

Annex 15A. Glossary of Rehabilitation Intervention Terminology

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Acute joint mobilization (adapted from 1)

A continuum of skilled movements to the joint complex that are applied at varying speeds and amplitudes, conducted early in a disease or impairment, such as post operatively, or in the acute stages. Mobilization is under the control or consent of the person to whom it is applied. Can also be referred to as 'Early joint mobilization'.

Examples:

- Active movement (using own muscle strength, no assistance)
- Passive movement (manual)
- Prolonged stretches

Assistive products (2)

Any external product (including devices, equipment, instruments, and software), especially produced or generally available, the primary purpose of which is to maintain or improve an individual's functioning and independence, and thereby promote their well-being. Assistive products are also used to prevent impairments and secondary health conditions.

Examples:

- Personal indoor and outdoor mobility aids: Such as crutches, prostheses, orthoses, wheelchairs, tricycles, transfer board, walking stick, walking frame and rollator
- Hearing aids, hearing loops and cochlear implants
- Vision aids: For complete vision loss including white cane and braille; for low vision including magnifiers
- Augmentative and alternative communication devices: such as communication boards, language-based educational apps and speech synthesizers
- Personal use in daily living: Such as dressing stick, over toilet frame, and built up cutlery
- Skin care: Such as pressure relieving mattresses and cushions

Assistive technology (2)

The application of organized knowledge and skills related to assistive products, including systems and services. Assistive technology is a subset of health technology.

Body re-positioning (adapted from 1)

Moving a person into or out of a body position, or maintaining their body position, for comfort, control of muscle tone, or prevention of contracture or pressure sore.

Examples:

- Supportive seating in the context of wheelchairs
- Pressure area care and pressure relief

Braille (3)

A system of writing for individuals who are visually impaired that uses letters, numbers and punctuation marks made up of raised dot patterns.

Breathing exercises to improve respiratory function (adapted from 1)

Teaching, supporting or guiding skills in breathing techniques associated with respiratory function. Can include regular or repeated use of respiratory muscles, and breathing exercises for expectoration.

Examples:

- Inspiratory muscle exercises
- Diaphragmatic breathing exercises
- Active cycle of breathing technique
- Forced expiration technique
- Controlled coughing
- Huffing
- Sputum clearance techniques

See also Chest function interventions

Cardiac rehabilitation (adapted from 4)

A medically supervised program designed to help improve cardiovascular health following heart attack, heart failure, angioplasty or heart surgery. It involves a number of important components including:

- Exercise counseling and training: To promote heart health (such as reconditioning and endurance exercises)
- Education: Managing risk factors, nutrition, healthy lifestyle changes
- Counseling to reduce stress

Chest function interventions

For the purposes of the essential rehabilitation package, chest function interventions include, but are not limited to: Postural drainage, turning, percussion, vibration, controlled coughing, and sputum clearance.

See also Breathing exercises to improve respiratory function

Cognitive interventions (adapted from 5 and 6)

Cognition interventions target deficits in different thinking skills (or cognitive domains) including orientation, attention, perception, problem solving, memory, judgment, language, reasoning and planning. Based on knowledge of neurology, and neuroanatomy, and following appropriate tests and measures to identify how these deficits impact on everyday activities, social interactions, and routines, a customized cognitive retraining program is prescribed for an individual. Cognitive interventions can be compensatory (compensate for a deficit), or restorative (aim to restore normal functioning).

Examples, in the context of the essential rehabilitation package:

- Training of basic-level cognitive functions: Such as memory, orientation and attention
- Cognitive compensatory strategies: External strategies such as visual or auditory cues, diaries and assistive devices such as electronic reminders; Internal strategies such as grouping, categorization, and visual imagery
- Early stimulation for children: Play-based activities, intervention to promote joint attention

Compression therapy (adapted from 7)

An application of external materials, to an affected area of the body, to increase the pressure on the skin and underlying structures to counteract the force of gravity. Commonly indicated for conditions of the vascular and lymphatic system (such as chronic venous insufficiency, lymphedema, swelling, chronic ulcers) as well as for scar management. It is usually applied to an extremity, however there are exceptions. Can be used to improve venous and lymph return, wound healing, reduce swelling and scar management.

Examples:

- Compression bandaging
- Compression garments and stockings

Early childhood development rehabilitation interventions (adapted from 8)

Rehabilitation interventions designed to support young children who are at risk of developmental delay, or young children who have been identified as having developmental delays or disabilities. Rehabilitation interventions are provided to ensure and enhance children's personal development and resilience, strengthen family competencies, and promote the social inclusion of families and children. Services can be delivered through a variety of settings including health-care clinics, hospitals, early intervention centres, rehabilitation centres, community centres, homes and schools.

Examples:

- Play-based activities
- Motor, sensory, language and cognitive stimulation
- Self-regulation techniques (including behavioural and emotional competencies)
- Functional training in activities of daily living
- Prescription and education in using assistive devices

Environmental modification (adapted from 9)

Environmental modifications are changes made to a person's surrounding environment (usually home, work or school setting) to increase access, usage, safety, security, and independence. The environmental modification process includes evaluating and identifying needs, resulting in recommendations for alterations, adjustments, or additions to the target environment.

Examples:

- Ramp installation
- Grab rail installation

Fabrication, fitting, and training in the use of prosthesis (adapted from 10)

A prosthesis is an externally applied device used to replace wholly, or in part, an absent or deficient limb or limb segment. A prosthesis is usually custom-made for an individual,

involving a process of evaluation (measurement and design), fabrication (creating the device), and then fitting by a qualified provider.

