

# AHP Team OT Case Study

By Beth Postill

Occupational Therapist



# Patient background

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- Patient referred to Macmillan OT by Community OT. Already provided with some equipment by CRT OT, referred to AHP for specialist OT needs.
- Diagnosis of Ovarian Cancer.
- Symptoms of reduced exercise and standing tolerance and fatigue linked with diagnosis and treatment (chemotherapy).

# Occupational Problems

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- Difficultly ascending and descending the stairs (putting both hands and back on wall)
- On low fibre diet which was impacting on her enjoyment and therefore on her engagement in social activities e.g. eating out with family/friends.
- Fatigue limiting engagement in meaningful and enjoyable activities including mobilising in local community.

# Goals

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- To increase safety and independence on the stairs.
- To increase safety and independence with mobility.
- To increase self management of Fatigue.
- To increase self management of Dietary intake.

# Treatment plan

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- Referral to Wigan Council for second stair rail.
- Provision of walking aid- 4 wheeled walker to enable outdoor mobility within local community.
- Fatigue management- advised on principles of fatigue management and referred to group.
- Referral to Macmillan AHP Team dietitian.

# Outcomes

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- Patient safety and independence increased on stairs.
- Patient safety and independence increased accessing the local community.
- Patient's self management of fatigue increased following completion of fatigue programme on 1:1 basis.

# How was this measured?

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- Using the TOMS (Therapy Outcome Measure).
- Looks at Impairment, activity, participation and Wellbeing/distress.

# Impairment

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**0 Profound.** Severe, constant symptom burden, for example pain/weakness in multiple sites; severe constant breathlessness/fatigue/nausea/impaired cognition. Symptoms not relieved by medication or non-pharmacological methods.

**1 Constant moderate and intermittently severe episodes of symptom burden.** For example, moderate/intermittently severe pain/weakness in two or more sites; moderate/intermittently severe breathlessness/fatigue/nausea/impaired cognition. Little reduction in symptoms with medication or non-pharmacological methods.

**2 Constant moderate levels of symptom burden.** For example, constant moderate pain/weakness in one or more sites; constant moderate breathlessness/fatigue/nausea/impaired cognition. Frequent, intermittent relief from medication or other nonpharmacological methods.

**3 Moderate/intermittently mild symptom burden.** Periods of pain/weakness/ breathlessness/ fatigue /nausea /impaired cognition. Some improvement from medication or non-pharmacological methods.

**4 Intermittent or mild symptom burden.** Pain/weakness/breathlessness/fatigue/nausea/impaired cognition. Symptoms are mostly relieved with medication and/or non-pharmacological methods such as personal strategies.

**5 No symptom burden.**



# Activity

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**0 No purposeful active movement**, totally dependent, requires full physical care and constant vigilant supervision. Totally dependent on skilled assistance.

**1 Some very limited purposeful activity**. Bed/chair-bound, unable to sit independently. Needs high level of assistance in most tasks. Some awareness, some effort and recognition to contribute to care. Dependent on skilled assistance.

**2 Participates in care** and engages in some structured activity. Limited self-help skills.

Initiates some aspects of activities of daily living (ADL). Transfers with one, mobilizes with two. Requires physical and verbal prompting and supervision for most tasks and movements. Dependent on familiar assistance.

**3 Appropriately initiates activities.** Transfers or walking requires help or supervision of one. Undertakes personal care in a modified supported environment. Needs assistance or supervision with some unfamiliar or complex tasks.

**4 Independent in familiar and/or adapted environments.** Carries out personal care and other activities of daily living but is less efficient. Needs occasional assistance and/or extra time with physically demanding activities.

**5 Activity not restricted.**

# Participation

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**0 Unable to fulfil any meaningful and/or purposeful role.** Unable to participate in any decision making. No social integration. No future plans in place and unable to take part in decision making about the future.

**1 Requires full, skilled assistance** to participate in any purposeful and/or meaningful role. Contributes to some basic and limited decision making. Unable to initiate social integration, low self-confidence/poor self-esteem and socially withdrawn. Can make simple choices but unable to contribute to complex future planning.

