Evidence Based Practice: Assignment 1

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OTD 912: Evidenced-Based Practice for Occupational Therapy

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In the occupational therapy practice in the inpatient rehabilitation setting, the main emphasis is scoring a patient’s level of performance with basic activities of daily living (ADLs) through the Inpatient Rehabilitation Setting (IRF) Quality Reporting Program (QRP) (Centers for Medicare & Medicaid Services, 2022). In the inpatient rehabilitation setting, the Functional Independence Measure (FIM) is mainly used to measure the outcomes for reimbursement (Grover, 2022). What is not emphasized is the patient’s level of performance with instrumental activities of daily living (IADLs).

Due to the pressure for scoring and showing maximal improvement with ADLs, it has been realized that addressing IADLs has been neglected in intervention prior to discharge home as observed by this occupational therapist (OT). The evidence is limited in the area of IADL focused intervention on the basic activities of daily living. There is also little evidence of discharge readiness following IADL training in the inpatient rehabilitation setting. In incorporating IADLs into treatment sessions led by the occupational therapist, such as cooking, baking, unloading/loading dishwasher, retrieving items from the cabinets, laundry, and practicing shopping, it is hypothesized that the patient’s quality indicator scoring for basic ADLs will improve, as well as patient’s readiness level to discharge home safely.

## Awareness.

The first important concept in evidenced-based rehabilitation as described by Law and MacDermid is awareness, awareness of evidence related to the clinician’s practice (2014). The goal is to be aware of where to look (Law & MacDermid, 2014). In gaining access to online organizations such as membership to the American Occupational Therapy Association and utilizing the Eastern Kentucky University online library aids in a clinician’s ability to access evidence-based interventions. In using features of online libraries including filtering to peer reviewed articles only in addition to filtering articles published in the past ten years helps to ensure that it is in fact the most recent evidenced based approaches.

In a study completed, occupation-based interventions focused on IADLs of the patient’s preference through a life skills group was implemented and it was found that self-efficacy, goal achievement, satisfaction and occupational performance significantly improved at discharge (Spalding et. al., 2022). There has been a cross-sectional study completed that focuses on the factors that predict IADLs in individuals who had a stroke. In this study, it was found that the individual’s ability to complete BADLs was the biggest predictor of their performance with IADLs (Ghaffari et al., 2021). The research is limited regarding the impact of completing IADLs on BADLs. There was a study completed in which an evidence-based and client centered intervention plan was implemented to find interventions to improve the ADL performance of patients with Parkinson’s disease. It was found in this study that with task specific ADL practice and multimodal exercise program, ADL performance did improve with emphasis of the authors placing in reporting importance of utilization of evidenced-based practice (Doucet & Frank, 2023). In order to be successful, continued research of ADL and IADL practice, intervention, and outcomes must be explored in order to implement the project to find the impact of IADL occupation-based intervention has on a person’s basic ADLs in the inpatient rehabilitation setting.

## Consultation.

Consultation is the second important concept explained by Law and MacDermid which is described as consulting with the patient educating the patient on the evidence-based practice, how the clinician found that data and what the clinician is doing with that data with the focus of also incorporating the patient’s needs and what is best for that patient (2014). As the evidence is limited on the impact of the IADLs such as cooking, cleaning, household management, and shopping has on a person’s ability to perform basic ADLs such as upper body dressing, lower body dressing, toileting and bathing, it will be communicated that the evidence suggests ADLs directly impact IADLs however this OT would like to explore the impact of IADLs on ADLs. The OT would explain that by including IADLs in intervention, it is expected that all the basic self-care tasks will improve. The OT will give the example of cooking at the stove incorporates dynamic standing balance, fine/gross motor coordination, attention to task, sequencing, safety awareness, and endurance which evidence does support as taught in schooling and training to improve a patient’s ability to perform self-care tasks.

## Judgment.

Clinical judgement must be incorporated in each intervention with each client to ensure the clinician is implementing client centered care. Utilizing this judgment is the third important concept explained by Law and MacDermid (2014). Evidence may suggest that completing toileting hygiene for clothing management is safer while sitting utilizing lateral weight shift technique after a below knee amputation, however the patient may request to stand therefore this OT would adapt, incorporate a rolling walker, gait belt, proper footwear on the other lower extremity and practice swaying side to side to practice clothing management. Evidence may suggest that weight bearing on the affected extremity can improve functional use of the extremity however the patient may report pain in shoulder with activity therefore the OT would stop the activity as pain needs to be avoided in the shoulder following a stroke. Clinical judgement must be followed in all scenarios therefore in implementation of this project, evidenced based practice would be implemented within the client’s needs to ensure beneficence.

## Creativity.

Creativity is the final concept explained in evidenced based rehabilitation (Law & MacDermid, 2014). In order to incorporate the art that entails evidence-based practice, the OT will teach herself what she needs to do to be creative to correctly implement the evidence-based practice (Law & MacDermid, 2014). There is a strong relationship between the impact of completing basic self-care tasks impacting IADLs (Ghaffari et al., 2021). Due to the impact seen of ADLs on IADLs, the OT will utilize creativity to show the relationship is mutual for this proposed project. An example will be utilizing the patient mentioned in previous section requesting standing to adjust clothing with toileting. In order to demonstrate creativity, the OT will challenge the patient to stand using a rolling walker, with proper footwear on the unaffected lower extremity, with gait-belt in place with patient participating in retrieving and placing items at counter top level challenging balance outside base of support, standing balance, endurance, weight bearing through bilateral upper extremities unilaterally to generalize the skills of standing and adjusting clothing over buttocks with one hand at a time. Creativity is imperative to effectively implement evidence-based practice (Law & MacDermid, 2014).

# Conclusion

Evidenced-based practice must be achieved by occupational therapists to ensure the American Occupational Therapy Association’s Centennial Vision is being met (AOTA, 2007, as cited in Fleming-Castaldy & Gillen, 2013). Occupation-based interventions of IADLs including but not limited to meal preparation, grocery shopping, laundry, and household management are often neglected due to the pressure of meeting the quality outcomes of basic self-care tasks required for reimbursement. It is hypothesized by this OT that occupation-based intervention of IADLs will positively impact basic ADL FIM scores in the inpatient rehabilitation setting, as well as improve patient’s readiness to discharge home. In order to achieve the above, the OT will explore the evidence and the need for further research, while incorporating the concepts of awareness, consultation, judgment, and creativity.

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