

Supporting Recovery Through Accessible Rehabilitation

A multilingual exercise video initiative for patients following upper- and lower-limb surgery

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FROM PLAN TO PRACTICE

Original Plan: Support surgical education through low-cost simulation workshops for medical students.

Challenge: Limited student availability during the placement made the planned workshops unfeasible.

Adaptation: Working with the surgical and physiotherapy teams, I shifted the focus from surgical training to patient recovery, creating 25 multilingual exercise videos covering early bedside movement and longer-term rehabilitation after upper- and lower-limb surgery – a gap that was very apparent.

25

EXERCISE VIDEOS
PRODUCED

4

LANGUAGES

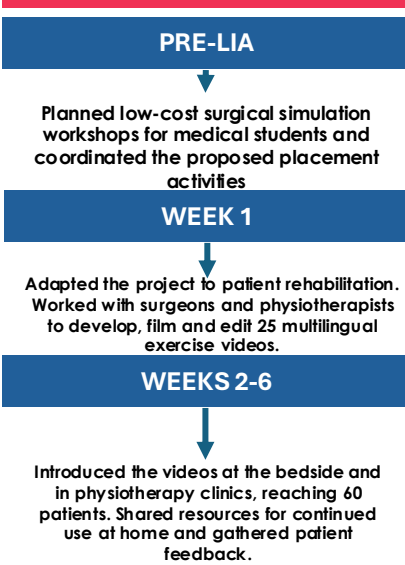
6

WEEKS FROM
DEVELOPMENT TO
DELIVERY

60

POSTOPERATIVE PATIENTS
ACCESSED THE RESOURCES

TIMELINE



SMART GOALS → OUTCOMES

Specific

Develop a video series covering early bedside exercises and longer-term rehabilitation after upper- and lower-limb surgery.

Outcome: Produced resources spanning the early postoperative period & rehabilitation for orthopaedic patients

Measurable

Record the number of videos produced and patients accessing the resources.

Outcome: Created 25 videos, accessed by 60 postoperative patients.

Achievable

Making use of the available equipment and collaborate with the clinical team to complete production within one week.

Outcome: Completed filming and editing in Week 1, informed by work with physios and surgeons.

Relevant

Make postoperative exercise guidance accessible across language and digital access barriers.

Outcome: Provided in four languages with captions and printed alternatives.

Time-bound

Develop and introduce the resources within the six-week placement.

Outcome: Completed production in Week 1 and patient delivery during Weeks 2-6

THE EXERCISE SERIES

Early bedside exercises
Demonstrations of movements performed in bed or seated during the immediate postoperative period.

Longer-term rehabilitation
Progressive exercises to support the recovery of movement and strength following upper- and lower-limb surgery.

Informed by clinical experience
Working with physiotherapists and surgeons, assisting in surgery and attending physiotherapy clinics helped me understand the rehabilitation pathway and inform the content.

ACCESSIBILITY BY DESIGN

4 languages: Arabic, Amazigh, French and English instructions to improve access across language barriers.

Captioned demonstrations: Written guidance for patients with hearing difficulties and those watching without sound.

Readable on a phone: Large, high-contrast text displaying exercise names and repetition counts.

Adapted movements: Lying, seated and standing demonstrations, with variations for different abilities.

Repeat access at home: QR codes and WhatsApp sharing enabled patients to revisit the demonstrations.

Printed alternatives: Illustrated handouts provided an option for patients without a smartphone or internet access.

A shared video library: Resources brought together on Google Drive for patients, families and clinical staff.

EXAMPLES FROM THE VIDEO LIBRARY



LESSONS IN LEADERSHIP

Adaptability requires purpose
Revising the plan taught me to reassess my contribution and collaborate around patient needs.

Collaboration strengthens judgement
Working with surgeons and physiotherapists taught me to recognise my limits and translate expert guidance into accessible resources.

Accessibility shapes delivery
Language, hearing and digital access shaped the videos' production and distribution, teaching me to anticipate barriers and embed inclusion from the outset.

SUSTAINABILITY

The clinic retains the video library via Google Drive and QR codes for ongoing patient use. Future evaluation could guide refinement and assess its contribution to rehabilitation.

ACKNOLEGMENTS:

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