Occupational Therapists Self-Perceived Role, Knowledge, and Skills for Enabling Older Adults with Delirium

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Background
Delirium is an acute change in cognitive status with a fluctuating course, which is characterised by disturbances in attention, orientation, perception and consciousness [1,2]. It is frequently experienced by older adults, with a prevalence of over 50% post surgery, over 20% in the community and over 12% in rehabilitation [3,4]. Current literature has focussed on healthcare staff knowledge about delirium, delirium assessment, and delirium intervention. However, there has been limited research into the role of occupational therapy with older people experiencing delirium.

Aim
The aim of this study was to describe Australian occupational therapist’s perceptions of role, knowledge, and skills in enabling older adults (65+) with delirium, to participate in meaningful activities.

Method
A mixed methods study design was implemented. A 52-question bespoke online survey was developed, consisting of five sections. Multiple-choice questions yielded quantitative data with some questions followed by short answer qualitative questions. Descriptive analysis was undertaken with quantitative data and content analysis was applied to qualitative data. Analyses initially occurred separately for each type of data, but both were then compared to identify areas of agreement and discrepancy.

Findings

- While the majority of participants did not use assessment tools recommended in guidelines for delirium, 71% agreed that occupational therapy assessment was important.
- The most commonly used assessments were Functional Assessments (78.5%), Clock Drawing test (48.1%) and Orientation Logs (38.0%).
- Frequently reported interventions included Environmental Modifications (74.7%), Reality Orientation strategies (65.8%) and Activities of Daily Living Retraining (62.0%).
- Occupational therapists work most frequently with medical staff (94.9%), nursing (96.2%) and physiotherapy colleagues (69.6%) when enabling older people with delirium. Other disciplines were thought to have some knowledge (45.6%) about the role of occupational therapy, but few participants (16.5%) though this knowledge was satisfactory.
- Participants had adequate general knowledge about delirium but were less knowledgeable about delirium risk factors, which is consistent with previous nursing research [5].
- Qualitative data demonstrated that participants identified further professional development needs around general delirium knowledge, as well as the knowledge and skills specific to the occupational therapy role in delirium care.

Recommendations
Occupational therapists should implement recommendations provided in clinical guidelines for delirium assessments and interventions, and the reasons why this is not occurring requires further research. Professional development opportunities should target both general and specific delirium knowledge and skills for occupational therapists to increase relevance and translation into practice. This study provides new and valuable information in regard to occupational therapist’s role, knowledge and skills in enabling older adults with delirium.

References