



**OMERO PROJECT
FINAL EVENT**

GENOVA - JULY 21st 2023



Person-centred rehabilitation care: professional care for equity, quality, ethics and patient safety

The need for professional grade care for PWVL



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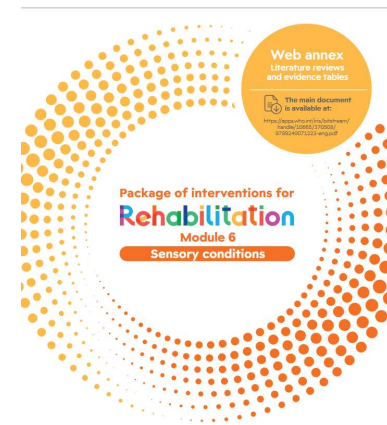
Rehabilitation, Person-centred

- Rehabilitation is defined as “a set of interventions designed to **optimize functioning** and **reduce disability** in individuals with health conditions in interaction with their environment”.
- Rehabilitation helps a person to be as **independent as possible** in everyday activities and **enables** participation in education, work, recreation and meaningful life roles.
- Rehabilitation is an important part of universal health coverage and is a key strategy for achieving Sustainable Development Goal 3 – “**Ensure healthy lives and promote well-being for all at all ages**”
- Rehabilitation is **highly person-centered**: the interventions selected for each individual are targeted to their goals and preferences.
- Rehabilitation can be provided in different places, inpatient or outpatient hospital settings, outpatient physio- or occupational therapy practices, and community settings such as an individual’s home, a school or a workplace.

Globally, 1 in 3 people today are estimated to be living with a health condition that would benefit from rehabilitation. This need is predicted to increase. For example, people are living longer but with more chronic disease and disability.

Equity, Quality, Ethics and Patient Safety

- **Equity** is the absence of unfair, avoidable or remediable differences among groups of people (socially, economically, demographically, or geographically) or by other dimensions of inequality (sex, gender, ethnicity, disability, or sexual orientation). Health is a fundamental human right. Health equity is achieved when everyone can attain their full potential for health and well-being.
- **Quality** of care is the degree to which health services for individuals and populations **increase the likelihood of desired health outcomes**. It is based on evidence-based professional knowledge and is critical for achieving universal health coverage
 - Should be:
 - **Effective** – providing evidence-based healthcare services to those who need them;
 - **Safe** – avoiding harm to people for whom the care is intended; and
 - **People-centred** – providing care that responds to individual preferences, needs and values.
- To realize the benefits of quality health care, health services must be:
 - **Timely** – reducing waiting times and sometimes harmful delays;
 - **Equitable** – providing care that does not vary in quality on account of gender, ethnicity, geographic location, and socio-economic status;
 - **Integrated** – providing care that makes available the full range of health services throughout the life course;
 - **Efficient** – maximizing the benefit of available resources and avoiding waste.





Equity, Quality, Ethics and Patient Safety

- **Ethics** Health ethics promotes the consideration of values in the prioritization and justification of actions by health professionals, that may impact the health and well-being of patients, families, and communities. Health ethics framework provides the evidence-based application of **general ethical principles**, such as respect for personal autonomy, beneficence, justice, utility and solidarity.
- **Patient Safety** is a health care discipline that aims to prevent and reduce risks, errors and harm that occur to patients during provision of health care. A cornerstone of the discipline is continuous improvement based on learning from errors and adverse events. Patient safety is fundamental to delivering quality essential health services. To ensure successful implementation of patient safety strategies; clear policies, leadership capacity, data to drive safety improvements, skilled health care professionals and effective involvement of patients in their care, are all needed.
- *Safety of patients during the provision of **health services that are safe and of high quality is a prerequisite for strengthening health care systems** and making progress towards effective universal health coverage (UHC) under Sustainable Development Goal 3*





VISION REHABILITATION

- Vision Rehabilitation is embedded in the global framework of Rehabilitation
- VR is also in the clinical continuum of Eye Care.
- All principles stated before (Equity, Quality, Ethics and Patient Safety) apply fully to VR.
- Person centeredness is the core of VR, but cannot be real is there is no:
 - ✓ **Equity:** if VR is delivered only in few specialized centers, if only those with higher education know about the benefit of VR, if **PWLV cannot afford paying for the services**, if people are not supported through their journey in VR, if ...
 - ✓ **Quality:** VR shall get free from been confused with charitable services or humanitarian care. For being considered a professional service to people in need it requires definition of **minimum services, acceptable quality, monitor outcomes, evaluate provision of care, define professional profiles of care agents**. Timeliness of services is critical as is health system wide compliance with availability of VR services and education of other professionals on the need to report people for VR assessment during medical interventions for defined diseases, not after.



Tracy Williams,
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VISION REHABILITATION

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- VR is also in the clinical continuum of Eye Care, and shall bond with it.
- All principles stated before (Equity, Quality, Ethics and Patient Safety) shall apply fully to VR.
- Person centeredness is the core of VR, but cannot be real is there is no:
 - ✓ **Ethics:** if decision on the rehabilitation strategies **are not evidence-based**, are not defined by internationally agreed guidelines, do not respect person's autonomy and follow the principles of social solidarity.
 - ✓ **Patient safety:** VR shall strive for best and agreed health outcomes. Patients shall be ensured that **when they trust a service providers presented as rehabilitation care professional, will receive the best possible care** for their condition and rest assured that no harm will result by missing proper consideration of monitored mistakes or lack of updated education.



