Need to Establish Telerehabilitation Guidelines in India
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Abstract:
Telerehabilitation is a viable option to provide continuum of rehabilitation intervention in situations like the ongoing pandemic. Presently, there was no legislation or guidelines to maintain minimum standards of telerehabilitation through video, phone, internet based platforms (web/chat/apps etc.) in India. In the phase of COVID pandemic, this paper looks on overview of guidelines given by various countries and to evaluate effectiveness of treatment delivered via telerehabilitation and assists in formulating appropriate guideline for telerehabilitation in India. The suggested guidelines can help develop and replicate similar models of telerehabilitation to reach people in need or in difficult situations like COVID 19 pandemic.

Keywords: Guidelines, Remote, Telerehabilitation, Telehealth, Tele practice

Introduction
The global pandemic has driven the physiotherapy profession to consider about using telehealth and digital physiotherapy practise to provide healthcare services. The World Confederation for Physical Therapy (WCPT) encouraged the use of telerehabilitation in the profession during the COVID-19 pandemic to enhance accessibility, and several national organisations offered resources and guidance on how to implement such services in practice.(1) Physiotherapists have explored a feasible service delivery option for remote consultations (also known as telehealth or telerehabilitation) to ensure a continuation of delivery of rehabilitation services for patients without COVID-19. This is also to limit long-term consequences of the complete termination of physiotherapy profession that can lead to increased demand for physiotherapy. This means that expectations are placed on physiotherapy despite the limitations and restrictions imposed by the pandemic.(2)
Telerehabilitation is a subset of telemedicine. Despite the fact that this profession is relatively new, its use in developing nations has grown significantly. In comparison to traditional inpatient rehabilitation, telerehabilitation often results in cheaper expenses for patients as well as for healthcare providers. Infact, this technology will be beneficial to individuals living in remote locations where conventional medical facilities might not be easily accessible. Nonetheless, some drawbacks to telerehabilitation, including patient suspicion due to remote contact with their doctors or rehabilitators, should not be overlooked. Tele-rehabilitation has the ability to change health sector and provides people with long-term outpatient therapy.

Telerehabilitation can help patients become more engaged in a variety of ways:

a) Affordability: For many people, it seems more cost-effective to get therapy via a telerehabilitation platform considering the cost and difficulty of visiting a clinic. Patients may receive consultations and treatments in the convenience of their own homes, and they always have access to their instructional films and resources at all time.

b) Accessibility by providing access to care and clinicians from different parts of the world, online platforms can help disadvantaged or marginalised groups and low- to middle-income countries.

Interactivity, Telerehabilitation has proven to be incredibly beneficial for persons who require physiotherapy but are not infected with the virus, particularly the elderly, who are more susceptible to infection as they get older, and people with a variety of disabilities or pre-existing health disorders. Tele-consultation sessions should follow current best clinical practise and care models for face-to-face consultations. All conventional physiotherapy practise standards will apply to tele-consultations, just as they would to face-to-face consultations, as stated in these guidelines.

The advancement in technology and healthcare innovation have greatly expanded its usability in health care without the physical presence of a medical professional and a patient, which is also evident in vision rehabilitation. Though the adoption rate is slow and gradual, evidence suggests telerehabilitation as an accepted, practical, time-saving, and cost-saving alternative to traditional face-to-face consultations.

The use of telerehabilitation is recommended by International Physiotherapy Organisations such as the World Confederation for Physical Therapy (WCPT), now known as World Physiotherapy, the American Physical Therapy Association (APTA), the Chartered Society of Physiotherapy (CSP), and the International Network of Physiotherapy Regulatory Authorities (INPTRA). World Physiotherapy has promoted telerehabilitation extensively and established a task group to develop and disseminate resources on the topic. The National physiotherapy organisations such as the Australian Physiotherapy Association (APA, 2020) and the Irish Society of Chartered Physiotherapists (ISCP, 2020) have already created telerehabilitation guidelines and policy. The International Private Physical Therapy Association, a division of World Physiotherapy, conducted a survey of its member countries and discovered that digital therapy is becoming increasingly popular. Since the beginning of the epidemic, physiotherapy has been continuously approved, used, and regulated.

