Independence for the activities of daily life during inpatient care: The use Assistive Technology of low cost.

Juliana Delsim^{1,3}, Valéria Elui², Carla Santana², Julio Moriguiti², Daniel Dahdah³

¹Postgraduate Interunits Program in Bioengineering EESC/FMRP/IQSC-USP, São Carlos/SP, Brazil,

²Medical Faculty of Ribeirão Preto / USP, Ribeirão Preto/SP, Brazil,

³Hospital Estadual de Ribeirão Preto (HERP), Ribeirão Preto/SP, Brazil

Introduction: The action of Occupational Therapy in general hospitals aims the integral assistance to the hospitalized individual. Assistive Technology (AT) devices improve individual's functioning, independence and participation in education, employment and community activities. In general hospitals can be found patients with disabilities that limit the realization of his activities of daily life (ADL). To provide independence of those patients the Occupational Therapist use AT devices. Objectives: describe the use of low cost assistive technology in general hospital of average complexity. Description: The "Hospital Estadual de Ribeirão Preto" SP/Brasil (HERP) attend exclusively the public health system. Beyond the pathologies which cause inpatient care (cardiovascular diseases and airway infections) the patients present pathologies which unlink deficits that justify the use of AT devices such as diabetes, hypertension, rheumatoid arthritis, stroke sequels or motor-sensor and cognitive losses related to aging. Occupational Therapy Services develop the Program of Improvement of Functional Capacity which is destined to such patients. On this program the Occupational Therapist use low cost AT making adaptations, training use and guide for keepers and health team. The most confectioned adaptations are: feeding aids (built-up utensil's handles, handstrap with utensil pouch, Food Guard, angled utensil's and nonslip material) and hygiene aids (long scrub sponge, and build-up comb and toothbrush handles). It is also done the adequacy of the furniture display and the position of the bed in conjunct with the health team. Results: The use of low cost AT allows autonomy and independence to the hospitalized individual in doing his ADL, increases his self-steem and optimizes the health team work, once its not necessary to help the patient in his ADL anymore. Conclusion: The AT is a resource that can be used in different fields of Occupational Therapy actuation, since it is appropriate to the context in which the patient is in. Contribution to Practice: Value the AT used as an occupational therapeutic resource at hospitals making it suitable to each patient's socioeconomic condition.