

# An occupational therapist as a new professional at home: which profiles of clients are reached ?

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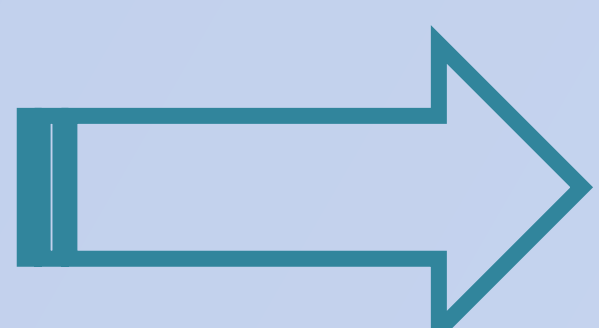
## Introduction

Occupational therapy (OT) is a relatively new health profession in Belgium which at the moment draws a lot of interest. This discipline, integrated to client's environment, seems to be effective and would have a positive impact on elderly client including falls prevention or mortality risk [1-2].

The Belgian National Institute for Health and Disability Insurance (NIHDI) wishes to evaluate 63 innovative projects in the elderly care sector. 8 projects propose occupational therapy services at home.

**The main activity proposed by occupational therapy projects is home adaptation**

**All projects offer more than one visit on the duration of the inclusion**



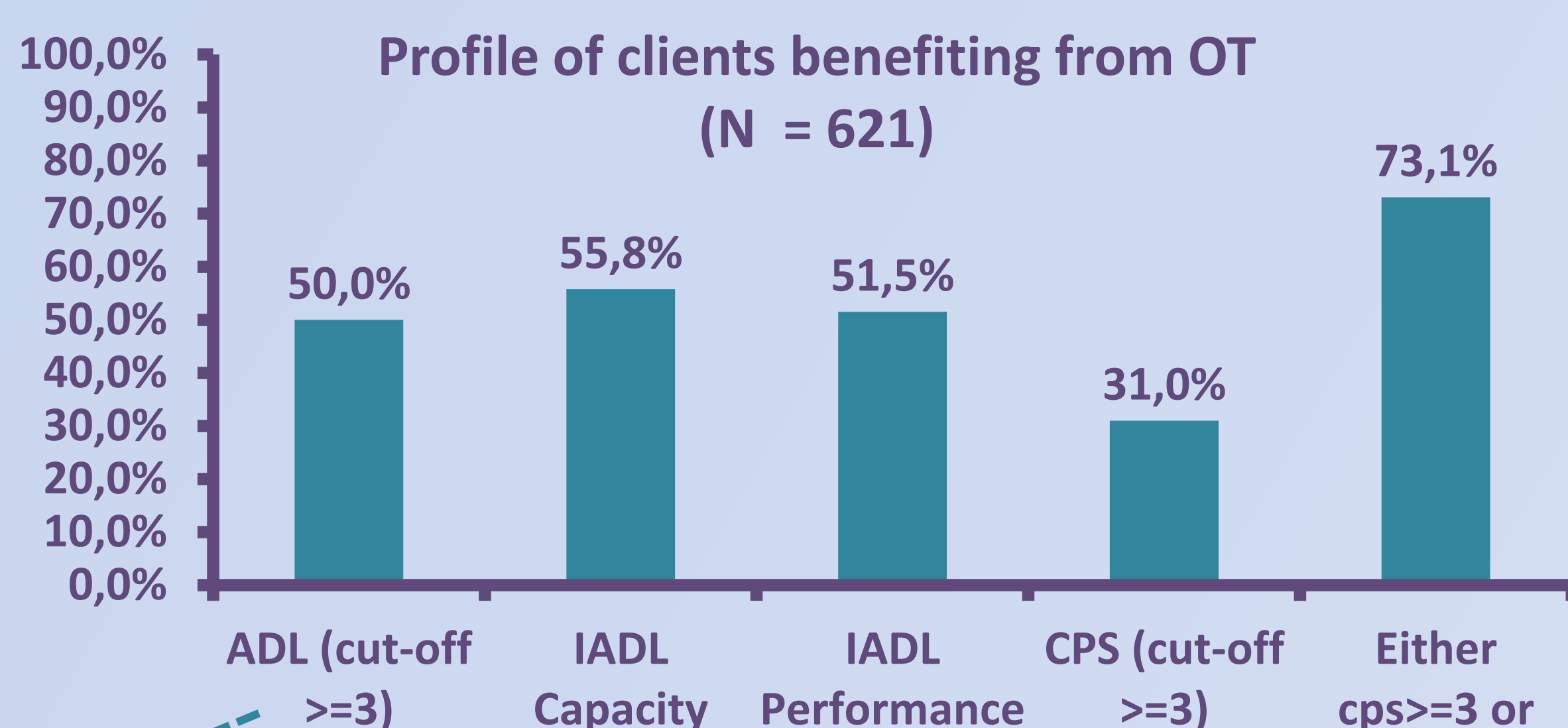
**Purpose** : Analyze the profile of clients who receive **occupational therapy** at home with the main activity being **home adaptation**.

