



Developing ClinFIT COVID-19: An ISPRM initiative to scale up rehabilitation for COVID-19 patients and survivors across the care continuum

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Abstract

Introduction: Health systems worldwide are challenged to address the healthcare needs of persons with COVID-19. After the immediate need to mitigate the spread of COVID-19 and scale up relevant healthcare capacities, one major challenge is scaling up rehabilitation to address the functioning limitations experienced by COVID-19 patients/survivors. To meet this challenge, ISPRM has developed a tool for the assessment and reporting of functioning of COVID-19 patients/survivors - "ClinFIT COVID-19", to assist health professionals to optimally address patients' healthcare needs.

Materials and Methods: The multi-step process to develop the ClinFIT COVID-19 category list involves: development of a proposed list of ICF categories, survey of ISPRM members worldwide about the proposed category list, and a post-survey consultation with the ISPRM ClinFIT Task Force.

Results: The final category list for the acute care context contains the seven categories provided to the survey participants (energy/drive functions, sleep, emotional functions, pain, exercise tolerance functions, carrying out daily routine, and walking) plus six categories related to respiration, mobility, and cognition. The post-acute and long-term care versions also contain the seven categories plus additional categories relevant for the specific context. The post-acute version contains 15 categories and the long-term 16 categories.

Conclusion: This talk presents the methodology and results of the multi-step task process to develop the ClinFIT COVID-19 category list.