

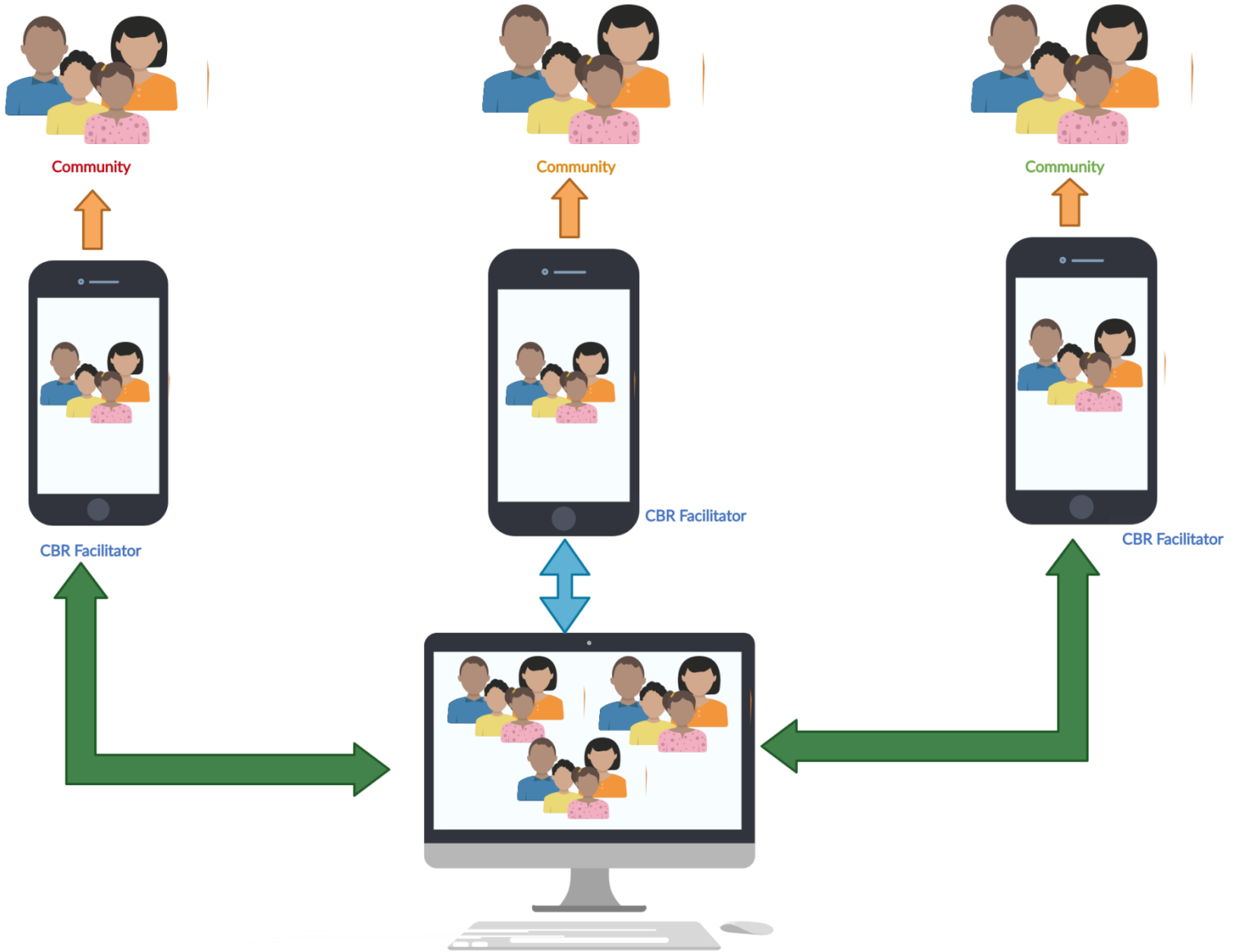
JVS Telerehabilitation Program “Sambhav”

