

KRUS medical rehabilitation during COVID – 19 pandemic

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An indoor swimming pool with a stone wall background and white radiators. A hot tub with red and white stripes is on the right. Several people are swimming in the pool. A green banner is overlaid on the bottom left.

Rehabilitation in KRUS

Medical rehabilitation

The tasks in the field of rehabilitation are regulated by the *Article 64 of the Act on the social insurance of farmers*¹, which obliges to Fund to provide assistance to the insured and persons entitled to benefits under insurance, who show total incapacity to work on a farm, but are likely to recover as a result of treatment and rehabilitation, or are at risk of being completely incapable of working on a farm, including:

- referral for medical rehabilitation to medical rehabilitation centres,
- running medical rehabilitation centres.

¹Act of 20 December 1990 on the social insurance of farmers, Journal of Laws 2021, item 266 as amended.

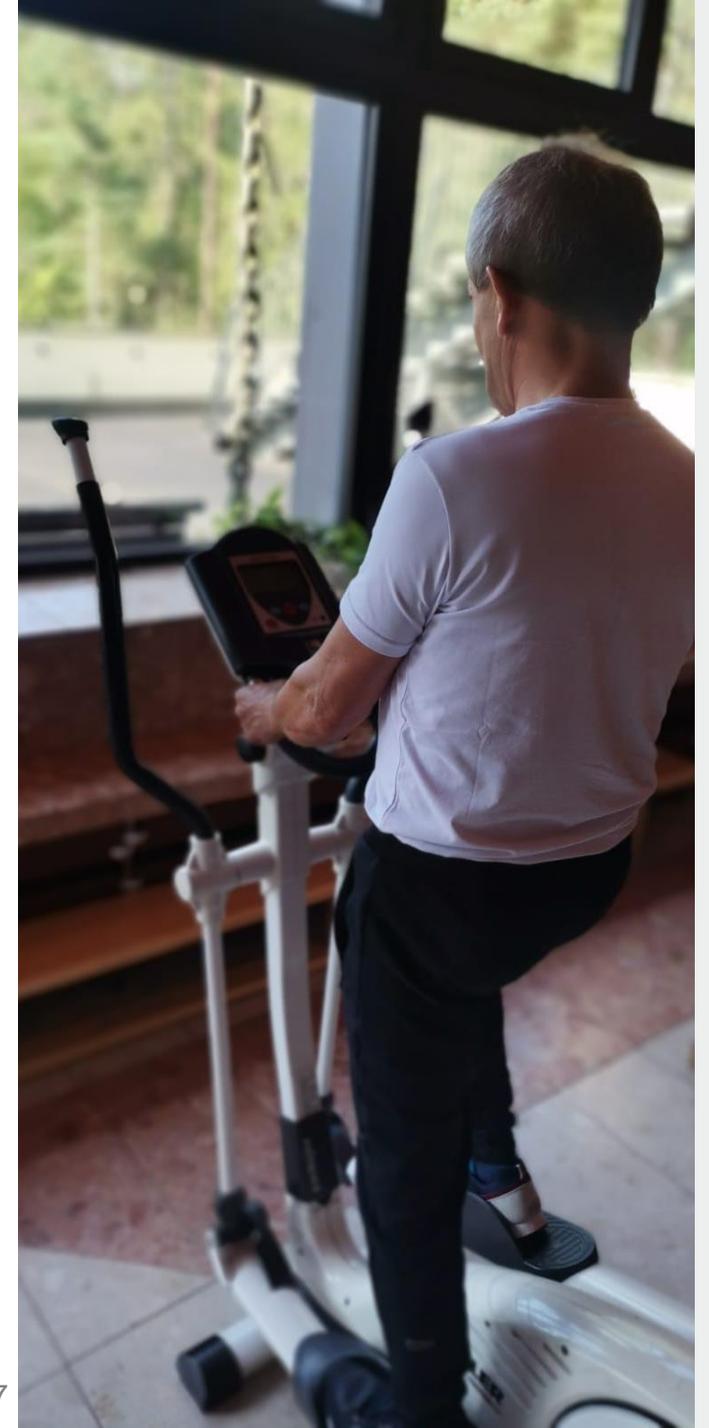


Main causes of referrals

Rehabilitation performed by KRUS is of an insurance nature and includes two groups of diseases:

