

Evaluation of a Population-based Rehabilitation Model within a Primary Care Setting

Julie Richardson, Lori Letts, David Chan, Sarah Wojkowski, Ainsley Moore, Lisa McCarthy, Alexis Officer, Sarah Kinzie, Doug Oliver, David Price
McMaster University, Ontario, Canada

Introduction: Chronic disease is the leading cause of death (60%) and disability (43%) world wide. Half of the Canadians with multiple chronic conditions report moderate to severe disability in daily living. Optimizing and preserving function is a central goal for all persons with chronic illness. This presentation will describe how a Population-based model was used to deliver rehabilitation services within a Family Health Team and to monitor physical functioning by increasing self-management skills and capacity by patients and care providers.

Objectives The purpose of this study was to determine whether:

- (1) A multi-component intervention increased patient self-management and capacity building within a Family Health Team and increased the collaborative approach to Chronic Disease Management by the patient care provider. (2) Patients who received the multi-component intervention showed less functional decline than case matched controls.

Methods: A before-after design with case matched controls (n=119) was used by physiotherapists and occupational therapists to deliver this intervention to patients ≥ 44 years with at least one chronic disease. The intervention included functional assessments, self management planning, a rehabilitation self management workshop and on-line monitoring of function as well as capacity building within the team. **Results:** There were no baseline differences between the groups. Thirty seven percent of patients were in a preclinical state of disability at baseline and 30% had established functional difficulties. There was a significant difference between the groups at the end of the study on the Rapid Assessment of Physical Activity, mean difference 1.04, $t=12.95$, $p=0.0005$ as well as significant differences in strength and self efficacy for chronic disease. There were no group differences in the physical functioning index. Assessment of the capacity building within the team will be discussed.

Conclusion: This approach aimed at increasing self management of physical functioning for persons with chronic disease has demonstrated feasibility as a method of delivering rehabilitation services within primary care.

Contribution to the practice of occupational therapy: This project provides evidence about the contribution occupational therapy can make to address the health and rehabilitation needs of persons with chronic disease in primary health care.