Implementation Toolkit/Audit Form Splinting for the prevention and correction of contractures in adults with neurological dysfunction





Splinting for the prevention and correction of contractures in adults with neurological dysfunction Pracice guideline for occupational therapists and physiotherapists







This audit form is to be used in conjunction with the evidence-based practice guideline for occupational therapists and physiotherapists <u>Splinting for the prevention and correction of</u> <u>contractures in adults with neurological dysfunction</u> (COT and ACPIN 2015).

These evidence-based recommendations are not intended to be taken in isolation and must be considered in conjunction with the contextual information provided in the full guideline, together with the details on the strength and quality of the recommendations. The recommendations are intended to be used alongside clinical expertise and, as such, the therapist is ultimately responsible for the interpretation of the evidence-based guideline in the context of their specific circumstances and service users.

The full practice guideline together with implementation resources can be accessed from the College of Occupational Therapists website: <u>www.cot.co.uk/library-publications/cot-</u> <u>publications/practice-guidelines</u> and the Association of Chartered Physiotherapists in Neurology (ACPIN) website: <u>www.acpin.net</u>

Reference

College of Occupational Therapists and Association of Chartered Physiotherapists in Neurology (2015) Splinting for the prevention and correction of contractures in adults with neurological dysfunction: practice guideline for occupational therapists and physiotherapists. London: COT.

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Association of Chartered Physiotherapists in Neurology

College of Occupational Therapists



Specialist Section Neurological Practice



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Date of audit	Auditor		Role	
Location		Review due	e date	

(Please note, the font size will adjust automatically to fit the box)

Initial questions	Yes	No	N/A	Comments
Have the guideline statements relevant to this case been considered prior to splinting?				Please indicate the relevant guideline statement numbers, i.e. 1-19.
Is the proposed splint for correction or prevention?				Correction Prevention

1	Before considering splinting	Yes	No	N/A	Comments
	Have the goals of treatment been considered within the context of overall rehabilitation?				
	Has remedial management for provocative factors of spasticity been addressed if relevant?				

2	Patient selection	Yes	No	N/A	Comments
	Have the goals of intervention been clearly defined and quantified in terms of standardised outcome measures?				



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Have cautions and contraindications been considered prior to fabrication of this splint or cast?		

3	Agree action plan with team	Yes	No	N/A	Comments
	Has a multidisciplinary team discussion of the rationale for splinting been undertaken? For example:				
	Cast or splint?				
	Bespoke or off the shelf?				
	The design of the splint or cast, e.g. materials to be used, lever length?				
	The patient position during fabrication?				
	Wearing regime?				
	Monitoring regime?				
	Outcome measures including timeframes?				

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4	Prior to splinting	Yes	No	N/A	Comments
	Has appropriate information been provided to patients and carers?				
	Has informed consent been obtained?				
	Have the goal and baseline measures been set and recorded?				

5	Splinting procedure	Yes	No	N/A	Comments
	Has the process of manufacture of the splint or cast been recorded?				



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6	Documentation	Yes	No	N/A	Comments
	Has a regime been agreed to monitor the splint and appropriate methods for doing this?				

7	Review	Yes	No	N/A	Comments
	Have a planned review and outcome evaluation date been agreed?				
	Have the goals of treatment been achieved when reviewed after intervention with corresponding change in standardised measurement tools?				