

“Hurled into it at the great speed of almighty”: Remote assessments of physical impairments during the Covid-19 pandemic



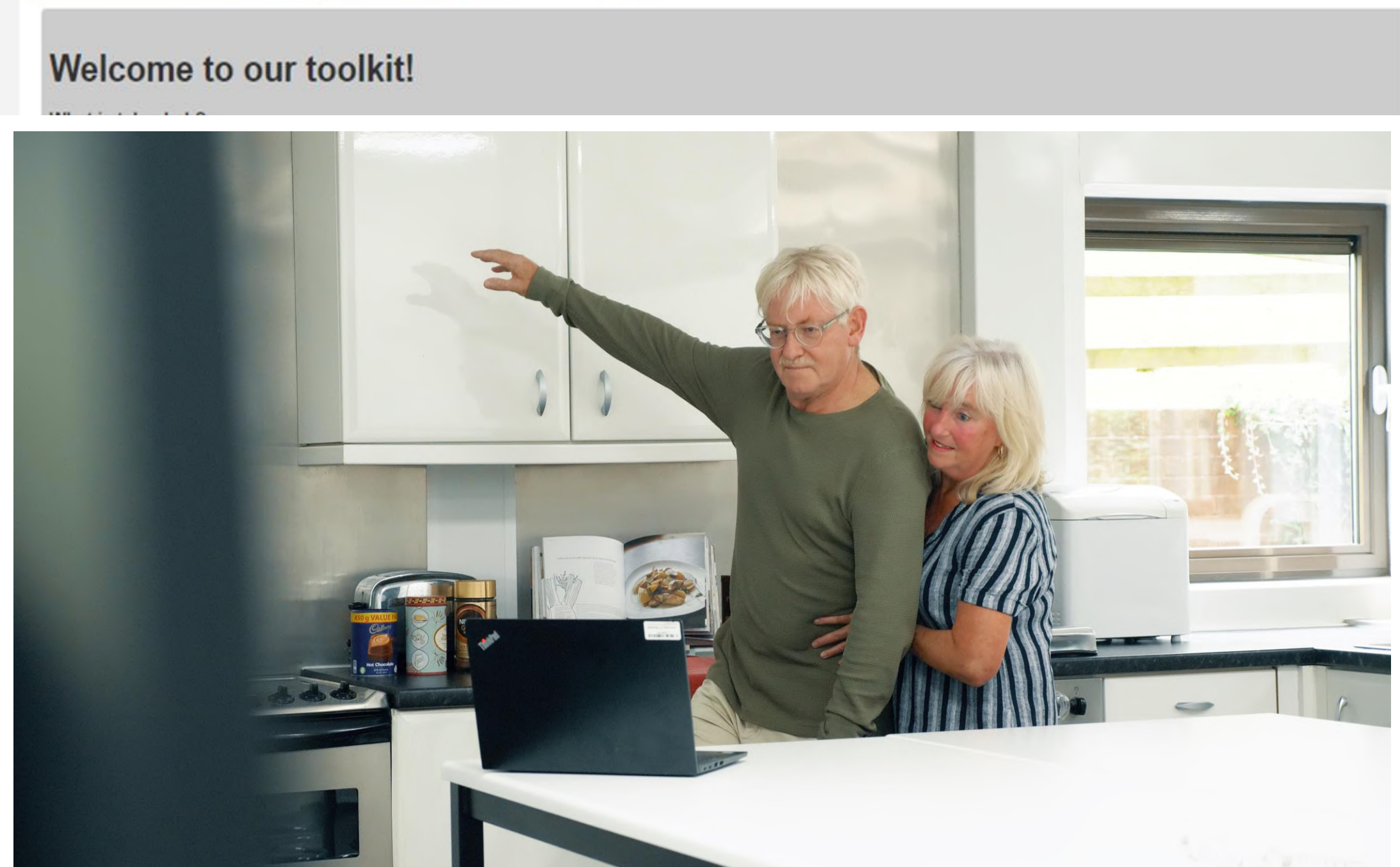
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Background

- Remote assessment of physical impairment is challenging. During the Covid-19 pandemic, practitioners dramatically increased their use of remote consultations. In the words of a participant: “We were hurled into it at the great speed of almighty”
- Anecdotal reports and our scoping review¹ highlighted little specific guidance to inform the remote assessment of physical impairments/function.
- We explored practitioners’ and patients’ experiences of telephone and video-based consultations to inform the development of a freely available Telerehab Toolkit that shares best practice.



