



National Health Service
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ORGANIZATION OF STATE FINANCED MEDICAL REHABILITATION IN LATVIA

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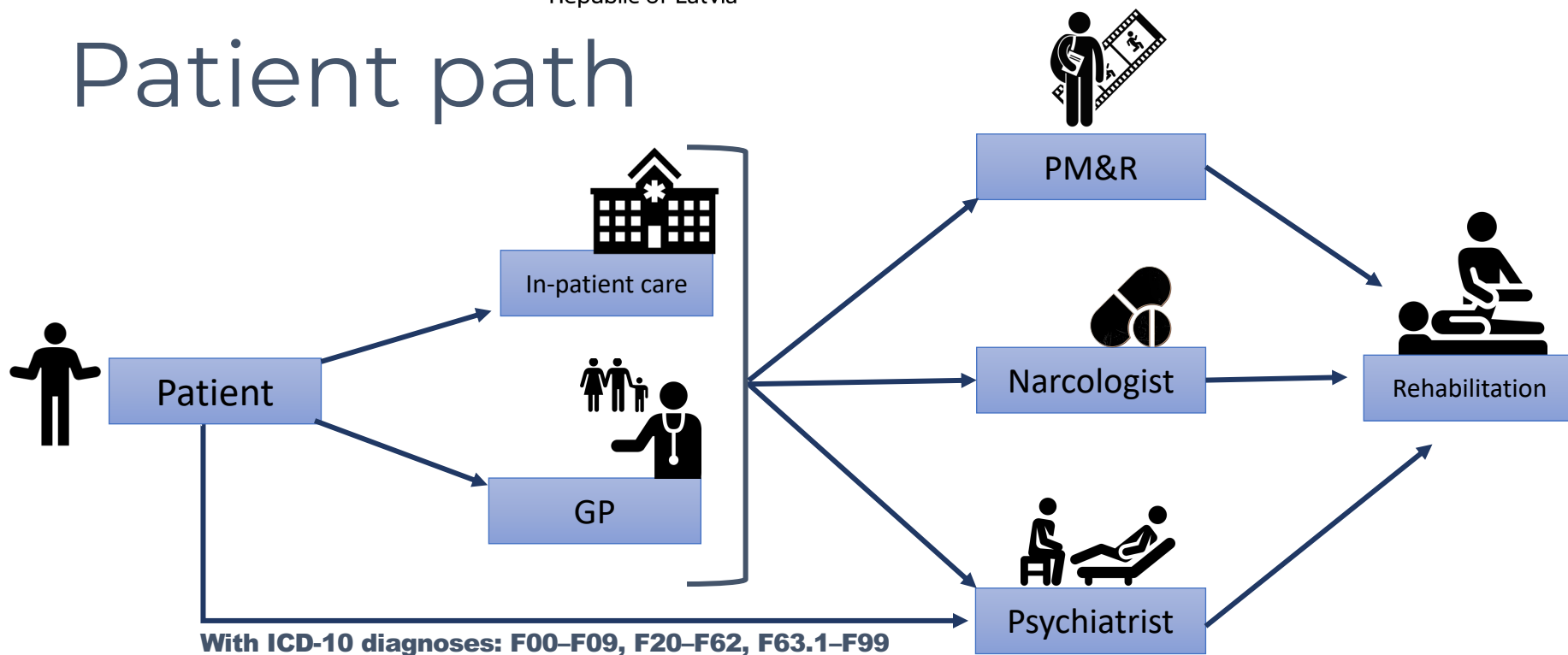
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Patient path



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Types of rehabilitation (1)



In-patient care

When a person receives acute care in mixed-profile beds in a hospital, rehabilitation services are provided in parallel with the treatment process (mobile rehabilitation units).



GP

After the assessment of the outpatient's condition, the general practitioner has the right to refer the patient to a functional specialist to receive no more than 5 consultations.



