

ASPR TRACIE Technical Assistance Request

Request Receipt Date (by ASPR TRACIE): 1 February 2022

Response Date: 11 February 2022

Type of TA Request: Standard

Request:

The requestor asked ASPR TRACIE for resources specific to the inclusion of rehabilitation professionals in disaster preparedness and response efforts in the U.S..

Response:

The ASPR TRACIE Team reviewed existing materials in our resource library. We also conducted a search online for relevant materials. Per the request, we specifically narrowed our search to disasters in the U.S.. Relevant resources gathered are included in the following section of this document.

I. Rehabilitation and Disaster Preparedness-Related Resources

American Physical Therapy Association. [Coronavirus \(COVID-19\) Resources for the Physical Therapy Profession](#).

This webpage provides links to numerous articles related to the role of physical therapists as it pertains to the COVID-19 pandemic response efforts. **NOTE:** Free registration is required to view full-text articles.

American Physical Therapy Association (APTA). (n.d.). [Emergency Preparedness Homepage](#). (Accessed 2/10/2022.)

This webpage provides links to multiple articles related to the role of physical therapists in disaster response and management. **NOTE:** Free registration is required to view full-text articles.

ASPR TRACIE. (2021). [Comprehensive Outpatient Rehabilitation Facility Requirements: CMS Emergency Preparedness Final Rule \(Updated\)](#).

This document combines excerpts from the Centers for Medicare & Medicaid Services (CMS) Emergency Preparedness (EP) Final Rule and the recently released Interpretive Guidelines from CMS to provide a consolidated overview document of requirements for Comprehensive Outpatient Rehabilitation Facilities.

ASPR TRACIE. (2021). [Occupational Therapy and COVID-19](#).

The goal of occupational therapy is to be able to get patients back to where they want to be, via a mix of physical rehabilitation, cognitive activity analysis, and improving safety, function, and independence. ASPR TRACIE interviewed Jamie Wilcox, OTD, OTR/L, Kelsey Peterson, OTD, OTR/L, Neuro-IFRAH® Certified, and Carnie Lewis, OTD, OTR/L, Neuro-IFRAH® Certified, who work in acute care settings at the Keck Medical Center of the University of Southern California to learn more about the impact the COVID-19 pandemic had on their jobs. Heather Parsons, the Vice President of Federal Affairs for the American Occupational Therapy Association, also participated in the interview.

ASPR TRACIE. (2021). [Respiratory Therapy and COVID-19](#).

Respiratory therapists are key members of healthcare teams in a variety of settings. Over the past year, they have played a significant role in the treatment and management of COVID-19 patients. ASPR TRACIE interviewed Katie Mattare, BS, RRT, Clinical Coordinator for the Adult Respiratory Therapy Department at Johns Hopkins Hospital in Maryland to gain insight into the respiratory therapists' experience during the pandemic. Review the related ASPR TRACIE webinar here: <https://files.asprtracie.hhs.gov/documents/healthcare-operations-series--role-of-respiratory-therapists-during-covid.pdf>.

ASPR TRACIE. (2021). [The Role of the Physical Therapist in Pandemic Response](#).

Physical therapists (PTs) are an integral component of healthcare teams in a variety of settings (e.g., emergency departments, acute care settings, home health care, and outpatient settings). In hospitals (i.e., acute care and/or inpatient rehabilitation), they may help develop treatment plans, teach patients how to use exercise techniques, and provide hands-on manual therapy to help with healing and improve function. The COVID-19 pandemic significantly affected the way PTs were able to provide care, while the number of patients who needed both inpatient and outpatient physical therapy increased. ASPR TRACIE met with Lindsay Harmon-Matthews, PT, DPT, MPH, J.J. Kuczynski, PT, DPT, OCS, Anthony Ganim, PT, MPT, MBA, and Michael Martin, PT, MPT (The Ohio State University Wexner Medical Center and other affiliations) to learn more about their experiences caring for COVID-19 patients during and after hospitalization. Review the related ASPR TRACIE webinar here: <https://files.asprtracie.hhs.gov/documents/aspr-tracie-healthcare-operations-during-covid-19-series-pt-role-in-pandemic-response.pdf>.

Gosney, J.E. (2013). [Physical Medicine and Rehabilitation: Critical Role in Disaster Response](#) (Preview only; for purchase). Cambridge University Press.

This resource addresses the importance of physical medicine and rehabilitation services during disaster response. **NOTE:** Both U.S. and internationally based disasters are addressed in this resource.

