A Pioneering Approach?

Enabling Occupation in the Care Pathway Model

Presentation by Jennifer Beal

Key Message for Today

- To explore enabling occupation using an eclectic approach
- To promote innovative practice that is proactive & holistic, grounded in & focused on occupation
- To sustain a high quality OT service in the Care Pathways & Packages Approach

Enabling occupation using an eclectic approach

- Well documented research, literature & evidence base
- Theoretical explanation to support the use of activity
- Structure to support the selection of activity
- Guidelines for intervention – motivation and action
- Graded interventions
- Standardised outcome measures.

Eclectic Approach - Joined up Thinking?

MoHO	MoCA	Recovery Star
F	6 ,7+	Self Reliant
A	4,5	Learning
I	3	Accepting
R	1,2	Stuck

SWOT Analysis

STRENGTHS	WEAKNESSES
MoHO: large evidence base, Standardised assessments	Increased training required therapists to be informed of both models
MoCA: limited research & evidence. Structure / guidelines support selecting activities.	MoHO terminology can be confusing
Both have screening tools to report on occupational performance	Using both involves change management
Both models offer structured engagement with graded activity (FAIR or Levels)	Application of 2 models may seem complicated to new practitioners
Both models can be used to support individual & groupwork	MoCA assessment / report not on RIO
MoHO assessments on RIO	

SWOT Analysis (continued)

OPPORTUNITIES	THREATS
Synergy provides well documented evidence base and standardised assessment tools. Improved report writing Engaging all service users in activity Skilled up practitioners – improved employability Benchmarking & comparability to other services using either model	Using one model may miss benchmarking opportunities Struggling to engage / adequately report on occupational performance without both resources Reaction from trainers for applying both together? Cost?

Thoughts?

- Further contributions to SWOT….

Structuring Activity Participation

Complementary Models of Occupational Therapy can be implemented in a traffic light system

RED STAGE

- **WARD BASED**

  Assessment focus.

  No tools, Low structure, Sensory Activities, Activity focus, Constant Supervision

  <u>OT Models of Practice:</u>
- **MoCA - Tone, Self differentiation, Self presentation (levels 1,2,3)**
- **MoHO Explorative – MoHOST ratings I and R**

AMBER STAGE

- **DEPARTMENT**

  Structured Activity, Social interaction, Tools, Product Centred, High Supervision

<u>OT Models of Practice:</u>

- **MoCA – Self presentation, Passive or Imitative Participation (levels 3,4,5)**
- **MoHO Experimental / Competence – MoHOST ratings A**