## Methods

- Assessments with the **interRAI Home Care** and the **Zarit Burden Scale** which measures burden perceived by the informal caregiver
  - ADL** : Activity of Daily Living measure (feeding, moving,...)
  - IADL scales (Capacity and Performance)** : are used to assess somewhat higher levels of performance, such as the ability to perform household chores or go shopping.
  - CPS** : Cognitive Performance Scale
- Instruments are filled out every 6 months until the client leaves the project
- Statistical analysis was performed with STATA 11.1

## Results

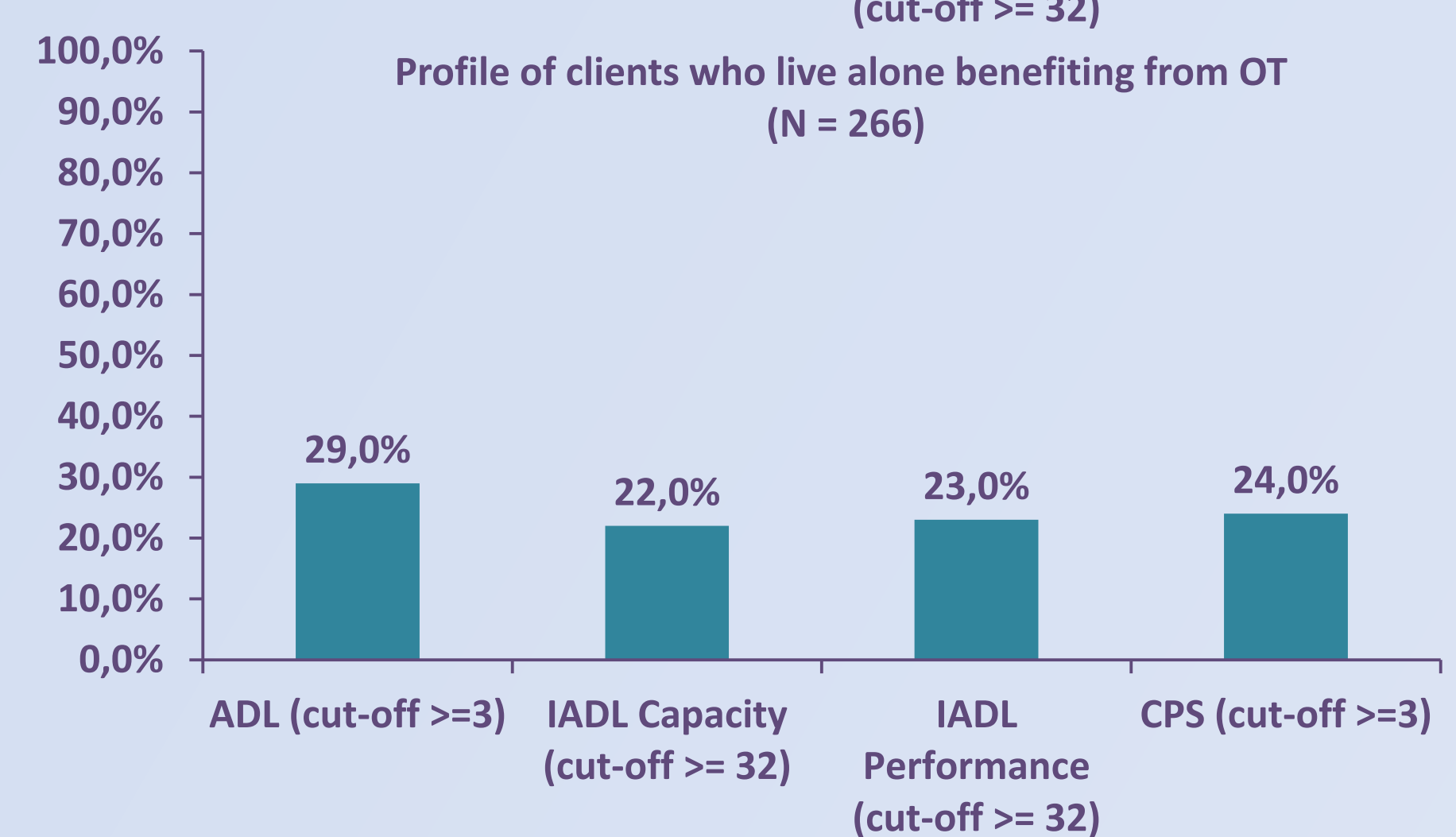
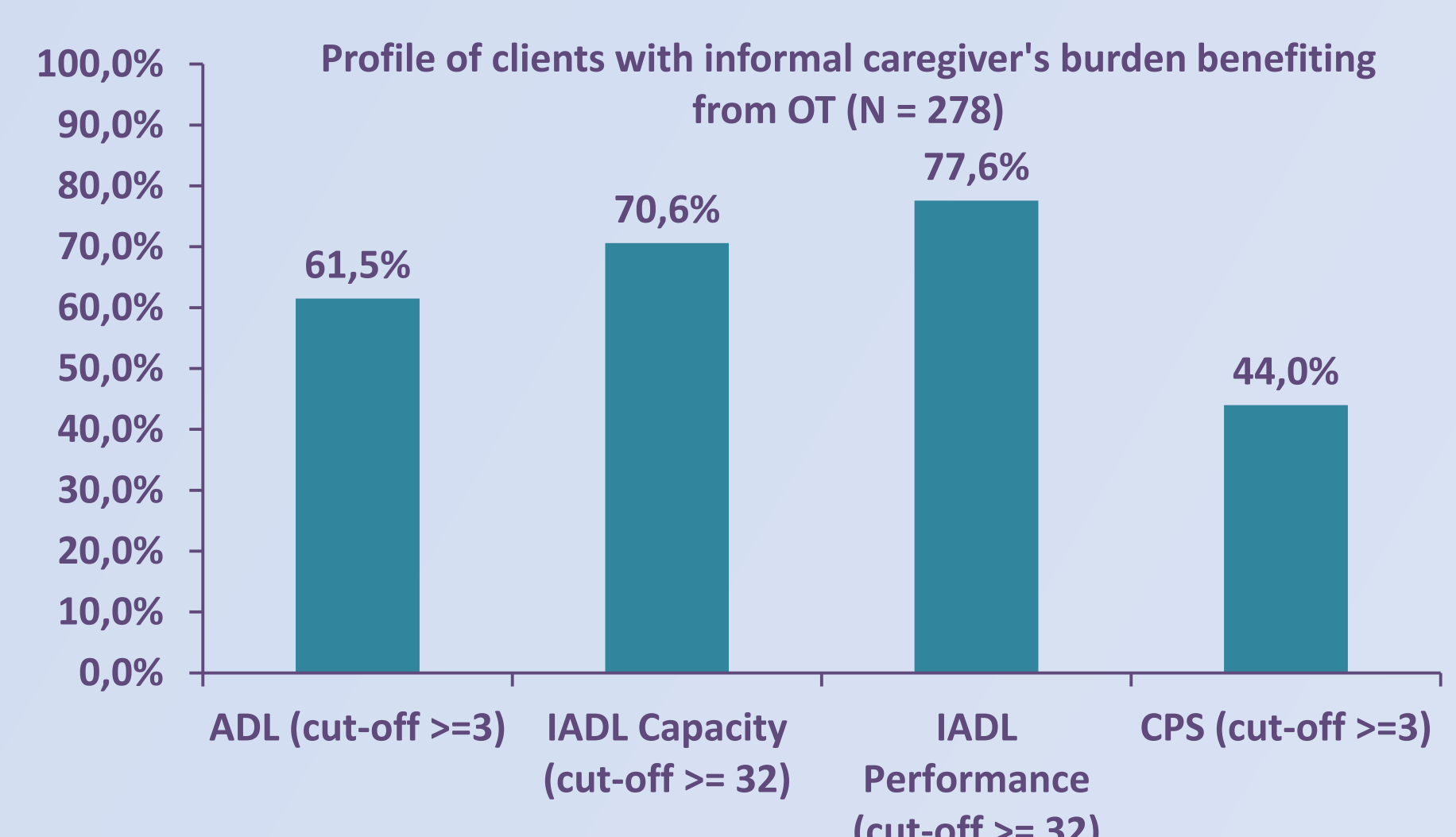
- A total of 621 subjects are included in the study
  - The population mean age is 79 ± 0,3 years old (female = 66.6%, male = 33.4%)
  - 73.1% [95%CI: 69.5-76.7] of population are somewhat frail in having either CPS>=3 or ADL>=3 or IADLp>=32 or IADLc>=32
  - 266 patients report living alone (44.0%) [95%CI: 40.0-44.0]
  - 479 patients declare having an informal caregiver (82.6%) [95%CI: 79.5-85.7] and 278 (63.0%) [95%CI: 59.0-67.0] of informal caregivers perceive burden (Zarit cut-off >= 10)



