

Rehabilitation providers' experiences with rapid telerehabilitation implementation during the COVID-19 pandemic in the United States

UT Southwestern
O'Donnell Brain Institute

Surendra Barshikar, MD; Rupali Kumar, MD; Candice Osborne, PhD, OTR; Robert Rinaldi, MD; Jason Smith, PhD; Shannon Juengst, PhD, CRC.
Department of Physical Medicine & Rehabilitation, University of Texas Southwestern Medical Center

OBJECTIVE

- Determine rehabilitation providers' perceptions of the usability of telehealth in rehabilitation and their satisfaction with telehealth and determine whether providers found telehealth to be more challenging for specific rehabilitation populations.

BACKGROUND

- The adaptation and application of telehealth modalities for the delivery of healthcare has taken on a new urgency as the United States has had to adapt to societal measures aimed at mitigating the spread of the SARS-CoV-2 virus.
- Barriers to telehealth application and full acceptance likely still exist and may include health care provider acceptance, patient familiarity with technology, internet access and broadband speed, dissatisfaction with the lack of full patient interaction, and privacy concerns amongst some patient cohorts.
- Despite these barriers, widespread adoption in the medical community has occurred out of necessity during the pandemic, with little evidence examining provider acceptance and satisfaction with telehealth as a healthcare model during the pandemic.

METHODS

- Anonymous survey study of rehabilitation providers at a University Medical Center and affiliated large urban county hospital.
- Inclusion criteria: rehabilitation providers fluent in English who used telehealth between March 16, 2020 and August 2020.
- 126 survey invitations were sent via electronic RedCap™ link to 70 physicians (attending and residents), 3 AP providers, 48 therapists (PT, OT, SLP), 3 rehabilitation psychologists, and 2 other providers (rehabilitation counselor, physician assistant).

RESULTS

- Telehealth was useful ($M=6.27$, $SD=0.76$), easy to use ($M=5.72$, $SD=1.05$), and effective ($M=5.33$, $SD=1.03$) measured with TUQ.
- Satisfaction with telehealth was high ($M=5.81$, $SD=1.03$).
- 41.2% experienced problems, with technical problems (e.g., connection issues) and limitations of technology (e.g., unable to perform physical examinations) as the most common.
- Traumatic injuries (brain injury, burn injury), stroke, wounds, pain (musculoskeletal, pelvic, chronic), and urinary/bowel dysfunction were the most challenging conditions to address using telehealth.

CONCLUSIONS

- Rehabilitation providers with no previous telehealth experience were highly satisfied with using telehealth technology, finding it to be useful, easy to use, and effective.
- The rapid and effective implementation and positive provider experiences reported in this study indicate that telerehabilitation could be maintained to improve access to clinical services and efficiency in service delivery.

Figure 1. University hospital physician and therapy visits: virtual vs face-to-face appointment.

