

Use of chart for interdisciplinary communication- based on COPM

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Introduction:

Occupational therapists at Slagelse Sygehus (hospital in Denmark) participate in rehabilitation of patients with Chronic Obstructive Pulmonary Disease (COPD).

In the rehabilitation of persons with COPD the role of the occupational therapist is to identify problems in the patient's everyday activities and teach appropriate methods of working and use of aid equipment. Canadian Occupational Performance Measure(COPM), which is a validated examination and measuring tool, is used to identify, prioritize and assess the patient's perception of performance and satisfaction on a scale from 1 to 10.

We found it difficult to communicate the results of the COPM in the multidisciplinary forum. Therefore we developed a chart which gives a clear view of the COPM evaluation to other professionals primarily in the science field.

Objectives:

The objective of a COPM chart as interdisciplinary communication tool was - and is - to improve the interdisciplinary understanding of the occupational therapeutic results.

Description:

A new patient is interviewed according to COPM. Evaluation takes place after 8 weeks and again 6 months later. In the evaluation the patient assesses the activity problems identified in the beginning. Based on the COPM results a chart is made to show the development of the performance and satisfaction of the 5 most important activity problems prioritized by the patient and assessed on a scale from 1 to 10. At the evaluation meeting in the multidisciplinary forum the occupational therapist uses the chart to present the patient's perception of performance and satisfaction.

Results:

Using the chart for interdisciplinary communication enables the occupational therapist thanks to documentation in figures to succeed in communicating the development of the patient's subjective perception of performance and satisfaction to other professionals.

Conclusion:

We find the chart a good tool for interdisciplinary communication. Qualitative aspects become quantitative and more intelligible and measurable for professionals working mainly in the quantitative field.

We believe that other occupational therapists may benefit from using this tool if adjusted to their specific tasks of interdisciplinary communication.