**2 Some participation** in familiar purposeful or meaningful roles. Able to engage more readily in some limited social integration. Able to respond to some social integration and some self-confidence but requires support (physical and/or emotional). Able to express preferences spontaneously for future care but requires support to weigh up options, plan and implement.

**3 Able to recognize and appropriately participate** in purposeful and meaningful roles. Able to make some decisions and understands potential consequences. Able to seek out and respond to social integration of their own choice but needs physical and/or emotional support. Some self-confidence, and able to contribute to future planning.

**4 Occasional difficulty** in fulfilling purposeful or meaningful roles. Able to seek out and respond to social integration of their choice. Minor restrictions in some situations but mostly confident; participates in all appropriate decisions and future planning.

**5 Able to fulfil purposeful and meaningful roles.** Autonomous decision making and social integration. Support in future planning for complex issues only.

# Wellbeing/Distress (client/carer)

**0 Severe, constant levels of distress:** High and constant levels of distress/concern/anxiety/fear/grief/boredom. Unable to express or control emotions appropriately.

No enjoyment of any activities. Unable to adjust to situation. No effective coping mechanism/strategy.

**1 Frequently severe levels of distress:** Frequent and significant levels of distress/concern/anxiety/fear/grief/boredom. Infrequent signs of pleasure or enjoyment. Loses emotional control easily. Shows some signs of adjustment but much difficulty with this. Coping mechanisms are frequently ineffective.

**2 Moderate consistent levels of distress:** Signs of distress/concern/anxiety/fear/grief/ boredom in unfamiliar situations. Signs of pleasure or enjoyment in familiar situations/ activities. Frequent emotional encouragement and support is required. Difficulty with adjustment; requires support. Coping mechanisms used with support and some success.

**3 Moderate frequent levels of distress:** Some signs of distress/concern/anxiety/fear/grief/boredom. Is able to control emotions with assistance but is vulnerable to change in routine. Spontaneously uses methods to assist emotional controls in familiar situations. Very occasionally has difficulty enjoying activities. Well adjusted most of the time but occasionally requiring support. Unable to cope with some aspects of condition.

**4 Mild, occasional levels of distress:** Occasional signs of distress/concern/anxiety/fear/grief/boredom. Able to control feelings in most situations, generally well adjusted/ stable (most of the time/most situations), occasional emotional support/encouragement needed. Frequent and consistent signs of pleasure and enjoyment. Copes well most of the time, uses strategies effectively.

**5 Not inappropriate levels of distress:** Generally well adjusted. Appropriate enjoyment of activities. Stable and able to cope emotionally with most situations, good insight into own limitations.

Impairment	Activity	Participation	Wellbeing/distress
<p><b>3. Moderate/intermittently mild symptom burden</b></p>	<p><b>3. Appropriately initiates activities</b></p>	<p><b>3. Able to recognize and appropriately participate in purposeful and meaningful roles.</b></p>	<p><b>3. Moderate frequent levels of distress</b></p>
<p>Fatigue and periods of nausea</p>	<p>Walking with assistance/supervision limited to indoors.</p>	<p>Participation reduced due to symptoms, social integration reduced due to fatigue and reduced confidence eating foods due to diet change.</p>	<p>Changes impacting on key roles and difficultly adjusting to this.</p>

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Impairment	Activity	Participation	Wellbeing/distress
<p><b>4. Intermittent or mild symptom burden.</b></p>	<p><b>4. Independent in familiar and/or adapted environments</b></p>	<p><b>4. Occasional difficulty</b></p>	<p><b>4. Mild, occasional levels of distress</b></p>
<p>Continues to experience fatigue but strategies provided supports patient's management of the same.</p>	<p>Stairs adapted to increase safety and independence and with mobility aide accesses local community and appointments more independently.</p>	<p>Aware of her new level of normal (including adapting routine around treatment) and adapts accordingly to situations e.g. knows what she is able to eat and enjoys eating out with her friend after appointments.</p>	<p>Treatment demands continue to impact on wellbeing however has an increased understanding of how her symptoms including fatigue impacts on her emotional wellbeing, aware of her needs and adapts accordingly utilising support as needed.</p>



**Wrightington, Wigan and  
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**Thank you**