Reaching the unreached



***** Remote Solution for Physical Rehabilitation of children with disabilities***

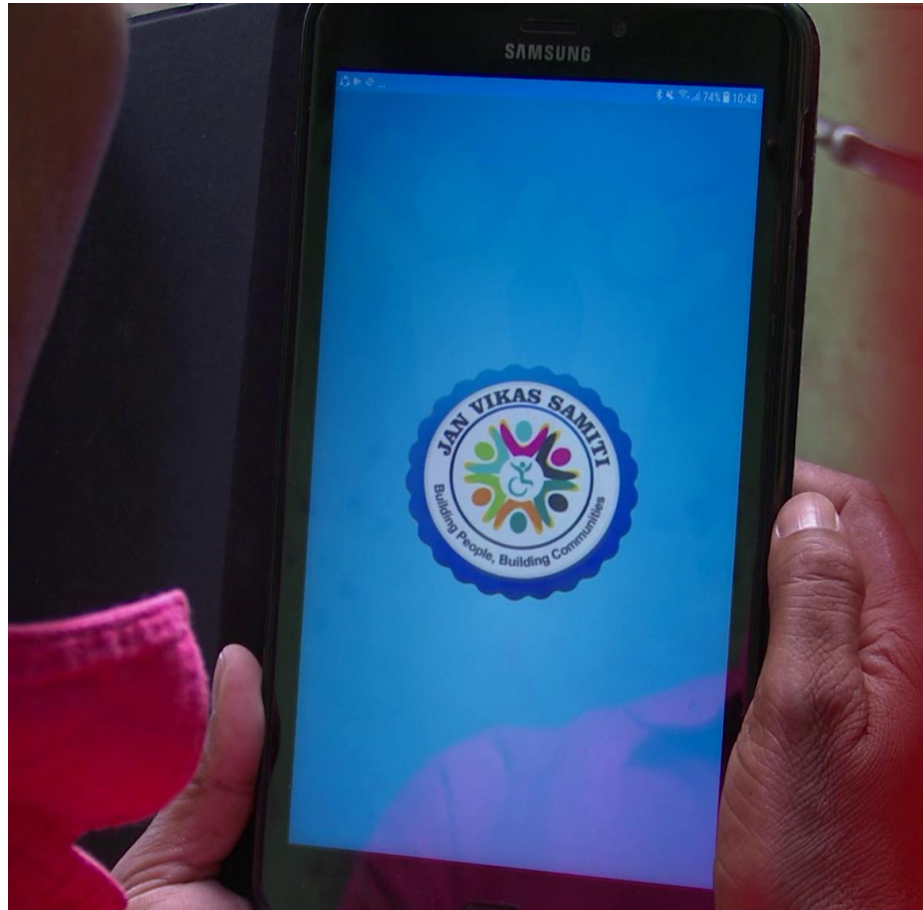
.....Reaching where no experts are available

