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Evaluating the impact of two occupational therapy assessments: an impact case study

Context: Findings were summarised in an Impact Case study for the UK Research Evaluation Framework. Evidence was collected from national and international sources.

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Impact!

'Impact is the good that researchers can do in the world'

(Reed, 2018, p. 15)

What is Research impact?

- ▶ ‘Impact is defined as an effect on, change or benefit to the economy, society, culture, public policy or services, health, the environment or quality of life, beyond academia’
- ▶ Research England, Research Evaluation Framework (REF) (2018)



Impact!

Impact study aim and methods



- ▶ **Aim:** To evaluate the implementation, impact and clinical usefulness of the ACS-UK and the SOTOF on the clinical practice of occupational therapists working with older people
- ▶ **Methods:** The study used a mixed methods design.
- ▶ Implementation of ACS-UK and SOTOF in two NHS Trusts was evaluated by 9 occupational therapists providing feedback through: interview (n = 1); focus group (n = 5); and online survey (n = 3). (Ethical was obtained from my University and governance approval from each NHS Trust).
- ▶ Evidence obtained from an MSc by Research study (Marrison, 2020) which examined the implementation, face validity and content validity of SOTOF on a stroke rehabilitation ward in another Trust. Data collections methods: 10 interviews with patients with stroke; focus group with 11 staff in a multidisciplinary team (MDT); and from another 8 MDT staff via an online-survey.
- ▶ **Further evidence:** feedback following training workshops; literature review; emailed feedback; and testimonial letters.
- ▶ **Data analysis:** interviews, focus group and workshop feedback qualitative data was transcribed verbatim. Content analysis was undertaken by question.

Structured Observational Test of Function (SOTOF)

- ▶ SOTOF is a standardised occupational therapy assessment (Laver, 1994; Laver and Powell, 1995) with a formalised dynamic element (Laver-Fawcett and Marrison, 2016)
- ▶ SOTOF provides assessment of the person's performance of activities of daily living and related:
 - ▶ Perception
 - ▶ Cognition
 - ▶ Sensory function
 - ▶ Motor function
- ▶ Developed for older adults (age 60 years+) with possible neurological problems arising from conditions e.g., stroke, head injury, dementia and Parkinson's disease
- ▶ It is a baseline assessment and an outcome measure
- ▶ The 2nd edition provides further information of prompts, cues, feedback and task alterations to support the person's function.

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- The **Activity Card Sort - United Kingdom** version (ACS-UK; Laver-Fawcett, 2019; Laver and Mallinson, 2013; Laver-Fawcett et al, 2016) is a self-report measure of an older person's participation in Instrumental activities of daily living (IADL), leisure, social and cultural activities
- Comprises 93 photo activity cards
- Can be used in a wide range of settings for initial assessment, goal setting and intervention planning, and measuring outcomes.
- Activities can be sorted in different ways depending on the assessment purpose and setting.



Pathways to impact: SOTOF and ACS-UK

- ▶ SOTOF and ACS-UK have been disseminated via:
 - ▶ Publications
 - ▶ Twitter
 - ▶ workshops delivered at YSJU and NHS Trusts
 - ▶ Conference presentations at national and European conferences and the OT Show
 - ▶ invited teaching e.g., in Austria, Belgium, Bangladesh and Singapore
 - ▶ Students introducing assessments on placements
- ▶ SOTOF requests from OTs in Australia, Austria, Belgium, Canada, Lithuania, New Zealand, Poland, Philippines, Singapore, Turkey, UK and USA

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Impact of the ACS-UK



- The ACS-UK provides a: *'...detailed account of what the person used to do, now does, how much etc, and also some of the reasoning - this makes it easier to consider [the therapists'] role and possibilities in enabling the person to engage'*
- *'In clinical practice with people with dementia the Activity Card Sort UK (ACS-UK) has been useful in terms of talking about activity, promoting communication that is meaningful and measuring activity participation/promoting ideas for new activities to add meaning to everyday life.'*
- Some people with mental illness or dementia find it hard to identify meaningful activities, and the ACS-UK helps with this: *'When I've used it, people have said "oh no, don't really have many hobbies or anything" ...and ... when you go through it, you find a plethora of things to do... also you build that great rapport with people and therapeutic relationship.'*

