

Collaborations That Work

Using Evidence for Policy

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Evidence-based practice (EBP) is useful not just for clinical practice. Increasingly, evidence supports important policy and regulatory recommendations and decisions. Most recently, AOTA policy staff collaborated with AOTA's EBP Project staff and an outside consultant to highlight high-quality evidence that supported a comment letter related to health care reform implementation.

The starting point was the new health care reform legislation that requires everyone in the United States to have health insurance beginning in 2014. To facilitate this and help improve insurance access, choice, cost, and coverage, state-run health insurance purchasing exchanges are to be established, with insurance plans participating in these exchanges required to cover, at a minimum, a package of "essential health benefits." Although *habilitation* and *rehabilitation* are included on the government's list of 10 essential health benefits, the Department of Health and Human Services (HHS) is responsible for defining these terms. In its *Essential Health Benefits Bulletin* released December 16, 2011, the agency outlined its intended regulatory approach to the task and requested comment on how to define *habilitative services*—specifically, the advantages and disadvantages of including "maintenance of function" in the definition.¹

The bulletin made clear that evidence will need to be used from this point forward to demonstrate to HHS (as well as states and insurers) how occupational therapy is effective in regard to issues of maintenance, particularly for people with developmental or other disabilities. In addition, it will be necessary to show how

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occupational therapy is effective in habilitation, which is defined as developing new skills or abilities rather than regaining lost skills or abilities.

Examples of the type of evidence sought include research on the impact of ongoing occupational therapy for children with cerebral palsy or Down syndrome, and literature describing occupational therapy's role in transition for children and young adults with disabilities.

In formulating their strategy for developing the comment letter, AOTA policy and EBP Project staff discussed the proper parameters in defining *maintenance* and *habilitation* and the importance of making sure that evidence was gathered for all relevant populations. For children with physical and developmental disabilities, it was important to consider transitions during the school years as well as the transitions from school to adulthood. Although a child or young adult may be able to participate in a particular school or at home, an individual's changing needs will benefit from the assistance provided by occupational therapy during periods of transition to new environments. During adult-

hood, these same adaptations to new environments take place when an individual is aging with a disability. These changes may include the need for occupational therapy services to promote safety with existing equipment, update equipment if needed, and prevent secondary disabilities that can occur over time. In addition, understanding the evidence of maintenance is critical to determining how long the effects of an intervention should be expected to last, and to understand when appropriate follow-up may be needed to maintain participation over an extended period. Lastly, occupational therapy practitioners need to understand and build evidence to support the best ways for community-dwelling older adults to maintain an active, healthy lifestyle as they age.

Separate from the policy implications, the studies on interventions provided during periods that might be traditionally considered "maintenance" provide valuable information for those in clinical practice. For example, a Level I randomized controlled design examined the impact of assistive technology (AT) on individuals aging

with a disability (e.g., polio, rheumatoid arthritis, cerebral palsy, stroke, spinal cord injury).² Those in the intervention group received recommended AT and home modifications that were paid either in full or in part as a component of the research study. The control group had access to the standard health care available in the community. The results indicated that there was a significant “group by time” interaction for scores of members of the intervention group on the Functional Independence Measure,³ suggesting that they had a slower decline in function over 2 years as compared to the control group. In addition, those in the treatment group were more likely to use the AT to maintain independence rather than using personal assistance. Another Level I randomized controlled trial compared active wheelchair checks by an occupational therapist to user- and caregiver-driven checks for adults using manual wheelchairs.⁴ After 1 year, the number of individuals who were accident-free was significantly lower in the intervention group (who received occupational therapy checks) compared with the control group.

The results of the searches show that valuable and respected evidence exists to support occupational therapy interventions in habilitation and maintenance function; however, they also highlight the need for more research in these areas. Occupational therapy practitioners provide high-quality client-centered interventions to children and adults throughout the life span that enable them to continue to participate in multiple environments despite changes that may take place internally and externally. The results of research in the areas of transition and maintenance periods are crucial to this aspect of occupational therapy practice.

The impact of the comment letter can't be determined yet given the agency's planned subregulatory approach to putting this legislation into effect, but weighing in with our comments is our best shot to impact the final EHB package. To view the full text of the comment letter, produced through the collaborative efforts of AOTA policy and EBP Project staff, and to follow further developments on this and other policy issues, go to www.aota.org/news/advocacynews. ■

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