

Occupational Therapy Association of California

POSITION PAPER: OCCUPATIONAL THERAPY AND THE VACCINE ROLLOUT

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Public Health, Vaccines, and Occupational Therapy Scope of Practice

Vaccines are a cornerstone of public health, and since the initial detection of the coronavirus disease 2019 (COVID-19), the world has anxiously awaited the development of this safeguard to help combat the widespread transmission of the virus, which has resulted in the death of over two million people worldwide^{5,7}. A public health approach to societal health is founded on the tenets of disease prevention, preservation of life, and health promotion⁹ and overlaps with occupational therapy's emphasis on maximizing clients' capacities to participate in activities that are meaningful, important, and promote health and wellness³. With the emergency approval of two vaccines in the USA in December 2020, healthcare providers have been tasked with vaccine rollout, an endeavor requiring immense coordination across multiple sectors and systems. Citizens must remain abreast of shifting regulations as states rollout their tiered plans for distribution. While some states have adopted an age-based vaccine distribution plan, others have chosen to first target sectors of the population with high-risk comorbidities. California initially opened up vaccines for healthcare workers in acute hospitals, skilled nursing and long-term care facilities, and residents of skilled nursing facilities within the first tier, but officials have opened up vaccine distribution to include more healthcare providers and medical residents to prevent vaccine waste and ensure better protection across vulnerable populations. With criteria for access rapidly changing, it is important for healthcare professionals, especially occupational therapists (OTs) and occupational therapy assistants (OTAs), to be equipped with accurate information for their clients.

Occupational therapy emerged within the last century as a client-centered, holistic approach to rehabilitation and wellness. Drawing upon foundations in biomedical, psychosocial, and socio-cultural disciplines, its scope of practice continues to grow and adapt in response to our increasingly cosmopolitan client base. Given the relative youth of this profession, its identity is still malleable and shifting, providing it with the freedom and space to respond to acute societal ailments in a way that is timely, relevant, and evidence-based and that upholds the profession's core values of altruism, equality, freedom, justice, dignity, truth, and prudence¹. Thus, it is within occupational therapy's scope of practice to facilitate an intentional, organized, and unified approach to vaccine education and access for its clients.

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VISION STATEMENT:

A world where all people participate in meaningful activities to optimize their life experience.

MISSION STATEMENT:

OTAC is the collective voice that serves, promotes, and supports the profession of occupational therapy and its practitioners.



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Health Management, Community Mobility, and Vaccines

Occupational therapists and occupational therapy assistants have an important role in health and medication management¹⁰, with a study by Craig (2012) identifying this as the most commonly addressed area for home healthcare OT practitioners (as cited in Blum, Fogo, & Malek-Ismail, 2018). Vaccine access and education is a natural extension of health management. Occupational therapy practitioners must improve health outcomes by objectively educating clients on how to access information and speak with medical professionals on the risks and benefits of the vaccine. OTs and OTAs should consult with fellow healthcare professionals as needed to better understand barriers to access and collaborate across disciplines to determine adaptations and suitable modifications to ensure safe and successful access, as “occupational therapy’s distinct contribution to medication management is addressing *actual performance* of these management activities in the context of the client’s daily life” (Siebert and Shwartz, 2017, p. 2, as cited in Blum, Fogo, & Malek-Ismail, 2018) [emphasis added]. Some barriers to successful medical management include traumatic brain injury, stroke, mental illness, homelessness — barriers to which occupational therapists are qualified to respond.

Occupational therapists and occupational therapy assistants also play a vital role in community mobility¹⁰, which is often paramount to a person’s sense of independence and autonomy². Transportation is necessary for healthcare and medication access; without this foundational asset, delays in clinical interventions, such as vaccine administration, can result, leading to a lack of appropriate medical care and unmet health needs, thus worsening health outcomes. Poorer populations face more barriers to healthcare access in general, and transportation barriers are no exception; patients with lower socioeconomic status have higher rates of barriers to transportation for healthcare in particular^{8, p.7}, thus community mobility becomes a social justice issue.

Practice Recommendations

Occupational therapists and occupational therapy assistants working in almost any setting can have the following conversations regarding vaccines. Occupational therapy practitioners possess the clinical reasoning to adapt these dialogues in consideration of their clients’ cognitive and physical capacities. While not exhaustive, we suggest the following practice recommendations:

- 1. Health literacy:** There is a significant amount of misinformation and skepticism circulating on the internet and news regarding both the virus and the vaccine. Freedom and truth are core values of our profession; thus, we must provide our clients with factual information about risks and benefits to the vaccine and give them the autonomy to choose what is best for them. Handouts written in language accessible for our clients, such as those created by the Centers for Disease Control and Prevention (CDC,) should be on hand and available and can serve as a launching point for discussing a client’s concerns and questions regarding the vaccine.
- 2. Navigating the system:** In its current iteration, vaccine-scheduling websites are incredibly unwieldy and require, rendering access difficult for many of our clients. Clients for whom English is a second language, clients without internet access, and/or those with cognitive deficits will require additional guidance and support in scheduling their appointments. Just as OTs and OTAs play a foundational role in health management as part of an interdisciplinary team, they have a vital role in managing the vaccine and its administration.
- 3. Navigating geographically (finding the location)/coordinating transportation:** Limited access to community mobility, whether a result of pandemic shutdowns, impaired cognition or physical functionality, or lack of resources, can result in decreased ability to care for one’s self and diminished wellness, and by extension, vaccine access. By considering subskills of performance such as cognitive, visual, perceptual, psychosocial, and motor skills, OTs and OTAs tailor interventions and mobility options to best support their clients in meeting their mobility goals². Occupational therapy practitioners should assist clients in coordinating transportation to and from the vaccine sites and review and rehearse the plan as part of their care treatment.
- 4. Assisting clients with temporal planning of the vaccine:** Clients with housing instability and/or cognitive deficits may encounter difficulties remembering when to schedule their second dose. Practitioners can utilize both assistive technology (scheduling apps) and calendar planning activities to assist clients in planning and receiving both vaccine doses. Additionally, OTs and OTAs can coordinate with a client’s primary care physician and/or caregiver(s) to provide additional support around remembering to plan second doses.

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5. **Managing side effects/post-vaccine response:** Occupational therapy practitioners work with clients to modify daily routines in consideration of energy levels and medication side effects. Assisting clients in planning their days and managing potential side effects in the days after receiving the vaccine is a natural extension of this work. Occupational therapists and occupational therapy assistants should review possible side effects with clients and talk through daily routine modifications following the vaccine. Additionally, practitioners can consult with and enlist the help of family members to support clients vis-à-vis any potential side effects.

6. **Health practices:** Despite the incredible efficacy of the vaccines, safeguards such as consistent handwashing, mask-wearing, and social distancing should still be practiced by all. Educating clients on health practices will be important in ensuring our clients' safety and the community at large. Conversely, those clients who opt out of the vaccine should be thoroughly educated on harm reduction techniques to reduce the likelihood of viral transmission and infection.

Public health is a social justice issue, and COVID-19 has exposed glaring injustices in our country. The pandemic has taken a disproportionate toll on ethnic minority communities, exacerbated disparities in healthcare access, and created more significant barriers to treatment⁶. Our country's inability to protect the most vulnerable populations from the virus's insidious nature has resulted in substantial losses across marginalized communities. Still, with the development of the vaccine, occupational therapy practitioners can do better by ensuring efficient, equitable, and informed access to the vaccine. As champions of our clients' health and wellness, dedicated not only to the prevention of disease but also the maintenance of well-being, it is our duty as occupational therapists and occupational therapy assistants to take the lead in this endeavor.

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