SPECIALISED COVID-19 REHABILITATION PROGRAMME

Life Rehabilitation

Making life better

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Improving quality of life during the COVID-19 recovery process

Although most people who contract COVID-19 infection may have mild symptoms and recover, approximately 20% of infected patients may require admission to an intensive care unit (ICU), and many may also require mechanical ventilation.

Up to 50% of all ICU patients requiring ventilation support may develop long-term complications involving impaired physical strength, cognitive and memory decline and mental health disturbances. Patients specifically at risk are those who have a history of chronic conditions such as diabetes, hypertension, asthma, chronic obstructive pulmonary disease (COPD) and a prolonged period of ventilation support. Furthermore, up to 40% of all patients will experience extreme fatigue.

Diabetes

Hypertension

Asthma

Chronic Pulmonary Disease

Ventilation Support

For many people, this may not only prolong their journey to recovery but place tremendous strain on the home environment.

What are some of the common complications experienced by patients with a prolonged stay in ICU?

The following complications may be present for up to two years following an ICU admission:

- More frequent hospital readmissions
- Loss of balance and muscle weakness; and increased risk of falling
- Extreme difficulty in performing daily activities; including the inability to drive a vehicle
- Chronic emotional and physical pain; and decreased quality of life
- Almost 50% of patients experience ongoing anxiety and depression

What are the benefits of early comprehensive rehabilitation in the journey to recovery following a COVID-19 infection?

Through managing the transition of care from the hospital environment to the rehabilitation setting a safe discharge home is facilitated. Patients' current and chronic medical conditions are managed by the onsite rehabilitation doctor therefore, comprehensive rehabilitation may commence sooner and the overall hospital stay may be reduced.

A goal-directed rehabilitation programme with coordinated and supported discharge planning aims to reduce ICU and hospital re-admissions. Managing the patient in the rehabilitation setting facilitates early identification and management of health impairments to reduce the risk of long-term complications. Ongoing support and counselling is available to patients and family members in dealing with traumatic events throughout the recovery process.

Who is part of the rehabilitation team?

The Life Rehabilitation interdisciplinary team comprises the rehabilitation doctor, rehabilitation nurses, physiotherapists, occupational therapists, psychologists, speech and language therapists, social workers and dieticians.

The comprehensive rehabilitation programme is tailored specifically according to each patient's needs and abilities and aims to improve quality of life and helping to regain independence.

- **+ Rehabilitation Doctor**
- **+ Rehabilitation Nurses**
- **+ Physiotherapists**
- **+ Occupational Therapists**
- **+ Psychologists**
- **+ Speech & Language Therapists**
- **+ Social Workers**
- **+ Dieticians**

What are the goals of the rehabilitation programme?

This is accomplished through:

- Achieving medical stability and concurrent management of any medical impairment during the comprehensive rehabilitation process
- Increasing endurance, balance and strength through a graduated exercise programme
- Improving respiratory health and cardio-vascular endurance
- Improving nutrition and prescribing dietary supplementation
- Encouraging independence in activities of daily living
- Assessment of cognition and implementing strategies to improve cognitive endurance
- Providing ongoing support to patient and family members to ensure adequate coping and adjustment
- Ensuring a coordinated safe discharge by providing caregiver training, and where applicable, guidance regarding assistive devices, home accessibility and ongoing oxygen needs

Who qualifies for admission into the rehabilitation programme?

- Patients recovering from moderate to severe COVID-19 infection
- Patients who were admitted to high care or ICU and required oxygen or ventilation for longer than 5 days
- Patients recovering from acute respiratory distress syndrome (ARDS), who no longer require mechanical ventilation
- Patients who still require ongoing oxygen therapy and / or who have a tracheostomy
- Patients recovering from severe weakness, poor mobility, muscle wasting and poor physical endurance
- Patients who may have sustained possible cognitive and memory deficits
- Patients who may require coordinated discharge planning

The rehabilitation journey

Full recovery following COVID-19 infection may take several weeks. During this period, patients may still experience symptoms whilst they are no longer infectious. The rehabilitation team will advise when persons with or without ongoing symptoms can be admitted to the unit to initiate the rehabilitation process; or treated as part of the outpatient rehabilitation programme. Every patient is assessed in full by the interdisciplinary team.

The rehabilitation team will assist with setting realistic and achievable goals with the correct intensity of intervention that will result in the best possible outcomes. A family meeting will be arranged soon after admission to ensure that the patient and family needs are included in the programme and that all aspects needed for a successful discharge are addressed, including carer training and home accessibility.

Depending on the individual health needs the expected length of admission will vary between 14 to 21 days.

Throughout the process, reports will be sent to the funder and referring specialists to keep everyone informed of progress made. The facility has implemented robust processes and areas earmarked for isolation to manage the COVID-19 infection risk to patients and staff members. Patients must wear masks when out of bed and social distancing measures will be implemented.

How do we assist patients and family members with the admission and case management processes?

Upon referral from the treating doctor, the rehabilitation admission consultant will conduct a health assessment free of charge. The funder or medical aid will receive an authorisation request where after pre-admission authorisation may be granted. Private paying patients may also be admitted. A global fee, inclusive of daily rehabilitation doctor visits and all therapy, ensures that patients have access to all services needed. The tariff excludes specialist consultations, medications, special tests and investigations and assistive devices required for home use.

After discharge, every patient will receive follow-up calls for up to three months to ensure a safe discharge home and to identify any arising health complications. These calls are included as part of the care package and tariff.

For more information about Life Rehabilitation's service offerings and for assistance with arranging and admission into the rehabilitation programme contact rehab.headoffice@lifehealthcare.co.za

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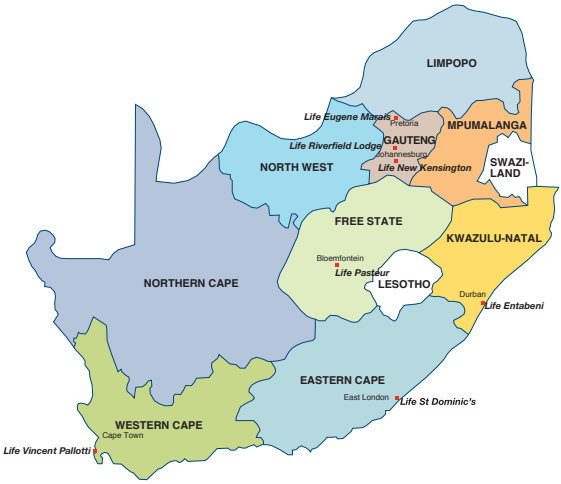

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