Rehabilitation for Chronic Diseases

Karthika S.

Author's Affiliation: Karthika S., Associate Professor, Rayat Bahra College of Nursing, Rayat Bahra University, Mohali, Punjab 140104, India.

Corresponding Author: Karthika S., Associate Professor, Rayat Bahra College of Nursing, Rayat Bahra University, Mohali, Punjab 140104, India.

E-mail: jerushakarthika87@gmail.com

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Abstract

With the emerging communicable and non-communicable diseases in this advanced world, rehabilitation is an essence in healthcare in preserving the remnant activities of the people living with such diseases. The major components revolves in creating the attitude towards people, provision of education and training opportunities, provision of rehabilitative services, provision of long-term facilities, prevention of causes of disabilities, monitoring & evaluation, creation of micro & macro income generation and empowerment through approaches such as social mobilization-opportunities-through empowerment, advocacy, negotiation, political participation, language, communication, self help groups-increased awareness of civil rights, responsibilities, increased knowledge of benefit from policies and programs, ability to get grievances.

Keywords: Chronic; Diseases; Rehabilitation.

Introduction

Community based rehabilitation is the strategy within community development for rehabilitation, equalisation of opportunities and social inclusion of all people with disabilities. It was evoluted with the concepts of disability & rehabilitation, human rights, poverty and inclusion of communities. The key principles are equity, social justice, solidarity, integration and dignity. Thus the objectives of CBR in any area is framed to identify all persons with disability, provide rehabilitative service, create awareness, transfer rehabilitative skills to community members, mobilize available resources & rise funds, raise the community participation and prioritize the services. Hence the community health nurse plays a key role in providing different rehabilitative services in the community.

Definition

The coordinated sum of interventions required to ensure the best physical, psychological and social conditions so that patients with chronic or post-acute disease may, by their own efforts, presence or resume optimal functioning in society and through improved health behaviour, slow or reverse progression of disease.

-Globe & Worcester.

Objectives

1. To enhance care and quality of life for people experiencing chronic disease.
2. Support self management and increase functional independent for people with chronic disease.
3. Help avoid unnecessary hospitalisation, presentations and admissions.
4. Reduction in premature mortality.
5. To achieve optimal physical, psychological

function.

6. To self manage their disease.
7. To be active partners with their medical team in decisions about their health care.

Chronic Diseases Include

- ✓ CVD
- ✓ Cancer
- ✓ Chronic respiratory disease
- ✓ DM
- ✓ Chronic renal disease
- ✓ Arthritis and musculoskeletal disease
- ✓ Mental health problems and disorders

Features of Chronic Diseases

- ➢ Complex and multiple cause
- ➢ Gradual and sudden onset with acute stage
- ➢ Occurring across the life cycle
- ➢ Compromising QOL through physical limitations and disability
- ➢ Long-term and persistent
- ➢ Gradual deterioration of health

Aims

- Enhance QOL by supporting self-management & independence
- Provide education & support to achieve self-management
- Improve functional exercise capacity
- Delay and avoid complications
- Reduce avoidable hospital presentations & admissions

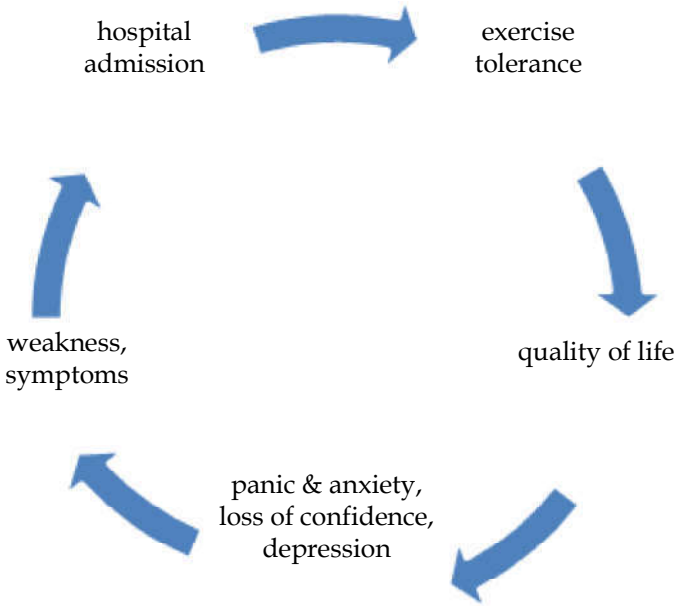
Principles

1. Early & accurate diagnosis
2. Supported management

Elements

1. Easy & early access
2. Comprehensive assessment
3. Holistic goal setting
4. Evidence based, multi-disciplinary interventions
5. Maintenance & support

Chronic Disease Disability Spiral (Model)



Process of RCD

1. Early and easy access to diagnosis & rehabilitation services
2. Comprehensive assessment
3. Evidence- based, multi-disciplinary interventions
4. Holistic goal setting
5. Links to ongoing maintenance & support programs