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Types of rehabilitation (2)



Rehabilitation

In-patient
rehabilitation
services

Out-patient
rehabilitation
services



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Types of rehabilitation (3)

In-patient rehabilitation services

1. Subacute rehabilitation for adults,
2. Long-term rehabilitation / dynamic monitoring for adults,
3. Subacute rehabilitation for children,
4. Long-term rehabilitation / dynamic monitoring for children,
5. Rehabilitation of perinatal conditions

Out-patient rehabilitation services

1. Out-patient medical rehabilitation services - acute, subacute and long-term medical rehabilitation services,
2. Medical rehabilitation services in a day hospital - acute (only for children), subacute and long-term medical rehabilitation services,
3. Rehabilitation services at home (restrictions on diagnoses)



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Content of rehabilitation services

If the service is received on an outpatient basis, the patient can receive consultations of:

- FRM doctor (or psychiatrist, child psychiatrist or narcologist);
- Physiotherapist;
- Occupational therapist;
- Audiologist;
- Physical medicine procedures for children

If the service is received in a day hospital or a 24-hour hospital, the patient is provided with rehabilitation from 2 to 4 hours a day in the form of a team of multi-professional rehabilitation specialists, which includes:

- FRM doctor (or psychiatrist, child psychiatrist or narcologist);
- consultations of functional specialists;
- consultations of psychologists;
- FRM nursing work;
- Physical medicine procedures



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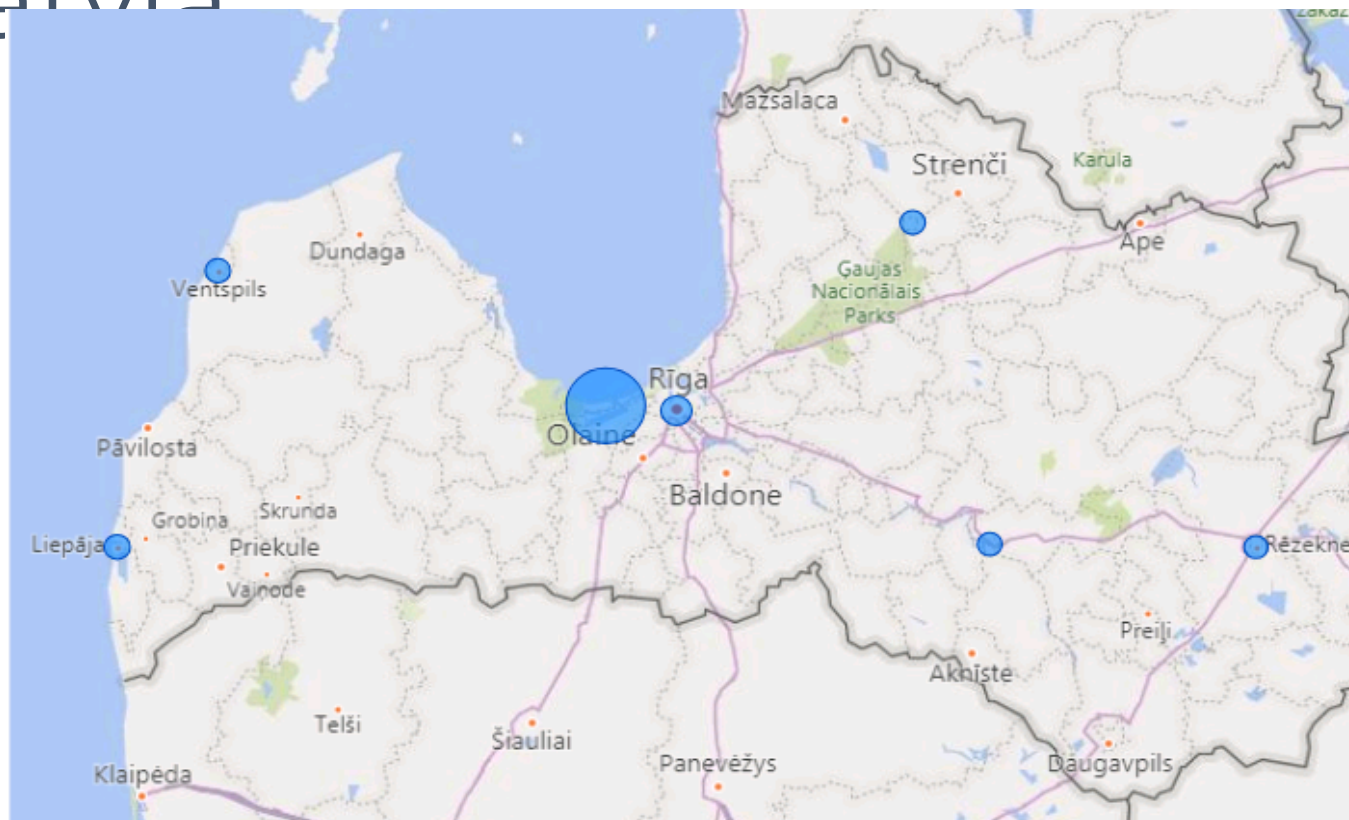


