



**Good work for
good health**
The difference
occupational therapy
makes



Royal College of
Occupational
Therapists



Occupational Therapy
Improving Lives
Saving Money
#ValueofOT

Good work for good health

The difference occupational therapy makes

Evidence shows that good work is good for our health. It benefits the individual, society and the wider economy. Ill health costs the UK economy £100 billion per year¹ but the benefits of work go much further than providing economic reward. Work is recognised as an essential occupation to support longevity, health and wellbeing.² As a society, we need to ensure that everyone has access to good work.

The national employment rate is at its highest in a generation, yet this is not the case for people living with disabilities.³ In the UK, one in three working age adults are living with a long-term condition. People who struggle with their health are more likely to either leave employment or never get a job in the first place. Our ageing population also means that as a society we need to think about how we best support an older workforce.

This report, *Good work for good health*, demonstrates how the occupational therapy workforce can be capitalised upon to reduce the disability employment gap.

The report considers the role of occupational therapy in ensuring work is an option for everyone. Occupational therapists are deploying their expertise in new ways, e.g. in primary care and tertiary services (occupational health), as well as developing new paths to vocational support e.g. community mental health teams.

Work is integral to the ethos of the profession. Occupational therapy was founded upon principles related to the benefits of work and supporting people with health conditions to gain or return to paid employment.

If everyone is to benefit from good work, we need to offer advice and support at an earlier stage.^{1,4,5} For example, people who have been signed off on sick leave for six months have less than a 50% chance of returning to work.⁶ Advice and support needs to be offered at any point of contact with the health service, whether it is at the GP practice or the emergency department.

As the only healthcare profession to train across physical and mental health focusing on occupation (people's every day activities), the Royal College of Occupational Therapists (RCOT) is calling for policy leads, commissioners and employers to ensure policy, legislation and services are designed to give advice and support as early as possible.



What can occupational therapists offer?

Targeted advice and support at a range of levels with approaches based on the needs of the individual.

At a **UNIVERSAL** level:

1 Advise on work for people with health conditions

Healthy workplaces can go some way to preventing poor health in the first place. Early intervention and advice, such as strategies to manage the demands of work and workstation assessments, can support an organisational culture that values staff health and wellbeing.

All healthcare staff should be confident to ask people of working age about their employment status and aspirations, and be able to signpost for advice and services if needed. Occupational therapists can train and support NHS and social care staff to manage these conversations appropriately and with confidence.

At a **TARGETED** level:

2 Develop vocational services that support people to access and/ or maintain employment

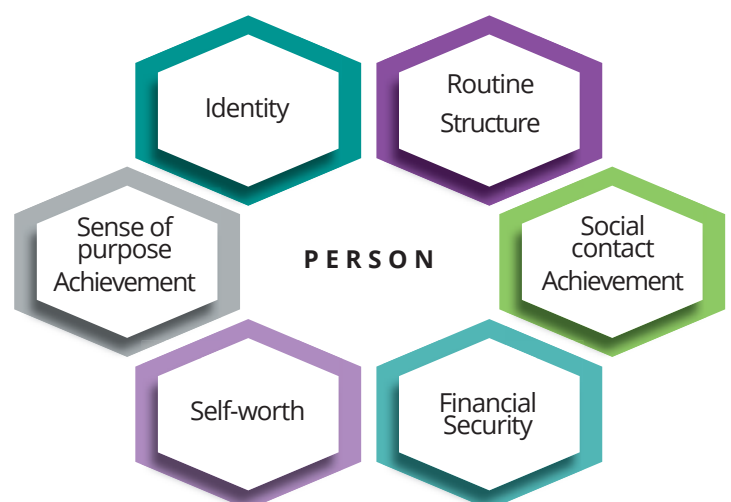
Occupational therapists provide vocational-focused interventions aimed at those already experiencing difficulties at work or getting into paid employment. Often embedded within existing health and care services, these interventions provide a clear pathway that supports people with health conditions and disabilities to better self-manage in the workplace.

