WHO Rehabilitation in Health Systems: Guide for Action

Step 1: STARS Situation Assessment

Guyana - November 2018

Lessons Learnt

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Density of physical therapists to population

Physical therapists per 10,000 people

Less than 1
1 to 5
5 to 10
10 to 15
15 to 20
20 or above

Based on data returns from 91 member organisations. Countries are based on data returns from member organisations that did not respond or count. Some nations are not represented due to software limitations and map scale rather than lack of data.

Produced for briefing purposes by the World Confederation for Physical Therapy in 2015 www.wcpt.org
With strong rehabilitation leadership and support from the MOH, Guyana has accomplished notable advances in the sector:

- **Rehab included in UHC** package of essential services (although gaps with AT provision)
- In recent years **PT education has transitioned to a baccalaureate level**
- **Baccalaureate OT and SLP programs** were also developed. (At the time of the assessment the OT program was on hold due to lack of faculty.)
- The majority of rehabilitation services have historically been rendered by rehabilitation assistants. That program is being phased out in order to **upgrade rehabilitation professions**.
- Rehabilitation services are now **offered in all 10 administrative regions**.
1. Advance the well-being of all people of Guyana
2. Reduce health inequities
3. Improve the management and provision of evidence-based, people responsive, quality health services
In-Country Situation Assessment

- 29 interviews
- 7 site visits
- 3 regions visited
- Full Day Technical Working Group Workshop
Lessons Learnt

#1: Begin at the end: Embrace reverse planning
In-Country

After leaving Country
Before submitting report and RMM
2. Don’t rely on assumptions
Re-state scope and goals for the STARS assessment and Rehabilitation Plan of Action
3. Prepare stakeholders for the Rehabilitation Maturity Model: Nature, mechanism, and interpretation
Rehabilitation Maturity Model (RMM)

The RMM evaluates rehabilitation along a continuum of development.

RMM identifies 50 components of rehabilitation and describes them according to four-levels of maturity rating them 1 – 4.
## Summary scores and results

### GOVERNANCE

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<th>Key to scores:</th>
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<tr>
<td>1</td>
<td>1</td>
<td>Already present, no action needed</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>Needs some strengthening</td>
</tr>
<tr>
<td>3</td>
<td>2</td>
<td>Needs a lot of strengthening</td>
</tr>
<tr>
<td>4</td>
<td>2</td>
<td>Very limited, needs establishing</td>
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<tr>
<td>5</td>
<td>2</td>
<td></td>
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<tr>
<td>6</td>
<td>2</td>
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### INFORMATION

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#4: Don’t Miss the Forest for the Trees
Data collection and submission of a country report is **NOT** the ultimate goal. It is an output not and outcome.

The ultimate goal is that the country will **Strengthen Rehabilitation** in the health system by following through with the entire **Rehabilitation Plan of Action**.
How could the process have been improved?

Better COMMUNICATION
The Meta Process
The Amazing Guyana Technical Working Group

Thank you!