Staffing for RCD

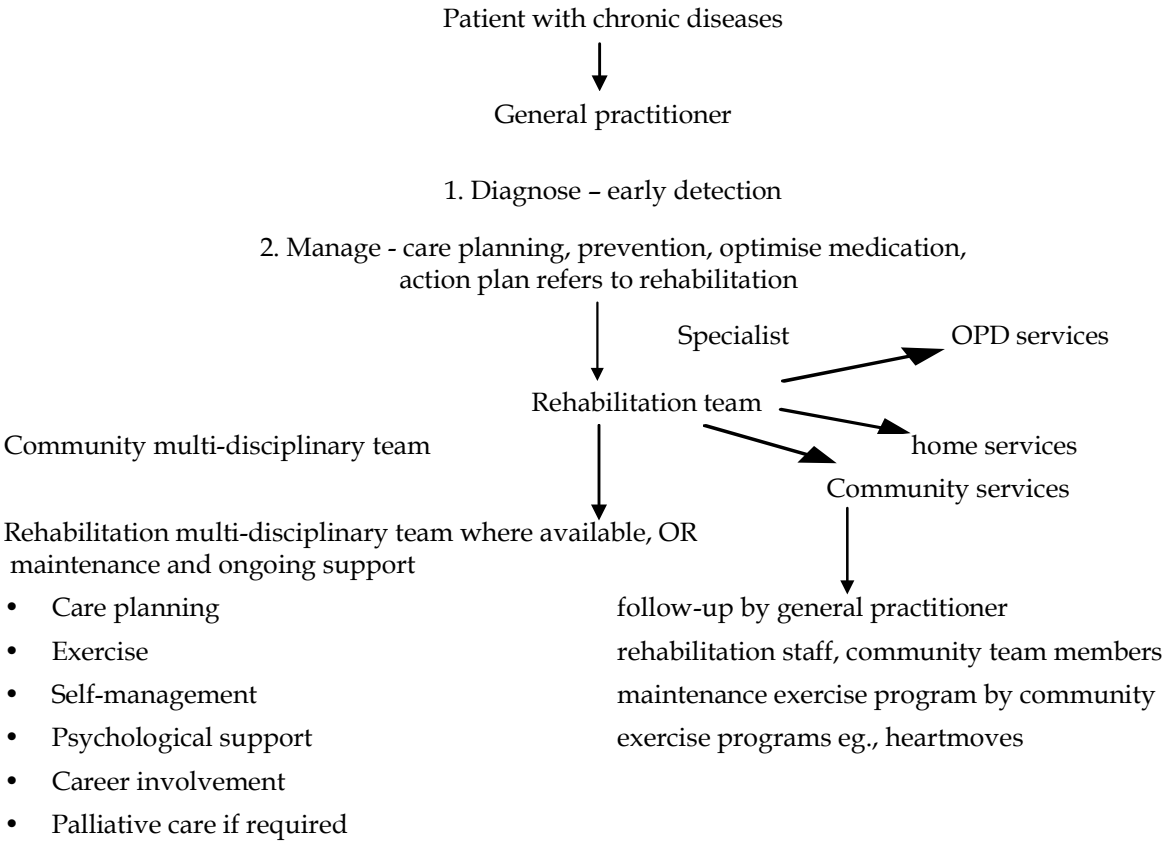
Multi-disciplinary team

1. Medical Officer
2. Nursing & allied health staff
3. Administrative Officer
4. Medical staff-General Practitioners
5. Coordinator
6. Clinical supportive staff

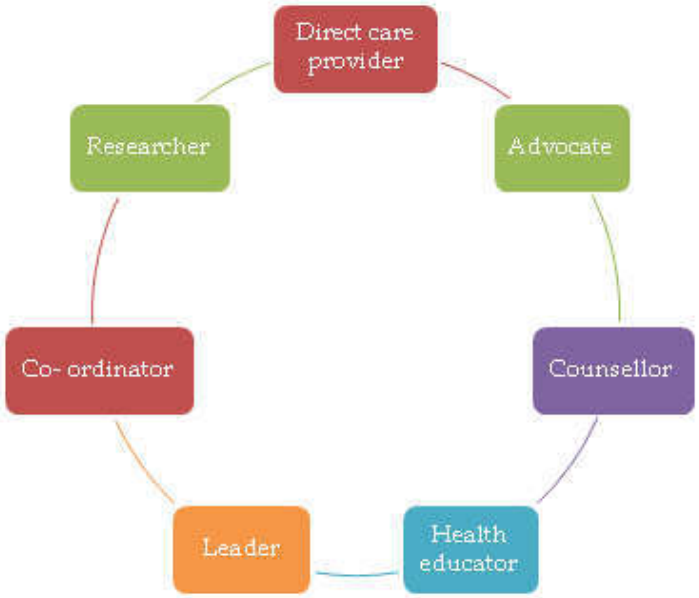
Implementing Rehabilitation for Chronic Diseases

Strategies	Planning
Governance	➢ Determine the type of rehabilitative service model ➢ Identify leaders ➢ Develop a process map ➢ Develop a project timeline ➢ Establish a steering commitee
Patient journey	➢ Map the patient journey ➢ See the correct rehabilitation for chronic disease
Policies & protocols	➢ Identify policies protocols & guidelines ➢ Check these key issues ➢ Review the rehabilitation literature ➢ Review the rehabilitation assessment tools ➢ Review or develop agreements with general practiotioners and other community partners.
People	➢ Stakeholder analysis ➢ Engage SH ➢ See the ideal staffing ➢ Develop a staff people ➢ Learn and understand the roles of all team members ➢ Identify existing teams to build capacity
Resources	➢ Conduct a resource survey ➢ Establish referral processes ➢ Identify the gaps
Communi-cation	Develop a communication plan

Flowchart of Process



Role of Public Health Nurse in Rehabilitation for Chronic Diseases



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