# The changing role of occupational therapy services in social care: a scoping study

#### **SUMMARY**

- The primary output from this study was a diary tool to capture the work of occupational therapists (OTs) and OT assistants.
- Its content was derived from findings from previous diary studies undertaken by the PSSRU at the University of Manchester and focus groups of OTs and OT assistants working in multiple settings.
- The utility of the diary tool was demonstrated through piloting in a number of settings including: adult social care; primary care community services, intermediate care; and hospital services.

#### **BACKGROUND**

OTs are a key component of the social care workforce, involved in an estimated 35 to 45 per cent of local authority referrals despite comprising only 2 per cent of the workforce (Department of Health 2008). Given their strategic importance it is imperative that more is known about the content of their working roles across different service sectors. Furthermore, the continued development of arrangements to promote integrated health and social care services requires a means of quantifying respective roles which spans both sectors.

## RATIONALE FOR DEVELOPMENT OF AN OT-SPECIFIC DIARY TOOL

The work of OTs is important in preserving and enhancing the physical function, independence and well-being

The study aimed to develop a means of describing the role of OTs in community care permitting a comparison across service settings over time. This will allow:

- identification of the principal components of the role, by service setting;
- evaluation of the influence of policy and practice changes;
- data collection to establish the cost and resource consequences associated with different service configurations.

of a broad spectrum of service users living in the community. However, little is known about the breadth of OT activity; the aspects of their role that accounts for most of their time; about differences in time-use across settings or between qualified and assistant-grade staff as demonstrated in the review of policy and practice, the research evidence and previous PSSRU studies conducted as part of this study.

This absence is a hindrance to research, service evaluation and re-design and the promotion of evidence-based practice.

#### A review of policy and practice

The role of OTs and OT assistants continues to evolve in response to policy initiatives in health and social care (HM Government 2012, Department of Health 2009). Three enduring themes are particularly relevant. First, the emphasis on inter-professional and inter-agency working, a mechanism to promote joined up care across hospital, community and social care. Second, the proposal that OTs in a local authority setting have more involvement in wider

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National Institute for Health Research local authority services beyond adult social care, replicating initiatives such as the development of specialist OT posts within housing departments. Third, the extension of self-assessment by service users as one of the developments in the impetus to create more personalised social care services.

#### A review of research evidence

No suitable tool for use by OTs and OT assistants across settings was identified in the study's literature review. Most studies described or evaluated a specific role or related to services provided to people with specific diagnoses. Few had a social care perspective. The majority were small scale and did not include comparisons between user groups or settings.

### A review of previous PSSRU studies

Existing PSSRU diary studies were examined to learn lessons about the application and quality of the data to inform the development of the new schedule (Challis et al. 2012, Jacobs et al.

2006). This was complemented by a synthesis of qualitative data about the range of activities undertaken by OTs within community care teams for older people and other adult service user groups. Together this provided evidence that while OTs participated within the earlier diary studies, those activity codes were unlikely to have fully represented the range of tasks they undertook.

#### **TOOL DEVELOPMENT**

Development of the diary tool was undertaken in partnership with an integrated health and social care provider, the Staffordshire and Stoke-on-Trent Partnership (SSOTP) NHS Trust. In addition to areas of enquiry described above, its format was informed by previous tools and the views of practitioners about their principal activities. This process is summarised in Figure 1.

#### **Format**

The tool's format built upon lessons learned from previous diary studies undertaken by the

Figure 1: Overview of Research Method

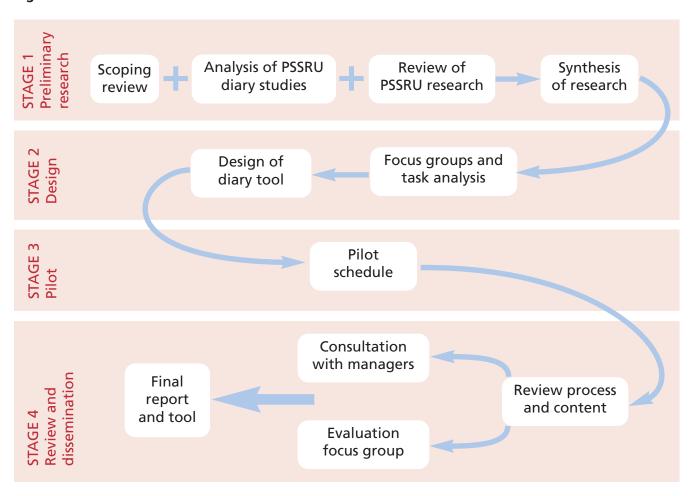


Table 1: Principal service sectors included in the research study

| Community services – primary care | Included primary community rehabilitation teams; pain management; and neuro-rehabilitation                                |
|-----------------------------------|---|
| Community services – social care  | Included community sector occupational therapy teams and equipment services   |
| Intermediate care                 | Included community intervention services and early discharge teams as well as ward-based intermediate care                |
| Hospital services                 | Included rheumatology; musculoskeletal service; stroke rehabilitation; falls service; limb fitting; and a wheelchair team |
| Other services                    | Included hospice-based palliative care and paediatrics  |

