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Implementation of Functional Cognition Screening Tool and Program Development in an Inpatient Rehabilitation Setting

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Spotskey, Michelle, "Implementation of Functional Cognition Screening Tool and Program Development in an Inpatient Rehabilitation Setting" (2022). *OT Student Capstones*. 11.
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BACKGROUND

Cognitive Deficits: Impact on Functional Tasks

- ❖ Research has identified the highest-level impairments with IADL tasks when cognitive deficits are present. Statistical significance linked specifically to medication and financial management

Occupational Therapist (OT) Role in Cognition

- ❖ Limited information on OT role in cognition
- ❖ Lack of consensus on standardize/non-standardized assessments
- ❖ Accessibility, billing, and interpretation are limiting factors
- ❖ Reluctance to implement cognitive components into interventions
- ❖ Executive Function Performance Test is a reliable and valid measure

Impact on Discharge

- ❖ Within hospitals there is a lack of task specific interventions. Education components are often presented without functional components
- ❖ Non-adherence to medication correlates to increased hospital readmission, healthcare cost, and safety
- ❖ Need for stronger collaborations/ interdisciplinary treatment with speech therapist to improve discharge safety in inpatient setting

PURPOSE

This project aimed to demonstrate the effectiveness of the implementation of standardized cognitive assessments and functional cognition-based program development in an inpatient rehabilitation setting. The following are the project objectives:

- ❖ Educate staff on topic of functional cognition including background, purpose, assessments, and interventions
- ❖ Complete EFPT as cognitive screening tool– utilizing data to guide OT goals, interventions, and family training and provide the facility with supplies complete subtest of EFPT
- ❖ Provide facility with functional cognition intervention binder and handouts/resources

METHODS

- ❖ EFPT subtest for medication management/bill paying were administered to patients following the inclusion criteria. Scoring for each subtest ranged from 0 (no assistance) to 25 (completing task for patient). Scores were recorded in EMR to guide occupational therapy interventions, goals, family training, and further recommendations.
- ❖ Therapist surveys were administered to all occupational therapist in the facility. This survey was used as a baseline screening to guide program development using Likert scale/open-ended questions. Information assessed included: therapist background information, use of cognitive standardized vs. non-standard assessments, implementation of cognitive interventions, and importance of cognition in the POC.

Michelle Spotskey, OTD Class 2022

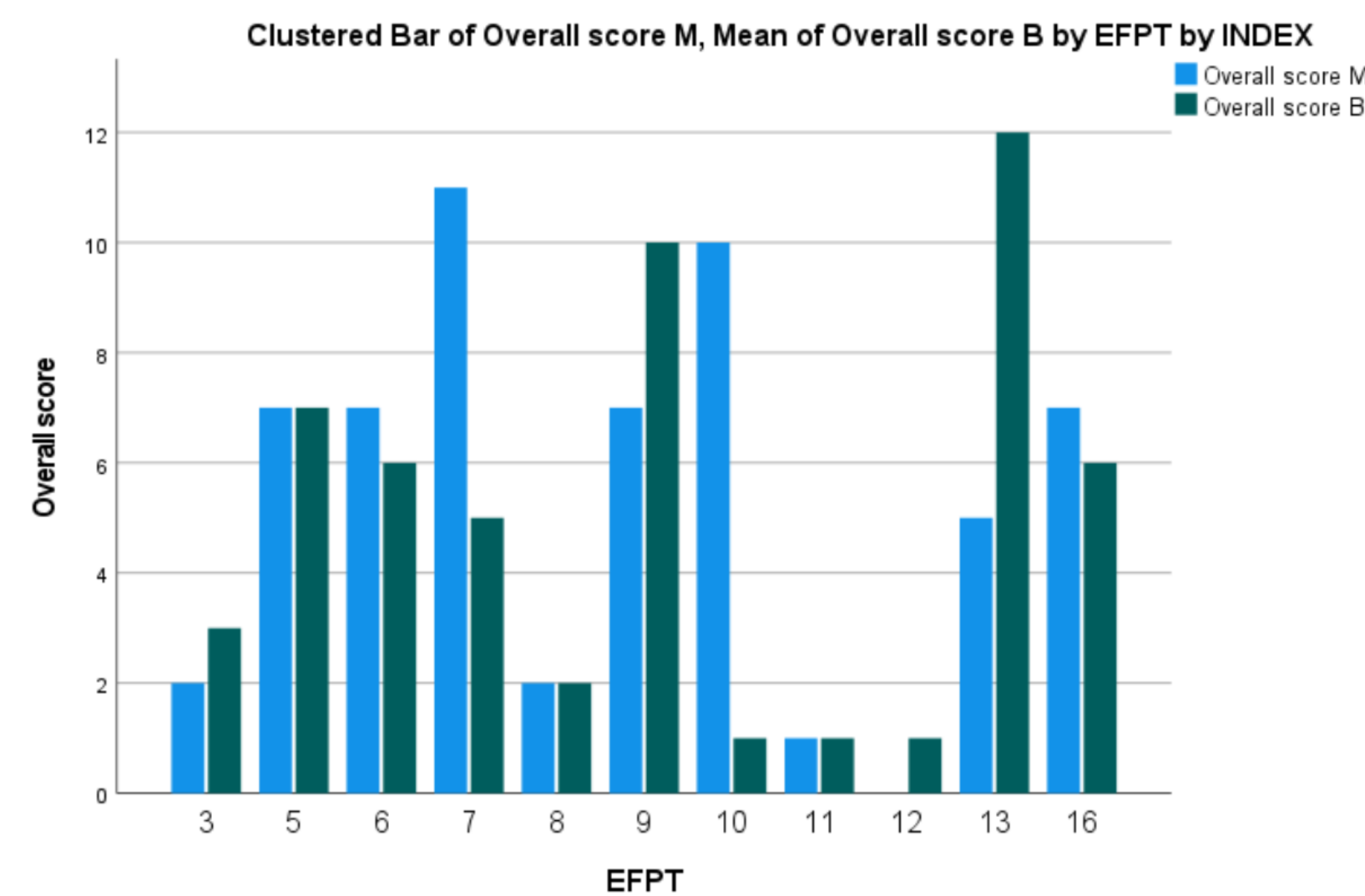
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RESULTS

