



Rehabilitation in primary care

Question 1:

What is the rehab role or could be the rehab role for occupational therapy in primary care? How do we articulate our offer?

- GP's get monies for virtual wards but are not engaged with the patient's journey. Focus on avoiding hospital admission. Understanding therapy varies and for many is a tick box.
- Mental health – using virtual ward to support people with eating disorders and physical aspects of mental health conditions.
- GPs are very different and practice managers have influence over use of wider multidisciplinary workforce. Relationships are really key.
- Occupational therapy should front load into primary care and address local population needs for GP surgeries.
- Earlier and specialist interventions in the community would reduce need for acute and hospital interventions.
- Children are a potential focus of practice but not reflected in the literature or within any pilots.
- Links and use of social prescribing.
- End of life care – supporting people to die at home.
- Need to address work and use AHP fit note.

Question 2:

What skills/capabilities and supervision structures are needed to offer rehab in primary care?

- Specialist assessments for adaptations and equipment.
- Group work
- Assets based approach
- Person centred- working with the person, co-production. Therapeutic use of self.
- Facilitating self-management



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- Rehabilitation – skills set will depend on population needs. Older people is different to mental health or neurological long term conditions.
- Role in assessing need and referring on and co-ordinating services.
- Possible issue within the profession in terms of lack of confidence to deliver rehabilitation.
- Burtzog model – neighbourhood approach might enable occupational therapists to practice rehab

Question 3:

How have you or could you build on partnership working to enhance the primary care rehab offer?

- Occupational therapists have skills to build partnerships. Working with other AHPs allow occupational therapists to follow paramedics and physio into primary care.
- Partnerships needed for wrap around care.
- Student placements can showcase what occupational therapy can do.
- Rotations into GP practices would develop skills and confidence.