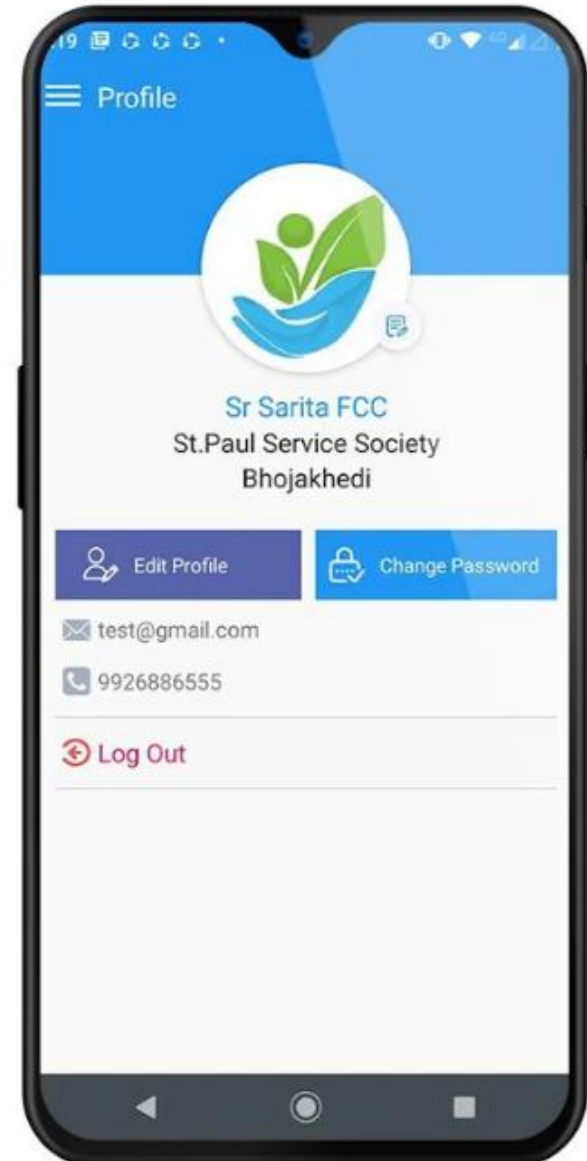
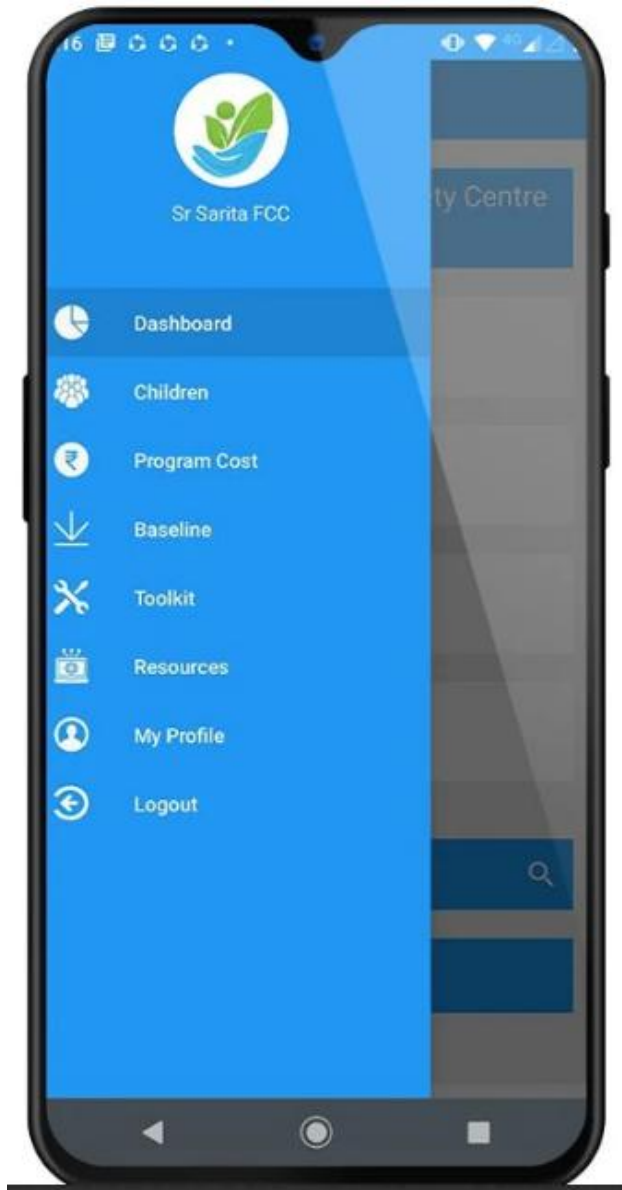


