Making personalised care a reality
the role of occupational therapy

Royal College of Occupational Therapists
Occupational Therapy
Improving Lives
Saving Money
#ValueofOT
Empowering people to manage their health and wellbeing

There is no doubt that people themselves are experts in what is important to them, their experience of illness and their familial and social circumstances. Care and support planning that embeds a shared approach to decision making recognises that people bring different, and equally important, knowledge and expertise to the process. Making people central to decisions on care provides the opportunity to think differently and “shift – away from the ‘medical model’ of illness... towards a model of care which takes into account the expertise and resources of the people with long-term conditions and their communities”.

In all four UK nations there is a growing momentum around embedding greater control and choice in the way people experience health and social care services. Policies and legislation seek to drive a greater focus of care in communities and there is an increasing number of local initiatives that focus on improved community delivery. With only 10% of what determines health and wellbeing linked to actual health care, it is time for a national approach that structures services better around people, keeping them connected with family, friends and their community.

Embedding personalised care requires services to shift in focus:

**FROM**
- Need
- Risk management
- Delivering to and for

**TO**
- People’s strengths and assets
- Balancing choice and risk
- Supporting people to maintain occupations (daily activities) and connect or re-engage people with their communities, family and friends

Capitalising on the occupational therapy workforce

Services, therefore, need to find new structures and ways of working that fully utilise professional skills whilst supporting people to take greater responsibility and roles in meeting their own health and social care needs. To this end, the Royal College of Occupational Therapists (RCOT) recognises that the occupational therapy workforce needs to move from being predominantly in secondary care to focus on preventative and public health delivery.

Occupational therapists are skilled in understanding the important role participation in productive activity plays in people’s lives. The profession’s extensive reach across the wider health and care system enables occupational therapists to form partnerships across various sectors.

As experts in supporting people’s participation in occupations (daily activities), services should use occupational therapists to support people in a wide variety of self-management approaches, as illustrated in the diagram below.

Self-management approaches

Occupational therapists should lead on new ways of working, which empower people with complex needs to maximise independence and quality of life.

> Personalisation is rooted in the belief that people want to have a life not a service.
Focus on people’s strengths, balancing choice and risk

Everyone whether they are young or old takes risks on a daily basis when going about their everyday lives. When a person has a chronic long-term condition, contact with health or social care services is often focused on managing those risks in order to achieve the best outcomes. Sometimes, however, in the management of the risk, people’s choice and control can be inhibited due to limitations in service provision; fear of repercussion for the health profession, or an overly medicalised, ‘I know best’ approach to care.

In order to ensure that people ‘live the life they want’, practitioners in health and care, people in receipt of services, and their carers, must work together to embrace risk-taking to achieve positive outcomes. In addition, services must move away from an approach that focuses on needs and problems to one that works with people to establish the strengths and assets that they bring to achieve positive change in their lives.

Occupational therapists have expertise in balancing risk and addressing barriers, while respecting the choices that people make about the way they wish to live their life. Positive risk-taking is intrinsic for occupational therapists when working with people in order to embed their choices and achieve their goals.

Service example: Respiratory Service, Gateshead NHS Foundation Trust

In 2016, the Pulmonary Rehabilitation Team at Gateshead won the AbbVie’s inaugural Sustainable Healthcare ‘Patients as Partners’ award for supporting individuals to take control of their care. The six-week programme, run by an occupational therapist, provides tools and strategies to support people to maintain the activities which are meaningful to them. This team has given people across Gateshead with respiratory conditions (such as chronic obstructive pulmonary disease and asthma) the confidence to lead their own recovery. In a review of the service following a year from discharge, 75% of people have been able to maintain their exercise levels and control their breathlessness. This has resulted in fewer GP appointments, hospital admissions and a reduction in medication.

Mary’s story

Mary, in her late 20s, has myalgic encephalopathy (ME). She had been using an extra wide wheelchair in her home but despite this, she was unable to move around the rooms. Mary was sleeping in the kitchen/dining room and needed to be hoisted out of bed every morning. Being so dependent, Mary felt trapped in a spiral of low mood and lethargy. Carers supported Mary with her self-care and helped her get into and out of the house.

In line with Mary’s wishes, the occupational therapist found a bungalow close to her father’s home. The new property gave wheelchair access to all rooms and enabled Mary to leave the home independently. It also meant that she needed minimum help from carers with her self-care.

For Mary to have greater control, the occupational therapist had a ceiling track hoist installed, a curtain opener system fitted and technology put in to open the doors remotely.

IMPACT

Mary regained much of her independence. She is seeing friends and family more and feels she has more control of her life.

Giving people the strategies and the tools to be able to manage their condition better gives them real confidence.

Joanna Donnelly
Respiratory Occupational Therapist, Gateshead

View the film here
2 Maintain people’s occupations (daily activities)

As life expectancy increases, the need to maintain and promote productive healthy lives is one of the nation’s biggest priorities. People with long term conditions are often challenged by their ability to have productive roles in the home and in the wider community. People with complex needs often require support in adapting their routines, or environment, to be able to maintain valued occupational roles.

Ensuring that people can access the right information at the right time, so they can plan for deteriorating health, is increasingly seen as a vital part of service delivery in all four nations of the UK.

An occupational therapist’s approach involves looking at the person, their daily occupations and whether the environment they live in supports or hinders what they want or need to be able to do. This makes the profession well placed to promote productive lives across the life course. Occupational therapists working at a primary care level taking a proactive approach can minimise the risk of a crisis and dependency on health and social care services, leading to financial savings.

