

- If you are viewing this course as a recorded course after the live webinar, you can use the scroll bar at the bottom of the player window to pause and navigate the course.
- This handout is for reference only. Non-essential images have been removed for your convenience. Any links included in the handout are current at the time of the live webinar, but are subject to change and may not be current at a later date.

© 2018 continued® No part of the materials available through the continued.com site may be copied, photocopied, reproduced, translated or reduced to any electronic medium or machine-readable form, in whole or in part, without prior written consent of continued.com, LLC. Any other reproduction in any form without such written permission is prohibited. All materials contained on this site are protected by United States copyright law and may not be reproduced, distributed, transmitted, displayed, published or broadcast without the prior written permission of continued.com, LLC. Users must not access or use for any commercial purposes any part of the site or any services or materials available through the site.

Technical issues with the Recording?

- Clear browser cache using [these instructions](#)
- Switch to another browser
- Use a hardwired Internet connection
- Restart your computer/device

Still having issues?

- Call 866-782-9924 (M-F, 8 AM-8 PM ET)
- Email customerservice@OccupationalTherapy.com

CONTINUED

Tools to Promote Healthy Eating Patterns in OT Clients

Gina Ord, MS, OTR/L
Yanet Bravo, BS, OTS

1

CONTINUED

Learner Outcomes

- Identify how nutrition is addressed in the OT Practice Framework for occupations and client factors.
- Describe the Dynamic HEALT²H Model to address nutrition goals in an adult setting.
- List evidence-based nutrition resources to OT practice.

2

CONTINUED

CONTINUED

Health, Wellness and OT

- In 2008, AJOT published article titled *Occupational Therapy Services in the Promotion of Health and the Prevention of Disease and Disability*
 - Secondary Prevention (prevention after disease diagnosis): “education and training regarding eating habits, activity levels and prevention of secondary disability subsequent to obesity.”

Scaffa, et al., 2008

3

CONTINUED

Health, Wellness and OT

February 2018 International Journal of Environmental Research and Public Health—*Preparing Physical and Occupational Therapists to Be Health Promotion Practitioners: A Call for Action*

- Entry level OT practitioners are equipped to address disease prevention as it is part of their school content, although disease-prevention is inadequately addressed in clinical practice.
- Mentions nutrition optimization as part of health-focused care.

Morris & Jenkins, 2018

4

CONTINUED

OT Practice Framework

- “Achieving **health, well-being**, and participation in life through engagement in occupation is the overarching statement that describes the domain and process of occupational therapy in its fullest sense.” (OTPF, p. 4)
 - If health and well-being are at the forefront of OT, then developing routines that support those are essential.
 - Developing/addressing healthy eating patterns can be one of the most important things an OT does to support client health and well-being through multiple settings.

5

CONTINUED

Where is Nutrition Mentioned in the Practice Framework?

- List of occupations (Table 1, OTPF):
 - Health Management and Maintenance is a sub-category of IADL's: “Developing, managing, and maintaining routines for health and wellness promotion, such as physical fitness, **nutrition**, decreased health risk behaviors, and medication routines.”
 - Could be billed as self-care or therapeutic activities

6

CONTINUED

Lifestyle Medicine Participant Video

- Under the guidance of Dr. Donna Man, OTD, Med., OT/L, and MOT students
 - 10-week class series taught to community participants
- Level 2 FW placement teaches classes at 4 community agencies: 2 English, 2 Spanish
- Non-traditional setting
 - Can be modified to an adult inpatient or outpatient setting
 - Contact course presenters for more info on this class

7

CONTINUED

Lifestyle Medicine Participant Video

- Participants are a dyad of father-son who are wishing to improve their eating habits.
- Father currently lives with the son and requires assist for IADL's.
- Father sustained a CVA two years ago, and although has had therapy for UE/LE strengthening and speech, he still has residual expressive aphasia and difficulty walking.
- Son switched to plant-based eating several years ago and is currently a vegan.