PSSRU at the University of Manchester. A tool comprising two elements was developed: a paper-based diary grid, representing a single week with 30 minute intervals, and a single page of pre-defined activity codes, to simplify the process of identifying specific tasks. This format had proved successful in balancing the need for a fine level of detail whilst minimising the burden of completion.

#### **Activity codes**

A focus group methodology was employed to identify activity codes specific to OTs to guide completion of the schedule. Five focus groups, with 46 participants recruited from multiple settings providing assistance to adults, were conducted. To enable participants to capitalise on shared experiences their composition was segmented by setting and qualification status. A non-directive approach to the conduct of the focus groups promoted rigour by ensuring activities were articulated and defined by practitioners (Kitzinger 1996, Morgan 1996).

Almost 200 activities undertaken by OTs and OT assistants were identified. Task analysis was employed to refine and summarise these under broader headings. These processes contained a degree of subjectivity and judgement, yet for the majority of activities such decisions were clear. Few differences in the tasks identified by OTs and OT assistants were identified. However, there was some evidence that only qualified staff would undertake triage of new referrals, and that assistant practitioners may have more time available for direct support and confidence-building with activities of daily living. Face

validity was maximised by reference to the study's expert OT adviser, the study management group and through comparisons with tasks identified in the literature review. Minor amendments were made to wording for clarity of meaning.

#### PILOT AND EVALUATION

Practitioners within all the service sectors outlined in Table 1 piloted the diary tool and a small group and representative managers contributed to the evaluation process.

#### Findings from the pilot study

All practitioners within the Trust undertaking an occupational therapy role were invited to participate in the diary tool pilot. 151 completed schedules were returned, encompassing just under 5,000 hours of activity, a response rate of three-fifths of all possible respondents. The validity of the tool was established through its capacity to distinguish between the amounts of time spent on different activities and between the workloads of OTs and OT assistants.

The pilot study demonstrated that practitioners spent most time completing case notes and related paperwork, travel, general administration, assessing the home environment and professional development and training. In contrast less than one per cent of their working week was spent on each of: assessing vocational, social participation and other needs; adaptation-related activities; clinical supervision; and training others. It also revealed that OTs were more likely than OT

assistants to undertake: client-related liaison with providers and other practitioners; triage of new referrals and allocation; supervision of others; and service development work. Qualified practitioners were less likely to spend time: supporting activities of daily living; recording case notes; personal development and training; and general administration.

#### **Review**

The evaluation of the diary tool comprised three elements:

- (1) The completed schedules were appraised at data entry stage and following data analysis. At the latter stage the proportion of the working week spent on each activity was scrutinised both as a whole and by service sector.
- (2) Another focus group of practitioners was held after piloting the schedule to review both its content and its ease of completion. Areas for improvement were identified for the latter.
- (3) Meetings with managers explored the utility of the constructs and concepts which underpinned the development of the tool based on preliminary findings from the piloting. One meeting comprised managers with responsibility for operational services, and the other personnel with the experience to explore the tool's potential utility to review service performance and contribute to its redesign.

Small but significant changes to improve the tool were agreed by the research team and their expert adviser following review of the information detailed above.

#### **CONCLUSION**

Understanding how OTs use their time is important to research the effectiveness of their work and how to make best use of their time and service configurations. To achieve this a diary tool comprising a list of activities and a diary grid (Monday – Friday, 8am – 7pm) divided into 30 minute intervals derived from an activity list specific to occupational therapy practitioners was developed. This schedule is available for use in further research and by occupational therapy services to help

#### **ABOUT THE STUDY**

The research was undertaken by David Challis, Jane Hughes and Mark Wilberforce at the Personal Social Services Research Unit at the University of Manchester.

Ethical scrutiny for the study was provided by the University of Manchester Research Ethics Committee 3. Local NHS permission was granted by SSOTP NHS Trust and the study was adopted by the Primary Care Research Network. It was conducted between April 2013 and April 2014.

Further information about the study can be obtained from: www.nursing.manchester.ac.uk/pssru/research/nihrsscr/projects/occupationaltherapy.

The diary tool is available at: www.nursing.manchester.ac.uk/pssru/research/nihrsscr/productsandtoolkits/

understand how to most effectively organise the work of OTs and OT assistants.

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