- **LOCOMOTORY SYSTEM** (MD, functional disorder of locomotor system in neuromuscular disease, post - orthopedical and post - traumatic states, degenerative diseases, rheumatoid, etc.
- **CIRCULATORY SYSTEM (cardiovascular diseases)**

Annually more than 14 thousand farmers benefit from rehabilitation ensured by the Fund.



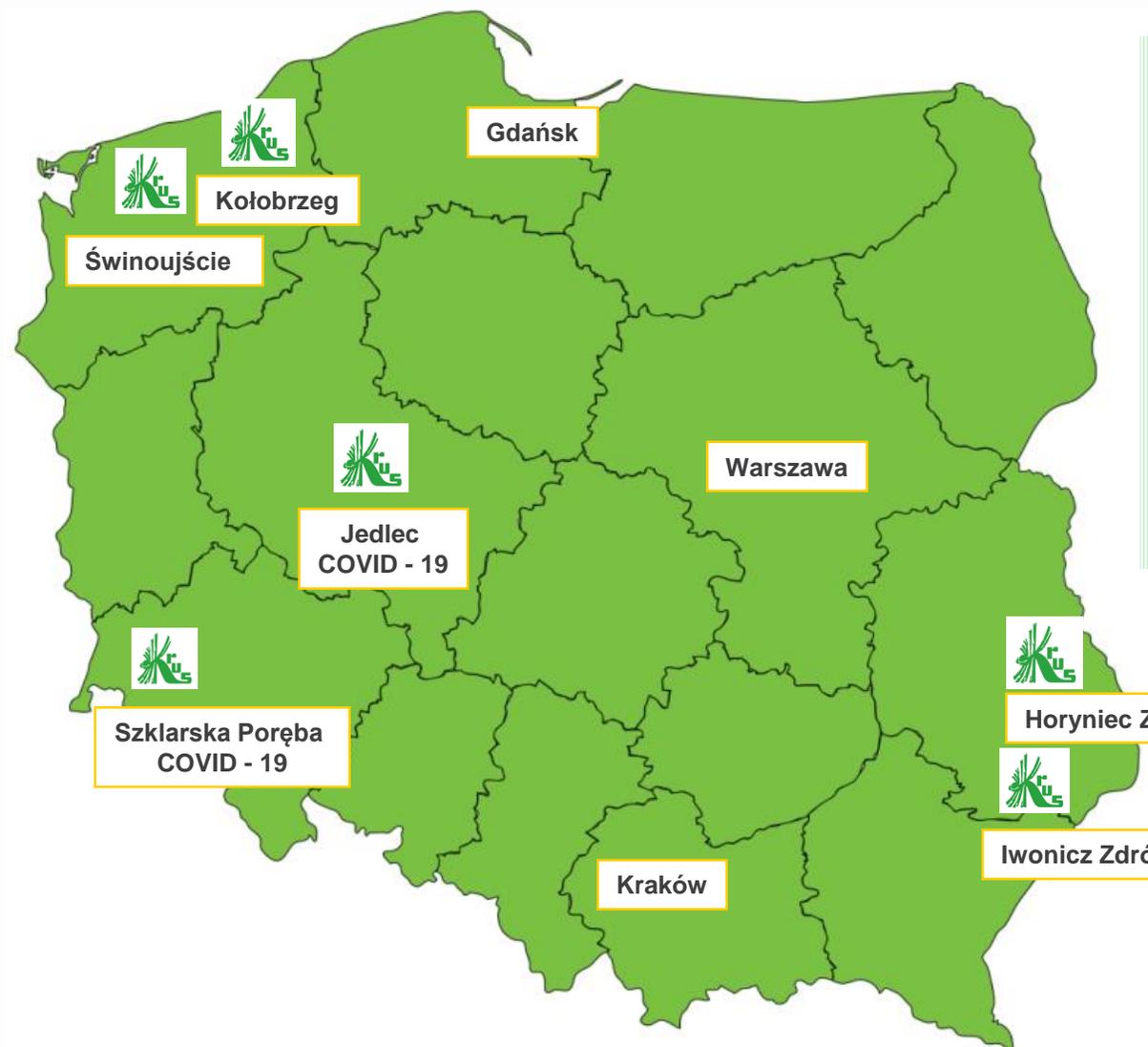
Who is directed to rehabilitation?

