

What influences therapists' treatment choices for rehabilitation of upper limb after stroke?

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Introduction: Upper limb (UL) impairment occurs in 77% of stroke survivors and is a major cause of functional disability. Even though best practice recommendations are available the selection and provision of intervention for individual patient's UL rehabilitation post-stroke varies widely amongst therapists. It is largely unknown what influences therapists' choices of goals, type and duration of interventions for each patient. It is also unclear whether clinicians use any prognostic models to guide their decision-making and treatment plans. The aim of this study was to investigate the factors influencing therapists' treatment choices for UL interventions post-stroke.

Method: Registered Occupational therapists (OT) and physiotherapists (PT) practicing in London at a band 7 level or above, experienced in UL rehabilitation post stroke were identified through purposive sampling. Qualitative data was collected via semi-structured online interviews using a carefully developed topic-guide and analysed using framework analysis on NVIVO-software.

Results: 14 senior therapists (9 OT, 5 PT) contributed to the study. The 'individual level of cognitive and physical impairment' was identified as the strongest theme and the key factor influencing therapists' clinical reasoning for UL interventions. Tailoring intervention to individual differences was emphasized, with clinician's experience and research evidence playing an important role in making treatment choices. Whereas, lack of formal guidelines and time were highlighted as major constraints. Concerns were discussed on using standardised clinical pathways while keeping them person-centred.

Conclusion: The study adds to our understanding of current practice by establishing the therapist's perceptions of factors that could be useful in implementing evidence-based tools guiding UL interventions in future.