


How to create interdisciplinary home exercise programs/patient resources: A practical How-to Guide

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Course Objectives

- Learn Best Practices for writing Home Exercise Programs
- Be able to identify Exercise Programs that Demonstrate Best Practices
- Break Out Session – Create Sample Home Exercise Program.




Best Practices

- Language/Cognitive Considerations
- Visual Considerations
- Physical/Environmental Considerations
- Format/Media Delivery
- Compliance/Carry Over
- Person Centered Care
- Functional Applications/Relevance




Language/Cognitive Considerations

- Grade Level/Reading Comprehension
- Culture
- Format
 - Narrative vs. Bullet points
- Ability to Recall Information
- Ability to Sequence Information
- Number of Steps that is realistic for patient to complete




Visual Considerations

- Font
- Color of Background
- Neglect




Physical/Environmental Considerations

- Position
- Ambulation
- Balance/Fall Risk
- Access
- Environment
 - Distractions
 - Obstacles
 - Activity level in the environment according to time of day
 - Activities in or around the home that could be barriers to carry over
 - When and where are the exercises supposed to occur.




Format/Media Delivery

- PAPER/Written
- Video
- Audio
- Phone Ap




Compliance

- Non compliance vs Poor Set up
 - Assess did you follow best practices and create client centered program
 - Exercise is relevant to the patient's life
 - Consult other disciplines on the team (including family/support system) to address following considerations:
 - Cognitive
 - Task management: i.e. do they have a reminder system or calendar that can be utilized
 - Steps required
 - sequencing steps of the exercise
 - Visual
 - Font, Colors vs. black and white, pictures, lighting
 - Attention/Concentration factors



Compliance cont.

- Non compliance vs Poor Set up
 - Reading
 - Reading level, structure of narrative, cultural considerations
 - balance of narrative vs. graphic/picture descriptions
 - Ability to scan and locate information, visuo spatial abilities.
 - Abstract language vs. concrete language
 - Environmental
 - Distractions: i.e. dogs or young children
 - Lack of resources (i.e. no pans, no chair)
 - Behavioral



Person Centered Care

- Make it Meaningful!
- Addressing Internal Motivators
 - Does it Relate to
 - what they enjoy doing (recreational/leisure interests)
 - want to be doing (vocational goals)
 - Where they want to spend their time (i.e. building family relationships)
 - Location (i.e. the lake fishing, outside in the garden, in their "she-shed")
- Consider Cultural Perspectives
- Assessing Effective Environments



Function/Relevance

- Infuse Person Centered Care into functional Activities
 - Working in the Garden
 - PT: Provide them with pictures of steps to kneel. They are to plant X # of plants, which will replace 10 reps of a kneel in a more clinical setting.
 - OT: Client is to pick up plants and tools and put them in a basket and take them out to the garden, which will replace stacking cones and carrying them from one counter to the other.
 - SLP: Client names identifies all the favorite vegetables they want to plant in categories and makes a list of the seeds they should purchase to plant the garden. This replaces a clinical worksheet working on categorization and naming.



Function/Relevance


- Ask yourself: "Does your patient see the correlation between what you are asking the patient to do and their discharge goals?"

"Give Life, Not Exercise!" ~ Berta Bobath



Team Collaboration

- When there isn't collaboration
 - HEP's focus on isolated skills and could require the patient to perform non-discipline specific tasks that not matched to their ability level
 - PT
 - Provides the posture, pain tolerance, gross motor requirements
 - SLP
 - Provides the language, memory , attention, sequencing requirements
 - OT
 - Provides the posture, fine motor, vision adaptive equipment needs requirements, organization
 - Counseling
 - Provides emotional cues , environmental stimuli, behavior management, family relationship attributes




Break Out Sessions

Create Home Exercise Program



- We should never assume that correlations can be made that facilitate carry Over
- Generalization is the “key to the kingdom”
- Never blame your patients for living in their reality
 - SHOW UP
 - Implement Best Practices
- And

Change Peoples Lives!!!



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