The medical rehabilitation ensured by the Fund is for people:

1. **at risk of total incapacity to work** on a farm, or
2. **showing total incapacity to work** on a farm, but promising to recover it as a result of treatment and rehabilitation,
3. children of the insured who are entitled to KRUS' payment benefits.



Farmers' Rehabilitation Centres

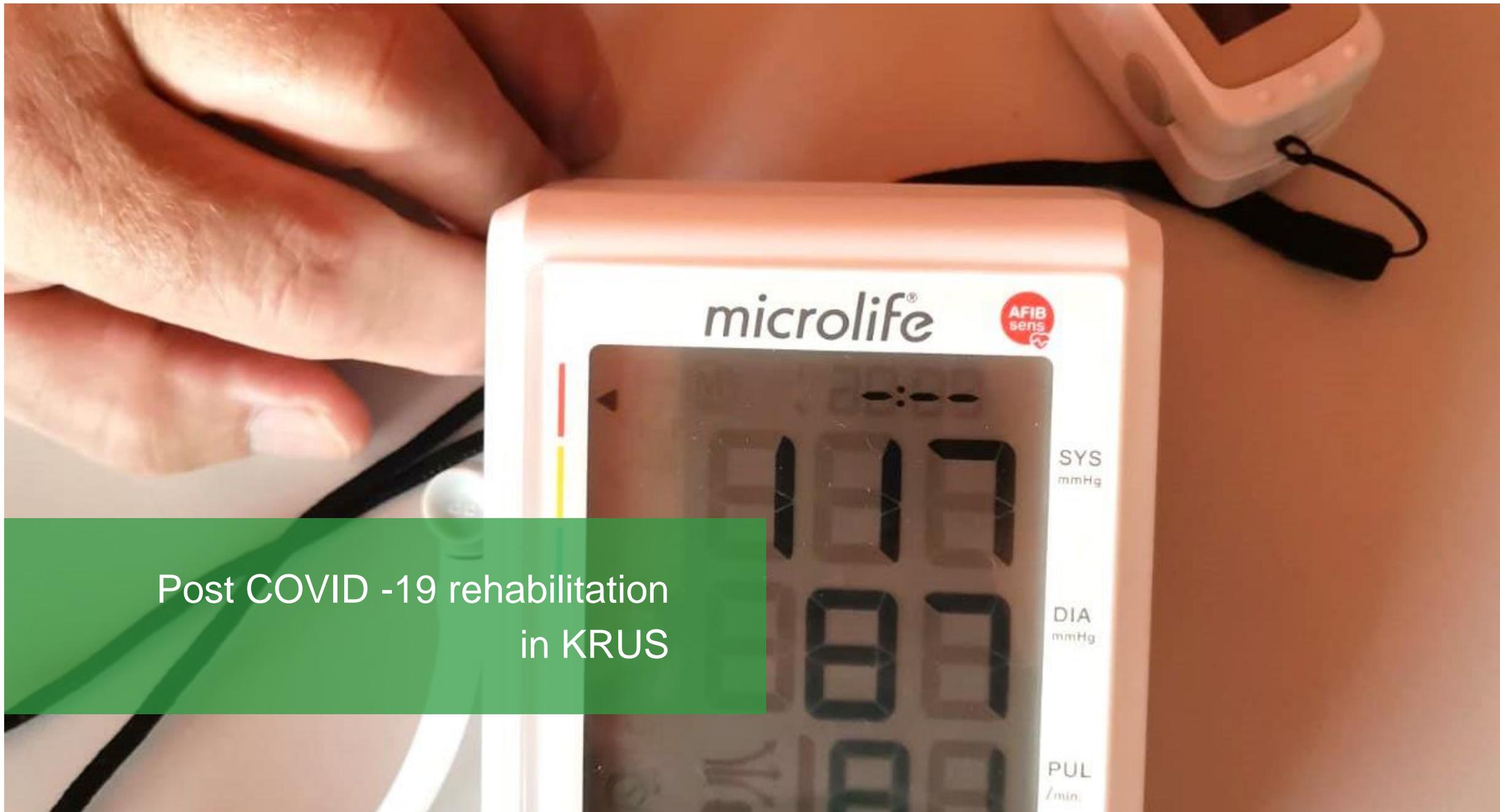


Medical care is provided by qualified medical staff, At the end of 2019, the medical staff in all Centres included:

42 doctors,
105 physiotherapists
and massage therapists,
60 nurses,
2 psychologists,
5 nutritionists
and 9 support staff

Currently, medical rehabilitation is carried out in the form of 21- day stationary stays at the KRUS Farmers' Rehabilitation Centres.

Post COVID -19 rehabilitation
in KRUS



March 2020

Ordinance of the Minister of Health on the declaration of an epidemic emergency in the territory of the Republic of Poland

From 13th March – **state of epidemic threat**

From 20th March – **state of epidemic**



16 March – 18 June 2020

18 June 2020

23 November – 15 March 2021

15 March 2021

**Temporary restriction
of activity
= STOP
of medical activity**

Launch of the Centres with sanitary rigour in accordance with the applicable guidelines

For the sake of safety:

- individual accommodation in rooms,
- procedures have been introduced to guarantee the safe organization of benefits,
- body temperature measurement,
- obligation to cover the mouth and nose,
- frequent hand disinfection,
- keeping distance,
- collision-free movement of patients between treatments,
- disinfection and airing of treatment rooms.

Chief Sanitary Inspector

Medical rehabilitation in 2020

PLAN

In 2020 KRUS planned to refer 14,518 farmers and 1,176 children of farmers for medical rehabilitation.

RESULTS

In the end, **7,585** farmers and **0** children benefited from medical rehabilitation.

