Frequently Asked Questions Rehabilitation Advice Line 1-833-379-0563

1. What is the purpose of the Rehabilitation Advice Line?

Rehabilitation is essential to maintain the health, function, psychological and social wellbeing of our communities. The Rehabilitation Advice Line increases access to rehabilitation services and supports for Albertans by providing triage, wayfinding, clinician consultation, and self-management advice for patients with rehabilitation needs. Information and advice will be provided based on caller presentation, best practice, evidence and approved support documents existing on MyHealth.Alberta.ca and other trusted clinical websites.

The Rehabilitation Advice Line gives callers information about:

- Activities and exercises that help with physical concerns
- Strategies to manage day-to-day activities affected by these concerns
- Rehabilitation services that are open for in-person and/or virtual visits
- Community-based organizations.

2. Who is it for?

The Rehabilitation Advice Line is available to Albertans over the age of 18 who:

- Have existing physical disabilities related to neurological conditions (e.g.: Parkinson's, Spinal Cord Injury, Brain, Stroke, Muscular Sclerosis)
- Have existing musculoskeletal conditions and/or are awaiting or recovering from related surgeries
- Are recovering from COVID-19.

3. How will Albertans hear about this service?

The service continues to be promoted in a number of ways, including through social media, news media and on Alberta Health Services website. Promotional packages, including posters sharable social media posts etc.) are available for community partners and other health providers to promote the service more widely.

4. Who answers calls to the Rehabilitation Advice Line?

AHS Allied Health clinicians including occupational therapists and physiotherapists are available to answer calls every day from 10 a.m. to 6 p.m. The line is operated by <u>Health Link</u>.

5. How will the Rehabilitation Advice Line clinicians know what services are available for callers?

Clinicians have access to a directory of available services across the province through the <u>Alberta Referral Directory</u>. A scan of relevant directories, along with the development of a service directory, is providing information about which sites are open and offering in-person or virtual care. Weekly updates will be conducted for the service directory until services resume to normal operations.

6. How will you know if callers are already receiving services?

As part of a needs identification, callers are asked if they are currently receiving services or have received services in the past.



7. Are callers referred to other clinics and programs?

Yes, callers are referred to AHS services and private practice, as appropriate. The Rehabilitation Advice Line does not replace in-person assessment and treatment by a healthcare professional.

8. How is the Rehabilitation Advice Line being evaluated?

An evaluation has been developed based on a quadruple aim approach that includes both quality improvement and research methodologies. The evaluation is led by the Scientific Office of the Neurosciences, Rehabilitation & Vision Strategic Clinical Network (NRV SCN), in collaboration with a team of stakeholders from the University of Alberta's Faculties of Medicine, Rehabilitation Medicine, and Engineering.

9. What measures are in place to ensure patient safety? Will you monitor for adverse events?

Clinicians follow evidence-based clinical guidelines to assess symptoms and identify any associated red flags with each caller. As well, all clinical content and guidance protocols are reviewed by the Medical Directors of Health Link, the NRV SCN and the Bone and Joint Strategic Clinical Network (SCN). Clinicians will not prescribe exercises to callers unless it is safe to do so. Callers that need individualized care plans will be directed to the appropriate clinical service in their area.

10. How will the Rehabilitation Advice Line work for patients with complex, multidisciplinary needs?

Clinicians will use clinical guidelines and their clinical expertise to ensure that the callers are linked with the appropriate service or program in their area. A call back can be booked with another clinician or discipline to ensure the best available advice is provided.

11. How are clinicians documenting calls?

The clinicians are documenting the calls in the electronic medical record (ECHO) also used by Health Link. Call metrics are tracked related to call volumes, duration and clinical content.

12. Who was involved in developing the Rehabilitation Advice Line?

The Rehabilitation Advice Line represents a collaborative effort by AHS Allied Health Professional Practice & Education, Allied Health Zone Operations, then NRV SCN, the Bone and Joint SCN, and Health Link. An Advisory of key partners and stakeholders will provide guidance through the ongoing evolution of the advice line.

For more information, visit ahs.ca/RAL or contact RehabilitationAdviceLine@ahs.ca