

BASIC PACKAGE OF INTERVENTIONS FOR REHABILITATION – A TOOLKIT FOR PRIMARY CARE PROFESSIONALS

INFORMATION SHEET

Rehabilitation in primary care – why is it important?

Global and demographic trends indicate an increasing need for rehabilitation as a result of population ageing, increasing prevalence in noncommunicable diseases and ongoing consequences of conflict and injury. However, in many parts of the world this need is largely unmet and may grow if there is no significant action taken. In some low- and middle-income countries it is estimated that more than 50% of individuals do not have access to the rehabilitation services they require.

A key strategy to address this unmet need is to make rehabilitation available in primary care. When rehabilitation is integrated into primary care, services are brought closer to people’s homes, making them more accessible and affordable. Rehabilitation can be integrated into primary care through multiple mechanisms, such as increasing the rehabilitation workforce at this level and through utilising the existing primary care workforce to deliver rehabilitation.

What is the Basic package of interventions for rehabilitation?

The World Health Organization’s (WHO) Basic package of interventions for rehabilitation (Basic PIR) is a toolkit derived from the WHO’s Package of interventions for rehabilitation (PIR)* and includes a list of interventions with a clinical resource, training materials and an implementation guide. The Basic PIR outlines a limited set of prioritised interventions for rehabilitation that can be delivered in primary care. It does this by providing information on low-cost, high-impact and evidence-based interventions for rehabilitation that can be easily, safely and effectively delivered by existing workforce in primary care settings.

The Basic PIR toolkit also provides a clinical resource that supports existing primary healthcare workers including doctors and nurses to provide the interventions for rehabilitation particularly where rehabilitation specialists are not available or have limited capacity. The resource guides clinical decision-making on the identification of rehabilitation needs and provision of appropriate interventions, it utilises a decision-tree (algorithm) structure, similar to that utilised by other WHO products, such as WHO PEN Package and mhGAP. The resource supports rehabilitation task-shifting approaches, enabling existing primary care workforce to be trained in the areas of rehabilitation (e.g. mobility, communication, self-care), so that they can assess for functioning difficulties and subsequently deliver a basic set of interventions. The interventions are focused on addressing functioning difficulties rather than health conditions, as accessing diagnostic tools in primary care settings may pose challenges. The resource will also include an implementation guide that outlines a method for adoption and utilization within a setting.

When rehabilitation is integrated into primary care, services are brought closer to people’s homes, making them more accessible and affordable.

One important approach is to utilise the current primary care workforce to provide a limited set of interventions for rehabilitation particularly where rehabilitation specialists are unavailable or have limited capacity.

*For further information on the PIR, visit this link: <https://www.who.int/teams/noncommunicable-diseases/sensory-functions-disability-and-rehabilitation/rehabilitation/service-delivery/package-of-interventions-for-rehabilitation>

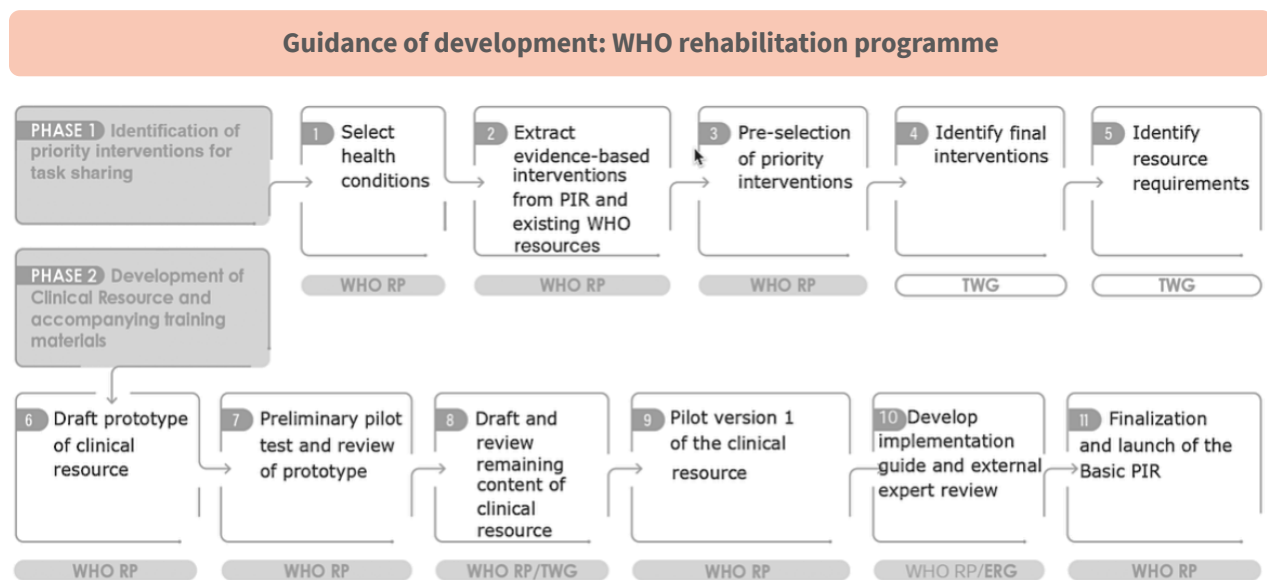
Why do we need a Basic package of interventions for rehabilitation?

