous function.

Methods-

This study was held as a review. A literature search was conducted in the PubMed, Medline, and Google Scholar database using key terms "spinal cord injury rehabilitation," "home care" and "home based rehabilitation." Studies addressed rehabilitative programs for patients with TSCI in their homes or home likes and their reference lists were reviewed from January 1990 to December 2016. English language studies introducing new methods for home care with a minimum of 10 participants were included. Case reports and theoretical studies with no participants were excluded from the study. Two independent reviewers were in charge of the literature search. The study protocol was approved by the Institutional Review Board and Ethics Committee of Tehran University of Medical Sciences.

Home aids/modification-

Physical barriers in home are among the most important environmental barriers for patients with spinal cord injury to return to normal life. Administration of specially designed equipment for a specific patient and applying possible changes in home or working place architecture would help to elevate patient's sense of secure and independence. These equipment consist of mechanical/electronic devices and also those used in conservative and supportive treatments. Few studies have emphasized the importance of using home aids for patients with TSCI. Using home aids beside application of remote control technologies may result in considerable positive changes, especially in patients with high motivation to overcome their disability boundaries and lower their dependency. Therefore, it would result in higher satisfaction and quality of life.

Discussion-

Conducting clinical research in the field of TSCI rehabilitation is very difficult. Sample heterogeneity and small size, ethical problems of not delivering rehabilitation services to control group, impossibility of patient blinding, and lack of an appropriate measurement tool along with financial problems are some difficulties.[49] Hence, nearly all investigators in TSCI home-based rehabilitation have only introduced and described their findings, and there are no comparative studies performed. Thus, future studies should be dedicated to intelligently designed clinical trials to evaluate and compare clinical effectiveness of different strategies. Financial concerns are another aspect of home care that has been neglected in previous

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studies. Hence, there is a need to conduct cost-effectiveness studies to find the most affordable strategy.

It should be considered that rehabilitation of an individual with spinal cord injury is not just a combination of separated parts coming together, but it includes all aspects of life of a biopsychosocial person with a catastrophic disability. Hence, studies investigating the effectiveness of complete packages of rehabilitation components are mandatory.

Conclusion-

Conducting clinical research in the field of TSCI rehabilitation is very difficult. Sample heterogeneity and small size, ethical problems of not delivering rehabilitation services to control group, impossibility of patient blinding, and lack of an appropriate measurement tool along with financial problems are some difficulties. Hence, nearly all investigators in TSCI home-based rehabilitation have only introduced and described their findings, and there are no comparative studies performed. Thus, future studies should be dedicated to intelligently designed clinical trials to evaluate and compare clinical effectiveness of different strategies. Financial concerns are another aspect of home care that has been neglected in previous studies. Hence, there is a need to conduct cost-effectiveness studies to find the most affordable strategy.

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