Polo Nazionale di Servizi e Ricerca per la Prevenzione della Cecità e la Riabilitazione Visiva degli Ipovedenti
WHO Collaborating Center ITA100



VISION REHABILITATION – Today vs. Tomorrow

Today

- PWVL have modest to none access to VR care.
- Services **only in few high specialized centers**, often in main cities, frequently as private service provision.
- PWVL are not educated on VR care, even been demoralized by eye care professionals with “**the**” **unfamous phrase** (*there is nothing more we can do for you ..*).
- PWVL are not provided with **professional grade services** but with a *bit of this and that*, or even exposed to unproven and “innovative” devices or techniques.
- PWVL receive a prescription for **devices which cannot afford** or not even exist in the country as not part of the GATE or EDL categories.



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VISION REHABILITATION – Today vs. Tomorrow

Tomorrow

- PWVL **will be supported** in finding where to receive their right to VR care.
- Services will be **disseminated** across countries and territories through telematic reference services.
- PWVL will be **informed of the possibility offered by VR** by their treating care providers.
- PWVL will receive care following **monitored guidelines**, will not be confused by claims of impossible recoveries, will have a **professional grade diagnosis** of their needs, expectations and **lives** not their v.a.
- Will get **best possible care** independently from who there are in the society.
- Will **not be the guinea pigs** of innovation or speculations of care providers.
- Will trust that vision rehabilitation services are offered under the authority, responsibility and scrutiny of the Health Authorities or the Community of Care, hence **they can trust the service**.



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IAPB - Polo Nazionale

Journey from Today => Tomorrow

- Need ongoing collection of evidence on the health gains with VR => Research
- Need ongoing collection of data on service demand => Live database
- Need profesional coherence and comminity of care solidarity => Nat. VR committe
- Need political recongition of the growing request for VR care => Coord. Advocacy
- Need health providers solidarity and unity towards common gains => Prof. Edu and Academia
- Need agreed guidelines and professional profiles => Int. Guidelines + curricula

WHO Contribution towards Tomorrow

- Establish the 1st VR collaborating center ITA100 Polo Nazionale IAPB (Rome, Italy)
- International standards for vision rehabilitation
- International competency based curricula
 - [IAPB_imp-DEF.pdf \(polonazionaleipovisione.it\)](#)



SEVENTY-SIXTH WORLD HEALTH ASSEMBLY
Agenda item 13.4

WHA76.6
30 May 2023

(1) to raise awareness of and build national commitment for rehabilitation, including for assistive technology, and strengthen planning for rehabilitation, including its integration into national health plans and policies, as appropriate, while promoting interministerial and intersectoral work and meaningful participation of rehabilitation users, particularly persons with disabilities, older persons, persons in need of long-term care, community members, and community-based and civil society organizations at all stages of planning and delivery;

(4) to ensure the integrated and coordinated provision of high-quality, affordable, accessible, gender-sensitive, appropriate and evidence-based interventions for rehabilitation along the continuum of care, including strengthening referral systems and the adaptation, provision and servicing of assistive technology related to rehabilitation, including after rehabilitation, and promoting inclusive, barrier-free environments;

(7) to promote high-quality rehabilitation research, including health policy and systems research,

WHO Contribution towards Tomorrow



Rehabilitation 2030

WRA

WHO hosted network

World Rehabilitation Alliance

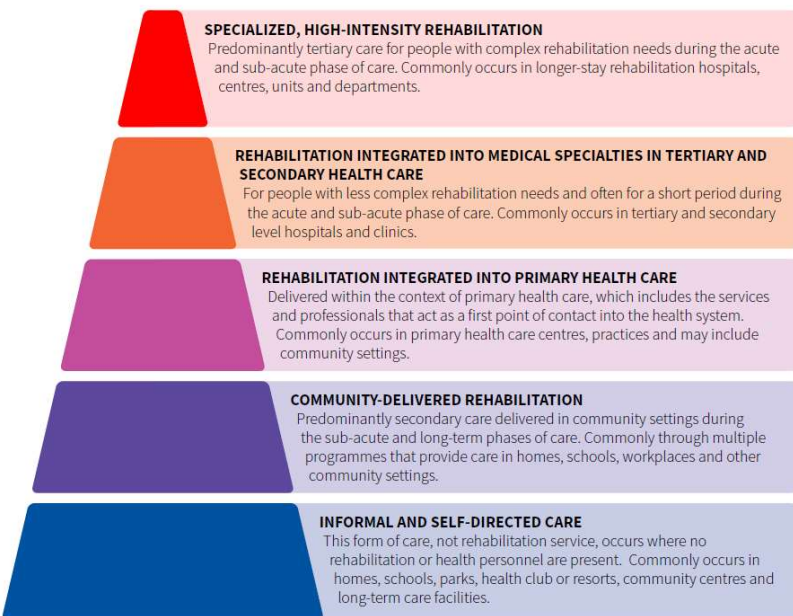
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- Raising awareness
- Creating demand
- Mobilizing political will

support and contribute to the WHO-hosted World Rehabilitation Alliance, a multistakeholder initiative to advocate for health system strengthening for rehabilitation;



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THANK YOU FOR YOUR ATTENTION



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