

## Package of Rehabilitation Interventions

### BACKGROUND

#### WHAT IS THE PACKAGE OF REHABILITATION INTERVENTIONS?

The Package of Rehabilitation Interventions (PRI) will be a WHO resource containing evidence-based rehabilitation interventions that will facilitate the integration of rehabilitation interventions in all service delivery platforms.

The PRI will be available as an open-access online resource and will have different target audiences. Ministries of Health will be able to plan the integration of rehabilitation interventions in their national health services; Researchers will be able to identify rehabilitation research gaps; Academics will be able to develop curricula for the training of rehabilitation professionals; and service providers will be able to plan and implement specific rehabilitation interventions in their rehabilitation programmes.

#### WHY DO WE NEED A PACKAGE OF REHABILITATION INTERVENTIONS?

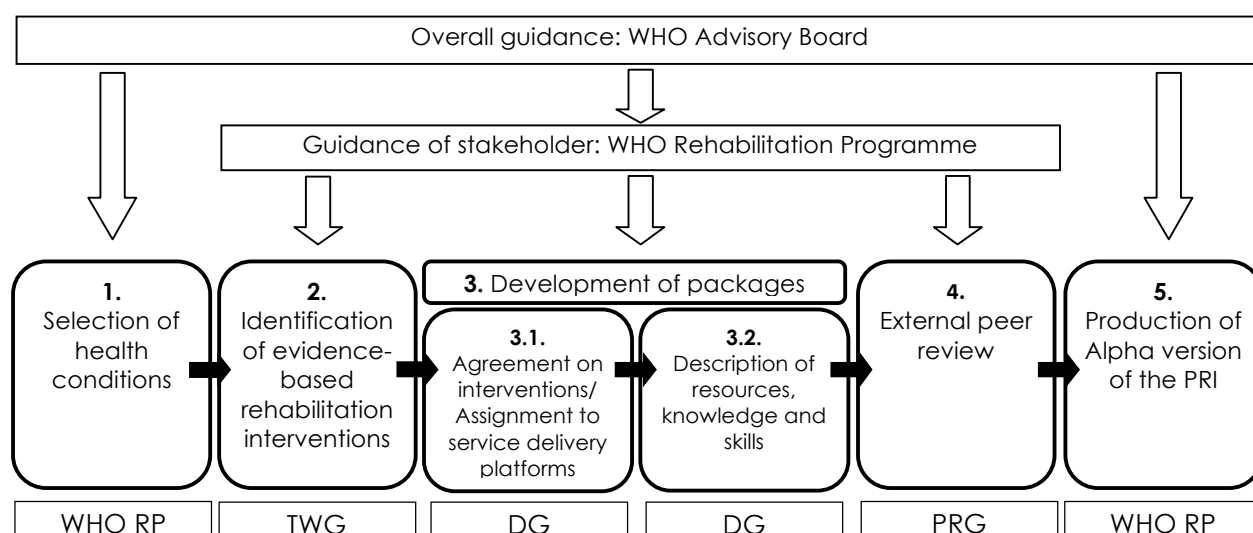
The 2030 Agenda for Sustainable Development has the overall goal to end poverty, protect the planet and ensure prosperity for all. Amongst the 17 Sustainable Development Goals (SDG), goal 3 aims to “ensure healthy lives and promote well-being for all at all ages”. Within SDG 3, a specific target calls for the achievement of Universal Health Coverage (UHC) defined as “all people receiving the full spectrum of quality health services (health promotion, prevention, treatment, rehabilitation and palliative care) that meet their needs without being exposed to financial hardship in paying for the services”. The World Health Organization (WHO) has defined the achievement of UHC as one of the strategic priority goals to address SDG 3 in its General Programme of Work 2019-2023 (GPW 13). To address this in terms of rehabilitation services, the WHO “Rehabilitation 2030” initiative was launched in 2017.

Rehabilitation is a core health service for individuals with health conditions throughout the life course, and across the continuum of care, such as children with developmental disorders, people with chronic conditions and living with the consequences of injuries or older people. It is critical that WHO Member States are equipped with technical guidance to establish and strengthen rehabilitation service delivery in line with population needs. This means identifying the rehabilitation interventions that should be prioritized for integration into the health system, and the resources required to deliver them safely and effectively. Such guidance would go far to strengthening health systems for rehabilitation through informing health policy, planning and budgeting.

#### HOW WILL THE PACKAGE OF REHABILITATION INTERVENTIONS BE DEVELOPED?

The development of the PRI takes an evidence-based and stepwise approach and draws on the expertise of rehabilitation professionals. The evidence on rehabilitation interventions will be identified for specific health conditions. (Fig. 1) Currently, the development of the PRI has arrived at step 3. (1) Health conditions have been selected based on global prevalence estimate, associated years of living with disability, as well as proposals from rehabilitation experts working in low- and middle-income countries. (2) Technical Working Groups (TWGs) have identified the evidence from high-quality clinical practice guidelines under the guidance of methodological experts from Cochrane Rehabilitation and WHO rehabilitation programme. Evidence from Cochrane Systematic Reviews will complement the information on evidence-based rehabilitation interventions. (3, 4) Development

Groups (DGs) composed of rehabilitation experts from different world regions and different health professions will approve identified interventions, define the areas of service delivery (primary, secondary and tertiary care) for the interventions, and describe the required resources (workforce, assistive technologies, equipment and consumables.) (5) External Peer Review Groups (PRGs) will review the results. (6) After the production of the first Alpha version, the PRI will be tested in countries and finally published as an open source web-based tool. Different dissemination strategies will be used to raise awareness on the PRI.



