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Implementing telerehabilitation services statewide: what are we learning?

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Aims

Evidence supporting the effectiveness of rehabilitation provided using telehealth (telerehabilitation) is growing nationally and internationally. Following a successful pilot project within SA Health^{1,2}, a decision was made to expand telerehabilitation services across the state.

Methods

Consumers across the state are able to loan iPads, or use their own technology, to enhance their rehabilitation program in the home environment. Consumers are able to connect with the entire rehabilitation team for consultations, assessments and therapy as well as utilising the technology to engage with extra goal-oriented activities.

The organisation invested significantly in local support positions for each Local Health Network, as well as central leadership positions and new 'off-the shelf' equipment, acknowledging that telehealth establishment requires timely 'at the elbow' support for problem solving technical challenges and supporting clinicians and consumers with understanding and accessing the technology^{2,3}.

Relevance

Enablers and barriers experienced during this statewide implementation process are consistent with anticipated factors and evidence published^{4,5,6}. Key factors that have supported growth include identification of clinical champions, consistent provision of data to staff and managers, a combined top down and bottom up approach, a training approach that supports individuals and functional teams as well as statewide communities of practice, a balance between statewide consistency and local flexibility, and the adoption of user friendly technology.

Key barriers that may inhibit future growth include the impact on service delivery of the current IHPA pricing model, the perception that telehealth is a lesser substitute, the lifespan and costliness of the equipment, inadequate bandwidth and mobile coverage (particularly in remote areas) and the culture and mindset shifts required to accept telehealth as quality, safe and effective practice. In order to build long-term sustainability, consideration must also be given to future workforce design and minimising complexities involved in managing a secure, encrypted, reliable technology system.

Results

Telerehabilitation activity has doubled across the state in the 2017/18 financial year with consumer feedback remaining positive. 80% of consumers who participated in surveys agree or strongly agree that they received the same standard of care as they would have from a face-to-face appointment, and 88% agree or strongly agree that they would participate in another telerehabilitation consultation in the future.

Conclusion

Sustainable service reform requires continued leadership, organisational investment and ensuring effective consumer and clinician engagement^{5,6,7}. SA Health is committed to training and support models plus an ongoing quality improvement approach that engages consumers, staff, teams and the organisation.

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Presenter

Kate Osborne is the Statewide Telerehabilitation Program Manager for SA Health and, in partnership with multiple local health networks, has been leading the expansion of telerehabilitation across SA to improve consumer access to rehabilitation services. With a regional allied health background Kate is passionate about leading and influencing complex system change that supports staff to empower consumers to focus on improving their health and wellbeing.