Service example: The Walton Centre, Liverpool

A multidisciplinary team (MDT) runs the Walton Centre Pain Management programme, supporting people to manage their chronic pain conditions.

With chronic pain affecting 35% to 51.3% of the UK population, the negative effects on people’s lives can seriously impact their quality of life, mobility, daily activities, employment opportunities, social and personal life and mental health. Although the overall cost of chronic pain is unknown, one figure puts the cost of back pain alone in the region of £5 billion per annum.

Through co-designed target settings, occupational therapists and the wider multi-disciplinary team help people by introducing a variety of self-management strategies to build greater activity, resilience and overall quality of life for people on the programme.

As part of the programme, people can also opt for further 1:1 sessions with the occupational therapist in a work and employment clinic. The occupational therapist works on goals identified by the person. This can involve advice to the current employer about reasonable adjustments; entry into paid or volunteer work; writing CVs and Allied Health Professions fit notes.

A recent six-month post-attendance review demonstrated 83% of participants achieved their goals in retaining or seeking work.

Glenda’s story

Glenda experiences lower back pain that has spread to her leg. The pain was impacting on her mood and motivation to look after herself and was also limiting her ability to move around the house. As a result Glenda had been unable to work for several months.

Glenda wanted to return to what she used to be able to do; walking, driving lessons, drawing, DIY and work. She successfully completed the pain management programme, learning skills in pacing activities and using strategies to cope with her chronic pain.

The occupational therapist worked with Glenda to produce a joint letter to her employer in support of her return to work and helped her with strategies and reasonable adjustments. The occupational therapist also supported Glenda in transferring her new self-management skills to the workplace.

IMPACT

Following a six-month review, although Glenda is still experiencing pain, she has returned to work full time, and has been promoted.
Connect people to their community, family and friends

It is widely accepted that good physical and mental health is related to people staying connected to the community where they live and the positive relationships they have with family and friends.\(^{ix}\) One research study has noted that disconnected communities could be costing the UK economy as much as £32 billion every year.\(^{xiii}\) For people with physical and mental health problems, maintaining or developing networks of support can sometimes be challenging, resulting in lack of engagement and isolation. With around 50% of disabled people affected by loneliness and 1.2 million older people reporting being ‘chronically lonely’,\(^{xiii}\) there is a great deal more that can be done to support people in their communities.

To ensure that people are able to access and make the most of opportunities for social participation, advice and guidance are often needed. With the profession’s focus on enabling participation, occupational therapists are ideally placed to address this. They can also support people in combating loneliness and increasing social interaction, leading to significant cost savings across the health and care system.

Given occupational therapists are a limited resource; RCOT recommends that services create clear access points for link and support workers in the voluntary sector and in other organisations. This would ensure that community services are able to utilise the advice and guidance from occupational therapists and access their skills for people with the most complex needs.

**Service Example: Ways to Wellbeing service, York**

The occupational therapy-led Ways to Wellbeing service is a multi-disciplinary team that supports people to address their health and wellbeing, acting as a bridge between primary care and the voluntary sector. The team works with people who have poor mental health, low mood and anxiety, but are not in crisis.\(^{xv}\)

The team uses a social prescribing approach to look at meaningful goals for people, in support of improving their wellbeing and health. They address issues such as housing advice, debt support, counselling links, loneliness and support with long term physical health complaints. They consider people’s interests, values and strengths, and use these to help increase social interactions. The focus is on social compassion, social confidence and social connectedness.

The team has developed partnerships with volunteer pathways in Healthwatch York and by accessing volunteer roles with Healthwatch friends. This has supported previous users of the service to develop productive roles in supporting others, and to also continue with their own community and social engagement.

**IMPACT**

Over a two-year period, 80% of people reported having greater wellbeing, and 75% have increased confidence. A review involving GP practices over three months showed a 30% decrease of GP appointments in people that accessed the Ways to Wellbeing service.

**Thom’s story**

Thom has autism and finds language and comprehension difficult. He is an avid runner, and following contact his parents made with his local running club, they were signposted to an occupational therapist involved in parkrun.\(^{xvi}\) This offered a perfect opportunity to work on Thom’s social skills, as well as being part of a community activity that had meaning for him. Through one-to-one coaching sessions with the occupational therapist, Thom became familiar with the environment, learnt skills for personal interactions to build relationships, as well as manage personal care and transport.

As a result of Thom’s increased confidence and new skills, he is now a member of a gym. Thom also won the junior trophy at the Wedding Day Race in Bushy Park in August 2017.

Thom’s occupational therapist said: “The therapeutic process of parkrun has meant that Thom has no choice but to communicate and interact all the time, which has built up his independence and confidence.”

**IMPACT**

Thom has missed only a handful of parkruns over the past couple of years, and he ran his 100th parkrun on Christmas morning 2017.

“There is now widespread recognition that communities have a vital role in improving health and wellbeing.”\(^{xvi}\)
Making personalised care a reality

Making personalised care a reality

1 Focus on people’s strengths, balancing choice and risk
2 Maintain people’s occupations (daily activities)
3 Connect people to their community, family and friends

Occupational therapists deliver personalised care by:

Leading
- Training and mentoring colleagues to work in partnership with people

Advising
- Signposting, guidance and linking with support services

Enabling
- One to one work with people who have complex physical and/or mental health needs
- One to one work with people who have complex physical and/or mental health needs

The RCOT Improving Lives, Saving Money campaign’s overarching recommendations are:

- Intervene early within primary care
- Embed personalised care through training and supervising others
- Develop wider partnerships to further innovation
- Expand therapy-led services

To empower people to manage their health and wellbeing occupational therapists should be deployed across the health and care system to:
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References


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