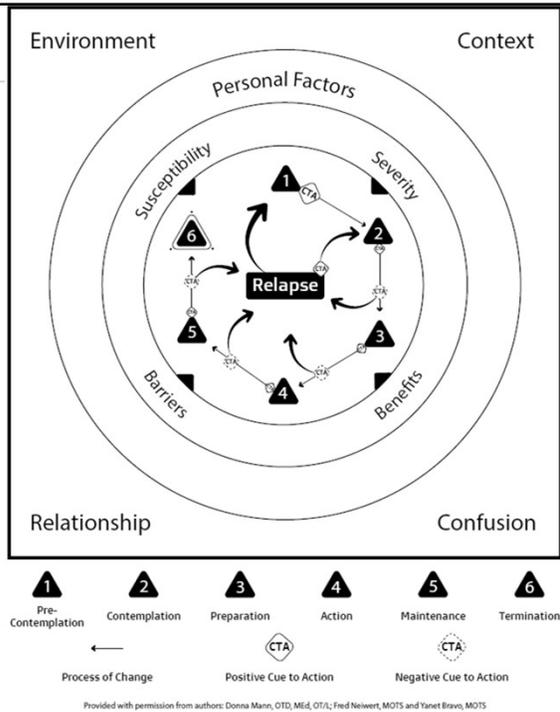
8

CONTINUED

Behavior Change Models

- Existing models to explain behavior change:
 - Transtheoretical Model (TTM)
 - Stages of Change (Prochaska, DiClemente, & Norcross, 1992).
 - Health Belief Model (Rosenstock, 1974).
 - Susceptibility
 - Severity
 - Benefits
 - Barriers

Dynamic HEALT²H Model



CONTINUED

HEALT²H Model

Holistic Approach

- Care is sensitive to personal and environmental factors and how they influence behavior change.

11

CONTINUED

HEALT²H Model

Evidence-based approach

- Using sound evidence when educating patients/clients as well as helping them evaluate the evidence themselves so that they are active agents in their health behavior change (HBC) process
- When looking at evidence for the prevention of cardiovascular disease and other non-communicable diseases (NCD's), the diet that has been shown in the research literature to reduce or reverse heart disease is the whole food plant-based diet (Ornish, 2013; Bodai, Nakata, Wong, Clark, Lawenda, Tsou, C., ...Stoll, 2018).

12

CONTINUED

HEALT²H Model

Antibody Metaphor

- Metaphor: vaccine titers influence disease prevention by allowing a person's own antibodies to *resist* infectious disease; OT's use of therapeutic self can influence health behavior change (HBC) by allowing a client to *resist* non-communicable diseases (NCD's)
 - Finding strategies to increase receptivity of client
 - Matching our interventions to the client/patient
 - **Relapse is inevitable, client will need a “booster” of prevention activities over time to continue in the disease prevention process**

13

CONTINUED

HEALT²H Model

Lifestyle Medicine

- Based from concepts from the American College of Lifestyle Medicine (ACLM) comprised of physicians and other healthcare providers who are committed to prevention of chronic diseases
- Framework of care delivery
 - Treating the causes of disease vs. symptoms
 - NCD's such as CVD, DMII, and CAD are lifestyle related
 - Considers: nutrition, physical activity, stress and sleep management and social relationships

14

CONTINUED

HEALT²H Model

Therapeutic Relationship

- Care is grounded upon principles of intentional relationship which supports clients in all stages of HBC
 - Modes and traits!

15

CONTINUED

HEALT²H Model

Team Approach

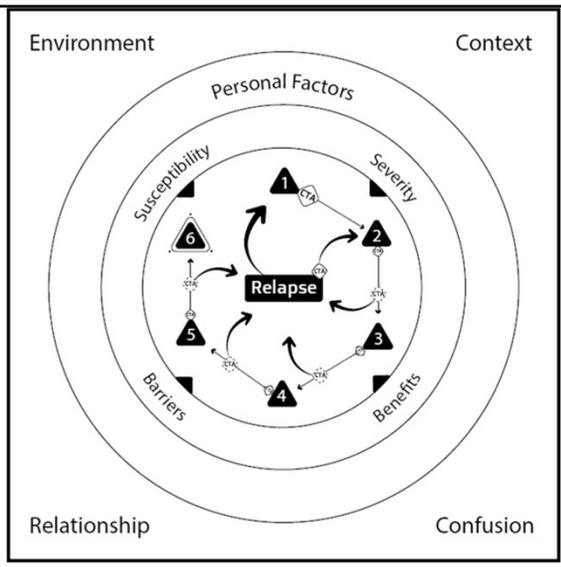
- Interprofessional collaboration
- Seek expertise of others to deliver care of the highest ethical standards
- Potential interprofessional collaborations
 - Dietitians
 - Physicians
 - Psychologists
 - Nurses
 - Exercise Physiologists

16

HEALT²H Model

Health Behavior Change

- The goal!
- Care plans should focus on HBC that is lasting in nature while preparing clients for relapse which is inevitable
- What happens when we know we are going to relapse?



