

Case study



# Occupational therapists in social care

Q&A: A consultant principle  
OT's perspective at practice level

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## Q&A: A consultant principle OT's perspective at practice level



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### About Sacha

Sacha qualified in 1989 and is currently Principal OT in a unitary local authority. This is a new role within her local authority and she has been in post since June 2022. The post has parity with the Principal Social Worker and is line managed by the Head of Quality Assurance and Governance, in adult social care.

### What are your experiences of career progression as an OT in social care?

When I first qualified, I completed an NHS rotation in general medicine, elective orthopaedics and general surgery. I became a senior OT and worked in orthopaedics, elderly care and then a rheumatology unit before specialising in neurology. I was a senior OT. I've lived and worked as an OT in several places in the UK and America where I worked in neuro rehabilitation within a state hospital for 18 months. During the past eight years, I've also completed work as an independent OT practitioner.

On my return from America, I worked in adult social care for a local authority for seven years. I joined my current local authority in 2009 as a Specialist Housing OT Senior Practitioner in the Housing Asset Management Team. We managed our own Council housing stock and funded major adaptations via the housing revenue account for tenants. I reviewed requests from OTs for the adaptations to these properties and worked with the supported housing refurbishment programme

to assess tenants for adaptations. I also worked with allocations to match adapted properties for our direct let cases who require specialist housing and new build housing projects for supported housing and general needs wheelchair housing.

In 2015 when adult social care had a reorganisation, Housing offered to take some of the OTs so that we could focus on adaptations across tenure and I became responsible for the line management and clinical supervision of these staff. I was still a senior practitioner and became responsible for the operational management of staff, allocation of referrals and responsibility for managing the work of the team. I requested a job re-evaluation because my original post didn't include all these management responsibilities and the job was successfully re-evaluated as a team manager. I continued in this role from 2016 to 2022.

I was looking for the next step up in terms of senior management but wasn't sure whether to step out of OT and do general management or stay within my profession or speciality. When this Principal OT role came up, I had to go for it because it was the step that I was looking for and really what I wanted to do. I've done a lot of service improvement work with the Council on the disabled facilities grant review as well as team management. Having worked with housing services I gained lots of strategic insight and built networks with stakeholders that I could use to influence the role of OT within adult social care and benefit residents.

## What are the enablers to your career progression in social care?

I've moved around a lot, and so in my career I've tried to make the most of opportunities to develop my skills and knowledge. I sat the additional exams and became registered to work in America which helped me to gain a lot of self-confidence and confidence in my role and abilities. I've had some good managers along the way who have supported my development as well as good and bad experiences that have shaped my skillset.

## What are the barriers to your career progression in social care?

A barrier for me was that there were no jobs in neuro rehab in my location when I returned to the UK. I decided to do a bit of a career change and went into adult social care. As a student, I didn't do a placement in social care, so it was very new to me and as I didn't work in social care previously, I had to start on the bottom of the pay scale. I completed my progression portfolio within 12 months to move into the experienced OT pay band.

Having moved, had a family and changed my area of work it took me 20 years to get my salary back to my NHS Head OT days. Realistically, the skills I've accumulated should've been recognised and it should be easier to transfer between organisations and keep that role responsibility and pay band.

Having a young family there was a need to do the job part-time to fit it around the family. On a personal level, I chose a job that was easier, had job satisfaction and that I could switch off from at the end of the day until I reached the point where I could develop my career again.

## Where do you see your career in five years' time?

I'd really like to have achieved good things in this principal OT role, to improve the OT service for residents and for OT staff to be recognised and valued for what they do. I'm also thinking about the longer term and whether to aim for a move to a more senior post whether to do independent consultancy work or retire.

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