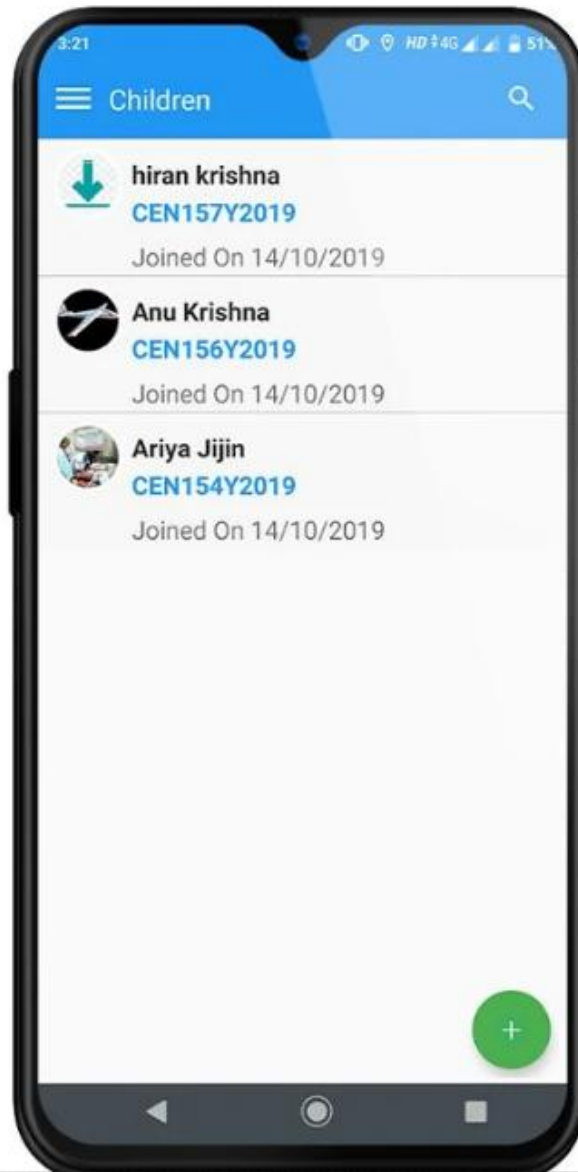
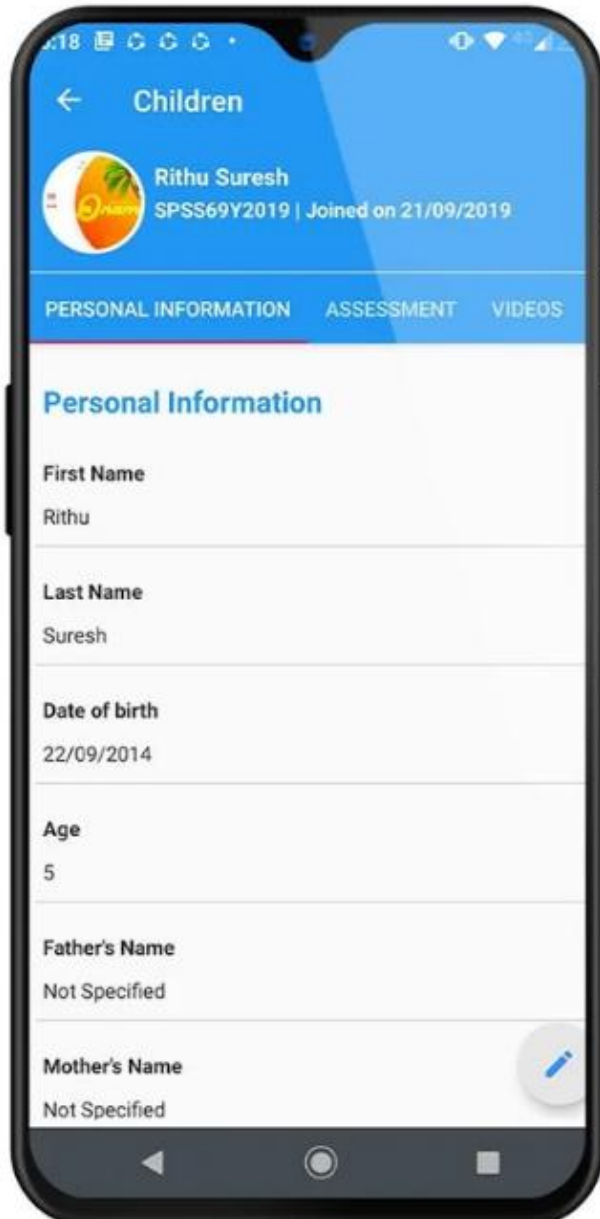
JVS Telerehabilitation Unit

JVS Sambhav app and Web Portal

Preloaded forms including Assessment, ICF report form, Toolkits for the effectiveness of tele-rehab and progress report available on the Web portal (Responsive) and Mobile app(Android) for the remote service delivery.