Gowing, J.R., Walker, K.N., Elmer, S.L., et al. (2017). [Disaster Preparedness among Health Professionals and Support Staff: What is Effective? An Integrative Literature Review](#). (Abstract only.) *Prehospital and Disaster Medicine*. 32(3):321-328.

The authors of this study highlight the importance of a multi-disciplinary healthcare team to support disaster response. They noted that most studies focused on the preparedness of medical, nursing, public health, or paramedic professionals, and added that there needs to be greater focus on other disciplines.

Harrison, R., (2007). [Preliminary Investigation into the Role of Physiotherapists in Disaster Response](#). *Prehospital and Disaster Medicine*. 22(5):462-5.

This paper focuses on the potential role of physiotherapists during disaster response. The author conducted four interviews with four physiotherapists to capture their experiences following disaster response. Results from these interviews indicated that physiotherapists did not have a well-defined role during their disaster response efforts, and there was a need for the physiotherapy community to better understand disaster response.

Kennedy, P. (2015). [Advocacy for People with Speech Disabilities: Emergency Preparedness Resources](#). *Therapy Times*. 14:15.

This article discusses challenges and resources for people who have difficulty communicating as a result of pre-existing conditions such as cerebral palsy, autism, and cognitive delays. Communication techniques include speech generating devices, sign language, and picture communication displays.

Mousavi, G., Ardalan, A., Khankeh, H., et al. (2019). [Physical Rehabilitation Services in Disasters and Emergencies: A Systematic Review](#). *Iranian Journal of Public Health*. May; 48(5): 808–815.

The authors of this article reviewed 13 studies written in English addressing physical rehabilitation services in disasters (natural and man-made) from January 2000 to September 2017. Results indicated that physical rehabilitation services were either not provided or insufficiently provided during the early phases of disasters. **NOTE:** The articles analyzed for this study include resources from disasters that occurred in the U.S. and abroad.

Seale, G. S. (2010). [Emergency Preparedness as a Continuous Improvement Cycle: Perspectives from a Postacute Rehabilitation Facility](#). (Abstract only.) *Rehabilitation Psychology*. 55(3): 247-54.

The objectives of this study were to describe the iterative process of emergency planning and preparedness as it relates to post-acute rehabilitation facilities. The study focused on facility staff involved in the evacuation and ongoing care post evacuation, and adults with moderate to severe acquired brain injury receiving residential post-acute rehabilitation and long-term care services.

Sheikhbardsiri, H., Yarmohammadian, M.H., Rezaei, F., et al. (2017). [Rehabilitation of Vulnerable Groups in Emergencies and Disasters: A Systematic Review](#). World Journal of Emergency Medicine. 8(4): 253–263.

The objective of this study was to conduct a systematic review as it pertains to rehabilitation of vulnerable groups in emergencies and disasters. The authors reviewed 25 articles and found that the most common kinds of rehabilitation intervention for vulnerable groups were physical, social, and psychological activities. Results also indicated that the implementation of rehabilitation services usually ranged from 1 week to 50 months after the onset of the disaster (with the mean period of seven months). **NOTE:** The articles analyzed for this study include resources from disaster that occurred in the U.S. and abroad.

The American Journal of Occupational Therapy. (2011). [The Role of Occupational Therapy in Disaster Preparedness, Response, and Recovery](#). 65(6).

This concept paper provides occupational therapists with a basic understanding of disasters in order to support disaster preparedness, response, and recovery efforts.

Wisconsin Department of Health Services. (2018). [CMS Emergency Preparedness Rule Toolkits](#).

This webpage includes links to toolkits and other resources designed to help certain types of healthcare facilities better understand the CMS Emergency Preparedness Rule. There is both a PDF (toolkit) and Word version (workbook) for each facility type, and the relevant CMS rules for each facility type are included. Each toolkit includes sample templates and planning worksheets that can help facilities develop compliant plans, policies, and procedures. **NOTE:** Review the [Clinics, Rehabilitation Agencies, and Public Health Agencies as Providers of Outpatient Physical Therapy and Speech-Language Pathology Services Toolkit](#).

Wolf Williams, R., (2019). [Important but Underused: PTs, PTAs, and Disaster Response](#). American Physical Therapy Association Magazine.

The author shares her experience as a physical therapist trying to assist individuals injured during Hurricane Harvey. She found that there was no defined role for her during response efforts and highlights ways in which physical therapists can assist during disaster response.