

Role of Occupational Therapy in Critical Care

There is a growing evidence base highlighting the impact critical care has on a patient and family and the need for early rehabilitation to improve patient recovery (Schweickert et al 2009, Corcoran et al 2017).

Critical Care patients are generally inactive for 96% of their day.

Occupational Therapists recognise the value of occupation to improve health and wellbeing and understand the impact of occupational deprivation in critical care (Howell 1999).

Patients are supported by Occupational Therapists to re-engage in physical and social environments in critical care to improve sensory input, alertness and awareness (Twose, 2021; Firshman, 2019).

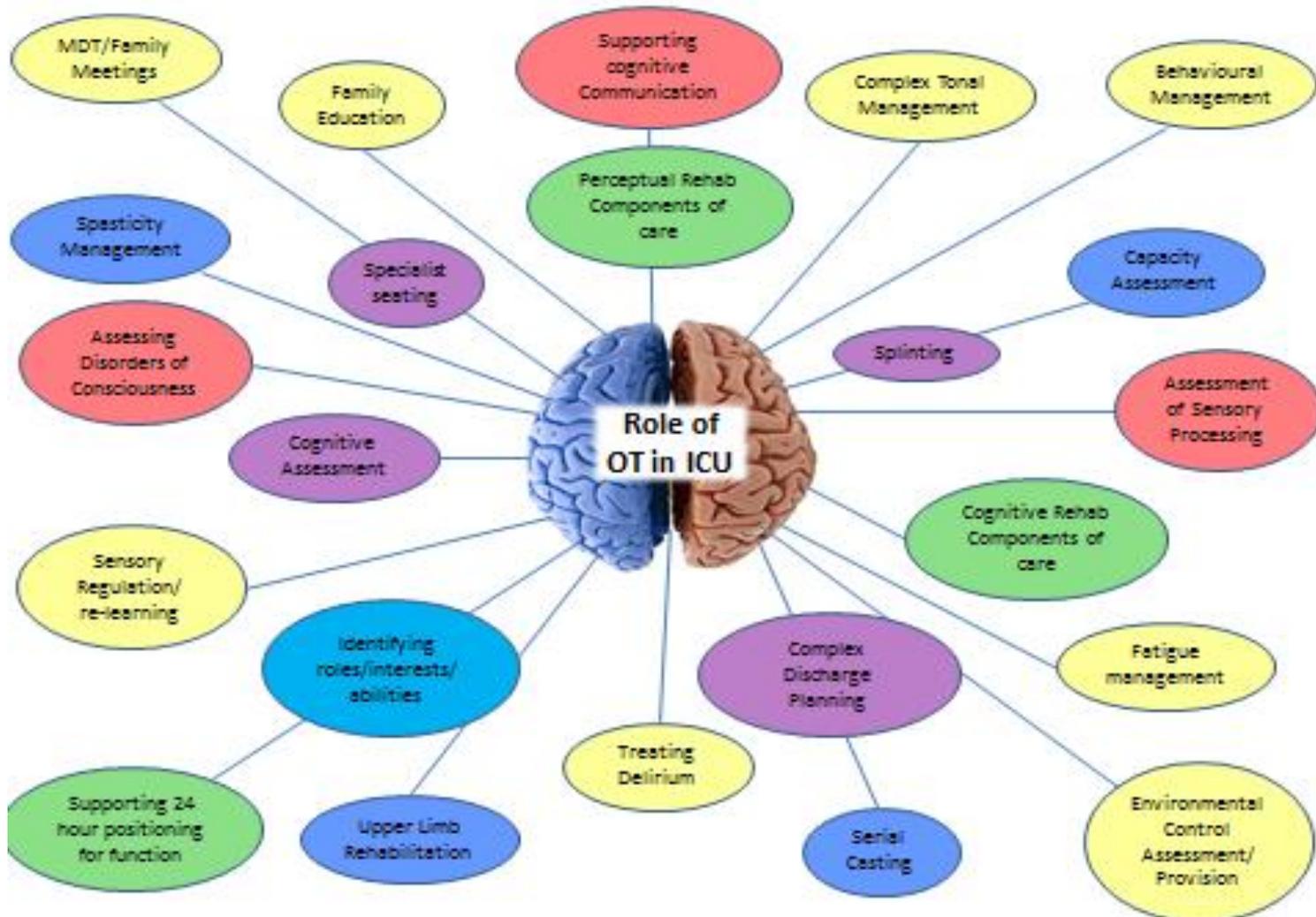
Role of Occupational Therapy in Critical Care

- ▶ Occupational Therapists focus their intervention on what is important to a person and how to support re-engagement in occupations that are important to a person
- ▶ They assess a person's abilities, role and interests prior to admission and assess occupational performance to identify most appropriate treatments to facilitate re-engagement
- ▶ Roles of an Occupational Therapist focus on:
 - ▶ **Self care**
 - ▶ **Vocation**
 - ▶ **Leisure**

Role of Occupational Therapy in Critical Care

- ▶ Occupational therapists support patients in many way in critical care.
- ▶ This includes assessment and treating functional components of physical, cognitive, perceptual and behavioural changes.
- ▶ The attached diagram identifies some of the key roles...