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In-patient rehabilitation in Latvia



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Rehabilitation service financing model



Out-patient
services

Out-patient services are paid according to manipulations and tariffs.



Day hospital or in-
patient services

Payment for day hospital and in-patient services consists of payment for bed days and multi-professional teamwork. Multiprofessional teamwork is defined as two manipulations - "multiprofessional teamwork 2-3 hours" and "multiprofessional teamwork 3-4 hours".



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Individual payment model for inpatient rehabilitation

each area is assessed
on a 4-point scale

Assessment of the level of care of an inpatient medical rehabilitation patient											
Unit, room											
Name, surname											
Medical document No											
Date:		0	0	0	0	0	0	0	0	0	0
		#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
<i>Descriptive values</i>											
CI/MI: Complete independence / Modified independence = 1						7 - 10		LOW INTENSITY CARE			
S: Preparation / monitoring = 2						11 - 17					
Min/Mod: Minimal Assistance / Moderate Assistance (50% - 75% patient effort) = 3						18 - 24		HIGH INTENSITY CARE			
Max/Total: Maximum Assistance / Total Assistance (0-49% of patient effort) = 4						25 - 28					
Drugs											
Skin care											
Family / Education											
Bladder / Intestines / Toilet / Personal Hygiene											
Mobility / Security											
Eating / Nutrition											
Communication / Social Cognition											



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Outcome of rehabilitation

There is no unified register of rehabilitation patients in Latvia, as well as the e-health functionality does not provide for functions like the register, the National Health Service has introduced statistical accounting systems in order to monitor the results of rehabilitation. Upon completion of the rehabilitation course, medical institutions must indicate in each patient's medical record:

1. Has the goal set in the rehabilitation plan been achieved, partially achieved or not achieved;
2. Whether or not the patient needs further rehabilitation. If further rehabilitation is required, then the type of rehabilitation should be indicated - outpatient, day inpatient or inpatient



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Rehabilitation Methodological Management Center



In 2019, the methodological management functions were transferred to the National rehabilitation center «Vaivari» in order to ensure equal quality of rehabilitation and to introduce a unified documentation system in rehabilitation in the country.



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Impact of COVID-19 on rehabilitation services

- Rehabilitation services were periodically banned or restricted due to the epidemiological situation.
- Residents chose to wait, postponing the receipt of services until a safer situation.
- Prior to the vaccination period, a serious problem was the illness of the medical staff, which limited the provision of services.
- Changes in the organization of the services themselves in accordance with the epidemiological situation are within the competence of each medical institution. Each medical institution has its own epidemiological safety plan, which they followed. The general conditions in the country on epidemiological issues are regulated by the Center for Disease Control and Prevention.

COVID-19



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Next step

- The Ministry of Health and the National Health Service, in collaboration with rehabilitation professionals, have prepared a report on the need for rehabilitation of post COVID-19 patients. The report includes a justification for the need for rehabilitation and a calculation of the additional funding required.

COVID-19



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THANK YOU!

Questions welcome



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