

## THE ABSTRACT

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**Thesis Title:** Rehabilitation outcomes measurement instruments usage in KwaZulu-Natal and Gauteng healthcare

There is a lack of rehabilitation outcome data collection and use in South Africa. Important to note in this study discussion are Rehabilitation Outcome Measures which are tools (FIM, BI, MRS, FAI, NEADL) used to collect data and measure the extent of change during and post-rehabilitation period. This research purpose aims to evaluate the awareness, and use of rehabilitation outcome data measuring instruments, the available capacity, opportunities of learning and constraints that exist across different settings in public and private rehabilitation healthcare in KZN and GP.

A quantitative research strategy was utilised. A cross-sectional, survey design plan of data collection framework was used. Face-to-face primary data collection was conducted in the proposed research sites. Purposive sampling targeting 13 rehabilitation public-private healthcare facilities in KZN, and GP was used. Stratified sampling together with 100% sampling in a small population was conducted. Community of Rehabilitation Multidisciplinary Teams (RMTs) of seven (7) members in public and private hospitals, composed of medical officer(s), nurse(s), clinical psychologist(s), physiotherapist(s), occupational therapist(s), speech/audio therapist(s) and social worker(s) took part in the study. SPSS assisted in results analysis; frequencies and non-parametric statistics were utilised to sort any significant associations.

Results indicated that 253 subjects participated in the study. Analysed results suggested that n=153 (60.5%) participants were not provided with rehabilitation outcome measuring tools by the facility they were working for. Results suggested a significant negative association in Public Rural Settings (FIM=49.7%, BI=43.8%, MRS=41.9%,  $p=0.001$ , FAI=17.6%,  $p=0.037$ ) and Public Urban Settings (FIM=43.2%, BI=36.5%, MRS=40.5%,  $p=0.001$  and FAI=35.3%,  $p=0.037$ ) of public healthcare facilities as they were not using rehabilitation OMs. A significant association in use of rehabilitation OMs was found in Private Urban Rehabilitation Healthcare facilities (FIM=56.0%, BI=35.6%, MRS=64.5%,  $p=0.001$  and FAI=47.1%,  $p=0.037$ ). Public healthcare facilities in KZN and GP were not using rehabilitation outcome measures, while GP Private rehabilitation healthcare facilities were using them. In conclusion, it is recommended that National Rehabilitation Policy (NRP) is subjected to reviews to incorporate standardisation of rehabilitation OMs. A diagnostic evaluation exercise is necessary for Theory Of Change development focusing on rehabilitation healthcare services.

**Key words:** Rehabilitation Outcome Measures, Awareness, Use of Outcome Measures, Rehabilitation-Multidisciplinary-Teams, Data Instruments, Evidence, Rural, Urban, Private, Public, Monitoring & Evaluation.