While having rehabilitation specialists (e.g. physiotherapists, occupational therapists, rehabilitation medicine physicians and speech and language therapists) delivering rehabilitation care in primary care will increase access, in resource constrained environments a large expansion of rehabilitation workers at this level is often not feasible. Hence, provision of a limited set of prioritised rehabilitation interventions delivered by existing primary care workers (i.e. nurses and doctors) with adequate clinical guidance and training is needed. This approach will support access to rehabilitation in two ways, one, by delivering a limited set of rehabilitation care by existing primary care workers at this level, and two, by increasing the capacity of existing primary care workers to identify rehabilitation needs and refer to rehabilitation services whether at the level of primary care or other levels of care.

How is the Basic package of interventions for rehabilitation being developed?

The development of the Basic PIR is led by the WHO Rehabilitation programme which provides the overall guidance. It draws on the interventions and evidence behind the WHO's Package of interventions for rehabilitation. A technical working group of experts (both rehabilitation and non-rehabilitation health professionals) with experience working in primary care and low-resource settings have supported its development. A stepwise approach is being conducted to develop this clinical resource across 2 phases (Figure 1). Phase one included the identification of priority rehabilitation interventions for task shifting from existing WHO resources, mainly the WHO PIR using the WHO International Classification of Functioning, Disability, and Health (ICF) served as a reference framework. The resource requirements were assistive products required to support the selected interventions identified from the WHO Training in Assistive Products (TAP) tool. The development of the Basic PIR is currently in the Phase two.

Figure 1: Method to develop the Basic package of Interventions for rehabilitation: A toolkit for primary care professionals



*WHO RP = World Health Organization Rehabilitation Programme; TWG = Technical Working Group; ERG = Expert Review Group

Who can use the Basic package of interventions for rehabilitation?

The Basic PIR will be used by existing primary care workers to guide clinical decision-making, enabling them to identify rehabilitation needs, provide basic rehabilitation interventions in primary care settings and refer where necessary. The rehabilitation specialists can offer either remote or in-person support to existing health workers in utilizing the resource. Governments and policymakers can use the Basic PIR to develop essential rehabilitation health benefits packages. This toolkit can also help in developing data collection systems to track rehabilitation service delivery and outcomes.

What is the process for providing rehabilitation through the Basic package of interventions for rehabilitation?

Providing interventions for rehabilitation through the Basic PIR involves a 3-step process:

- Take a history and ask about presenting complaints
- Rule out red flags
- Use assessment form to confirm and rate level of difficulty
- Refer if a rehabilitation specialist is accessible
- If not, plan for rehabilitation



- Re-asses
- Review
- Progress
- Discharge

- Provide rehabilitation including assistive products if rehabilitation specialist is not accessible

How can the Basic package of interventions for rehabilitation be implemented?

The toolkit includes a training package which supports blended learning, using both online and face to face learning materials. The training can be delivered as a stand-alone through workshops or as part of ongoing training programs (e.g. WHO's ICOPE-Integrated care for older people and TAP-Training on Assistive Products) and continuous professional development programs.

When will the Basic package of interventions for rehabilitation be available for use?

The Basic PIR is anticipated to be finalized and available in 2025.

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