Impact of the ACS-UK



- ▶ Clinicians felt ACS-UK aids reminiscence, supports goal setting, helps clients to think about what they would like to do again, *'tease[s] out information that may not normally be covered'*; *'focuses interventions in a client centred way'* and provides results which can be used *'to increase care home staff awareness of what the person has done previously and how best to increase their meaningful engagement'*
- ▶ An occupational therapist summarised: *'I think it [ACS-UK] is helpful as we are not using much by way of standardised assessments or those that help formulate goals and monitor engagement as much. It will also help make sure we address all domains, as sometimes the focus can end up being on self-care. It will also help to work collaboratively and make sure the goals are ones shared / made by the person'*

Impact of the ACS-UK: occupational therapists' views

- *'I used it mainly to support people with dementia who had expressive speech problems in particular word finding difficulties. Using the ACS-UK supported them to identify their meaningful activities, reduced stress levels (e.g., not having to rely on verbal speech output) and enabled choice in goal planning'*
- *'definitely [provides] more information' [compared to another assessment used previously] and '... it helped their partner get involved as well, they ... did it together and they looked at things that they could work on together'.*



Impact of SOTOF: views of people with stroke

People with stroke reported doing the SOTOF was useful, interesting, and they learnt from doing it.

Following a stroke, reduced insight into functional problems can hamper people's engagement in rehabilitation, and stroke patients gained insight into their functional problems and abilities through doing SOTOF.

- ▶ One person commented: *"I was shocked actually...I thought I could do a lot more than that...I didn't follow them [SOTOF instructions] as straight as I thought I would"* (Participant 8).

The impact of stroke can lead to low mood and it is important for patients to see progression and improvements, to maintain morale during rehabilitation, SOTOF demonstrated progress with their recovery to patients,

- ▶ for example: *'Simple everyday tasks become a problem...and pouring the drink [SOTOF task 3] felt as though they were coming back'* (Participant 6).

[feedback collected through semi-structured interviews with 10 patients; Marrison, 2020].

Impact of SOTOF: occupational therapists' views

- ▶ Feedback from occupational therapists who have attended SOTOF training workshops indicated SOTOF
- ▶ *'...help[s] me identify patients' rehab. potential and to support my clinical reasoning and be more person-centred';*
- ▶ SOTOF assists with *'...being able to track change and help with insight'* and provides *'more accurate assessment of strengths and deficits to plan ... interventions'*

Marrison (2020) reported that the SOTOF identified a patient had right / left discrimination problems which had not been discovered in previously undertaken functional or cognitive assessments and stated if SOTOF had not be undertaken the deficit may have gone unnoticed.

SOTOF's impact: MDT focus group

SOTOF's ability to identify functional improvements was reported by staff for example:

- ▶ *'it was a good assessment really to show that they had moved on considerably from when they were first on the ward'.*

SOTOF was useful to inform treatment planning:

- ▶ *'The scores show so clearly... where their difficulties are. And then we could ... get together a really good programme of treatment and therapy'.*

[stroke rehabilitation ward multi-disciplinary team's view of SOTOF collected via survey n=8 and focus group n=11; Marrison, 2020].

SOTOF's use in Belgium

- ▶ Following a request to translate the SOTOF into Dutch, a project to evaluate SOTOF's use in practice was undertaken at a hospital in Belgium (with 10 neurological patients) leading to plans to implement it further in practice.
- ▶ Identified SOTOF strengths included: the use of everyday objects and tasks recognised by patients; clear instructions; low cost of equipment; free assessment; that the therapist can use one test (instead of several tests); and administration can be spread over time (which helps when patients have fatigue).
- ▶ *'The dynamic element of the test provides extra information on learning or coaching style of patient, [and] effective cues...'*

SOTOF: educational impact example

- ▶ A Senior Lecturer from an occupational therapy programme reported how SOTOF and role-plays were used with occupational therapy students on placement:
- ▶ *'We had a remote peer learning placement and as the students did not have much client interaction [owing to the pandemic] we gave them all the SOTOF files and they used them to role play the assessment together. They were able to navigate it all themselves and we watched the role play videos. They also reflected on using the assessment'*

For further information or to obtain the SOTOF or ACS-UK contact:

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- **ACS-UK** is published by York St John University. The pack (manual, cards, master copy of forms) costs £66.50 (plus 20% VAT of £13.30; postage and packaging of £3.85) = total £83.65. For details of how to order email me at: a.laverfawcett@yorks.j.ac.uk

Please submit any questions or comments in the Q & A box



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