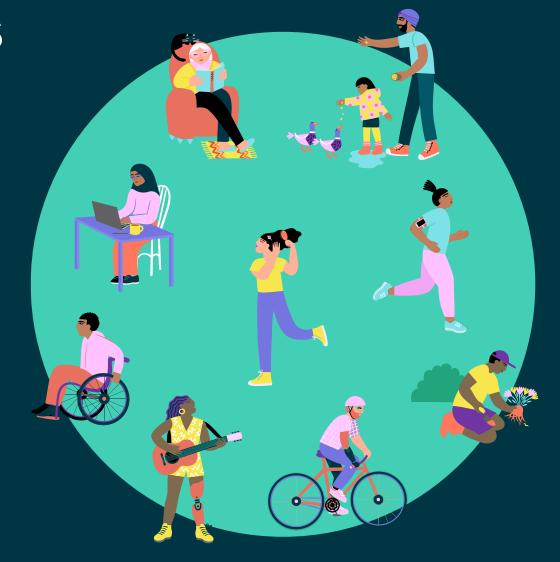
# Occupational therapists in primary care





### **Outline**

Introduction to occupational therapy in primary care

What do occupational therapists do in primary care and what's their impact?

What are the views of GPs and patients?

What are their experiences and what support do they need?

What other resources are there?



### Introduction

There are about 8000 GP surgeries in the UK and only 300 occupational therapists working in them. We estimate we need at least another 2000 occupational therapists to get national coverage.

We want to expand the number of occupational therapists in GP surgeries so everyone can benefit from early intervention to stay active and independent, at home, at work and everywhere else.

Our recent <u>research project</u> has shown that occupational therapists bring benefits to patient populations, support primary care teams to manage demand and meet local need, as well as reducing the ongoing demands on secondary care and other sectors.



What do occupational therapists do in primary care?

- Occupational therapists carry out physical and psychosocial assessments that consider health and home management, education, work, leisure, and social participation.
- They formulate plans for therapy including differential diagnosis of conditions impacting on health, functional ability, and activity levels.
- They proactively work in partnership with patients to find solutions that improve health and activity levels.
- Occupational therapy interventions are practical, realistic and goal orientated. They adapt activities to help patients stay active in their everyday lives.





## What do occupational therapists do in primary care?



These are several key patients that can be directly triaged to first contact occupational therapists, without having to see a GP first:

Adults with mental health problems

Older adults with frailty related problems

Working age adults requesting fit notes

## Occupational therapy and older adults

#### Person

Nutrition + hydration
Pain + fatigue management
Addressing fears + low
mood
Developing cognitive
strategies
Improving hand function

#### Occupation

Activities of daily living
Supporting life roles
Managing medication
Improving mobility and
transfers
Accessing social activities
Engaging with hobbies

#### Environment

Equipment provision
Assistive technology
Safety/falls prevention
Access to property
Reducing isolation
Carer support
Accessing local resources



## Occupational therapy and mental health

#### Person

Signs + symptoms
Suicide + self-harm
Risk assessment
Non-pharmacological
treatments
Improving self-management

#### Occupation

Activities of daily living
Restarting or increasing
activity levels
Support for work and travel
Social and leisure activities
Supporting life roles

#### Environment

Improving relationships +
support
Finances + debt advice
Home environment + safety
Work environment +
disclosure



## Occupational therapy and work

#### Person

Illness, injury or disability
Sickness absence
Presenteeism
Talents + assets
Employment rights

#### Occupation

Breaking down work tasks into what is easy, what is hard and what could be adapted or modified

#### **Environment**

Line manager +
work colleagues,
Sickness absence policies
Employer liaison
Confidentiality and consent
Adaptations to workplace



## What's their impact?

Improved access, decreased demand. In Lanarkshire, 55% of patients had fewer GP appointments. 97% improved their quality of life and 88% their activities of daily living and functional outcomes.

Improved functioning and activity levels. In Pembrokeshire, 67% of patients referred to primary care occupational therapists showed improvement in their everyday function and home safety.

Improved independence. In Sheffield, all frail patients seen in 12 months by an occupational therapist achieved their functional independence goals. 38% achieved more than they expected and 21% achieved their best outcome.

Improved health and lifestyle skills. In Glasgow, an occupational therapy primary care mental health service saw 61% improvements in self-management, a 45% increase in activities of daily living, a 38% increase in employability and a 39% reduction in GP appointments.

Improved quality of life and mental wellbeing. In Sussex, occupational therapy input into a primary care frailty team that included group interventions, gave 69% of patients' quality of life improvements on standardised measures such as the EQ5D (EuroQol).

Improved cost savings. In Yorkshire, a proactive occupational therapy service for older adults delivered over six months made cost savings of £767 204.



## Views of GPs and patients

I think its brilliant. I would go as far as to say it's the best thing I've done. I feel really proud of the service. I think it fulfils an unmet need. GP

I didn't really know what an OT did-now I do, I can't do without one...I thought it was just handrails and toilet aids. I didn't realise it was so holistic. GP

I get to stop pulling my hair out -it was frustrating because you could see somebody had these needs and you were just directing them to the internet. GP

She's been nothing but a help to me. She's there to listen and to help. She comes up with suggestions...all these things make a difference. They keep people like me who don't want to be a burden -I've been independent...I want to do stuff for myself. Patient



## **Experiences of OTs in primary care**

RCOT research across England,
Wales and Scotland reported high
levels of job satisfaction linked to
ability to provide early
interventions and holistic care.

Support needed for OTs making the transition from working in secondary to primary care – very different environments and ways of working. OTs need to be prepared and have the ability to deal with undifferentiated diagnosis and lone working.

Time needed to establish new roles and educate the system about the occupational therapy role.

Need to build capacity in primary care to collect evidence and outcomes.

Need to address disparities in terms and conditions across primary and secondary care.



### **Further resources**

RCOT <u>Primary care</u>
webpage and
network

Lanarkshire first area to have universal coverage.

Primary Care Sheffield South
Pembrokeshire
Primary Care
Cluster

Primary care occupational therapy service in <u>Somerset.</u>

Occupational therapists in primary care in Yorkshire.

North Wales and Northern Ireland mental health case studies.

A <u>scoping review</u> of occupational therapy in primary care was carried out in January 2023.



Get in touch for more information and resources about occupational therapy in primary care.



