

Outpatient Physiotherapy Service Availability & Utilization in Ugandan Transitional Care for Traumatic Brain Injury : A Mixed-Methods Study Protocol




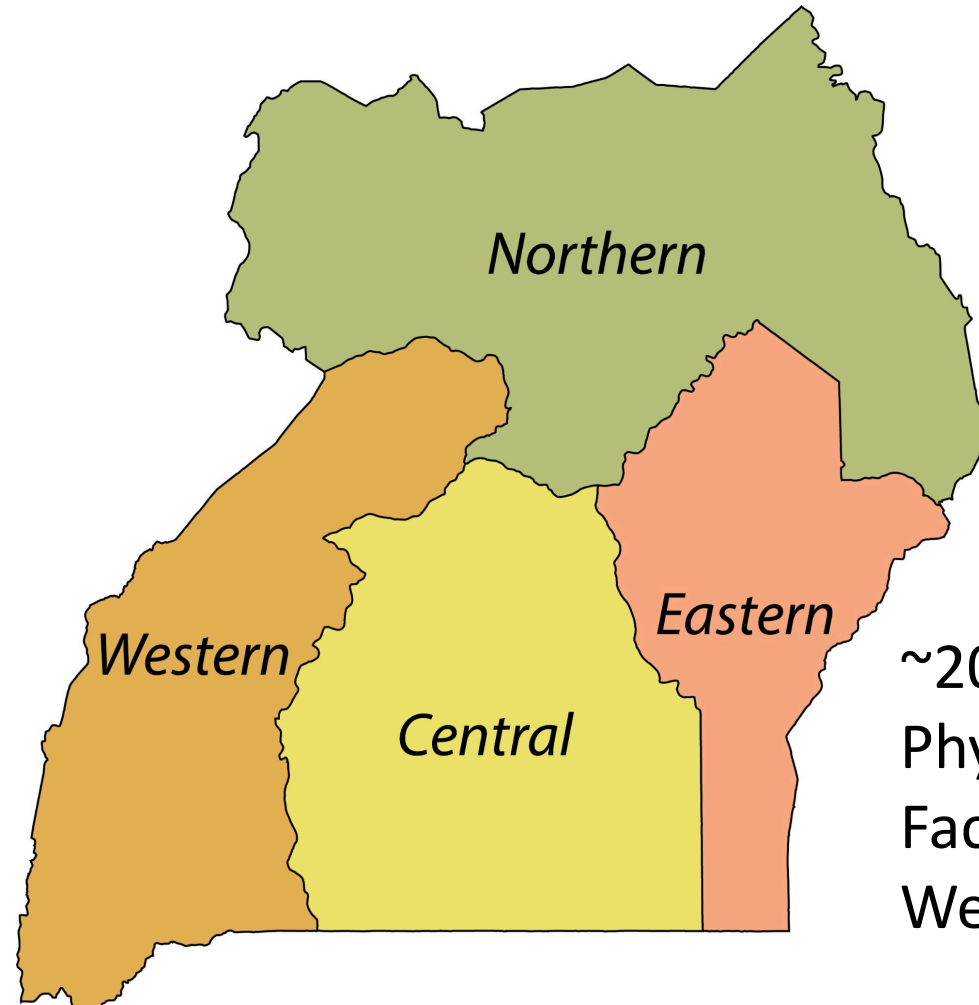
L. Davidson¹, A. Fulton², E. Lijesen², V. Pirapaharan³, F. Ahurira, SPT⁴, R. Kasheija, SPT⁴, C. Kemirembe, SPT⁴, F. Namirimu, SPT⁴, K. Stewart, PhD³, J.D. Niyonsenga, MScPT⁴, T. Fuller, MD, MScGH^{3,5}, K. Bullock, PT, DPT⁵


¹Biology Dept, Duke University; ²Neuroscience Dept, Duke University; ³Duke Global Health Institute, Duke University; ⁴Physiotherapy Dept, Mbarara University of Science & Technology; ⁵Duke Global Neurosurgery & Neurology Division, Duke University

Background

- Traumatic Brain Injuries (TBIs) are a leading cause of hospital admission in Uganda.¹
- Rehabilitation services address complications from TBI to recover functional mobility and/or manage new or worsened disability.²
- Physiotherapy is the most widely available rehabilitation service for TBI in Ugandan.³
- Prior team examined Characteristics & Roles of Patients, Caregivers, and Providers at Mulago National Referral Hospital (MNRH) and Mbarara Regional Referral Hospital (MRRH) for discharge planning before leaving acute hospitalization.
- Limited information exists on the ability of outpatient physiotherapy services to connect with referred patients after discharge from acute hospitalization.

