A new policy and practice landscape has emerged in England. Successive reforms have expanded community care and reduced residential home placements to promote independent living at home. In addition to the evolution of specialist assessments and equipment and a growing emphasis on cross-professional themes, occupational therapists now play a key role in integrated care. Despite the fundamental impact that such changes may have on the occupational therapy role, surprisingly little is known about the breadth of their activity.

The lack of standardised instruments available to measure the role of occupational therapy services in social care is a hindrance to research, evaluation and evidence-based practice. Diary tools have been repeatedly used with practitioners in adult social care, community mental health services, hospital-based social work, continuing healthcare and intermediate care settings which – when linked with other data – provide a means for exploring a wide range of research questions. The PSSRU, funded by the NIHR SSCR and in association with the Staffordshire and Stoke-on-Trent Partnership (SSOTP) NHS Trust, developed a new diary tool to determine how qualified and assistant-grade practitioners invested their time, and to investigate any association between time use, service setting and qualification status.

The self-report paper-based diary tool comprised an anonymised daily grid divided into 30-minute intervals, with a list of 37 activity codes for practitioners to complete each day during a reference week. The activities were organised into four sections: direct care, indirect care, team/service work, and other tasks.

One hundred and fifty-one schedules from the 244 SSOTP Trust practitioners undertaking an occupational therapy role were subject to a narrative and pragmatic evaluation: (1) an evaluation of the standard of schedule completion, (2) a group interview with three participants to explore their experiences using the schedule, and (3) a presentation of preliminary findings from the pilot to operational and strategic managers to review the face validity of the findings and to explore the utility of the diary schedule in reviewing performance.

Almost 5000 hours of practitioner activity were recorded. It was found that less than 10 per cent of the average working week was spent on ‘therapeutic activities’: one of the roles expected to be a central component of an occupational therapist’s duties. For the average working week, 39 per cent was spent in direct care with clients, whilst 31 per cent was undertaking indirect casework and a further 22 per cent in service development activities. Data also suggested that respondents spent over twice the time undertaking wider assessment activities as they did on occupational therapy specific assessment.

These findings possibly reflect the breadth of skills possessed by occupational therapists and the multi-disciplinary nature of their work. The appropriate balance between direct and indirect care has been a topic of some debate, due to concerns that health and social care reforms have pro-codified service delivery at the expense of service user/carer contact. These findings are similar to a 2000 study of a health visiting practice, in which respondents spent on average 41 per cent of their time in direct client contact and 27 per cent on ‘client-related’ activity, with the remainder on travel, administration and so on (Crofts et al., 2000). The data provide some evidence that qualified staff spent more time undertaking occupational therapy specific activities than assistant grade counterparts, particularly in primary care services. Qualified practitioners spent more time than assistant grade respondents on multi-disciplinary working, whilst spending less time on office-based administration. Assistant grade practitioners spent significantly more time on therapeutic activities than their qualified counterparts, whilst the reverse was true for time spent on care planning, monitoring and reviewing.

These results raise questions about whether occupational therapists have moved too far away from rehabilitative forms of support and too far towards the delivery of compensatory approaches. Given the current emphasis towards prevention and self-care (NHS England, 2014), and the College of Occupational Therapists’ previous statement that the majority of casework should be focused on special occupational therapy interventions (Pettican and Bryant, 2007), the findings here hint at a cause for concern.

For further information, visit: http://research.bmh.manchester.ac.uk/pssru/nihrsscr/projects/occupationaltheray

Other References


