Intensive client-centred occupational therapy in the home improves older adults’ occupational performance and is still effective 6 months after baseline.

Results from a Danish randomised controlled trial

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Disposition

• Background
• Aim and main hypothesis
• Methods
• Results
• Strengths and limitations
• Implications for practice and research
Background

Older adults’ impaired occupational performance

Rehabilitative and compensatory services

Lack of evidence concerning home-based, client-centred and occupation-based occupational therapy for older adults with various chronic health issues
Aim and primary hypothesis

Aim
To compare the effect of 11 weeks of home-based, client-centred and occupation-based occupational therapy for older adults to the effect of the usual practice of a Danish municipality

Primary hypothesis
The intervention will improve the participants’ self-reported occupational performance more than the usual practice
A Randomised controlled trial was performed

119 older adults were included
Home-dwelling women and men (♀ 72%, ♂ 28%)
Age 60+ (mean 78 years)
Danish speaking

Excluded were older adults who had
Previously received home rehabilitation
Predefined severe diseases
Severe pain
Drug or alcohol abuse
Randomisation to two groups

119 participants

59
ICC-OT + some usual practice

60
Usual practice
Usual practice, both groups

- Personal care and practical help
- Meal delivery
- Assistive devices and home modifications
- Physiotherapy
Occupational therapy, ICC-OT

Aim
Improved occupational performance

Approach
Home-based, client-centred, occupation-based occupational therapy

Intensity
11 weeks, twice a week, max. 22 visits by an occupational therapist
Some in the Usual Practice group had occupational therapy

**Aim**
Minimised need for home help

**Approach**
Home-care reablement
Practicing activities to which the older adult needed home help

**Intensity, occupational therapy**
Max 3 weeks, max 3 visits by an occupational therapist
Assessment of occupational performance at baseline, 3, and 6 months

COPM

AMPS
Self-reported occupational performance (COPM)
Main result, baseline to 3 months

The ICC-OT group
Improvement 1.87 points

The usual-practice group
Improvement 0.61 points

Difference in improvement
1.26 points (95%CI 0.5 to 2.02) p 0.001
Self-reported occupational performance (COPM)
Secondary result, baseline to 6 months

The ICC-OT group
Improvement 1.42 points

The usual-practice group
Improvement 0.44 points

Difference in improvement
0.98 points (95%CI 0.27 to 1.70)
p 0.008
To sum up..

3 months after baseline, ICC-OT had effectively improved
• occupational performance (COPM)

6 months after baseline, ICC-OT had effectively improved
• occupational performance (COPM)
• performance satisfaction (COPM)
• quality of occupational performance (AMPS)

Concerning occupational performance (COPM)
• modest effect sizes and smaller effect at 6 months
Limitations
No long term follow-up
All born and raised in Denmark

Strengths
Study design
Skilled professionals
Validated assessments
Implications for practice and research

Consider offering home-based ICC-OT to older adults with mainly physical health issues

Focus on how to further improve the effectiveness of ICC-OT

Test the long-term effectiveness of ICC-OT

Test the effectiveness of ICC-OT in different populations and health systems
THANK-YOU FOR LISTENING

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