Provided with permission from authors: Donna Mann, OTD, MEd, OFA; Fred Nelwert, MOTS and Janet Bravo, MOTS

CONTINUED

Participant Video: Acute Care Setting

Case Study: Marta is a 78 year-old female who has a medical history of DM II, HTN, CAD and depression. She lives at home with her husband, who is overweight and has poor ambulation among other medical conditions. She is independent in ADL's/IADL's and drives. She is a retired teacher and enjoys word games, knitting and listening to music. She has been able to control her diabetes fairly well with medication and a few dietary changes. Recently, she went to her PCP's office with chest pain and she was sent to the ER. At the hospital, she was sent to emergency surgery and they did a CABG x4. The OT saw her for an evaluation the day after surgery and gave her info re: sternal precautions and energy conservation. She is scheduled to be in the hospital and seen by OT for two more days

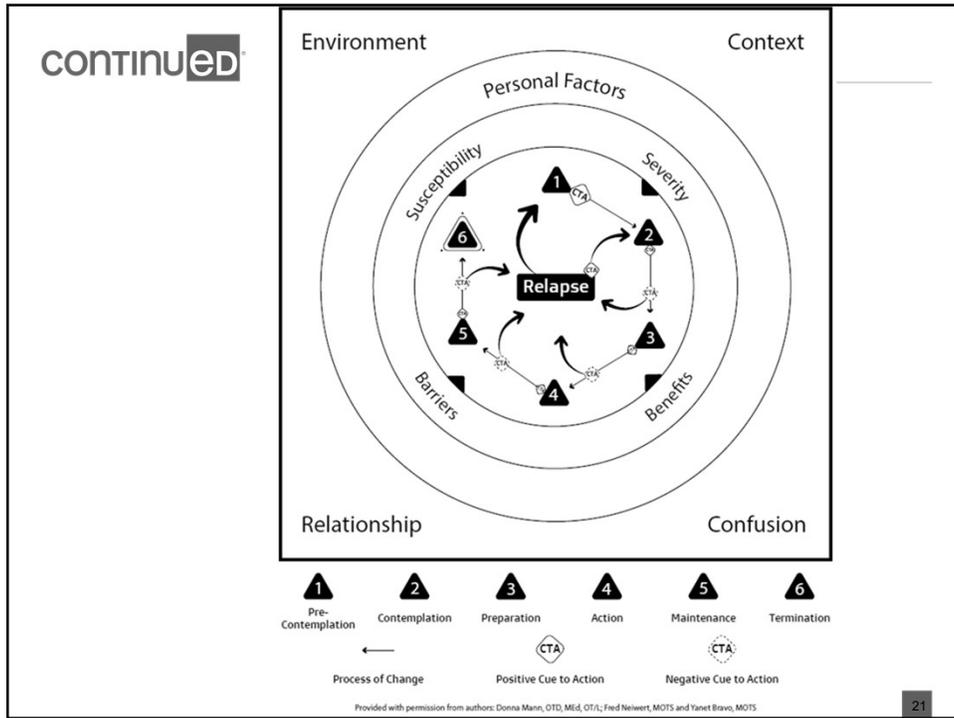
19

CONTINUED

Participant Videos: Home Health Setting

Case Study: Marta has returned home and receives home health nursing services for her wound care. A home-health OT was asked to perform an evaluation for energy conservation and meal preparation. She lives in a 1-story house in a middle-class neighborhood. The OT found that Marta is appropriately following her sternal precautions, has a safe home environment and needs no adaptive equipment for ADL's. However, Marta has identified some IADL's she would like to work on to prevent further cardiovascular events, including health management and maintenance strategies and preparing a healthy meal. She is Latina, and in the past she and her husband divided cooking tasks and liked to prepare pasta, tacos, chicken and sandwiches. They also ate out about 3x/week.