At a **SPECIALIST** level:

3 Work with occupational health departments to support the health and wellbeing of staff

Occupational therapists' knowledge and skills should be used for the accurate assessment of the work ability of individuals. In addition, they can look at using broader organisational interventions aimed at bringing about a positive change in workplace attitudes to enable good work for people with disabilities and health conditions.

Good work offers...



OUTCOME

Advice on self-management is readily available

HOW

1 Advise on work for people with health conditions

For many people struggling with their health at work, the GP is the first point of contact. Yet in England out of the 9–10 million GP fit notes issued between 2016 and 2017, approximately 93% stated that the person was unable to work. Very few stated that the person may be able to work with adjustments⁶.

Allied Health Professions (AHP) Health and Work Report

Occupational therapists can support GPs with making judgements on fitness to work using the AHP Health and Work Report.⁷

This report is similar to the current GP statutory documentation; however it provides recommendations in highly specific terms about work ability, which employers and occupational health departments are able to implement to keep a person healthy at work.

Further still, in collaboration with the person, the recommendations support people with health conditions to better self-manage in all aspects of their life.

Elaine's Story

Elaine was in her 50s and worked in a factory when she took time off work with short-term work-related stress. She was experiencing low mood and poor sleep which was also having a negative impact on her home life.

Elaine was referred to an occupational therapist based within her GP surgery when she was signed off work. The occupational therapist worked with Elaine to identify the cause of stress and then recommended some lifestyle-based coping strategies to help her to manage. The occupational therapist discussed with Elaine potential reasonable adjustments to her work role, tasks and environment. These recommendations were shared with her employer's occupational health department through the use of the AHP Health and Work Report. They took the responsibility of implementing the recommendations on Elaine's return to work.

IMPACT

Elaine returned to work within four weeks, having had only two face-to-face occupational therapy consultations and two follow up phone calls.

Quote from Dr Kochar, Lanarkshire GP

"It's really opened our eyes to the huge role occupational therapists can have, particularly with mental health and improving peoples outcomes."

Quote from occupational health nurse

"I had expected Elaine to be off work for months and was surprised to see her returning to work so quickly."

Rolling out early access to advice and support

Wales and Scotland are leading the way in developing occupational therapy services within primary care. Access to transformation funding⁸ is ensuring that services can be scaled up across a wider geographical area. In England, occupational therapy is not listed on the Additional Role Reimbursement Scheme⁹ for primary care networks and roll out of vocational support is being hindered. In Northern Ireland, occupational therapists are being recruited into mental health practitioner roles within primary care but this does not address the needs of people with predominantly physical health issues.

RCOT is calling for:

- 1. Access to occupational therapy through GPs.**
- 2. A change in legislation so that AHPs can provide statutory sickness certification and advice on fitness for work.**
- 3 Ongoing roll out of Health and Work Champions programme**

Service example: RCOT Health and Work Champions

The NHS employs approximately 1.3 million people, is the world's fifth largest employer and delivers a million patient contacts every 36 hours. But how many of these contacts are lost opportunities to talk about the health benefits of good work? To address this, RCOT was funded by Public Health England through the Work and Health Unit Innovation Fund to deliver the Health and Work Champions training programme.

The project has to date trained over 100 occupational therapists. The champions' role is to train their workforce colleagues to ask the 'work question' as part of their everyday interactions with people who access their services. The champion is a source of local support for colleagues who are establishing where a person is on their work journey, e.g. on sick leave, in work and struggling with their health or out of work. If all staff are asking the 'work question' people can be signposted to local employment support at any point of contact with health services.

