

Implementing an occupational therapy self-management program for people with stroke in the rehabilitation setting

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Introduction/Rationale: People who experience stroke face barriers to participation and are not fully integrated into their homes, communities and places of work. Current rehabilitation practice and health care services have an acute focus and are dominated by impairment reduction and decreasing burden of care, often leaving little time for interventions that encourage self-management to enhance performance of meaningful occupations and long-term participation in the community. Incorporation of the voice of people with stroke and the use of peer mentors is also noticeably lacking in stroke rehabilitation care.

Methods: This project included development, implementation and evaluation of the Improving Participation After Stroke Self-Management Day Rehabilitation (IPASS-DR) program, an evidence-based, self-management program for stroke survivors. A participatory action research approach was used as consumers who have experienced stroke co-developed, co-implemented and evaluated the program. Participants attended 6, 1-hour occupational therapy group sessions, 2 times per week. Each participant was assessed prior to and immediately following the program using the Canadian Occupational Performance Measure (COPM), the Executive Function Performance Test (EFPT), the Community Participation Index (CPI) and the Participation Self-Efficacy Scale (PS-SES) to identify trends.

Conclusion and Implications for Occupational Therapy Practice: Overall, participants demonstrated increased participation self-efficacy, increased engagement in community participation, increased executive function skills and increased satisfaction with their occupational performance. Self-management interventions focused on participation in the home, community and in productive roles and co-facilitated by a peer mentor are feasible in an outpatient day rehabilitation setting and enhance meaningful participation outcomes for stroke survivors.