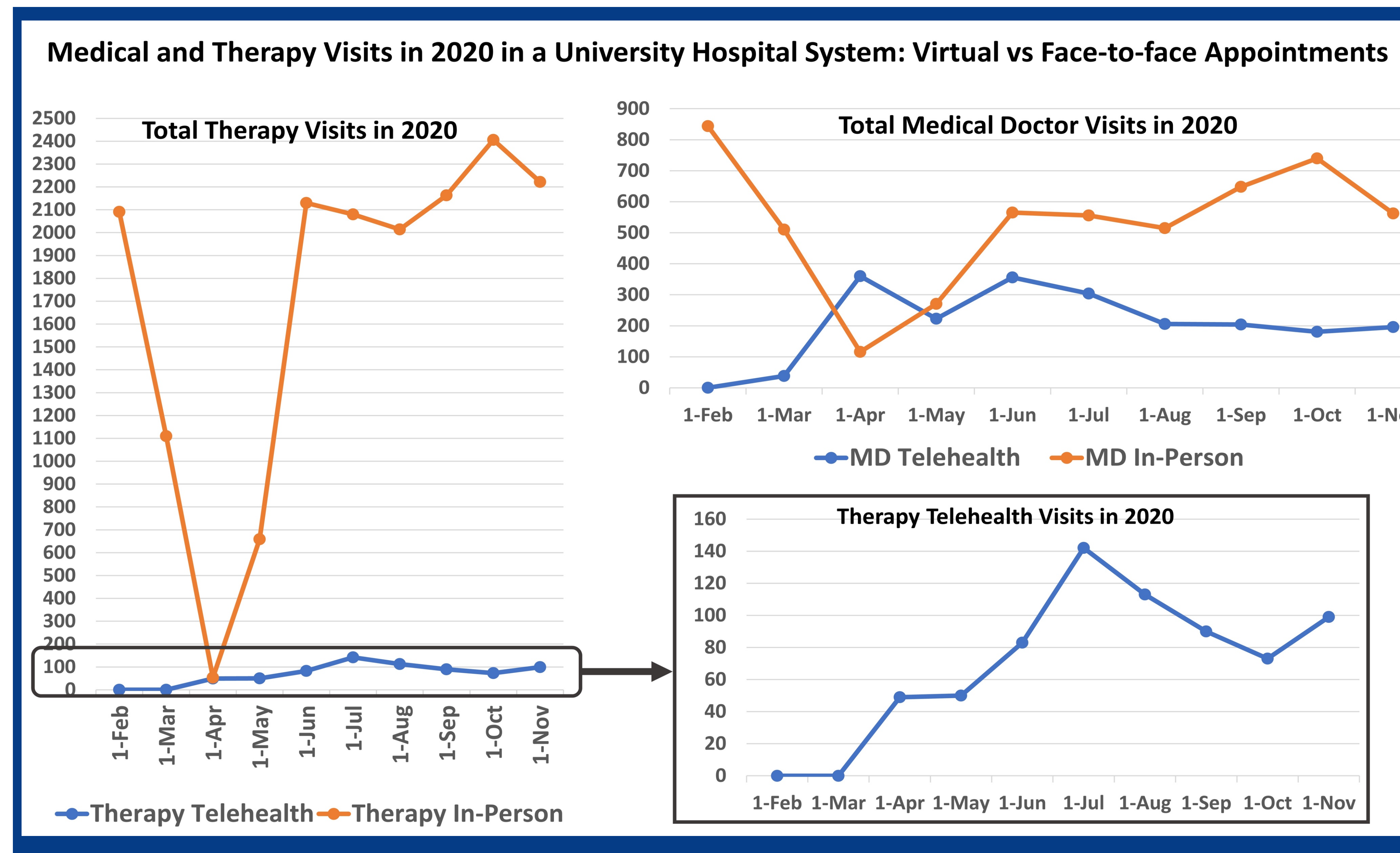
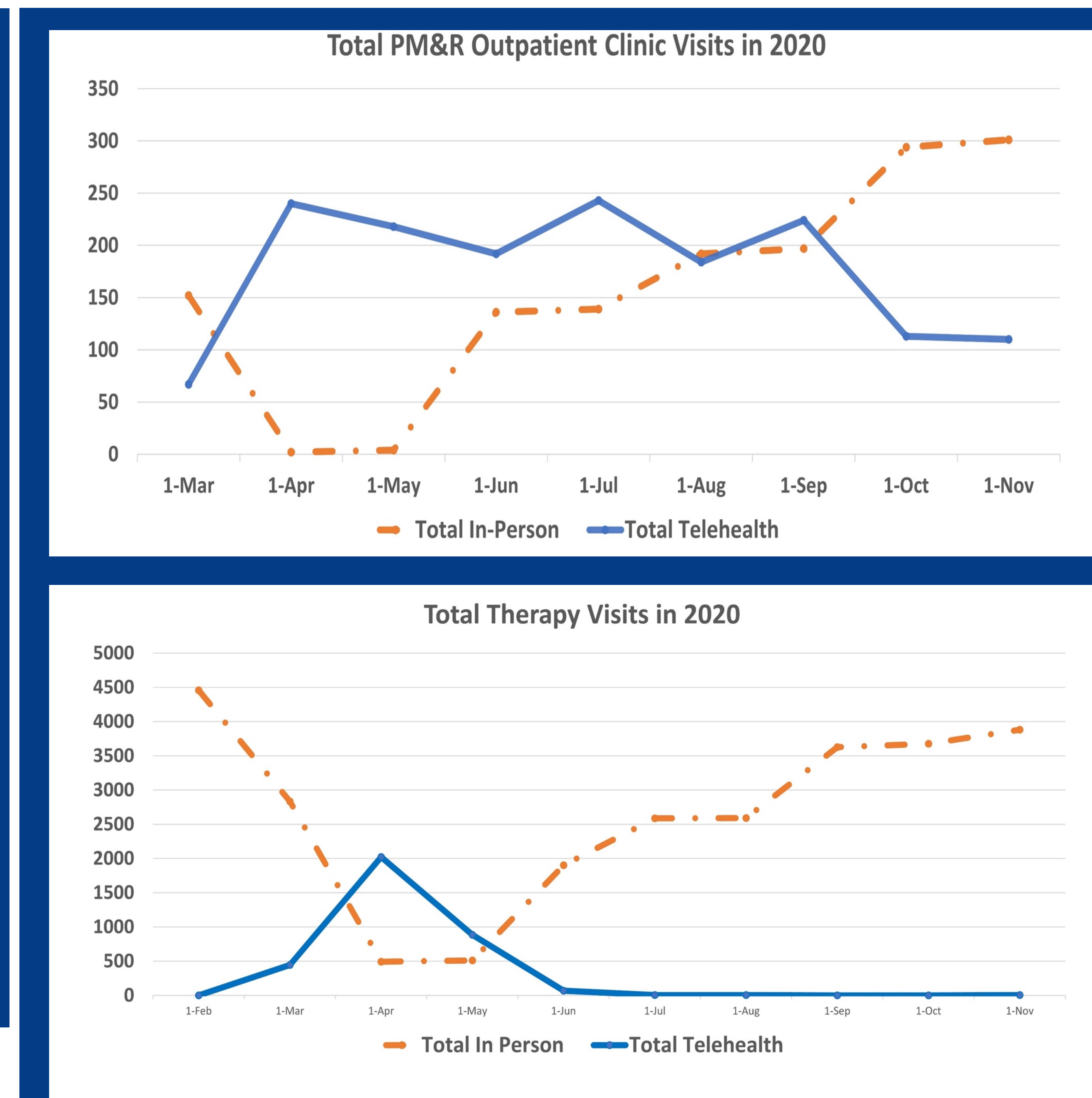


Figure 2. County hospital physician and therapy visits: virtual vs face-to-face appointments



Contact: Surendra Barshikar, MD, surendra.barshikar@utsouthwestern.edu
5161 Harry Hines Blvd, suite CS6106, Dallas, TX 75390-9055