Role of Occupational Therapy in Critical Care



Role of OT in Critical Care: Engaging in Self Care

- ▶ Occupational therapists support patients to engage in self care activities that are important to them
- ▶ Things to consider.....
- ▶ Encourage patients to engage in personal care activities if they are able to do so e.g. teeth brushing/washing face/applying creams/lotions
- ▶ Ask patient what is important to them when providing personal care
- ▶ Ensure water is warm when providing support to wash
- ▶ Family to provide own clothing e.g. tops cut out at back or with tie at back for ease of wear

Role of OT in Critical Care: Fatigue Management

▶ Primary fatigue

This occurs as a direct result of damage to the Central Nervous System due to the neurological condition eg inflammation/damage to the myelin sheath in multiple sclerosis or a lesion following a stroke.

- ▶ The body responds to the damage by slowing down and trying to make new connections to get messages through (neuroplasticity).

The body is working hard to do this even at rest, and thus fatigue occurs.

Role of OT in Critical Care: Fatigue Management

- ▶ Secondary fatigue
- ▶ Experienced as a result of other factors and therefore are not directly caused by the neurological condition itself
- ▶ They can be viewed as ‘extra layers’ of fatigue (on top of the primary fatigue mentioned earlier).
- ▶ The good news is that secondary fatigue factors can be managed with the right knowledge and skills

Role of OT in Critical Care: Fatigue Management

▶ Secondary factors

- ▶ Medication (some medications cause drowsiness, sedatory)
- ▶ Sleep disturbance / poor sleep
- ▶ Poor diet, erratic eating patterns, poor nutrition
- ▶ Over activity (pushing yourself too much)
- ▶ De-conditioning (not doing enough),
- ▶ stress/worry/anxiety,
- ▶ Infections other illnesses (eg Urine infections, colds/flu)
- ▶ Pain
- ▶ Low mood

Role of OT in Critical Care: Fatigue Management

- ▶ Reducing/Managing Fatigue
- ▶ Education
- ▶ Measuring fatigue levels
- ▶ Reducing any secondary factors
- ▶ Relaxation
- ▶ Rest breaks
- ▶ Break down tasks to smaller goals
- ▶ Consider how you consider fatigue when working with critical care patients

Role of OT in Critical Care: Environmental Controls

- ▶ Patients with limited motor function may be unable to operate electronic devices. This includes:
 - ▶ Nurse call buzzer
 - ▶ Mobile phone
 - ▶ I pad
 - ▶ TV
- ▶ Use of stands attached to bedside/appropriately set up at bedside table may facilitate ability to access movement
- ▶ Occupational Therapists can utilise adaptive devices to allow patients to operate electronic devices via environmental control systems

References

- ▶ Corocoran JR, Herbsman JM, Bushnik T, Van Lew, S, Stolfi A, Parkin K, McKenzie A, Hall, GW, Joseph, W, Whiteson J, Flanagan SR. *Early Rehabilitation in the Medical and Surgical Intensive Care Units for Patients With and Without Mechanical Ventilation: An Interprofessional Performance Improvement Project* (2017), Feb 9(2), 113-119
- ▶ Howell D. *Neuro-occupation: linking sensory deprivation and self-care in the ICU patient* (1999) *Occupational Therapy in Health Care* 11(4) 75-85
- ▶ Twose P, Jones U, Bharal M, Bruce J, Firshman P, Highfiled J, Jones G, Merriweather J, Newey V, Newman H, Rock C, Terblanche E, Wallace S. *Exploration of Therapists' Views of Practice within Critical Care* *BMJ* (2021) 8(1) 1-8
- ▶ Schweickert WD, Pohlman MC, Pohlman AS, C Nigos, Pawlik AJ, Esbrook CL, Spears L, Miller M, Franczyk M, Deprizio D, Schmidt GA, Bowman A, Barr R, McCallister KE, Hall JB, Kress JP. *Early physical and occupational therapy in mechanically ventilated, critically ill patients: a randomised controlled trial.* *Lancet* (2009) 30(373) 1874-82

Check your understanding...

Q1. Name three roles of occupational therapists in critical care.

Q2. When you are completing personal care with a patient, what should you consider?

Q3. what secondary factors may impact or increase a persons level of fatigue?

Q4. What can Occupational Therapist do to support fatigue?

Answers

Q1. Name three roles of occupational therapists in critical care

OT's focus on areas of self-care, vocation and leisure. They do this in many ways. The brain diagram shows you all the activities you might see the OT performing with a patient.

Q2. When you are completing personal care with a patient, what should you consider?

Never underestimate the importance of involving the patient. Encourage them to become involved (if appropriate). Ask what is important to them when providing personal care and ensure the water is warm. No-one likes a cold soggy flannel!

Q3. what secondary factors may impact or increase a persons level of fatigue?

Medication, poor sleep, poor dietary intake, over activity, inactivity, stress, anxiety or low mood and infection, pain can all impact a person who is already very tired following critical illness.

Q4. What can Occupational Therapists do to support fatigue?

Reducing / managing fatigue, education, measuring, reducing secondary factors, relaxation, rest breaks, breaking down tasks.