

Exploring the utility and relevance of activity analysis teaching materials in a clinical context

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Background - OT programme - Oslo

- Occupational analysis as a fundament for OT.
- EVA (Virksomhetsanalysesystem for ergoterapi) occupation/activity analysis. Based on conceptual models and terminologies.
- Need for updating.
- EVA system is not evaluated for clinical utility.
- Questions about the relevance of teaching to practice.



Background - clinical field

- Need for accessable standard assessment tools and consistent terminology and documentation.
- Some clinicians using the Oslo college occupational analysis system (EVA).



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The project

- Participants
 - Oslo OT program
 - Three hospital trusts
- Aims
 - Explore clinical utility of selected EVA analysis forms.
 - Focus on motor, process and communication skills.
 - Investigate the relevance to and compatibility of teaching materials with clinical practice.



EVA – occupational/activity analysis system

- Teaching tool
 - Analysis of person-occuption-environment system
 - Used in workshops and clinical placement
- Analysis of Occupational forms and observation of Occupational performance



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Method

- Systematic trials using EVA during 2nd year students clinical placements.
- Evaluation
 - Questionaire
 - Evaluation seminar
- Two trials Autumn 2011 and Spring 2012



Preliminary results - questionaire

Questionaire

n= 14 (7 students, 7 OTs)

	Agree		Neutral		Disagree
1. EVA systemet er et nyttig verktøy for observasjon av aktivitetsutførelse	13		1		
2. Det er nyttig å bruke et graderings system for de enkelte ferdigheter på EVA skjemaene	6	8			
3. Det er nyttig å gradere oppsummering av ferdighetene nederst på skjema	4	6	3	1	
Bruk av den modifiserte VAS skalaen er en hensiktsmessig metode for å gradere observasjoner	3	7		3	1
5. Kommentarfeltene for de enkelte ferdighetene på EVA skjemaet er nyttige	11	2	1		
6. Det er nyttig å oppsummere ferdighetskategorier samlet nederst på skjema	6	2	3		
7. Det er nyttig å vurdere motoriske ferdigheter for pasientgruppen ved min arbeidsplass	13	1			
8. Det er nyttig å vurdere prosess-ferdigheter for pasientgruppen ved min arbeidsplass	14				
9. Det er nyttig å vurdere interaksjons- og kommunikasjonsferdigheter ved min arbeidsplass	8	4	1		
10. Det er nyttig å analysere aktivitetsform med trinnanalyseskjemaet	5	2	2	2	
11. Tidsbruk på å fylle ut Eva skjemaer står i forhold til utbyttet	5	5	3	1	
12. Jeg bruker mindre tid på å fylle ut EVA skjemaer nå enn jeg gjorde i starten	8	2	3		
13. Jeg har hatt nytte av å bruke hjelpekortet	10	2	1		1
14. EVA systemet er nyttig som grunnlag for dokumentasjon	14				
15. Mine samarbeidspartnere har gitt uttrykk for at EVA – basert dokumentasjon er nyttig for dem	2	1	9		
16. EVA-basert dokumentasjon øker bevissthet om ergoterapi blant mine samarbeidspartnere	4	2	6	1	
17. Bruk av EVA systemet har bidratt til enhetlig begrepsbruk i dokumentasjon på min arbeidsplass	4	4	1	2	2

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Preliminary analysis - texts

Criteria for judging clinical utility

- Cost
- Time
- Energy and effort
- Portability
- Acceptability

(Fawcett 2007)

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Preliminary analysis:

Clinical utility of selected EVA analysis forms

Cost

- Purchase: user manual and laminated reference card (€20?).
- Training: One or two half day seminars?
- Supplies: no extra costs, used in activity observation situations.



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Preliminary analysis:

Clinical utility of selected EVA analysis forms

Time

- Administration:
 - Informants mostly agree that time use is reasonable.
- Documentation:
 - Observation forms easier and faster to fill out with practice.
 - Report writing is easier and takes no extra time adapted into the existing electronic documentation system.
- Training:
 - Requires some training and practice.



Preliminary analysis:

Clinical utility of selected EVA analysis forms

Energy and Effort

- Ease of learning/aquisition:
 - "Familiar" for students and recently qualified Ots.
 - User manual easily accessable.
 - Generally well defined terms.
- Administration:
 - Easy to integrate into existing practice.
 - Reference cards helpful for structuring observations and documentation.
 - Alternative to more demanding assessments.
 - Some issues in connection with scoring.



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Preliminary analysis:

Clinical utility of selected EVA analysis forms

Portability

- Tools:
 - Requires no special equipment
 - Forms can be filled out during or after observations
 - Reference cards useful
- Context:
 - Flexible, can be used in a wide range of activity observations



Preliminary analysis:

Clinical utility of selected EVA analysis forms

Acceptability

- Fit with OT thinking:
 - Focuses on occupational/activity perspective
 - More consistent terminolgy use.
- Client:
 - No data
- Co-workers and other stakeholders:
 - Early days need time for documentation to filter through the system and become familiar.
 - Some issues with OT terminology



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Discussion

- All informants agree that the selected EVA forms contribute to consistency in terminology and documentation.
- Some indication (anecdotes) that EVA may communicate and promote OTs' occupation/activity focus in multiprofessional contexts. However it is too early to tell.
- The forms would seem to have clinical utility however their reliability and validity needs to be established.
- EVA may lack the rigor of other instruments but has the advantage of breadth of applicability and accessability.
- The system seems be useful in both physical and mental health settings. It will be interesting to see utility of the system in community settings.



Conclusion

- The selected EVA forms and report structure:
 - is usable and easy accessable.
 - Is relevant in clinical contexts.
 - promotes consistant use of terminology and documentation in different clinical settings.
- A basis for for further systematic development and validation of these and other parts of the EVA system.



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