What did we do

To inform the development of the Telerehab Toolkit we:

- Undertook a **Rapid Scoping Review**² of the literature to explore existing guidance
- A **National Online survey**² to identify clinicians needs and explore their experiences
- A **Service Evaluation** with five Trusts across Devon / Cornwall, guided by the Theoretical Domains Framework, to identify top tips and best practice
- Explored the use of **new technology**³ which might physical assessments
- Produced and evaluated the **Telerehab Toolkit**⁴ for use within clinical and educational arenas

What we found

Rapid Scoping Review¹: We searched for guidance and training resources about physical and movement assessment via telerehabilitation for people with a physical disability. 6000 records were screened, 425 assessed for eligibility, and data extracted from 23 articles. We found little guidance related specifically to physical assessments.

National Online Survey²: 257 clinicians, representing a wide array of rehabilitation professionals, reported that:

Competent in delivering video-based consultations 72% agree/strongly agree	Confident in problem-solving technical issues 59% agree/strongly agree	Competent in undertaking standardised physical ax's 25% agree/strongly agree	Confident in reliability of physical measures 19% agree/strongly agree	Received training in remote consultations 19% received training	Safety, reliability and validity of remote physical assessments were key concerns
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“It can be quite de-skilling. It’s just like learning from scratch all over again. You are so used to being skilled and picking up on things, and being able to see something and know exactly what it is. I’ve sometimes felt like I’m a band 5 again, with my observational skills and looking at things on a video and thinking, ‘Well, was it that? Do I need to see that again?’ That’s what I was doing when I had just qualified!” (Senior OT)

Service Evaluation:

Discussions with 100 practitioners, students, patients and carers highlighted:

- The early “chaos” experienced in the pandemic subsided relatively quickly
- Many services “stepped up to the plate”, quickly adapting to remote appointments and continuing to learn by experience
- A range of obstacles and facilitators (Table 1) were reported
- Remote consultations were viewed positively. Convenience, such as not needing to travel, was valued, as was the relative ease of joint consultations.
- Most believed remote working is a long-needed change, and a useful part of a broader patient-centred package.
- Discussions revealed three key themes to best practice:
 - Preparation and Planning
 - Communication and Observation
 - Person Centred Care

Obstacles
Practical: e.g. positioning the camera
Technology: e.g. poor internet connection
Patient-related: e.g. technical skills, anxiety
Organisational: e.g. software governance
Facilitators
Support from family members and carers

Table 1: Obstacles and Facilitators to telerehabilitation delivery

The Telerehabilitation Toolkit⁴: freely available at plymouth.ac.uk/research/telerehab

The toolkit includes a wealth of resources for practitioners, students and patients

Topics include: technology and digital skills, assessment tools, “how to guides” and checklists, “top tips”, videos and accounts of peoples experiences, case reports, common questions and answers and links to other resources.

References: 1. Anil et al Scope, context and quality of telerehabilitation guidelines for physical disabilities: a scoping review. *BMJ Open*. 2021;11(8):e049603 ; 3. Jones RB et al. Technologies to Support Assessment of Movement During Video Consultations: Exploratory Study. *JMIRx Med*. 2021;2(3):e30233.

2. Buckingham S et al. Telerehabilitation for People With Physical Disabilities and Movement Impairment: A Survey of United Kingdom Practitioners. *JMIRx Med*. 2022;3(1):e30516. 4. The Telerehabilitation Toolkit – available at plymouth.ac.uk/research/telerehab