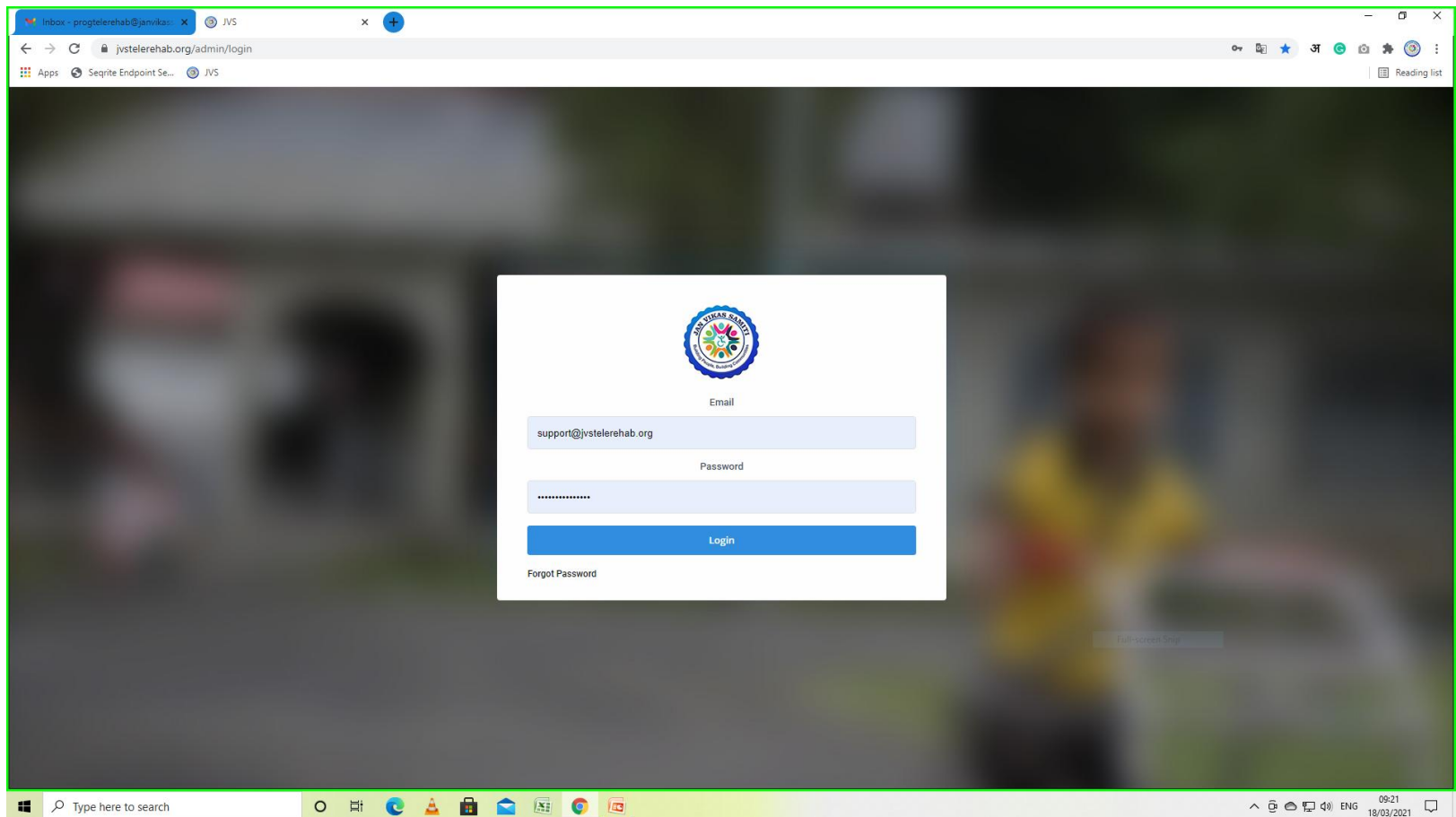




Web Portal- JVS

<https://www.jvstelerehab.org>


Control and admin all partner organizations



Web Portal- For Partner Organization

Assigned to each partner organization with a separate login Id and password

The screenshot displays a web browser window with the address bar showing `support@jvstelerehab.org/login`. The main content area features the Jan Vikas Samiti logo, a welcome message, and a login form. The form contains the following text and elements:

