



MEENAKSHI

ACADEMY OF HIGHER EDUCATION & RESEARCH

DEEMED TO BE UNIVERSITY U/S 3 OF UGC ACT, 1956

BEST PRACTICE 1

Title of the Practice: Illam Thedi Eyan Murai Maruthuvam (ITEMM)

ITEMM is a domiciliary rehabilitation scheme and a MAHER benchmark initiative to equip the physiotherapy students with an indispensable practical tool that is socially relevant to a rural community.

Objectives / Goal of the Practice:

- Promote the development of a conducive learning environment outside the formal setting that is innovative, challenging and socially pertinent
- Deliver essential physiotherapy at the doorstep of the rural community at zero cost, integrating the process of rehabilitation into their daily routine
- Enable the continued economic productivity of the rural population even while actively undergoing physiotherapy.
- Institutionalize and disseminate this new field learning process that enables all students to learn, innovate, communicate, adapt and evolve in a resource limited ecosystem that is frugal, under-equipped and demanding.
- Train the health science students of today to serve in a rural milieu and equip themselves to operate safely with the minimum facilities.
- Add value to human life and support the mission of the Institution

The Context:

- The ITEMME scheme was conceptualized because the lack of physiotherapy services in the rural sectors of India.
- Non ambulatory rural patients- particularly geriatric patients, antenatal women and nursing mothers face challenges in finding transportation facilities as well as suitable attenders to accompany them.

- The patient and the attenders suffer economic losses due to loss of working man days arising from the need to seek physiotherapy daily from health centres located far away.
- The ITEM scheme eliminated the need for transportation to a health facility and if their disability was mild, they could continue working without loss of income. Patient attenders were no longer needed enabling them to go out and earn their daily wages.

The Practice:

- The ITEM scheme or ‘Physiotherapy on wheels’, was initiated to empower the student fraternity to provide effective health care in resource constrained settings of the rural environment.

Plan Germination – An initial survey revealing poor availability of physiotherapy services in rural areas, was followed by a brainstorming session at the Faculty of Physiotherapy, to draw up a strategic plan to address the issue. The proposed plan was approved by the academic council of MAHER. The main plan was to set up a residential base camp in a central village for a week-long Physiotherapy service at the doorstep of the rural households.

Preparatory Training: The final year students of the BPT course participated in a one-day training session, organized to sensitize and equip them for the successful implementation of the program.

Logistics Management- MAHER provided unflinching support for logistic management ensuring provision of manpower, equipment and transportation. A fully equipped mobile physiotherapy van was procured for the purpose at the cost of 30,00,000/- (Thirty Lacs) along with the equipment cost.

Community participation- The outreach team of MAHER ensured the cooperation of the leaders from the pre identified rural communities thereby empowering them towards better health and well-being.

Plan implementation- The Physiotherapy students of MAHER set up the base camp in the central village under the supervision of the faculty. The lodging arrangements were provided by

the villagers while the transportation and food were sponsored by MAHER. The students fanned out to the surrounding villages in batches of ten, where all needy patients were offered physiotherapy at their doorstep. The teams visited the villages continuously for seven days ensuring absolute patient compliance.

Self-Help Stations (SHS)- the establishment of Self-Help Stations in 15 villages was done in a period of 5 years costing approximately 3,00,000 (three Lacs). The SHS were set up in a well-ventilated room of the local school and equipped with basic instruments required for rehabilitation. Patients requiring chronic rehabilitation continued their physiotherapy at the SHS. A science teacher of the school was provided with basic knowledge and training to assist the patients in obtaining physiotherapy.

Tele-support- The SHS stations were supported through tele medicine provided by the faculty of physiotherapy of MAHER for as long as was necessary.

EVIDENCE OF SUCCESS:

DATA TABLE - ITEMME SCHEME

	2017-2018 (1st)	2018-2019 (2nd)	2019-2020 (3rd)	2020-2021 (4th)	2021-2022 (5th)
No. of Camps	30	35	30	50	151
No. of Faculty involved	05	05	06	07	07
No. of Days Stayed	15	18	19	20	35
No. of Villages Covered	30	34	31	36	55
No .of Patients Treated	1013	1232	1119	1400	2507

No. of geriatric patients benefitted	309	455	469	770	1153
No. of antenatal mothers benefitted	1	5	4	6	16
No. of nursing mothers benefitted	4	2	3	13	12
No .of Students Participated	80	150	160	170	200
No of Specialized training for students	5	5	6	6	6
Awards/recognitions/ appreciation	2	2	3	2	15
No. of Tribal Villages Covered	1	02	03	06	12
Longest travelled distances (in km)	608	721	175	340	1400
Self-help station	3	03	03	03	03
No of science teachers trained for offering basic services in their village	2	3	3	3	5

- The ITEM scheme is a pioneering journey of MAHER into uncharted territory. Although there are no established benchmarks, the data presented show an exponential increase in the number of camps organized annually with a corresponding increase in the student participation. The number of students undergoing this hands-on experience went up from 80 to 200 annually over a period of 5 years. Feedback obtained from the students and the faculty denote that ITEM improved their communication skills, enhanced their cooperation and

team spirit, augmented their lateral thinking and reinforced their clinical skills to offer effective medical help in resource poor settings.

- The number of villages covered grew from 30 in 2017-18 to 55 in the year 2021-22 and the number of patient beneficiaries grew from 1013 in 2017-18 to 2507 in 2021-22. This indicated an increasing demand for the services provided by the ITEM scheme and an expression of confidence from the rural communities.
- This best practice fulfilled the Institutional Social Responsibility, boosted the educational atmosphere and generated social soft power for the growth of MAHER. It also reflected the credibility of MAHER and served as an important agent of positive change for the Institution and the rural society that it served.
- ITEM thus facilitated excellent patient compliance, early recovery and return to work with minimum loss of working man days and wages.

Problems Encountered and Resources Required

- 1st challenge for the ITEM scheme was the organization of boarding and lodging for the students and faculty over an extended period of stay at the camp. This was solved by involvement of the local leaders who ensured that the service providers were given safe places to stay at the camp site.
- 2nd challenge was the requirement to provide prolonged physiotherapy for some patients after camp closure which was addressed by creation of Self-Help Stations at the local school with minimal equipment provided by MAHER wherein the patients could access continued physiotherapy under tele support if necessary.
- The 3rd challenge was that the students along with the supervising faculty needed to stay at the base camp set up in a rural area around Chennai for seven days continuously. This involved some practical difficulties for the students and anxiety for their parents. This was tackled by counselling them regarding the advantages of this field experience and rewarding them with credit points and merit certificates at the end of the camp.

Notes

- The ITEM scheme identified and addressed a significant lacuna in health care.
- It is structured as a dynamic program with provision for improvisation as and when required
- For successful continuation of ITEM, the program needed to be institutionalized. The ITEM program of 15 days has now been proposed to be a mandatory part of their internship. This proposal has been approved by the academic council and the Board of Management of MAHER.
- MAHER recognizes the social, cultural and regional diversity of the population and will make suitable adaptations for various segments of the community
- The underlying mantra in this endeavour is quality; quality in conception; quality in implementation; quality in outcome and this best practice achieved all three comfortably.
- Over all resources was provided from MAHER.



SELF HELP STATION- GOVT. SCHOOL, PULLAIMADATHUR, TENKASI.



SELF HELP STATION- BENEDICT HIGHER SECONDARY SCHOOL,
ANAIMALAI PALAYAM, THENI.



SELF HELP STATION- SEVADIPATTI



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ANALYSIS OF CAMP PARAMETERS 2017-22













