

International Rehabilitation Forum

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Covid-19 Rehabilitation from Day of Admission Pays Off

Dear colleagues,

Our experience with many natural disasters tells us that failure to include expert rehabilitation from the very beginning means congested hospitals and bad medical as well as functional outcomes. We need to bring attention to the problem, then help hospitals develop their protocols before they're overwhelmed in the middle of the acute crisis. I'll outline what my group has done and what needs to happen, then give my background.

What we've done: My team at the International Rehabilitation Forum (IRF, www.rehabforum.org) launched the scientific field of Disaster Rehabilitation at a meeting in Kayseri, Turkey, in 2007. We found that acute and emergency responders around the world naively dealt with saving lives, forgetting that back home their Rehabilitation Medicine doctors and rehab team were busy in the ICU and acute wards. In a Pakistan earthquake we found that rehab expertise even during evacuation improved outcomes. In China my colleagues had rapid rehab response to one town and not another after the earthquake, resulting in faster hospital discharge, better care and better long-term outcome. In contrast my New Orleans colleagues found that the acute responders' assumption that everyone's 'normal' resulted in death and illness among people who already had some disabling problem. We moved this expertise from the IRF to the International Society for Physical and Rehabilitation Medicine, which is the official WHO liaison for medical rehabilitation. It is now the most active committee of that organization.

What needs to happen: We must spread the urgency of this to healthcare leaders and the public, and we have to give them a solution. Acute care folks we knew of were only looking at lifesaving resource allocation. Local rehabilitation teams are in crisis trying to care for their fragile inpatient and nursing home patients. An international team of the International Rehabilitation Forum brainstormed on unique challenges with coronavirus and global resource limitations, as well as unique advantages of internet communication, and came up with a plan or process that builds on past experience but can be emulated everywhere related to Covid-19.

We've devised a 2-page executive plan, a rehab screening survey that busy nurses can use, and a simple patient handout that puts their rehab in their own hands. All are available at www.rehabforum.org.

Going forward we're organizing experts to further expand this core information so that your teams can do more sophisticated work. So check back in with us.

But the urgency for action is now, before the predicted influx of patients. Spread the word.

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