TBI INCIDENCE:

Up to 170/100,000 people
 Sub-Saharan Africa
106/100,000 people
 Global⁴



REHABILITATION ASSISTS:




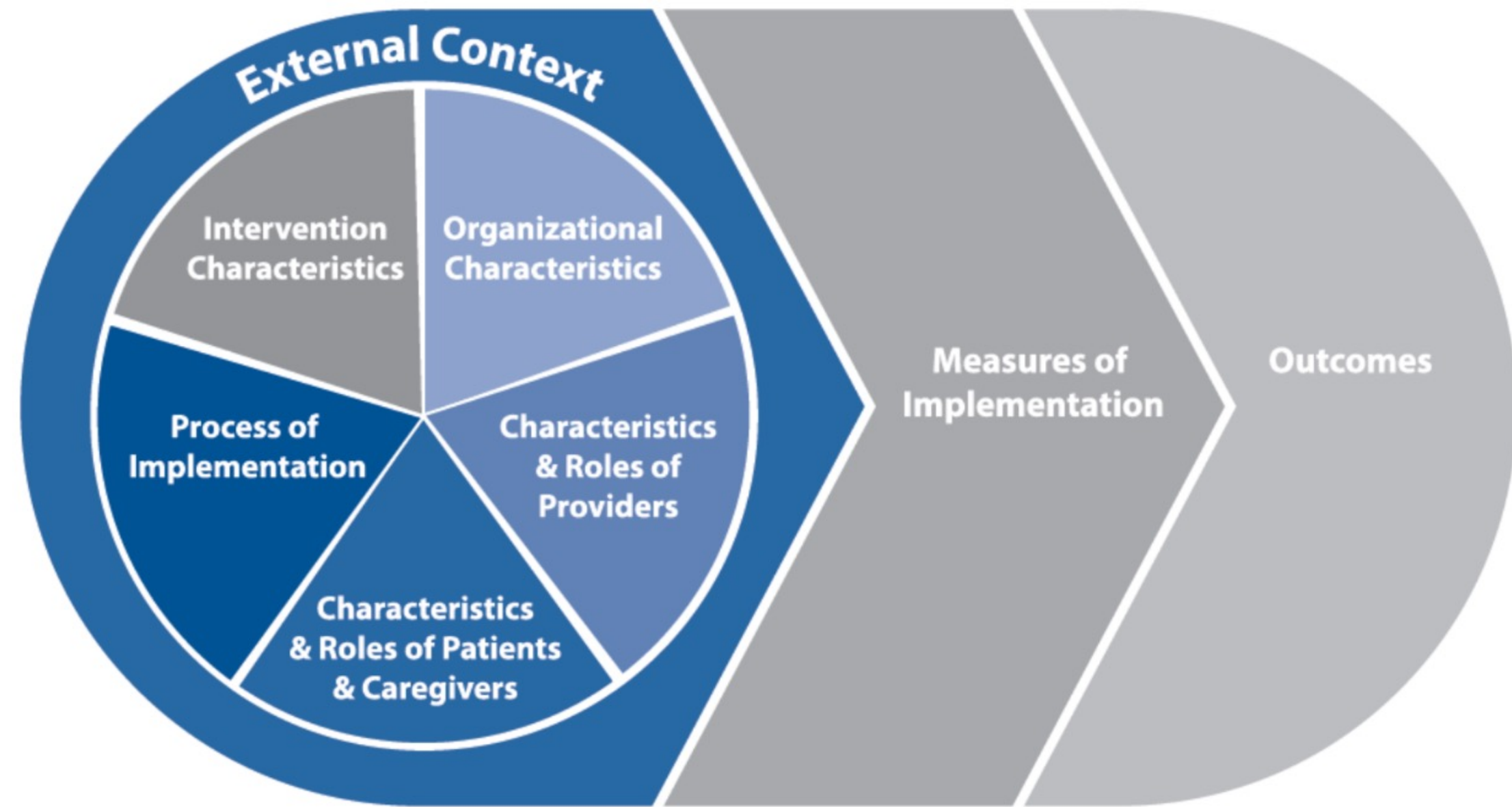
Purpose & Objectives

- Purpose:**
 To assess the current state of outpatient physiotherapy (PT) service availability and utilization for patients who have been discharged from an acute hospitalization due to TBI
- Objectives:**
- To describe the patient experience of accessing and utilizing outpatient physiotherapy resources.
 - To examine the facility-level attributes that affect the current ability for patients to follow through with referrals to outpatient physiotherapy
 - To understand organizational characteristics that affect implementing a new intervention for care transition to outpatient physiotherapy.

Methods and Analysis Plan

- Mixed-method study informed by Care Transition Framework (CTF) Domains: Organizational Characteristics, External Context, Outcomes
- Components: 1) Quantitative Cross-sectional Patient and Caregiver Surveys; 2) Strength, Weakness, Opportunities, and Threats (SWOT) Analysis; and 3) Qualitative Key Informant Interviews

Figure 1: Care Transition Framework⁵



Patient & Caregiver Surveys

- Purposive sample of 50 patients & 50 caregivers from MNRH & MRRH
- Caregiver included if patient not eligible
- Scripted telephone interviews to determine no. of referrals to outpatient physiotherapy (OPT), no. of attempts to complete referral, no. of successful OPT attendance, and ranking of factors that affect OPT attendance
- Descriptive Statistics & Non-Parametric Data Analysis

Patient Inclusion

- >18 years
- Discharged following TBI
- GCS score of 15/15 48 hours before discharge
- Pass Decision-Making Capacity Screening