**Figure 1:** Phases of the development of the Package of Rehabilitation Interventions

WHO RP = World Health Organization Rehabilitation Programme; TWG = Technical Working Group; DG = Development Group; PRG = Peer Review Group

## WHO WILL BE INVOLVED IN THE DEVELOPMENT OF THE PACKAGE OF REHABILITATION INTERVENTIONS?

The WHO Rehabilitation Programme is leading the development of the PRI with extensive stakeholder involvement. WHO's Guideline Review Committee Secretariat is supporting its development. Different stakeholders are being involved including health condition specific organizations, health professional organizations, and international non-governmental organizations. Cochrane Rehabilitation is also part of the development by supporting the identification of evidence of rehabilitation interventions.

It is anticipated that the PRI will be finalized and available in 2020.

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### DEVELOPMENT GROUP TERMS OF REFERENCE

The development of the PRI is currently arrived at step 3 (view figure 1). WHO is now recruiting members for the Development Group for specific health conditions to perform the work at step 3.1. and 3.2.

#### **MANDATE OF THE DEVELOPMENT GROUP**

Under the leadership of the WHO Rehabilitation Programme, the Development Group is mandated to:

- a) Agree on the inclusion of evidence-based rehabilitation interventions in the PRI for a specific health condition. A list of interventions, identified from clinical guidelines in the previous step 2 by Technical Working Groups, will present the basis for this consensus process. Additional information on the evidence of the identified interventions is available from Cochrane Systematic Reviews.
- b) Identify target areas and interventions not addressed in this list and relevant to be considered in the PRI (if applicable).
- c) Agree on the material resources required to provide each of the selected interventions, time required for the provision of interventions and the service delivery platforms where interventions should be available.
- d) Agree on the knowledge, skills and levels of proficiency required to provide the selected interventions. A list of different knowledge and skill items, identified from WHO classifications and from consensus, is available and will be used as the basis for selection. Additional areas of knowledge and skill may also be generated by the Development Group. This information will link to the WHO Rehabilitation Competency Framework, which is simultaneously under development. Further information on the framework will be provided at the commencement of this component of work.

#### **FUNCTIONS OF THE DEVELOPMENT GROUP**

- Maintain a practical and operational perspective which is realistic and implementable in a low-resource setting
- Work in a multi-professional team and with participants of varying levels of specialization and from different geographic regions

#### **COMPOSITION OF THE DEVELOPMENT GROUP**

The Development Group will be composed of multi-professional rehabilitation providers with working or research experience in the rehabilitation of people with a specific health condition comprising experience with the provision of interventions along the life-course (pediatric, adult, geriatric care), and at different service delivery platforms (primary, secondary, tertiary and community care). Consumers will complement the Development Group.

The Development Group will include representatives from all geographical regions with a special consideration of low-resource countries:

- African Region
- South-East Asia Region
- Western Pacific Region
- Eastern Mediterranean Region
- Region of the Americans
- European Region

#### **OUTPUT**

- 1) List of interventions to be included in the PRI including information on appropriate service delivery platforms and service levels
- 2) List of target areas/interventions that are not addressed by clinical practice guidelines (if applicable)
- 3) List of required material resources, information on the time required, service delivery platforms and rehabilitation professionals required for providing the selected intervention
- 4) List of required knowledge and skills and the required level of proficiency related to the interventions

#### **DEVELOPMENT PROCESS**

The required information will be generated through a combination of an electronic survey and web-conferences. The electronic survey will generate data on specific questions from the individual Development Group members. Group results of the survey will then be presented to the Development Group during subsequent web-conferences where they serve as the basis for the achievement of consensus on the selection of interventions and (if applicable) target areas/interventions not addressed by clinical practice guidelines. The identification of material resources, definition of time required, assignment to service delivery platforms and rehabilitation professionals, and the identification of knowledge, skills and level of proficiency required for providing the selected interventions will be generated through web-conferences only. Detailed information on this process will be available through webinars.

#### **COMMUNICATION DURING THE DEVELOPMENT PROCESS**

The Development Group will communicate primarily through email and through web-conferences. Members of the WHO Rehabilitation Programme will moderate the web-conferences and coordinate all other communication. All communication will be in English.

#### **DURATION**

Members will need to allocate time for conducting the online surveys and about two hours for participating in each of the web-conferences. The number of web-conferences may vary based on the number of the interventions to be discussed. If the Development Group will decide that additional evidence from systematic reviews needs to be consulted, the next steps will be decided in the final web-conference.

### **CONFLICT OF INTEREST**

Prior to joining the Development Group, interested people need to submit a conflict of interest form supplemented by an actual curriculum vita to identify potential conflict of interest. Identified conflict of interest precludes membership in the Development Group.

### **REMUNERATION**

Members will not be remunerated for their participation in the Development Group. The work will not require any travels.

### **ACKNOWLEDGEMENT**

The names of each member of the Development Group and, when appropriate, the organization they represent, will be listed in the acknowledgements section of the completed PRI and online version of the Rehabilitation Competency Framework.