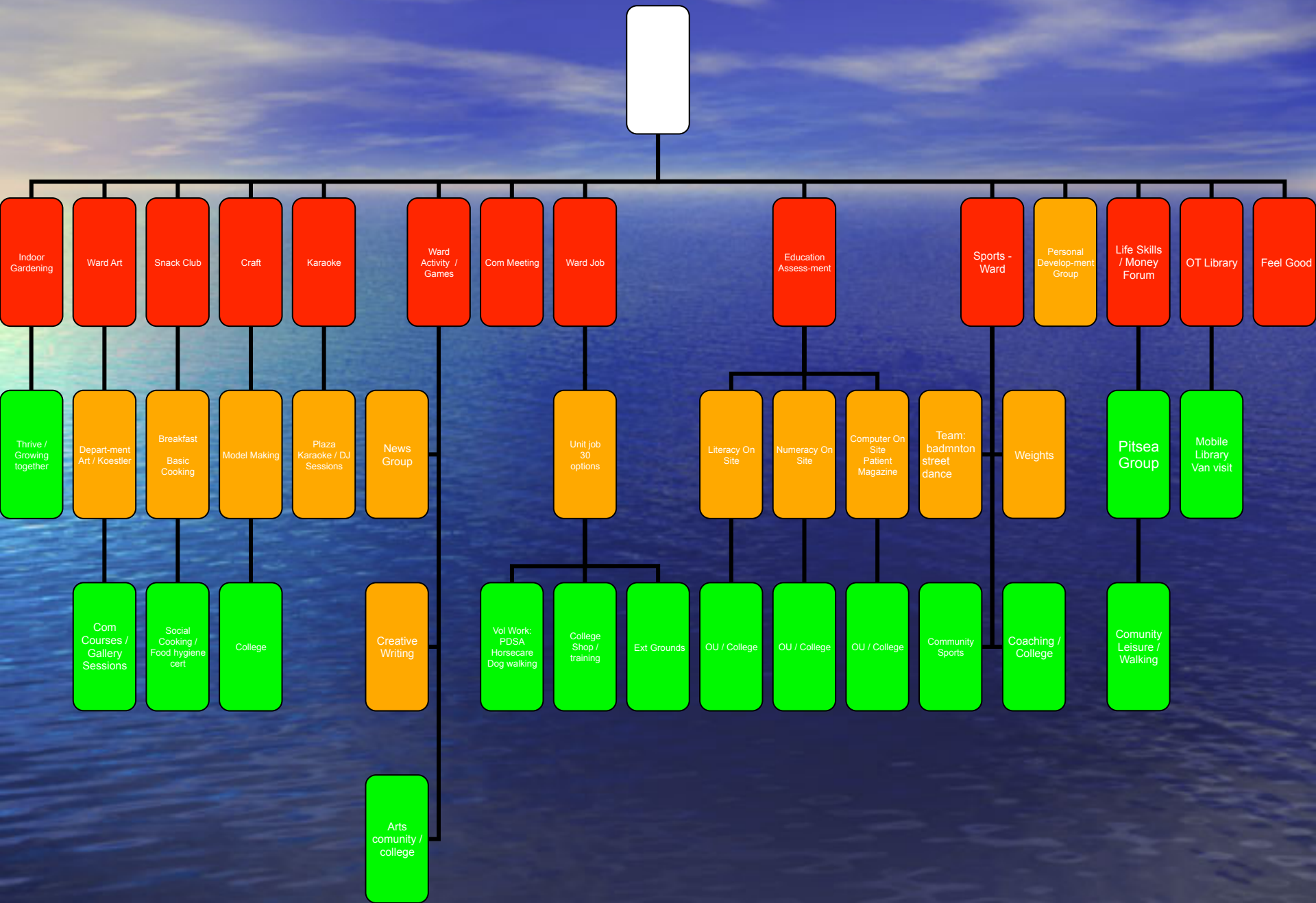
GREEN STAGE

- **COMMUNITY REINTEGRATION –**
  Education, Vocational & Service User focus.
  Mastery & Achievement, Situation Centred, Less Support

<u>OT Models of Practice:</u>

- **MoCA – Imitative or Active participation, Competitive Participation (level 5,6,7)**
- **MoHO Mastery / Achievement – MoHOST ratings F**

Progression routes in occupation



Innovative practice

- Using complementary models
- A defined structure of increased engagement and participation in activity
- OT provision and delivery is more focused and planned
- OT practice is grounded in & focused on occupation

Sustaining High Quality

- Promoting occupation in the least restrictive environment / Maximise functioning to abilities and aspirations
- Allows service transparency, & opportunity for comparability or benchmarking with other services.

Development & Implementation

- Clear rationale
- Promote ‘buy in’
- Ensure staff equipped with knowledge & skills
- Strategic work to introduce into OT pathway
- Evaluate progress (patient experience & outcome tools)

Local & National Directives

- Timely care
- Safe and secure environment
- Patients at the heart (personalising care)
- Measurable outcomes
- Socially Inclusive
- Comparability & transparency

(Care Pathways & Packages approach, MH PbR, Low Secure Guidance, Recovering Ordinary Lives)

Concluding Remarks

An eclectic approach may inspire services towards better outcomes, providing an OT service that is more focused & planned.

Innovative practice focused on occupation, ensures structure, relevance & clarity of OT role in the secure care pathway. It will emphasise meaningful activity & reablement as priorities from admission.

Implementing a standardised pathway with standardised outcome measures, & evidence based practice ensures a high quality OT service .

HoNOS

1 OVERACTIVE, AGGRESSIVE, DISRUPTIVE OR AGITATED BEHAVIOUR*
2 NON ACCIDENTAL SELF-INJURY
3 PROBLEM DRINKING OR DRUG-TAKING
4 COGNITIVE PROBLEMS
5 PHYSICAL ILLNESS OR DISABILITY PROBLEMS
6 PROBLEMS ASSOCIATED WITH HALLUCINATIONS AND DELUSIONS
7 PROBLEMS WITH DEPRESSED MOOD
8 OTHER MENTAL HEALTH AND BEHAVIOURAL DISORDERS
9 PROBLEMS WITH RELATIONSHIPS
10 ACTIVITIES OF DAILY LIVING
11 LIVING CONDITIONS
12 PROBLEMS WITH OCCUPATION AND ACTIVITIES

Summary Assessment of Characteristics (SAC)
13 STRONG UNREASONABLE BELIEFS
A AGITATED BEHAVIOUR / EXPANSIVE MOOD (H)
B REPEAT SELF HARM (H)
C SAFEGUARDING CHILDREN & VULNERABLE ADULTS (H)
D ENGAGEMENT (H)
E VULNERABILITY (H)