

Decision-making & Evidence-based Practice

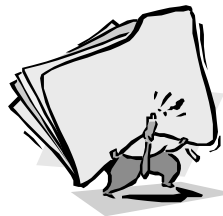
What is the Connection



Decisions





Evidence-based Practice



Decisions we make

- Who needs intervention?
- Why do they need intervention?
- What intervention do they need?
- When should they receive intervention?
- Where should they receive intervention?
- How long should they receive intervention?
- What are the outcomes of intervention?
- When will they not receive intervention?

How we make decisions

- Traditional  Paternalistic
 - Impairment driven
 - Problem-orientated
 - Hierarchical
- Contemporary  Shared
 - Outcome-driven
 - Interest-based
 - Strength-based
 - Collaborative

Models of decision-making

- Structured approach for solving a problem or promoting an outcome
- Graphically shows all possible solutions and steps
- Reasoning pathway
 - HOAC* *Top-Down*
 - Guide to PT* *Guide to OT*
 - Logic*

Why use a model?

- Organize the situation
- Indicate linkages
- Identify strengths and weaknesses
- Identify options
- Avoids prescriptive problem solving

Influencing factors

<i>Child & Family</i>	<i>Provider</i>	<i>System</i>
Needs	Knowledge	Policy
Outcomes	Research	Funding
Concerns	Experience	Environment
Priorities	Judgment	
Culture	Values	
Values		

How do we account for these factors within the models

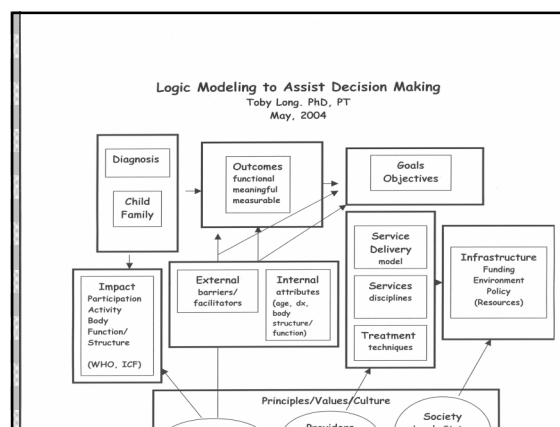


- HOAC
- Top-down
- Guide to PT
- Guide to OT
- Logic

	N	O	C	P	C	K	E	J	P	F	E	V
HOAC				
PT				
OT	
Top-d	

Logic Model

- Theory
- Assumptions
- Participatory
- Functional
- Qualitative
- Quantitative



Keys to Quality

- Client is described
- Services are quantified
- Intensity/duration of intervention is individualized
- Outcomes are meaningful
- Goals/objectives are measurable
- Impacts are reasonable

Clear connections - Action oriented

<i>Resources</i>	<i>Outputs, activities, inputs</i>	<i>Goals, objectives</i>	<i>Outcomes</i>	<i>Impact</i>
Needs	To do	To reach	To change	To become
Time Space Funds	Service delivery Services Strategies, techniques	Measurable Short term, long term	Team based Functional Meaningful	Long term consequence
<i>Caseload</i>	<i>TE, AT, consult, monitor, direct</i>	<i>Specific to barriers, facilitators, impairments</i>	<i>Functional limitations Client expectations</i>	<i>Participation</i>

Requires

Reflection

- Awareness
 - Self, Field, Environment
- Organization
 - Logical, Systematic
- Individualization
 - Client, Family Centered, Participatory
- Documentation
 - Formative, Summative

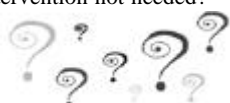
Evidence-based Practice

- “...conscientious, explicit, & judicious use of current best evidence in making decisions about the care of the individual.
- integrating clinical expertise and external evidence from research”

Sackett, et al, 1996

What evidence do we want/need?

- Does intervention work?
- How to determine if intervention works?
- Why does the intervention work?
- What should be the duration/intensity of intervention?
- When is intervention not needed?



What kind of evidence?

- Quantitative research
- Qualitative research
- Consensus statements/papers
- Guides, pathways, protocols
- Models
 - Guide to PT
 - Guide to OT
 - WHO classification scheme

EBP



- A reflection of a therapists skill to incorporate best knowledge of the field, reasoning, and decision-making

Gaps: From evidence to practice

- Time Lag
 - How long did it take for British ships to incorporate the use of citrus to prevent Scurvy?*
- Why
 - Knowledge
 - Comprehension
 - Beliefs/values
 - Application
 - Permission

Steps of EBP

- Practice
 - Observation of current or promoted practice
- Knowledge generation
 - Research, systematic reviews, guidelines, pathways, protocols
- Evaluation
 - Individual, peer, research
- Implementation
 - Skill development, resources
- Analysis
 - Reflection and documentation on implementation
- Action
 - Use of data to inform further action

Implications and Challenges

- Defining EBP
 - Developing the evidence
 - Appraising evidence
 - Using evidence
 - Sharing evidence
 - Participatory implementation
 - Building evidence: Research, documentation
- The clinician's responsibility*

Conclusion

The clinician's responsibility

- To make decisions on the best evidence available
- Incorporate into decisions evidence from the field, from families, from system
- Insure decisions are logical, individualized, collaborative

The End and Happy Spring!