Therapist Survey

Overall Themes of Therapist Survey
Limited usage of cognitive based standardized testing
Use of various forms of non-standardized cognitive screening
“Strongly Agree”- Importance/need to address functional cognition
Limited knowledge on background/purpose/administration of EFPT
Need for ADL/IADL based cognitive interventions
Need for focus on quick cognitive screenings, handouts, and education

EFPT Results



Overall Score Correlations

Overall Medication Scores Mean Score: 7.16 Standard Deviation: 5.49	.800 (.033) with sequencing .894 (<.001) with judgement. .721 (.012) with completion
Overall Bill Scores Mean Score: 4.90 Standard Deviation: 3.75	.904 (<.001) with sequencing .834 (.001) with judgment .811(.002) with completion

Note: Pearson Correlation Score (significance level 2-tailed)
**Correlation is significant at the .001 level (2-tailed)
*Correlation is significant at the .05 level (2-tailed)

DISCUSSION

Program Development

Survey results support literature regarding reluctance/education with cognition. The overall themes of therapist survey guided program development at Rhodes Rehabilitation which consisted of:

- ❖ EFPT Kits- Bills/Medication
- ❖ Observation/Education on EFPT
- ❖ Cognitive Domain Based Intervention Binder for ADL/IADLs
- ❖ Patient & Therapist Handouts

Interpretation of Findings

- ❖ Highest correlations found with sequencing/judgment components which correlate to lower levels of safety upon discharge
- ❖ Implementation functional task reduces barriers with treatment such as language, comprehension. Functional task increase natural translation which assist with adherence/safety upon discharge which reduces the chance hospital readmission
- ❖ Demonstrated effectiveness of EFPT as a quick, effective, and billable tool
- ❖ Resources provided ways therapist to factor in cognitive components to already used interventions
- ❖ Higher knowledge/background with cognition increased collaborative approach

LIMITATIONS & FUTURE INDICATIONS

Limitations

- ❖ Decreased census due to facility relocation
- ❖ Small sample size
- ❖ Therapist with similar backgrounds
- ❖ Time constraints, scheduling demands, and lack resources for all EFPT components

Future Indications

- ❖ Include all subtest to address mean, correlations, and frequencies
- ❖ Pre/Post study using EFPT following cognitive protocol
- ❖ Quantitative measures in various settings
- ❖ Collaboration study with SLP/Neuropsychologist
- ❖ Advocacy for OT and skilled cognitive based assessments, interventions, billable coverage etc.

ACKNOWLEDGEMENTS

A special thank you to the staff at Banner Baywood- Rhodes Rehabilitation for partnering with me for this project, especially Jennifer Beach for advising as my community mentor. Thank you to my faculty advisors Tania Shearon and Adam Story for the guidance on this project over the past two years.