1. Assess the situation
2. Develop a rehabilitation strategic plan
3. Establish monitoring, evaluation, and review processes
4. Implement the strategic plan
Four-phase process

1. Prepare for situation assessment
2. Collect data and information
3. Conduct assessment in the country
4. Write, revise and finalize report, disseminate and communicate findings
5. Prepare for strategic planning
6. Identify priorities and produce first draft of plan
7. Consult, revise, finalize and complete costing of plan
8. Endorse and disseminate the strategic plan
9. Develop monitoring framework with indicators, baselines and targets
10. Establish evaluation and review processes
11. Establish a recurring implementation cycle – the “plan, do and evaluate” (cycle)
12. Increase capacity of rehabilitation leadership and governance
1. Assess the situation

2. Develop a rehabilitation strategic plan

3. Establish monitoring, evaluation, and review processes

4. Implement

Implementation period of the strategic plan

Strategic plan review and development of new plan
Four-phase process

1. Prepare for situation assessment
2. Collect data and information
3. Conduct assessment in the country
4. Write, revise report, disseminate
5. Prepare for strategic planning
6. Identify priorities and produce first draft of plan
7. Consult, revise, finalize and complete costing of plan
8. Endorse and disseminate the strategic plan
9. Develop monitoring framework with indicators, baselines and targets
10. Establish evaluation review processes
11. Increase capacity of rehabilitation leadership and governance
12. Establish a recurring implementation cycle – the “plan, do and evaluate” (cycle)
Development of the RGA

Sept 2016 – Initial consultation meeting

Feb 2017 – Rehab 2030 and 2nd consultation meeting

Jan 2018 – Rehab Indicator consultation meeting

2018/2019 – Field testing and stakeholder interviews

2019 – Launch of RGA

2017 – Version 1 drafted, reviewed & preliminary field test in Botswana

June 2018 – Training of development partners in the RGA, review process
Rehabilitation Results Chain

**INPUT**
- Governance, financing, human resources, information

**OUTPUT**
- Rehabilitation accessibility, availability, acceptability and affordability
- Rehabilitation quality

**OUTCOME**
- Coverage of rehabilitation interventions and functioning outcomes

**IMPACT**
- Better population health and functioning with financial protection

**CAPACITY**
- System attributes: equity, efficiency, accountability, sustainability

**PERFORMANCE**
Rehabilitation Results Chain

**INPUT**
- Governance, financing, human resources, information

**OUTPUT**
- What mix of rehabilitation is needed?

**OUTCOME**
- Coverage of rehabilitation interventions and functioning outcomes

**IMPACT**
- Better population health and functioning with financial protection

*System attributes: equity, efficiency, accountability, sustainability*
SPECIALIZED, HIGH INTENSITY REHABILITATION
Occurring in rehabilitation hospitals, centers, departments, units and day programmes

COMMUNITY-DELIVERED REHABILITATION
Occurring in homes, schools, workplace, childcare, local health centers, long-term care facilities and other community settings

REHABILITATION INTEGRATED INTO MEDICAL SPECIALTIES IN TERTIARY AND SECONDARY HEALTH CARE
Occurring in hospital and clinic in-patient and out-patient settings across a wide range of medical specialties

REHABILITATION INTEGRATED INTO PRIMARY HEALTHCARE
Occurring in primary care settings such as general practice, private clinics and community health centers

INFORMAL AND SELF-DIRECTED REHABILITATION
Occurring in home, school, park, health club, community group, long-term care settings
SPECIALIZED, HIGH INTENSITY REHABILITATION

COMMUNITY-DELIVERED REHABILITATION

REHABILITATION INTEGRATED INTO MEDICAL SPECIALTIES IN TERTIARY AND SECONDARY HEALTH CARE

REHABILITATION INTEGRATED INTO PRIMARY HEALTHCARE

INFORMAL AND SELF-DIRECTED REHABILITATION

Primary Healthcare

Tertiary and Secondary Healthcare

Specialized care
Rehabilitation 2030

INPUT
Governance, financing, human resources, information

OUTPUT
Rehabilitation accessibility: availability, acceptability and affordability
Rehabilitation quality

OUTCOME
Coverage of rehabilitation interventions and functioning outcomes

IMPACT
Better population health and functioning with financial protection

System attributes: equity, efficiency, accountability, sustainability
Key ingredients for utilizing the Rehabilitation Guide for Action (RGA)

• Government leadership, readiness and commitment
• Rehabilitation leaders working together
• Development Partners supporting government and rehabilitation leaders
  • WHO - CO, RO & HQ
  • HI, ICRC, Movability, World Education, Light for the World, ISPRM, USAID
• Preparation, patience and persistence
8 countries already commenced RGA

Botswana, Myanmar, Jordan, Solomon Islands, Laos, Guyana, Sri Lanka, Haiti
10 more countries planned for 2019

26 more expressing interest

44 Countries

Botswana, Myanmar, Jordan, Solomon Islands, Laos, Guyana, Sri Lanka, Haiti, Nepal, Bhutan, Mozambique, Zambia, Rwanda, Burkina Faso, Mongolia, Vietnam, Bolivia, Colombia, Uganda, Philippines, Senegal, Papua New Guinea, India, Thailand, Pakistan, Syria, Libya, Sudan, Morocco, Ukraine, Georgia, Tajikistan, Moldova, Turkmenistan, Uzbekistan, Armenia, Azerbaijan, Montenegro, The Bahamas, Dominican Republic, Trinidad and Tobago, Honduras, Panama, Chile, Cuba
Thank you!