SUMMARY OF GUIDELINES FROM DIFFERENT COUNTRIES

Telerehabilitation will continue to grow and be adopted by more healthcare practitioners and patients in a wide variety of forms, and these practice guidelines will be a key enabler in fostering its growth.
Lack of gaps in legislation and the uncertainty of rules pose a risk for both the doctors and their patients. There are some countries that have put in legislative measures and some countries, which follow non-legislative measures such as guidelines to practice telerehabilitation.

In some countries guidelines are treated as professional norms that need to be followed by medical practitioners. The purpose of these guidelines is to give physiotherapists providing physiotherapy via real-time (synchronous) video consultation with a framework that will help ensure the safety and quality of their practice. It has been specifically designed for rapid initiation and the concepts have been simplified where possible with this in mind.

The 2018 judgement of the Hon'ble High Court of Bombay had created uncertainty about the place and legitimacy of telemedicine because an appropriate framework does not exist.

This paper presents the guidelines of APTA, APA, SINGAPORE ALLIANCE OF PHYSIOTHERPY and CPTBC as shown in Table 1.(7,8,9&10)

<table>
<thead>
<tr>
<th>Principles</th>
<th>Australian Professional Association (APA)</th>
<th>American Telerehabilitation Association (APTA)</th>
<th>Singapore Physiotherapy Association</th>
<th>Columbia Physical Therapy British Council (CPBTC)</th>
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<td>10. Privacy</td>
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In India, no survey has been done to fill the knowledge gap. In comparison to the rest of the developed world, India and other developing countries need more study on telerehabilitation. India is culturally, socioeconomically, and geographically diverse, making it difficult to create universal principles and laws that are appropriate for all regions.(11) Clinicians must adjust guidelines developed by international organisations to
meet their specific needs. The study's findings may be useful in informing policymakers and stakeholders about physiotherapists' readiness to use telerehabilitation. Furthermore, the results of this survey could aid academics in developing telerehabilitation guidelines in India.

This guide will assist physical therapists to understand these expectations and to develop policies and procedures to support quality, effective physical therapy care using technology. Physical therapists who wish to deliver physical therapy services across jurisdictional borders within India must comply with the requirements of both the client's jurisdiction and the physical therapist's jurisdiction, and be aware of all regulatory requirements related to the delivery of cross-border physical therapy services. Physical therapists wishing to deliver physical therapy services in other countries are advised to contact the regulatory body in the jurisdiction in which the client resides. This paper will assist physical therapists to understand these expectations and to develop policies and procedures to support quality, effective physical therapy care using technology. This document was created to enable physical therapists engaging in technology-mediated practice, whether clients are within a single provincial jurisdiction or across jurisdictional borders, to do so safely and effectively. It focuses on how to deliver physical therapy services via telerehabilitation.

**Barriers**

There are issues with how telerehabilitation can fill the gap between physical contact required for some assessments and interventions by the physiotherapists, clearer results from its use for a wide variety of conditions, and cost implications that may have limited its application across various climes, especially in developing countries. (2) Nigerian physiotherapists identified six obstacles to telerehabilitation: insufficient and underdeveloped infrastructure, context of ethical concerns, training of physiotherapists/patients' need for literacy, physiotherapy-patient contact, cultural difficulties, and financial consequences. Similar to this, there have only been a few reports of research in India that have looked at the effectiveness of telerehabilitation. (12)

**Conclusion**

In the phase of the pandemic, this paper looks at an overview of guidelines given by various countries and to evaluate effectiveness of treatment delivered via telerehabilitation and find benefits & perceived challenges in implementing tele rehabilitation. Lack of clear guidelines has created significant ambiguity for registered medical professionals, raising doubts on the practice of telerehabilitation. In India, there are currently no rules for the use of telerehabilitation by physiotherapists. The purpose of this paper to formulate guidelines is to give physiotherapists providing physiotherapy via real-time (synchronous) video consultation with a framework that will help ensure the safety and quality of their practice.

**References**