Half of the sample [95%CI: 46.0-54.0] has a moderate to an extreme dependency in ADL i.e., basic activities of everyday life.

55.8% [95%CI: 51.7-59.9] and 51.5% [95%CI: 47.4-55.6] of patients have respectively an extensive assistance for IADL Capacity (what a person can do) and IADL Performance (how the person does do).

31.0% [95%CI: 27.0-34.0] have a moderate to a severe cognitive decline.



## Conclusions

Patients who receive occupational therapy through a **home adaptation** mainly have troubles with the activities of daily living. A large percentage of their caregivers perceive burden from giving care. Patients reporting living alone have a better functional status than those with a burdened informal caregiver. Concerning functional status, it's expected that home adaptation is relevant in order to relieve difficulties in ADL's achievement.

The **next step** consists on comparing this sample with a control group to assess whether occupational therapy at home, still through a home adaptation, improves the functional status and perceived burden by a prospective informal caregiver.

## References:

- Johnston K., Barras S., Grimmer-Somers K. Relationship between pre-discharge occupational therapy home assessment and prevalence of post-discharge falls. Journal of Evaluation in Clinical Practice. 2010, 16: 1333-1339.
- Gitlin L., Hauck W., Winter L., Dennis M., Schulz R. Effect of an In-Home Occupational and Physical Therapy Intervention on Reducing Mortality in Functionally Vulnerable Older People: Preliminary Findings. The American Geriatrics Society. 2006, 54: 950-955.

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