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Client-Centered Practice for Neurological Clients in Domiciliary

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Introduction: In planning and providing treatment to clients with neurological conditions in the community, domiciliary occupational therapists (DOT) should consider the unique needs and abilities of individual clients, as well as the effects of environmental and social factors on their occupational performance. A pilot trial of evaluating a client-centered approach, guided by the use of the Canadian Occupational Performance Measure (COPM), was attempted. The COPM is an individualized, client-centered measure designed for use by occupational therapists for detecting changes in a client's perception of his or her occupational performance over time. The development of the COPM was founded on the philosophy of the Occupational Performance Model that emphasizes a client-centered practice. The client-centered approach embraces a respect for, and a partnership with, clients in attending therapeutic programs. It recognizes the autonomy of individuals and their need for choices. It has brought about the benefits of a clienttherapist collaboration. Method and Results: A qualitative research design via semi-structured interviews for evaluating the client's level of satisfaction towards the client-centered approach of domiciliary occupational therapy was conducted. Four subjects with neurological impairments including spinal cord injury, Parkinson's Disease and stroke participated in the study. The COPM was employed to assess the subject's self-perception of his or her own performance in self-care, productivity and leisure domains. The priority of the identified problem areas was determined by the subjects after consulting their therapists. Therapeutic activities were planned in accordance with the problems as the subjects defined. Domiciliary occupational therapy was delivered once per week. After a period of three months, the subjects' level of satisfaction with the COPM approach in comparison with the traditional medical approach that they previously received was made. A questionnaire was administered to each subject for triangulation. All the interviews were videotaped for analysis. It was found that the client-centered therapy using the COPM allowed therapists to focus intervention on the most important occupational performance goals from the perspective of the clients. It also provides an appropriate method for documenting the qualitative aspects of progress that are important for evaluating the service of DOT. Conclusion: The adoption of the client-centered approach in DOT, guided by the use of COPM, is an efficient way to streamline therapeutic decisions for ensuring that the most important occupational goals are quickly and efficiency addressed.



17/F, 21 Pak Fuk Road North Point, HK 香港北角百福道 21 號 17 樓

PHONE 電話 FAX 傳真 EMAIL 電郵 WEB SITE 網此 (852) 2527 8978 (852) 2866 3727 ho@sahk1963.org.hk www.sahk1963.org.hk