

Key elements to successful rapid uptake of telehealth in public hospital physiotherapy departments: clinician perspectives

Megan H Ross¹, Mark Nelson², Vicki Parravicini³, Matthew Weight², Ryan Tyrrell², Nicole Hartley⁴, Trevor Russell¹

¹ RECOVER Injury Research Centre, The University of Queensland, Queensland, Australia

³ Bayside Health Service, Metro South Hospital and Health Service, Queensland, Australia

² QEII Jubilee Hospital, Metro South Hospital and Health Service, Queensland, Australia

⁴ School of Business, The University of Queensland, Queensland, Australia

BACKGROUND

In March 2020, the COVID-19 pandemic triggered considerable, previously unforeseen changes to the delivery of community-based allied health services.¹ In-person physiotherapy outpatient services were restricted by social distancing requirements, and the Australian Government recommended that health services, where possible, were delivered via telerehabilitation.² The COVID-19 pandemic and rapid implementation of telerehabilitation provided a unique opportunity to explore physiotherapists' perspectives of telerehabilitation in real-world applications. Gaining an in-depth understanding of the experience of hospital physiotherapists will provide insights into factors which may be leveraged to improve widespread, long-term uptake of telerehabilitation services.

AIM

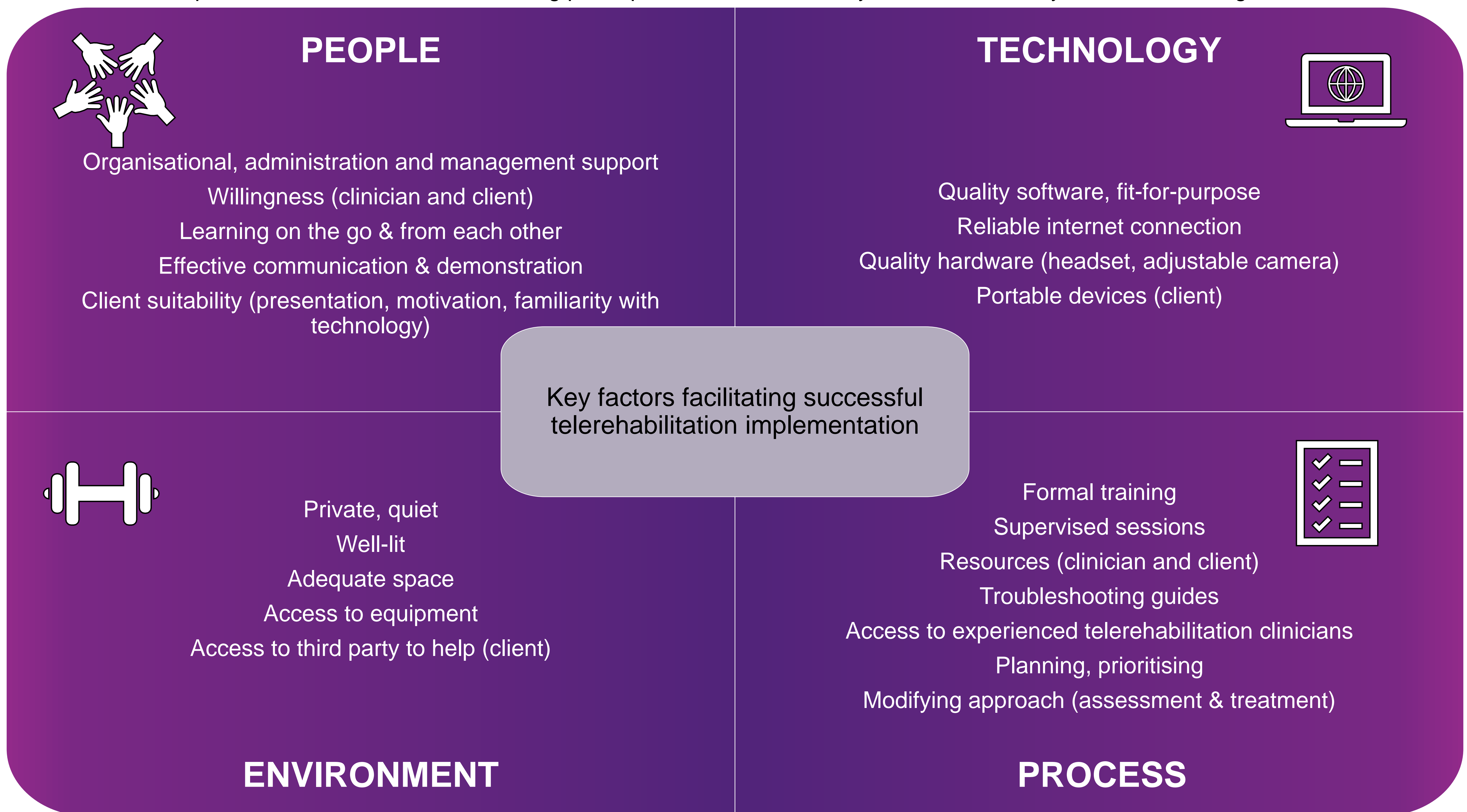
To explore staff perspectives of the key elements of successful, rapid implementation of telerehabilitation in medium-sized public hospital physiotherapy departments in response to COVID-19.

METHODS

Physiotherapists from two Brisbane public hospitals (QEII Hospital and Bayside Health Service [incorporating Redlands Hospital and Wynnum-Manly Community Health Centre]) were eligible to participate if they had delivered telerehabilitation consultations between March and September 2020. A convenience sampling approach was used, and sample size was achieved when iterative analyses failed to generate new themes.³ Data were collected via semi-structured interviews and analysed using qualitative thematic analysis.⁴

RESULTS

25/28 (89%) of eligible physiotherapists participated in the interviews. Participants were 22-60 years of age (mean age 37), 67% female, with between 1 and 40 years of clinical experience (mean = 13 years). Six (24%) of the participants had some previous experience with telerehabilitation prior to COVID-19 restrictions being put in place. Qualitative analyses revealed 4 key factors facilitating success:



CONCLUSIONS

Facilitators of successful telerehabilitation implementation:

- Organisational, administrative and management support
- Willingness to adopt
- Shared learning experience
- Availability of equipment and space
- Optimised systems and processes

Facilitators of successful telerehabilitation consultations:

- Effective communication
- Demonstration
- Involving a third party to help
- Clients who are well prepared
- Clients who are willing to engage

Physiotherapists indicated that formal training, education, access to experienced telerehabilitation clinicians and optimised systems and processes may further facilitate the transition to and uptake of telerehabilitation for physiotherapy in hospital settings.

References

- ¹ AHPA. (2020). Expansion of COVID-19 telehealth measures to include more MBS allied health services.
- ² Hunt G. (2020). Whole of population telehealth for patients, general practice, primary care and other medical services.
- ³ Moser A & Korstjens I. (2018). Practical guidance to qualitative research. Part 3: Sampling, data collection and analysis. *Euro J Gen Pract*.
- ⁴ Clarke V & Braun V. (2014). Thematic analysis. *Encyclopaedia of critical psychology*.