

FROM THE DESK OF THE GUEST EDITOR: VOLUME OVERVIEW

JANA CASON, DHS, OTR/L



This issue of the International Journal of Telerehabilitation (IJT) contains original research evaluating the efficacy of telerehabilitation, viewpoint articles, a letter to the editor, a committee report from a working group within the American Telemedicine Association's Telerehabilitation Special Interest Group, and an announcement from the American Telemedicine Association. It is important to note that legislation,

regulation, and policy related to telerehabilitation continues to evolve; the information presented in this issue of the IJT is current as of the time of its publication and reflects the most recent developments in the field.

The clinical research featured in this issue of the IJT, Simulated In-Home Teletreatment for Anomia, evaluated the effectiveness of telerehabilitation as a delivery model for individuals with post-stroke anomia. Using a pre-/post- study design, Dechêne and colleagues measured changes in participants' performance and satisfaction with speech therapy services delivered remotely through telehealth technologies. Research results demonstrated the feasibility of telerehabilitation as a service delivery model for interventions targeting neurological speech-language disorders.

The viewpoint articles in this issue of the IJT include international and national perspectives from diverse practice settings. These professional perspectives highlight opportunities and challenges associated with telerehabilitation as a service delivery model within the rehabilitation disciplines. In the first viewpoint article, Dr. Seelman shares insights into the World Health Organization and World Bank's first World Report on Disability. In her article, World Health Organization/World Bank's First World Report on Disability, Dr. Seelman, a co-author of the international report, provides an informative summary of the report including its purpose, content, intended audiences and outcomes. The efficacy of telerehabilitation as a service delivery model is affirmed and discussed within the report in the chapters related to rehabilitation and enabling environments. The inclusion of telerehabilitation within the World Health Organization and World Bank's first World Report on Disability reflects the

increasing evidence and application of telerehabilitation as a service delivery model within the rehabilitation professions.

In the article, Telehealth Regulatory and Legal Considerations: Frequently Asked Questions, Cason and Brannon examine key questions associated with telehealth and licensure, reimbursement, HIPAA compliance, and malpractice insurance coverage. The questions and responses serve as a catalyst for further inquiry into the regulatory and legal requirements uniquely inherent with the use of telecommunications technology by rehabilitation professionals delivering services remotely.

Two featured telerehabilitation programs are included in this issue of the IJT. These programs demonstrate the benefits of telerehabilitation for improved access to specialized care. In the article Technology that Touches Lives: Teleconsultation to Benefit Persons with Upper Limb Loss, Whelan and Wagner describe the use of telehealth technologies to increase access to care for individuals with upper extremity amputations. The authors describe their use of telehealth at Touch Bionics, a progressive company that develops upper limb bionic technologies and high-tech upper extremity prosthetic devices. Telehealth technologies afford the opportunity to provide continued support to clients. Greater licensure portability would enable clients to benefit from the specialized knowledge and expertise of prosthetists and occupational therapists who could provide comprehensive follow-up care to clients who may need additional support to integrate their prosthetic device into their daily routines. The authors conclude that inter-state licensure portability would greatly benefit the underserved population of individuals with upper extremity amputations.

Stout and Martinez, in their article Telehealth Forging Ahead: Overcoming Barriers in Licensure to Improve Access to Care for Service Members, also highlight the benefits of using telehealth technologies within a telerehabilitation program for individuals with traumatic brain injury. The authors, who practice within the Department of Defense (DoD) and Veterans Health Administration (VHA) respectively, describe the unique credentialing and privileging process utilized by the DoD and VHA to facilitate licensure portability. The existing credentialing and privileging process requires practitioners using telerehabilitation to provide care to service members and veterans while they are physically located on federal property, such as at a military treatment facility. For many service members and veterans, the nearest military treatment facility is located a distance from their homes,

thus requiring extensive travel to access care. The Servicemembers' Telemedicine and E-Health Portability (STEP) Act that is currently being considered by the US Congress, may enable practitioners to provide health care and rehabilitation services to service members in their homes, using the home as an extension of the military facility. This provision circumvents the licensure barriers that currently exist for inter-state practice.

The theme of licensure portability continues in the Letter to the Editor, The Time Has Come for Speech-Language-Pathology Licensure Portability! Drawing on her extensive professional experience, Jakubowitz describes some of the challenges and redundancies associated with the current licensure process. Jakubowitz further articulates the need for inter-state licensure portability to support labor mobility, to overcome chronic shortages of speech-language pathologists in K-12 schools and healthcare settings.

The Committee Report, Resolving Barriers to Licensure Portability for Telerehabilitation Professionals, is a product of the American Telemedicine Association's Telerehabilitation Special Interest Group, Licensure Portability Working Group. Convened in August, 2010, this working group has examined the challenges and identified key elements to support inter-state licensure portability for rehabilitation professionals (i.e., occupational therapists, physical therapists, speech-language pathologists, and audiologists). In Resolving Barriers to Licensure Portability for Telerehabilitation Professionals, Cohn, Brannon & Cason discuss the challenges of inter-state licensure portability that impact the use of telerehabilitation among rehabilitation professionals. Duplicative paperwork, expense, and lack of uniformity for state credentialing requirements, processing times, and fees create barriers to inter-state practice. Potential approaches to resolving these barriers are identified and briefly described. Additionally, the authors outline key enablers for licensure portability including uniform core licensure requirements, common/uniform license application, and credential verification organizations. While challenges to inter-state licensure portability exist, Cohn, Brannon & Cason conclude that inter-state licensure portability and the use of telerehabilitation may improve access to specialized care, reduce duplicative processes and costs for state governments, decrease fees for clinicians seeking licensure in multiple states, promote oversight for clinicians engaged in inter-state practice, and reduce travel and related expenses for clients.

CALL FOR SUBMISSIONS

The next volume of the International Journal of Telerehabilitation will be published in spring, 2012. We cordially invite your submissions by February 1, 2012, and accept original research, case studies, viewpoints, technology reviews, book reviews, and country reports that detail the current status of telerehabilitation.

Our peer reviewers constitute a multi-disciplinary group, and include researchers and clinicians from each of the major rehabilitation disciplines, rehabilitation engineers, health information managers, information technologists, and others. We welcome new peer-reviewers and invite guest editors with ideas for special, thematically focused issues. The IJT is agile and can add additional issues as warranted to ensure currency. Please contact Editor Ellen Cohn, PhD if you are interested: ecohn@pitt.edu.

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It has been an honor to serve as guest editor for this issue of the International Journal of Telerehabilitation.

Respectfully,
Jana Cason, DHS, OTR/L
Guest Editor