Occupation-focused practice in secure hospitals

Key facts

Occupational therapy delivered within the context of a secure environment demands a balance between therapy and security, while still maintaining the validity of occupation for patients.

Occupation-focused practice may incorporate a number of dimensions:

- Occupational therapy assessment and interventions.
- Risk assessment and management, specific to occupational therapy.
- Community-based interventions, if relevant to the patient in a secure hospital.
- Management and adaptation of the therapeutic environment.
- The principles of recovery, motivation and social inclusion.
- Vocational rehabilitation and real work opportunities.
- Education/further education.

Key messages for commissioners and service providers

Occupational therapy is acknowledged as a core part of service provision within secure services, identifying specifically a role within assessment and intervention for ‘daily living, educational and occupational needs (NHS England 2013).

The low and medium secure standards, developed by the Quality Network for Forensic Mental Health Services, personify key principles of occupational therapy in the following standard:

*Patients have a personalised plan of therapeutic and skill-developing activity that is directly related to their outcomes plan. Patients can see the connection between activities they are undertaking and the achievement of recovery goals.*

(Royal College of Psychiatrists, Quality Network for Forensic Mental Health Services 2016, p20)

Guidance associated with the standard includes that: therapeutic and skills development interventions are evidence based and ‘prescribed’ by need; there is a proactive approach to promoting relevant vocational skills and opportunities; activities and therapy are planned over seven days and not restricted to conventional working hours; and there are personalised timetables in which an individual’s activities and therapies are planned.

Key benefits

The following key benefits of occupational therapy are synthesised from the Royal College of Occupational Therapists (RCOT 2017) evidence-based practice guideline: *Occupational therapists’ use of occupation-focused practice in secure hospitals.*

- Occupational therapists work collaboratively with patients to identify and develop care pathways which are recovery-focused.
- Occupational therapists are skilled in facilitating meaningful occupational choices for patients, increasing motivation and engagement in purposeful activity.
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- Occupational therapy services are able to facilitate a range of interventions that enable patients to engage in structured and constructive use of time throughout the week, including weekends and evenings, assisting secure hospitals in meeting best practice targets.

- A patient’s wider recovery goals and aspirations towards paid employment can be ascertained by an occupational therapist at the earliest opportunity and during rehabilitation. Options for supported employment, real work, or prevocational training can be considered as part of occupation-based intervention leading to increased confidence, self-belief and achievement (McQueen and Turner 2012).

- Occupational therapists are able to support patients to engage in healthy living programmes and exercise activities to benefit the individual’s health and wellbeing. This is important when there is a propensity for engagement in passive occupations, with some patients prone to weight gain due to side effects of medication.

- Improved occupational functioning can be enhanced through the provision of social inclusion programmes as part of the occupational therapy intervention, supporting the social inclusion agenda.

- Occupational therapists recognise the role and contribution of families and friends in the patient’s recovery, and can help to facilitate this through family interventions.

Cost benefit

Evidence on the occupational therapy contribution to reducing the risk of recidivism is not available. However occupational therapists are able to work collaboratively with patients to develop the relevant occupational performance skills to assist their reintegration into the community (RCOT 2017), including participation in meaningful roles and routines, such as engaging in work-related activities/paid employment.

References


All websites in these references were accessed on: 15.06.17.

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