In order to meet the pandemic health priorities, as well as bearing in mind the numerous complications in people after COVID-19 disease, the Agricultural Social Insurance Fund has launched a **new rehabilitation profile** for this group of patients.



Post COVID -19 rehabilitation

GOALS

- remission of the disease in recovered patients,
- improvement of exercise capacity, circulatory and respiratory efficiency,
- strengthening the psychophysical condition and mental health.

PROGRAMME BEGINNING - Spring 2021

First stays: 24th May in **Jedlec** and 4th June in **Szklarska Poręba**.

ORGANIZATION

Post COVID rehabilitation is in stationary mode, based on 21-day stays.

It is worth noting that during the COVID-19 epidemic in the country, the activities of the centres were periodically suspended.



Anti – epidemic guidelines

In May 2020 „Anti - epidemic Guidelines for Regional Branches of the KRUS and KRUS Farmers' Rehabilitation Centres” have been issued (Rehabilitation Office in cooperation with the Chief Fund’s Doctor).

In accordance with the guidelines – rehabilitation under **sanitary rigour** in the Centres resumed on 18 June 2020.

Until now - the condition for starting therapeutic rehabilitation in medical rehabilitation facilities, created on the basis of the President of KRUS decision, **is a negative result of a diagnostic test for SARS – CoV-2 of the patient**, from material taken **no earlier than 4 days before the date of commencement of medical rehabilitation.**

Procedure path

Qualification of patients as part of post COVID rehabilitation takes place in the KRUS Regional Branches:

- a) referral on the basis of an application from a GP or specialist doctor, or
- b) on the basis of a final decision of the Fund's medical expert or a decision of the Fund's medical commission issued to determine the right to benefit from the social insurance of farmers, containing indications for systemic rehabilitation after Covid-19 disease.

