



# Cognitive Rehabilitation: An Evidence-Based OT Approach to INTERVENTION

STAGE ONE: Prior to initiation of cognitive intervention:
<ul> <li>a. Key criteria prior to starting cognitive intervention:</li> <li>Do goals of intervention focus on function/task (occupational performance &amp; engagement)?</li> <li>Are there client-centred goals &amp; client motivation? (essential for performance &amp; engagement)</li> </ul>
<ul> <li>b. Consider results of cognitive assessment (see also Step 6 of the document "An OT Approach to Evaluation of Cognition/Perception"):  insight/awareness specific cognitive impairment task performance impact of environment/context</li> </ul>
STAGE TWO: General Health and Well-Being – ensure that these factors are being addressed:
medical issues (including medication side effects) fatigue/poor sleep pain, headaches mood (e.g., anxiety, depressed mood) other health issues including adequate nutrition
STAGE THREE: Specific Cognitive Intervention Strategies:

### \*\*Strategies are rarely selected in isolation\*\*

## > Remedial/Process Training

- o drill-and-practice exercises: e.g. pen/paper, computer, auditory
- o emphasized in: Attention Process Training (APT); Neurocognitive Enhancement Therapy (NET); Neuropsychological Educational Approach to Rehabilitation (NEAR); etc.
- o not to be used in isolation of other strategies

## > Task-Specific Training

- o learning or re-learning a task through practice of the task, within context
- o involves: consistency, structure/routine, repetition
- **External Strategies** ("compensatory strategies")
  - o e.g.: day timer, calendar, lists, alarms, cues/reminders from others, etc.
  - o consider the task specific training that may be required to learn a new external strategy
- ➤ Internal Strategies ("metacognitive strategies")
  - e.g.: self talk; anticipation; enhanced awareness of learning style; self-appraisal, processing & selecting relevant info; guided discovery; etc.
  - o such as are emphasized in: CO-OP Approach; Toglia's strategy training approach

#### > Adapt the Environment

o e.g.: simplify; reduce distractions; provide cues and prompts; change others' perceptions & attitudes; modify support from others (increase, reduce, change type of support); etc.

### > Social Skills Training

o e.g.: 1-1 or video feedback, peer input, role play, task-specific training of social skills in context

#### **Education**

- o e.g.: education about brain function, cognition, cognitive strategies
- o formal or informal

# Selecting Specific Cognitive Intervention Strategies: first determine where you client fits within the continuum

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-severe cognitive deficits (including poor insight, memory) -low capacity for new learning	-mild cognitive deficits, (including good insight) -high capacity for new learning
Remedial/Process	
-remedial activities may promote attention & awareness	-focus on attention, working memory, & problem solving training -OT takes on role of coach -must be contextualized & personalized, provide the "just right" cognitive challenge, and link to function -not in isolation: must also utilize other strategies (including external & internal strategies)
Task-Specific T	
-lots of repetition, consistency, structure -many repetitions, same manner -blocked practice (i.e., focus on one aspect of task) -errorless learning -aim for success within one task, same context (generalization may not be possible)	-random: variety of tasks in one session -whole practice of task -vary the context (within natural tasks, environment) -may include trial & error learning -aim for transfer to other tasks and context
External Stra	
-high emphasis on external strategies (likely generated by OT & caregivers) -simplify -consider new learning (task specific training)	-aim for strategy generation (client coming up with their own external strategies)
Internal Stra	tegies
-limited use of internal strategies -OT as primary problem-solver	-strong emphasis on internal & self-generated strategies -OT as coach; use of guided discovery
Adapt the Envir	
-environment adapted by OT or others	-enable client to adapt own environment
-external feedback likely required	raining -aim for self-monitoring & self-discovery of social skills performance
-information, explanations provided by OT	n -enable self-discovery for example by providing resources

This document was created by Alison M. McLean, OT (2013; updated 2018). Permission is given to Vancouver Coastal Health and Providence Health Care to use and distribute. Questions? Feedback? Please contact alison.mclean@vch.ca