

Postdischarge Telehealth Support for Caregivers Through a Coaching Approach: A Case Study

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BACKGROUND: Caregivers derive meaning and purpose through caregiving but it can also bring upon mental health issues, physical health challenges, and reduced quality of life (Little et al., 2018). Occupational therapists can support caregivers early-on post-discharge to avoid the negative sequelae, thereby benefiting both carepartners. The Coaching-in-Context approach presents great promise since it can be delivered remotely after discharge, but has yet to be systematically studied with caregivers of persons with stroke. Coaching-in-Context is a process that uses skillful, constructive conversation that involves client-centeredness, coach presence, active listening, and powerful and reflective questioning to create awareness, action plans and solutions to challenges that interfere with participating in required and desired everyday activities (Cadematori et al., 2021).

PURPOSE: This feasibility study aimed to examine the effects of Coaching-in-Context on occupational performance, self-efficacy, and quality of life for the caregiver and the effects on quality of life, stroke impact, and re-admissions for the person with stroke.

DESIGN: The case study reported here is part of a pilot randomized controlled trial.

METHOD: The person with stroke was a 56-year old male with mild stroke (Stroke Impact Scale, SIS = 81), recently discharged to home from acute care hospital, and received care from his 51-year old wife who worked part-time. Both individuals were African American. The wife experienced mild/moderate burden of caregiving (Zarit Burden Scale = 31), and occasional migraines. The wife participated in 8 coaching sessions over the phone, 45-60 minutes duration, one session/week with an occupational therapist certified in coaching. The outcomes were measured at pretest, posttest, and 4-week follow-up. The caregiver set goals with the coach using the Canadian Occupational Performance Measure (COPM). A blinded assessor measured quality of life (WHO-BREF-QOL), caregiver self-efficacy (Revised Caregiver Self-efficacy Scale, RCSS), and SIS for the person with stroke. At baseline, the blinded rater also obtained target COPM scores for benchmarks of success from the client. Re-admission information and caregiver feedback about the acceptability of coaching were also obtained. Fidelity of coaching was assessed by a master coach using a fidelity assessment scale for adherence to the principles of coaching. Data was analyzed descriptively for the case study. The study was funded by the American Occupational Therapy Foundation Intervention Research Grant.

RESULTS: The caregiver attended all sessions and worked towards COPM goals of time for self and balancing work and home. Coaching was delivered with high fidelity to coaching principles for 7 out of 8 sessions. For each COPM activity (N = 3), performance improved by 4 points (range 0-9) and satisfaction by 4 points (range 3-6) at post-test and follow-up (4 points, range 0-9). COPM improvements exceeded the caregiver's projected benchmark and minimal clinical important difference of 2 points. The caregiver's quality of life improved by 4 points at follow-up; and self-efficacy in obtaining respite at home by 54 points at posttest and 62 points at follow-up. The caregiver indicated a high acceptance of coaching (10/10). The person with stroke experienced no readmissions and showed improved quality of life (4 points), mood (28 points), and participation (19 points).

CONCLUSION: The findings from this case study indicate that coaching was feasible and acceptable to the caregiver and had a positive effect on the both carepartners.

References

- Cadematori, C., Alpajora, B., Sivori, T., Betz, S., Gerhardt, N., Dunn, W., Mulcahey, M.J. (2021) Preliminary Examination of Coaching in Context with Clients with Spinal Cord Injury. *Spinal Cord Cases and Series*, 7(27); 1-10.
- Little, L. M., Pope, E., Wallisch, A., Dunn, W. (2018) Occupation-based Coaching by Means of Telehealth for Families of Young Children with Autism Spectrum Disorder. *American Journal of Occupational Therapy*, 72, 7202205020.