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The content validity of the Structured Observational Test of Function (SOTOF) 2nd edition from the perspective of a stroke rehabilitation multi-disciplinary team.

**Background**

- SOTOF (Laver and Powell, 1995) was developed for use with older people with neurological diagnoses.
- It is a standardised, valid and reliable test.
- Provides a detailed description of occupational performance in four personal activities of daily living.
- SOTOF identifies underlying cognitive, perceptual, sensory and motor deficits.
- Improvements to the 2nd edition (Laver-Fawcett and Marrison, 2016) enhanced the dynamic assessment element and added a scored graduated mediation protocol to be applied to the standardised test items the person is unable to complete.
- National stroke guidelines (ISWP, 2016) recommend occupational therapists should assess a person's safety and independence in personal activities of daily living using a standardised assessment tool.

**Methodology**

- Mixed methods, pragmatic paradigm
- Participants chose to attend a focus group or complete an online survey comprised of closed and open questions, with some rating scales.
- Focus group of 11 participants (1 consultant, 1 occupational therapist, 2 stroke rehab assistants, 2 physiotherapists, 1 nurse, 1 speech and language therapist, 2 therapy assistants)
- Online survey with 8 participants (3 speech and language therapists, 1 nurse, 1 physiotherapist, 2 occupational therapist and 1 occupational therapy assistant)
- Quantitative data was analysed using descriptive statistics.
- Thematic analysis of the focus group and the survey qualitative data [following Braun and Clarke’s (2006) 6 stages].
- Member checking of preliminary thematic analysis undertaken with focus group participants.
- Ethics approval was obtained via the Health Research Authority (HRA), Research Ethics Committee (REC) and from York St John University’s Cross Schools Ethics Committee

**Research aims**

To explore...

1. The perceptions of staff working in a stroke rehabilitation multi-disciplinary team on the content of SOTOF.
2. If staff working in the stroke MDT consider the SOTOF scoring form and summary of results useful for their practice.
3. If staff of the stroke MDT consider the SOTOF useful for informing goal setting in rehabilitation and treatment plans.

**Results**

**Theme 1**

The reliance and importance of verbal handovers of assessment results

Verbal handovers were primarily used between MDT members to share information.

- "...but normally an assessment we’d just verbalise it ...
- "...the narrative is the most important ...

**Theme 2**

The value of having an overall score attached to a test

Particularly to communicate results to other professions who are not experts in that area.

- "...to communicate across groups of people who aren’t experts in your area ...
- "...gives you the option to do it as an outcome measure as well"

**Theme 3**

Lack of awareness of SOTOF

There was a lack of awareness by the MDT of SOTOF prior to and during the study. Highlighting the importance of how tools are embedded into a service.

- "...didn’t know anything about it before."

**Theme 4**

Usefulness of SOTOF assessment results to inform practice

Information generated from SOTOF can inform and be useful for other professionals’ practice.

- "...to inform treatment techniques or treatment interventions...we could get together a better programme ...
- "Little bits of advice we got given...able to incorporate that into treatments"

**Conclusion**

- The findings indicate that the insertion of the graduated mediation protocol, scoring and the identification of strategies and recommendations from the occupational therapists could benefit other members of the MDT by informing their goal setting and treatment plans. Ultimately improving patient care and, therefore, suggests the tool to have content validity.
- It has been concluded that the content and information the SOTOF (2nd edition) generates, is relevant to other members of the MDT, not only occupational therapists.

**References:**


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