Hand and upper limb therapy (adapted from 11)

Hand (and upper limb) therapy is the art and science of evaluating and treating injuries and conditions of the upper extremity (shoulder, arm, elbow, forearm, wrist and hand). Interventions include non-operative, preventative care, post-surgical rehabilitation, and chronic condition management for a wide variety of upper limb disorders.

Examples:

- Upper limb positioning: Positioning of the upper extremity to protect soft tissue, immobilize a joint(s), assist with swelling management, assist tone and spasticity management, and/or to promote function. Can include sling, casting, splinting and / or orthosis
- Provision of customized exercise programs: including range of motion, joint mobilization, stretches and strengthening
- Customized splint and orthotic fabrication: a device used for support or to immobilize a joint
- Upper limb functional retraining: A range of task-specific activities aimed at improving fine and gross motor function and independence in activities of daily living. May include compensatory strategies, such as alternative movement patterns, or provision of assistive aids and products
- Management of pain, swelling, wounds and scarring

See also Acute joint mobilization

Lower limb, upper limb and trunk / spine exercise programs

Provision of a customized exercise program designed to target identified impairments in movement, strength, flexibility, sensation, dexterity (upper limb), control, pain, swelling, balance, endurance and functioning. Usually prescribed in conjunction with other interventions.

Examples:

- Joint mobilization
- Stretches and range of movement
- Strengthening

See also Hand and upper limb therapy; and Mobility training

Mobility training (adapted from 1 and 12)

Training and education in changing body position, transferring from one place to another, walking, balance, running or climbing stairs.

Examples:

- Gait training: pattern of walking or locomotion
- Provision of customized exercise programs: including range of motion, joint mobilization, stretches and strengthening
- Post-operative acute mobilization: A set of exercises (active or passive) or movements (positioning or walking) prescribed immediately after surgery in order to prevent secondary complications due to immobility and optimize regain of function
- Provision and training in use of mobility aids

See also Transfer training

Ponseti clubfoot treatment (adapted from 13)

Club foot is a congenital deformity involving one or both feet. If left untreated, clubfoot can result in physical deformity, pain, and impaired mobility. Ponseti clubfoot treatment involves manipulation, casting, Achilles tenotomy (if required), and fitting of foot braces, in the context of club foot.

Post amputation management (adapted from 10 and 14)

Following an amputation, rehabilitation involves a number of interventions, including:

- Stump care: Any measure used to keep a residual limb healthy, and in some cases capable of prosthetic application. Stump care can involve stump shaping, wound care, and desensitization techniques
- Limb positioning

See also Fabrication, fitting and training in the use of prosthesis; and Mobility training

Scar and contracture management (adapted from 15)

Scar and contracture management are a range of interventions that prevent hypertrophic and keloid scar formation, and optimize range of movement.

Examples:

- Scar massage: Can help reduce sensitivity and loosen any adhesions to deeper structures, especially tendons and joints. Scar massage helps to produce a scar that is smooth and moveable.
- Early controlled exercise programs: Can prevent stiffness of nearby joints and keep tendons gliding under the skin.

See also Compression therapy

Self-care training (adapted from 1 and 16)

Training and education in caring for oneself, covering domains such as bathing, dressing, eating, mobility, toileting, hygiene, and looking after one's health through context-specific practice. These activities can also be referred to as basic activities of daily living.

Speech and communication interventions (adapted from 1)

Training and development of communication skills, including speech, language, signs and symbols, and the use of communication devices through context-specific practice.

Examples:

- Sign language
- Specific interventions for aphasia and ataxia
- Training in speech comprehension and production
- Non-verbal communication
- Prescription and training in the use of augmentative and alternative communication devices

Splinting and orthosis (adapted from 2 and 17)

A splint and / or orthosis are an externally applied device used to modify the structural and functional characteristics of the neuro muscular and skeletal systems (such as immobilize or stabilize a joint), or to compensate for impairments of the neuromuscular and skeletal system.

Examples:

- Post-operative splinting and orthosis: This takes place immediately after an operation. Common surgeries that require post-operative splinting include: skin grafting; muscle and skin flaps; plate insertion, in the context of fractures and bone grafts; re-plants; soft tissue repair, such as tendon or ligament.
- Orthosis for upper limb: Fracture bracing, shoulder abduction orthoses, pre-fabricated hand splints
- Orthosis for lower limb: Knee orthosis, ankle foot orthosis (AFO)
- Orthosis for spine: Halo brace, cervical collar, scoliosis spinal brace, lumbosacral corset

See also Hand and upper limb therapy

Swallow retraining (adapted from 18)

Swallow retraining is a range of interventions aimed at improving a person's swallow. It is used when swallowing disorders, also known as dysphagia, are identified in order to prevent complications such as aspiration and malnutrition. An issue in swallow can occur at different stages in the swallow process – the oral phase, the pharyngeal phase, or the esophageal phase. A customized swallow retraining program is prescribed following appropriate assessment (such as Modified barium swallow study, and flexible endoscopic evaluation of swallow) and evaluation.

Examples:

- Improve motor patterning
- Increasing sensory input
- Increasing motor control with motor training

Transfer training (1)

Training and education in moving safely from one surface to another (such as sliding along a bench or moving from a bed to a chair, without changing body position) through context-specific practice.

Upper limb positioning

See Hand and upper limb therapy

Upper limb functional retraining

See Hand and upper limb therapy

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