

What is it that Occupational Therapists do?



Occupational therapy is a diverse profession so it's not unusual for people to ask what exactly an occupational therapist does. Often people guess "so you're a bit like physio". I recall once going out to fit some equipment for a lady to be discharged from a trauma bed – her mother shouted after me as I left her home "you toilet people are fantastic!!"

Occupational therapy concerns itself with the lived experience of an individual, interacting with their world applying their own unique abilities, expectations and opportunities; it seeks to explore potential and maximise independence through use of activity and the environment around us.

Occupational therapists work in services ranging from neonatal to palliative care and everything in between. We can assist people to regain abilities and adapt to new ways of living so that they continue to participate in meaningful roles and activities.

Activities are occupational therapists' tools of practice. We use activity in a wide variety of ways to allow us to:

- assess abilities
- identify needs
- develop skills
- evoke change
- evaluate progress
- develop insight and self awareness

Occupational therapists evaluate the environment

A person's ability to perceive, interact with and adapt to their environment influences their success in getting what they want and need to do done. When illness, injury or other cause results in reduced independence, occupational therapy can help to explore the problems and potential solutions.

In personal injury and clinical negligence cases, occupational therapists are often instructed directly by solicitors or through case managers to carry out occupational therapy assessment and rehabilitation as part of implementing The Rehabilitation Code and Serious Injury Guide.

Following a referral, the occupational therapist will visit a client in an appropriate environment.

A comprehensive assessment is carried out to establish a person's present level of independence and participation in everyday activities. Factors which influence potential for change are considered and information relating to a person's physical and social environment is gathered. The assessment typically includes:

- facilitated discussion
- observation of the person completing everyday activities, mobilising and using furniture and fittings
- assessment of particular skills
- measurement of the environment
- liaison with significant others

The occupational therapist draws on their knowledge of occupational science, anatomy and physiology, brain and behaviour to understand physical and cognitive abilities and potential. A comprehensive and integrated problem analysis with relevant recommendations is outlined in a report.

Intervention is aimed at positively influencing how a person realises their own potential for independence. This may require the occupational therapist to educate, train, practise, explore or reinforce skills and strategies with the client. Equipment, adaptations or support may also be required.

Occupational therapists use a variety of scales, checklists and indexes to document observations and measure change. Change such as a person's range of movement, strength or test scores can be useful. However, we also observe a client's application of skills and abilities to carry out every day activities in order to measure and report change.

Brain Injury case study

Miss S sustained a brain injury as a child and was referred to occupational therapy for support with transitioning to more independent living as an adult. Her parents had been completing all aspects of her care. A package of support had been set up to carry out specific care duties and Miss S and her family wanted to adapt their home to support her desire for independence.

The occupational therapy assessment was completed in conjunction with Miss S, her parents, her support team, and the architect and building site manager. The assessment was completed over several visits and detailed:

- Miss S's abilities and limitations, support and care needs, ability to use equipment and technology
- Recommendations regarding environmental needs, equipment, space and technology to be incorporated into the adaptation scheme
- Recommendations to support Miss S taking on adult responsibilities relating to everyday activities

The initial focus of occupational therapy was to establish an appropriate environment for Miss S which met her support needs and facilitated maximum independence both now and in the future. This involved the occupational therapist doing the following:

- Linking in with suppliers for hoisting, toileting, showering and bathing equipment, and an accessible kitchen and door entry system
- Regularly meeting with the architect and site manager to ensure adaptations met Miss S's needs and were compatible with equipment required
- Meeting regularly with Miss S and her family to ensure complex issues were communicated effectively and Miss S was included in making choices and decisions regarding equipment and environment

This note is for information only and does not constitute legal advice.

The Brain Injury Group is a national network of legal and other professionals supporting individuals and families affected by brain injury. www.braininjurygroup.co.uk

Miss S moved into her own home with interconnecting access to her parents' home. Her bungalow was set up with level access, a visual door entry system with intercom, a height adjustable bath with music and interactive lights, an adjustable shower room, an H frame hoisting system, an accessible kitchen, therapy space, environmental controls, slide-back double width internal doors and adequate turning circles for a powered wheelchair throughout.

Miss S is presently engaging in ongoing occupational therapy intervention with the following goals:

- To manage a small budget specific to clothes, make up and entertainment purchases
- To participate in a structured schedule of activities across the week
- To use her door entry system independently
- Miss S's care providers to keep up to date with training in relation to brain injury and specialised equipment

February 2018

The original article was prepared and published by Hayley Green of Independence Found Limited. Hayley has been practising as an occupational therapist since 2002. She is a member of the Royal College of Occupational Therapy including its Specialist Sections in Independent Practice and Neurology.

Hayley is Director of Independence Found Ltd, providing occupational therapy assessment and rehabilitation across the West Midlands and surrounding areas.

Contact Hayley on hayley@independencefound.co.uk or by calling 07807 816997.

You can read the original blog here: <https://www.independencefound.co.uk/single-post/2018/02/06/What-is-it-that-OTs-do>

<https://www.independencefound.co.uk>

Independence Found Ltd

Occupational Therapy Assessment and Rehabilitation
Maximising Independence and Participation

This note is for information only and does not constitute legal advice.

The Brain Injury Group is a national network of legal and other professionals supporting individuals and families affected by brain injury. www.braininjurygroup.co.uk