

INTRODUCTION

BACKGROUND

- 1 in 5 adults will experience a mental illness in a given year¹
- Individuals with mental health diagnoses often experience difficulties with daily tasks, particularly self-care¹
- Dysfunction in daily activities is associated with increased hospital admissions, increased healthcare associated costs, increased risk of mortality, and decreased quality of life¹
- Furthermore, limited ability to care for oneself within this population inhibits participation in the community due to reduced self-confidence¹



SIGNIFICANCE

- UPMC Western Behavioral Health (WBH) Outpatient Rehabilitation serves community-dwelling adults with psychiatric diagnoses. They offer 1:1 counseling services and group-based therapy
- Despite receiving services, many still report a sense of helplessness in their ability to complete self-care tasks independently²
- Staff at WBH Outpatient Rehabilitation have growing concerns that many of their clients experience difficulties related to self-care

OBJECTIVES

1. Select appropriate self-care assessment tool(s) for a psychiatric population and conduct assessment(s) on clients at WBH Outpatient Rehabilitation
2. Analyze data from assessments to recommend assessment tool(s) based on outcome(s)

METHODS

SELECTION

1. Conduct literature review to determine appropriate performance-based self-care assessment tools
2. Narrow results to 2-3 appropriate assessments based on validity, reliability, content, and feasibility

SELECTED ASSESSMENTS

1. Performance Assessment of Self-Care Skills (PASS)
2. Kohlman Evaluation of Living Skills (KELS)
3. Occupational Circumstances Assessment Interview and Rating Scale (OCAIRS): self-report assessment added later to accommodate clients in the virtual setting

IMPLEMENTATION

1. Conduct chosen self-care assessments on clients served at WBH Outpatient Rehabilitation to observe the prevalence of difficulty experienced in self-care within this population

ANALYSIS

1. Analyze data from assessments using predetermined criteria including timing, measurement sensitivity, cost, etc.
1. Select an assessment to inform rehabilitation program development and improve the continuum of care

RESULTS

KELS and PASS Outcomes (n=8)

Assessment	KELS	PASS
Average Independence Score*	69%	86%
Range of Independence Scores	44% - 91%	66% - 97%
Average Adequacy Score	N/A	77%
Range of Adequacy Scores [^]	N/A	55% - 86%
Average Administration Time	21 minutes	26 minutes
Range of Administration Times	15 - 40 minutes	15 - 55 minutes

* Determined by averaging independence scores across all domains tested

[^] Determined by averaging adequacy scores across all domain tested

Clients included in this analysis completed both the KELS and the PASS

KELS Domain Results (n=12)

Domain	Money Management	Safety & Health	Self-Care	Community/ Phone	Employment/ Leisure
Average Independence Score*	25%	61%	71%	86%	90%
Completed Assessment With No Errors [^]	3/12	4/12	6/12	9/12	10/12

* Determined by averaging overall independence score for all participants

[^] # of individuals who completed domain with no errors/ # of individuals who attempted the domain

PASS Domain Results (n=8)

Domain	Shopping	Medication Management	Oral Hygiene	Auditory Info	Visual Info	Telephone Use
Average Independence Score*	75%	81%	89%	89%	91%	96%
Completed Assessment With No Errors [^]	1/8	0/8	3/6	5/8	5/8	2/3
Average Adequacy Score	62%	58%	83%	79%	91%	88%

* Determined by averaging overall independence score for all participants

[^] # of individuals who completed assessment with no errors/ # of individuals who attempted the domain

Oral Hygiene: 2 participants opted out of completing oral hygiene due to COVID-19 precautions

Telephone Use: 5 participants did not own a cell-phone thus this task was omitted

DISCUSSION

- The average independence score for the KELS was lower than the average independence score for the PASS
 - The PASS provided more opportunities for success due to the graded prompting scale
- Deficits were observed and measured across all domains assessed
 - Deficits were determined by inability to complete full assessment with no errors thus illustrating some degree of dependence
- The PASS average adequacy scores were lower than its average independence scores
 - This demonstrated participants' ability to complete task, but often lacking quality and/or thoroughness
- The OCAIRS self-report assessment was administered virtually
 - An additional assessment that accounted for individuals receiving services virtually
 - 100% (n=3) of individuals who completed the OCAIRS indicated a need for OT

CONCLUSION

RECOMMENDATIONS

- Data indicates a need for OT at this site. We recommend the addition of an OT to the WBH Outpatient Rehabilitation team to address the identified deficits using a consultative model
- Implement a performance-based assessment to evaluate independence with ADLs/IADLs
- For an immediate recommendation, implement the KELS with current staffing
- Implement the PASS with OT presence, as it requires increased clinical reasoning
- Virtually implement the OCAIRS with OT presence, as results indicate the direct need for OT services

LIMITATIONS

- Sample size was small due to:
 - COVID-19, as there were a limited number of clients receiving services in-person
 - Attrition, as clients declined to participate in a follow-up assessment or failed to arrive for appointments

IMPLICATIONS FOR PRACTICE

- The implementation of a performance-based self-care assessment is necessary in outpatient psychiatric settings. Functional assessments more accurately evaluate independence and assist in the development and guidance of individual and group treatment
- At WBH Outpatient Rehabilitation, there is a clear need to address deficits across all domains of occupations assessed. These deficits can be addressed at the individual and/or group level

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REFERENCES

- ¹ Birken, M., Wong, H. T., McPherson, P., & Killaspy, H. (2021). A systematic review of the published literature on interventions to improve personal self-care for people with severe mental health problems. *British Journal of Occupational Therapy*, 84(4), 200-211. <https://doi.org/10.1177/0308022620979467>
- ² Schmitte, T., Flanagan, E., Bedregal, L., Ridgway, P., Sells, D., Styron, T., & Davidson, L. (2009). Self-efficacy and self-care: Missing ingredients in health and healthcare among adults with serious mental illnesses. *Psychiatric Quarterly*, 80, 1-8. <https://doi.org/10.1007/s1126-008-9088-9>