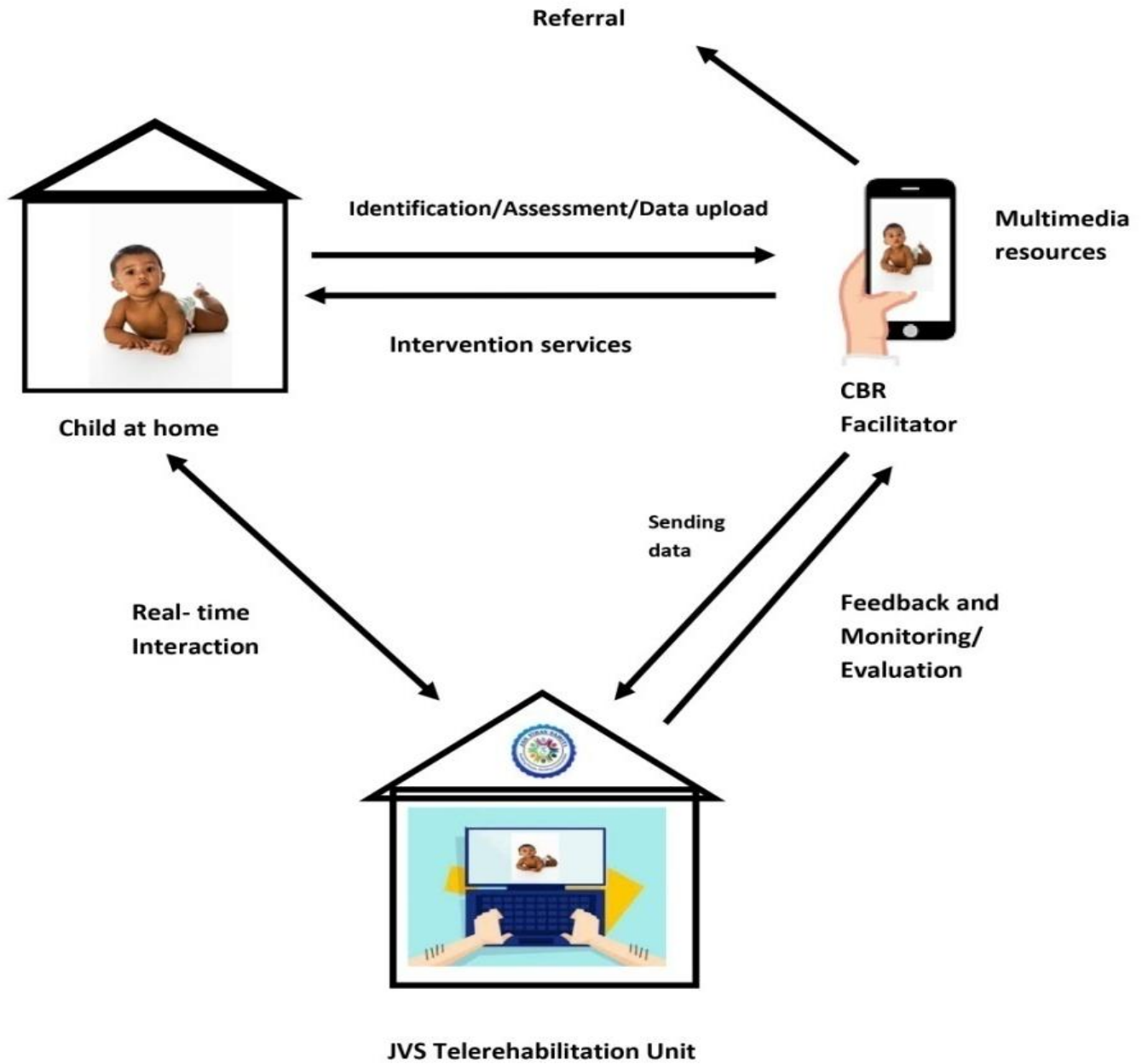
- Logo: 
- Text: "Welcome to Jan Vikas Samiti"
- Text: "Hello! let's get started"
- Text: "Enter your details below."
- Input field: `support@jvstelerehab.org`
- Input field: `*****`
- Button: "Login »"
- Text: "Forgot password ?"

On the right side of the page, there is a photograph of a young girl with a joyful expression, wearing a pink top and a green and white checkered skirt, seated in a wheelchair. The background of the page is a blurred image of a brick wall.

The Windows taskbar at the bottom shows the search bar with the text "Type here to search", several application icons, and the system tray displaying the time "09:23" and date "18/03/2021".

Methodology (How it works)

- Store and Forward/Asynchronous (in which after the video shoot, it can be stored and at the time of need can be forwarded to the JVS headquarter for intervention planning) method of technology which is quite practical and suites well to the concept of telerehabilitation.
- Rehabilitation professional/expert at JVS Telerehabilitation unit regularly receives videos of children with disabilities and assesses the case and provides treatment protocol/rehabilitation plan to the POs and periodically monitors the progress of cases.
- Now on-site real-time communication through video calling with the rehabilitation expert at JVS to discuss the present condition and progress of the child in the home-based care program.
- Real-time interaction and guidance have been provided to the parents/caregivers.