20



Nutrition Tools for OT Practitioners

- Extension Tools: Land-Grant University mission is to provide research-based info to consumers
- Colorado State University Leafy Greens Campaign: <http://farmtotable.colostate.edu/prepare-greens.php#.W7-67mhKi70>
- Kansas State University Cooking for One or Two: <https://www.ksre.k-state.edu/humannutrition/nutrition-topics/eatingwell-budget/cookingfor1or2.html>

More Nutrition Tools

- Cornell University Cooperative Extension Nutrition for Seniors: <http://cceschenectady.org/nutrition-for-seniors>
 - 2017 publication about Adaptive Devices to make cooking/eating easier:
https://s3.amazonaws.com/assets.cce.cornell.edu/attachments/26009/Tips_to_Handle_Cooking_and_Eating_a_Little_Easier_7.17.pdf?1506955552
- See your own state/county Extension for classes and other programs (examples: EFNEP, SNAP-Ed for low-income audiences).

23

More Nutrition Tools

USDA Tools

- My Plate Message toolkit for professionals:
<https://www.choosemyplate.gov/myplate-message-toolkit-professionals>
- Spanish-language resources:
<https://snaped.fns.usda.gov/nutrition-education/spanish-language-materials>
- Consumer-friendly tip sheets:
<https://www.choosemyplate.gov/myplate-tip-sheets>
- Look for a local SNAP-Ed program as many offer nutrition classes to low-income seniors

24

More Nutrition Tools

- Latest in nutrition research
 - Nutritionfacts.org
 - Spanish: nutritionfacts.org/es
- American Academy of Nutrition and Dietetics
- <https://www.eatright.org/>
- <https://vegetariannutrition.net/>

25

More Nutrition Tools

Food Insecurity

- Limited availability of nutritionally adequate foods during certain months/year
- Free online course (1 hour) for healthcare providers: <http://frac.org/news/free-online-course-help-health-care-providers-address-senior-hunger>
- Provided by Food Research and Action Center in coordination with AARP Foundation (focus is adults over 50 and food access)

26

CONTINUED

Questions?

Gina Ord
gina.ord@wsu.edu

Yanet Bravo
yanetb@eagles.ewu.edu

27

CONTINUED

References

- American College of Lifestyle Medicine (2018, October 15). Lifestyle medicine is revolutionizing our healthcare system. Retrieved from <https://lifestylemedicine.org/ACLM/Home/ACLM/Default.aspx?hkey=a39dc6f4-1e03-4c51-b838-992f45cfc385>
- Bodai, B. I., Nakata, T. E., Wong, W. T., Clark, D. R., Lawenda, S., Tsou, C., ... Stoll, S. (2018). Lifestyle Medicine: A Brief Review of Its Dramatic Impact on Health and Survival. *Permanente Journal*, 22(1), 49–62. <https://doi-org.ezproxy.library.ewu.edu/10.7812/TPP/17-025>
- Clark, F. et. al. (2015). *Lifestyle Redesign: The Intervention Tested in the USC Well Elderly Studies, 2nd Edition*. Bethesda, MD: AOTA Press.
- Greger, M. (2018, October 13). The latest in nutrition research. Retrieved from nutritionfacts.org.
- Morris, D.M. Jenkins, G.R. (2018). Preparing Physical and Occupational Therapists to Be Health Promotion Practitioners: A Call for Action. *International Journal of Environmental Research and Public Health*, Feb. 15(2): 392

28

CONTINUED

References

- Occupational Therapy Practice Framework: Domain and Process (3rd Edition). (2014). *American Journal of Occupational Therapy*, 68(Supplement-1). doi:10.5014/ajot.2014.68s1
- Ornish, D. (2013). Mediterranean Diet for Primary Prevention of Cardiovascular Disease. *New England Journal of Medicine*, 369(7), 675–676. <https://doi-org.ezproxy.library.ewu.edu/10.1056/NEJMc1306659>
- Prochaska, J. O., DiClemente, C. C., & Norcross, J. C. (1992). In search of how people change: Applications to addictive behaviors. *American Psychologist*, 47(9), 1102-1114. doi: 10.1037/0003-066X.47.9.110
- Rosenstock, I. M. (1974). Historical origins of the health belief model. *Health education monographs*, 2(4), 328-335.
- Scaffa, M.E., Van Slyke, N., & Brownson, C.A. (2008). Occupational therapy services in the promotion of health and the prevention of disease and disability. *American Journal of Occupational Therapy*, 62:6, 694-703.