Caregiver Inclusion

- >18 years
- Intended primary caregiver in the home
- Present at discharge

SWOT Analysis



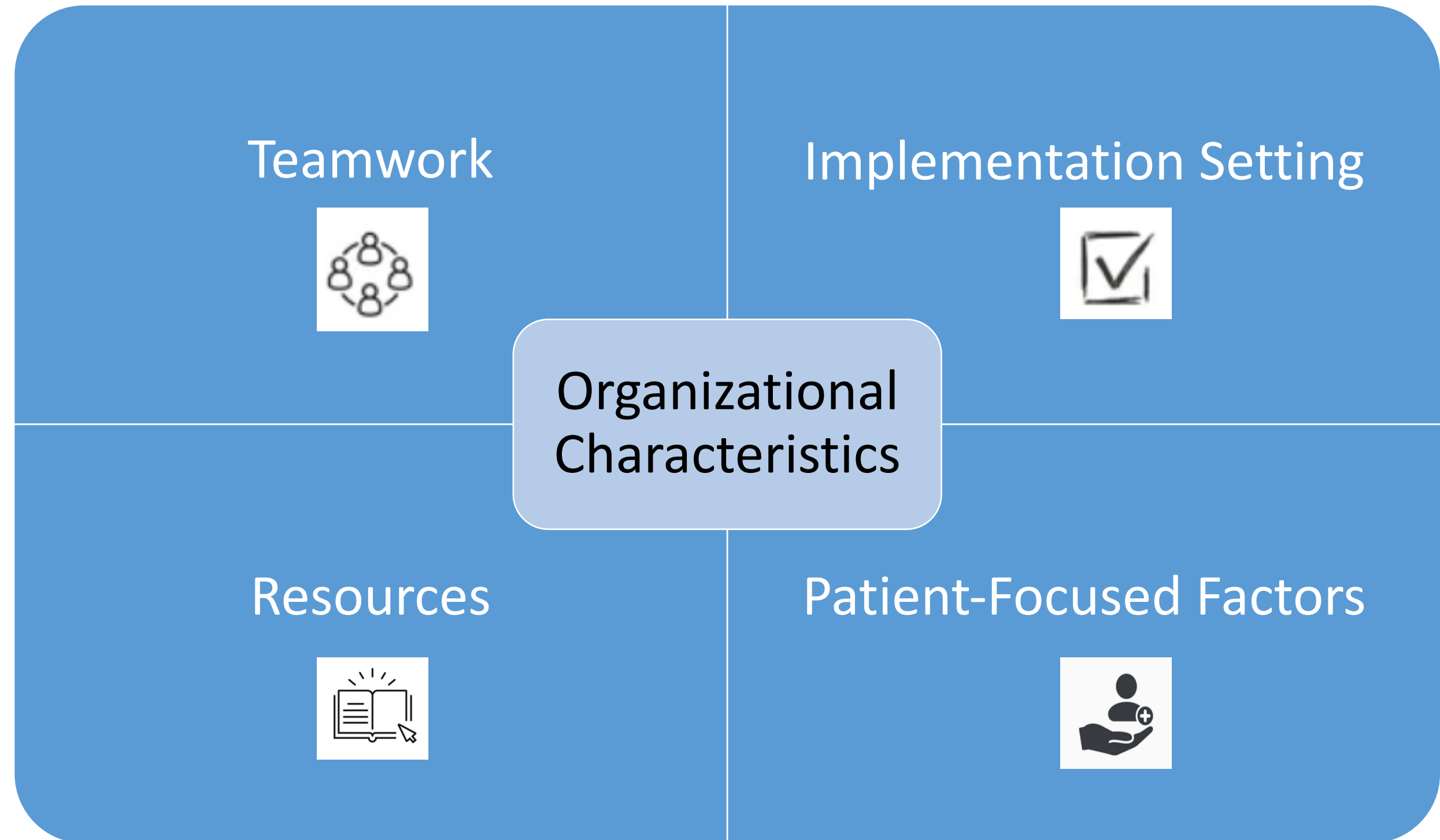
- Purposive sample of 30-40 PTs; 1-2 participants from ~20 eligible OPT Clinics in Central and Western Regions
- Deductive thematic analysis of structured telephone interviews to examine perspectives and attitudes of patient ability to follow up with OPT Clinic

Methods and Analysis Plan

Key Informant Interviews

- Purposive sample of 14-20 facility administrators and department leaders for neurosurgery, nursing, and physiotherapy at MNRH & MRRH
- Inductive thematic analysis of semi-structured interviews to examine perspectives attitudes, experiences, and knowledge of organizational characteristics that affect new model for care transition to OPT

Figure 2: Components of Key Informant Interviews



Potential Implications

- Results of this study will inform:
- Full understanding of components needed to build care transition model and referral tool
 - Expectations of patient outcomes for neurosurgery, nursing, & PT
 - Feasibility information to inform later studies of effectiveness and other pre-implementation outcomes
 - Future studies regarding patient barriers and facilitators to rehabilitation service access
 - Educational & training interventions of staff for new care transition model

References

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