

Implementing a virtual rehab service for children and young people

Gillette Children's Specialty Healthcare, United States

What was the challenge?

Gillette serves a 'high risk' group of patients, who require medically complex, life-long care and who are particularly susceptible to COVID-19 related complications. For this patient group, exposure to coronavirus would significantly raise their risk of needing high-cost critical intervention and delays in care could lead to more emergent hospital stays in the future.

As the COVID-19 crisis evolved, Gillette's Rehabilitation (Rehab) Therapies department experienced sharp declines in the volume of patients seeking in-person care. The reasoning for this decline was due to concerns from families and carers about patient safety in the hospital environment and the risk of virus transmission. A safe solution was needed to ensure the continuous access and delivery of essential rehabilitative services for rehab patients.

What was the task?

The Rehab Therapies department determined that a telehealth/virtual care programme was a potential means to deliver rehabilitative services to patients during the pandemic, until it was medically safe to bring these groups back into a clinic setting.

What was the action taken?

A workgroup was formed of leaders and clinical educators from the Gillette Rehab Therapies department to create the virtual care offer and a pilot was conducted prior to public roll-out. Informative phone calls to families and carers, describing the new service at Gillette provided patients with support to make the transition to virtual care. Once the pilot phase was deemed successful, a full endorsement was provided to move forward with implementation across the entire

rehabilitation department. Scaling out the virtual care rehabilitative service offering involved training of over 70 rehabilitative clinical staff including physical therapists, occupational therapists, and speech language pathologists. Training sessions were conducted by members of the virtual care work group on a weekly basis until the entire clinical team had been formally trained. Once trained, therapists progressed to providing virtual care services independently with ongoing mentoring and support from working group team members.

What were the results?

Since launching its virtual service, the Gillette Rehabilitation Therapies department has rendered over 3,000 virtual care visits to children with complex care needs. Additional benefits realised include:

- Improved access to rehabilitation services for patients and families residing in remote rural locations as telehealth negates the need to travel to rehab clinics.
- Cost-efficiency savings have been realised as no personal protective equipment is required to deliver this model of care.
- Substantial improvements in therapists' understanding of environmental and logistical factors influencing the rehabilitative plan of care, thanks to being able to 'see' into a patient's home environment.

The success of the virtual care rehabilitative program during the pandemic led to the strategic decision that the new delivery model of rehabilitative services is sustainable for the long-term and can beneficially contribute to Gillette's patient care experience. More detail on this initiative can be found [here](#).