



Beit Issie Shapiro

Changing the lives of people with disabilities

On the Willie & Celia Trump Campus

Remote Treatment (Telehealth) for Allied Health Professions during the Coronavirus Outbreak (COVID-19)

A Global Perspective

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Executive Summary

Background

The coronavirus (COVID-19) pandemic erupted worldwide in 2020, with far-reaching consequences for all aspects of life, including public services, trade, the economy, education, culture, and naturally, the health system. Because of lockdown restrictions and limitations, healthcare professionals had to face a new reality, in which they became reliant on technology and digital communications to deliver services (“telehealth”). Allied health professionals found themselves confused and lacking the knowledge on how to provide remote treatment in an effective manner to their clients.

Research Objective

The main objective of this study was to learn about the advantages and challenges allied health professionals experienced providing remote treatments. Whereas most published studies on this subject offer one perspective of one discipline, this study offers a wider perspective of professionals from three disciplines: physical therapists (PTs), occupational therapists (OTs), and speech, voice and language therapists (SVLTs). Furthermore, as COVID-19 is a global pandemic, an international perspective provides information about the similarities and differences between the professions across nations and cultures. The findings of this study will assist in developing tools and training programs that will better meet the needs of allied health professionals in offering optimal professional services for their clients.

Study Sample and Research Method

A questionnaire was developed in collaboration with allied health professionals, consisting of open and closed questions. Data were digitally collected using web-survey software. The questionnaire was distributed internationally. The survey included 443 professionals: 96 PTs, 189 OTs, and 158 SVLTs from 48 countries. Data collection lasted from mid-June until the end of October 2020.

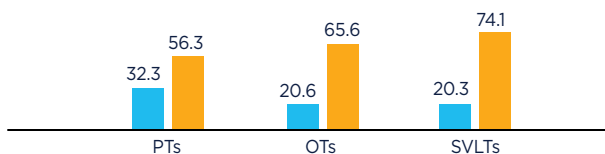


A mind open to learning, researching and an ability to think creatively to adapt the familiar to the new and challenging.

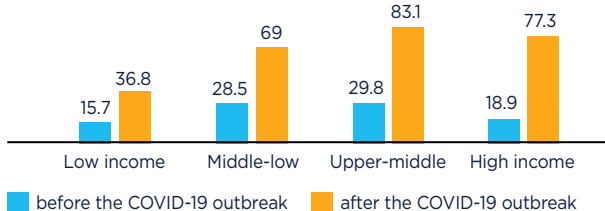
Main findings

- Using telehealth: Usage rates have tripled since the outbreak: 66.6% of the sample reported providing treatment by telehealth after the COVID-19 outbreak, as opposed to 23% before the outbreak. The highest usage rates were measured among SVLTs (74.1% vs. 20.3% before the outbreak), followed by OTs (65.6% vs. 20.6%), and PTs (56.3% vs. 32.3%). When examining telehealth usage after the outbreak based on country income, as defined by the World Bank, the highest usage rates were found in upper-middle income countries (83.1%), followed by high-income countries (77.3%), middle-low income countries (69%), and low-income countries (36.8%).

Telehealth usage rates before and after the COVID-19 outbreak (n=433)



Telehealth usage rates before and after by country income



- Starting to use telehealth: 41.7% of those using telehealth after the COVID-19 outbreak reported that their workplace initiated their use of telehealth, 29.2% initiated the use themselves in their private practice, and 19.7% initiated it as employees in their workplace.

- Modes of usage: Real-time synchronic on-line modes (such as “Zoom”) were used most frequently (68.5% vs. 37.3% before the outbreak). This increase seems to reflect the fact that this mode offers the closest option to conventional face-to-face therapy mode, emphasizing the importance of the interpersonal aspects. The second most frequently used telehealth mode after the outbreak was written information (48.8% vs. 47.1% before), followed by the phone conversation (38.3% vs. 45.1% before).

The a-synchronic off-line mode (e.g., by submitted video) was still the least popular mode (22% vs. 20.6% before).

- Main use of telehealth: Before the COVID-19 outbreak, telehealth was used primarily for guidance and consultation (48%), or to treat children or adults with permanent disabilities (47%). After the outbreak, telehealth has been used mainly as an alternative to conventional treatment in the clinic (55.3%), and less as a means of guidance and consultation (25.4%). These findings are similar across all three professions, but PTs use telehealth less than others as an alternative to the conventional clinic (44.4% vs. 51.6% of OTs and 64% of SVLTs). PTs also tend to use it more than the others as a means of guidance (38.9% vs. 25.8% of OTs and 18.8% of SVLTs).

- Professionals’ perceptions of telehealth: Telehealth users were asked to rate telehealth on three parameters on a scale from 1 (Not at all) to 4 (To a very great extent). The parameters were: “Allows you to maintain your professional standards” (mean score - 2.81), “Allows you to provide appropriate support to your clients” (2.70), and “Is a channel with which you are satisfied” (2.50). These ratings suggest that professionals do not perceive telehealth as an optimal tool for treatment. Significant differences were found by profession (PTs rated telehealth significantly lower than did OTs and SVLTs). Significant differences were also found based on country income, with upper-middle income countries granting telehealth the highest scores on all examined parameters, and low-income countries giving it the lowest score.

- Training: 47.8% of professionals using telehealth did not receive any training, 23.4% received training (19% after the outbreak and 4.4% before it). Only 14.9% of PTs reported receiving training, as opposed to 29.1% of SVLTs and 21.7% of the OTs.

- Future intent of using telehealth (after the outbreak): 53.2% stated they would use telehealth, and 24.1% that they would not use it after the COVID-19 pandemic is over. The remaining 22.7% did not answer the question. The highest intent was among OTs (55.6%), followed by PTs (53.7%), and SVLTs (40.2%).

Recommendations

1. It is important to understand the differences and similarities between the three disciplines, and to further research the provision of telehealth, focusing on each area of expertise and on the specific issues of concern for each. It is also important to tailor professional training for each discipline, and accompany it by evaluation studies, addressing also the emotional issues of the therapists.
2. It is important to examine the client's perspective to ensure that telehealth treatment is geared to better meet their needs.
3. It is important to examine a hybrid model of therapy that combines telehealth with face-to-face therapy.

For the full study, please click here.

The executive summary in Hebrew: <https://tinyurl.com/yhnqzfy0>

The executive summary in Arabic: <https://did.li/XSA5q>

