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## Inpatient Occupational Therapy: Decision Guide for COVID-19

**In the rapidly changing health care landscape, the ability to evaluate, plan, and adapt is vital; occupational therapy practitioners have unique skills to address this challenge.**

- The following checklist can assist in the development of a facility-specific algorithm and work plan during the COVID-19 pandemic, and aid in clinical decision-making.
- Occupational therapy practitioners and rehabilitation managers should work closely with facility management and the infection control department to develop a plan and maintain continuous monitoring to address emerging factors and guidelines.

### Staffing Considerations

- Determine if practitioners are prepared to provide services for increased patient acuity
  - Provide education & training for safe PPE utilization (in collaboration with facility and CDC guidelines)
  - Implement cross-training programs for anticipated needs (e.g., ICU, subacute, cardiopulmonary disease, general inpatient hospital care)
    - Develop a list of clinical and site-specific skills competencies
  - Provide education on possible clinical presentations of COVID-19 and related needs
- Determine if a COVID-19-specific rehabilitation team can be implemented in order to minimize exposure and preserve PPE resources
  - Set guidelines for how the team will be assembled (e.g., volunteer, specialty area)
- For all rehabilitation staff, implement measures to support remote work in order to minimize the risk of exposure
  - Consider block scheduling and/or staff rotations
  - Consider client-related tasks that can be completed at home (e.g., documentation, development of client and staff educational materials, caregiver training, telehealth services)
  - Consider equipment or systems that need to be in place to support remote work (e.g., access to remote documentation system, web conferencing)
- Implement support measures to prevent staff burnout and feelings of isolation
  - Adjust schedules, allow time off, and promote social supports
  - Share external support resources (e.g., employee assistance program, mindfulness/relaxation app support)

### Patient Care Considerations

- Establish a system for implementing care for PUI, COVID-positive, and COVID-negative patients, including clinical decision-making guidelines about the necessity of care
  - Develop a screening process for determining if there is an urgent need for therapy
  - Develop a site-specific timeline for PUI test results and care team plans for patient discharge

*Note:* CDC = Centers for Disease Control and Prevention; CMS = Centers for Medicare & Medicaid Services; ICU = intensive care unit; OSHA = Occupational Safety and Health Administration; PPE = personal protective equipment (e.g., gloves, gowns, face shields); PUI = persons under investigation (status unknown for COVID +/-)

- Establish a system for patient prioritization (may be a different prioritization than pre-pandemic) considering the following:
  - Decreasing the length of hospitalization for COVID-negative patients, in order to minimize exposure
  - Increasing the availability of hospital space for acute need
  - Utilizing clinical decision making and multi-disciplinary collaboration in prioritization
- For COVID-negative patients, consider the following during care planning:
  - Anticipated discharge disposition and needs (e.g., equipment, caregiver training)
    - Educational or reference materials (e.g., handouts, recordings of caregiver education)
  - Staff availability and patient tolerance for increased frequency and intensity of intervention

## Staying Safe (Personal and Patient Safety)

- Utilize methods of remote service provision when appropriate
  - Develop facility/department protocol to ensure patient confidentiality and compliance with regulations
- Provide staff education on mechanism of transmission, clinical scenarios with highest potential for exposure, and best practices for preventing transmission
- Standardize use of PPE and infection control procedures, as indicated in the guidelines for CMS, CDC, and facility infection control department
  - Utilize the [OSHA standards](#), [strategies to optimize PPE](#), and [control and prevention guidance](#)
  - Post written guidelines by PPE stations for reference
  - Implement a peer check system for correctly donning/doffing PPE
- Develop a system to regularly update staff on the latest guidelines for [health care professionals](#)

## Ethical Considerations

- Utilize AOTA's Code of Ethics when considering:
  - Facility policies and procedures relating to provision of occupational therapy
  - Clinical decision making
- Learn about occupational therapy's role in responding to the novel coronavirus and COVID-19
  - Review the AOTA recorded webinar (free to members): [Occupational Therapy in Hospitals & Inpatient Care: Responding to a Pandemic](#)

## Resource

Esbrook, C., Jordan, K., Robinson, M., and Wilcox, J. (2020). *Occupational therapy in hospitals & inpatient care: Responding to a pandemic* [Online CE]. Retrieved from [https://myaota.aota.org/shop\\_aota/product/OL8102](https://myaota.aota.org/shop_aota/product/OL8102)