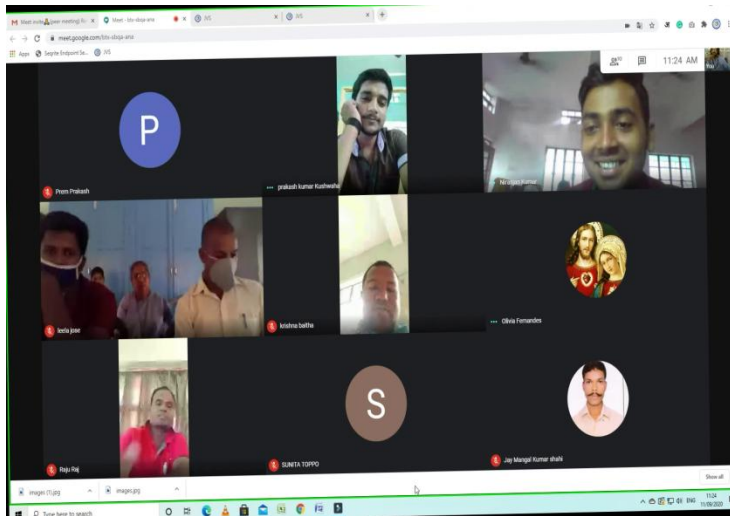


Our reach...

18 Partner Organisations (POs) from 10 states of India namely Uttar Pradesh, Bihar, Uttarakhand, Jharkhand and Madhya Pradesh, Chhattisgarh, Rajasthan, Manipur, Meghalaya and Odisha are assigned in the project “Sambhav” on a payment basis.

Training programs-

Residential and Online training on tele-rehabilitation service delivery



Impact

JVS is justifying its motto by reaching the unreached with providing guidance on physical rehabilitation to approximately 400 children with disabilities in the project areas of partner organizations.

PO heads and field staffs have shared their view that they are now able to provide quality intervention in remote areas as per the physical rehabilitation protocol through tele-rehabilitation.

As effective as conventional rehabilitation

	Benefits	Benefits observed
1	Getting rehab services within their Environment	Able to get home-based therapy
2	Therapist does not need to visit service user at their home.	Providing all professional support online/remotely
3	Save time-decreased travel between rural communities and rehabilitation centre.	Parents need not go rehabilitation centre
4	Reduce the cost of rehabilitation	Reducing approx 50% cost
5	Real –time guidance	Helpful for the parents
6	Onsite training/online capacity building	Very helpful for the staffs working in the field implementation

Experiences-Provision of Physical Rehabilitation

Key components		Remote application
Assessment	Consent	Yes
	Personal information	Yes
	Assessment	Yes, by Professional/CBR Facilitators
	ICF Report	Yes, by Professional/CBR Facilitators
	Videos/Photos	Yes , by CBR Facilitators
Rehabilitation	Plan and SMART goal setting	Yes with CBR Facilitators/Professional/Parents
	Basic therapies	Yes , by CBR Facilitators/Parents as advised by the professional
	Assistive devices	Local made developmental devices by CBR Facilitators
	Real-time interaction	Yes for on-site training/parents counseling
	Progress/outcomes	Yes
	Follow up and skill transfer	Yes
	Evidence-based	Yes using all functional classifications
	Enabling environment/ transition	Yes

Capacitating CBR facilitators on Physical Rehabilitation



Enable parents and caretakers for Home-based therapy



Encourage proper positioning



Improve functions & mobility



Increase participation & transition



Challenges and Risk factors :

The risk factors in this project are very minimal but some risk factors are observed during the project implementation as mentioned below-

- Retention and attrition of the CBR staffs.
- Poor technological skills among CBR staff .
- The vast project area covered by less human resource in the field.
- CBR staffs are engaged in almost every activities of the organisations.
- Poor understanding and lack of interest in the project at the higher level of the some organisations.

Challenges and risks can be reduced with more equipped and proper channelization with various stakeholders.

Endnotes.....

- India is now turning to a digital nation with the digitalization of all the present systems.
- In India telerehabilitation getting attention to other players.
- Use of technology is more in the future rehabilitation service delivery.
- It is proven that in Covid-19 pandemic situation, the use of technology in various service delivery increases leaps and bounds.
- Covid-19 pandemic situation put telehealth in the front lines in service delivery.
- Tele-rehab improves access to services, desired outcomes and reduces costs.

For more details...

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<https://janvikassamiti.org>

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