Requirements:

- 1. Documented COVID-19 disease,
- 2. Rehabilitation carried out at least 12 weeks after the onset of the disease,
- 3. the rehabilitation programme is systemic,
- 4. type and number of treatments determined individually by the doctor at the Centre.

Main indication to rehabilitation after COVID - 19

1. Post COVID interstitial pneumonia during respiratory capacity,
2. Previous COVID-19 disease in a person with controlled perially circular asthma, Chronic Obstructive Pulmonary Disease (COPD - mild form), bronchoconsis without abundant discharge and concomitant inflammation during respiratory capacity,
3. Sarcoidosis in the first and second periods.



The rehabilitation programme includes

At the moment 26 patients are being rehabilitated in CRR KRUS

1

Patient assessment

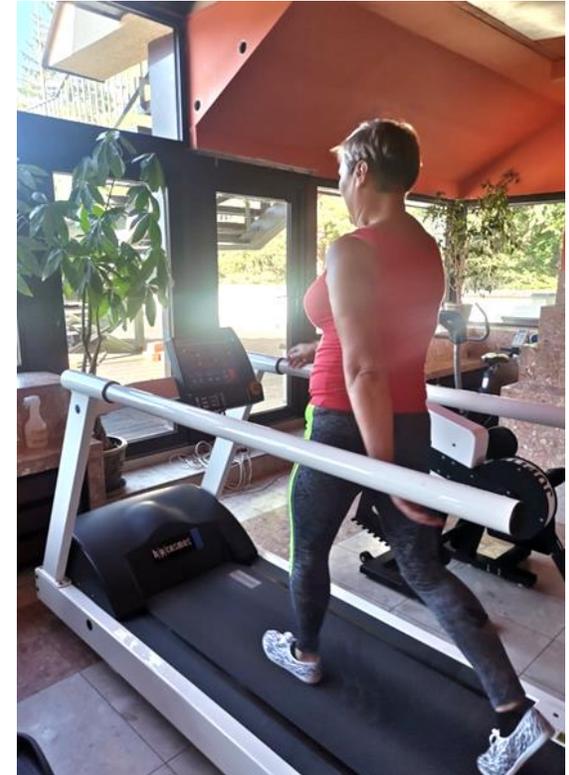
1. Subjective and physical examination,
2. Respiratory system - performance tests, spirometer,
3. Muscle strength assessment, dynamometer,
4. Assessment of mental state, ability to cope with health problems, stress.



2

Defining an individual training plan

1. Endurance exercises (aerobic, interval training)
2. Strength/resistance exercises
3. Respiratory exercises (effective coughing, relaxation techniques, drainage, patting, rotational massage)
4. General fitness exercises
5. Supportive treatments (light therapy, electrotherapy, UD, baths).



The rehabilitation programme includes

At the moment 26 patients are being rehabilitated in CRR KRUS



3

Patient education

1. Optimal disease management
2. Strategy for correct breathing
3. Correct use of medicine
4. Benefits of physical exercises
5. Proper nutrition
6. Managing anxiety and panic attacks
7. Relaxation techniques

4

Evaluation of rehabilitation results

1. Comparison of results before and after rehabilitation
2. Assessment of physical fitness (tests)
3. Spirometry/picroflometry
4. Assessment of dyspnoea, fatigue (Borg scale)
5. Quality of life and physical activity assessment (questionnaire)





Conclusion



1. The observed numerous complications associated in the occupational group of farmers warrant the implementation of a comprehensive rehabilitation programme after Covid - 19 in order to allow farmers to fully recover and thus return to farm work.
2. KRUS will continue to work in the health area, providing expert support for the recovered.

Thank you!



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