IMPACT

An evaluation of the Health and Work Champions Project demonstrated that training boosted 90% of staff's confidence and knowledge in supporting patients to return to work.¹⁰

"I am definitely having more conversations with patients about the potential of work to aid recovery instead of just being the aim at the end of recovery"

Health and Work Champion

Further details on Health and Work Champions is available here www.rcot.co.uk/hw

OUTCOME

People with health conditions are able to self-manage in the workplace

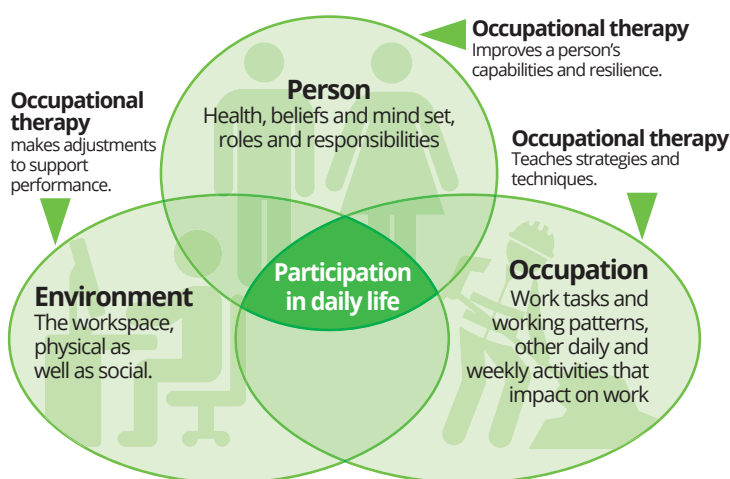
HOW

2 Develop vocational services that support people to access and/or maintain employment

Occupational therapists support people and employment services to understand the relationship between a person's health and the work activities that they carry out in the work environment. These three components impact on their performance and health and wellbeing at work.

Participation in Good Work

(Person, Environment, Occupation (PEO) model diagram¹¹)



Occupational therapists, through specific vocational assessments and interventions, are able to facilitate change.

Working with employment services, occupational therapists can take a targeted approach to overcome barriers to work. An example of this is Individual Placement and Support (IPS) supported employment approach.¹²

Individual Placement and Support (IPS)

Individual Placement and Support is a 'place then train' employment service that supports people with serious mental health problems gain paid work. Employment specialists are integrated in community mental health teams where occupational therapists are already working.

27 randomised control trials highlight that the IPS approach helps double the number of service users into work than traditional employment support. Furthermore, there is evidence that people who gain work through IPS go on to have fewer relapses and fewer days in hospital, and sustain their new employment for longer and at higher rates of pay.¹³

Occupational therapists can be the vocational champions in the clinical team, supporting their colleagues to access IPS as well as developing a peer worker network of those with lived experience who support other people accessing the IPS service.

"Occupational therapists are perfect in the role to champion employment as a health outcome as they are focused on meaningful activity and work; and IPS as a key approach to achieve this."

IPS only works with everyone in the team having positive conversations about work with service users and embracing the IPS staff as full members of the team. Clinical teams say that the IPS employment specialists not only bring hope to the service user but also hope to the team"

Gary Johnston (Director of Operations at Social Finance, which has funding from NHS-England to provide the national IPS Grow Service¹⁴).

Service Example: Fife Early Onset Dementia and Employability Support

Early onset dementia can occur in working age people and affect their work ability in different ways. Fife's Early Onset Dementia and Employment support provides a person with access to vocational, cognitive and occupational-based assessments. This targeted approach enables occupational therapists to provide tailored and person-specific recommendations on work ability that a person can share with their employers.

Service Example: Wellbeing through Work Service, Swansea Bay University (SBU) Health Board, Wales

The Wellbeing through Work Service provides short-term, early intervention/support to help individuals with, or at risk of developing, work limiting health conditions to remain in employment. People can self-refer to the service, reducing the demand on primary and secondary care services. Occupational therapists provide a telephone assessment and collaborate with the person to devise an action plan. This may include continued telephone support, face-to-face sessions or attending the five-week 'Managing your Wellbeing' course, which is a cognitive behavioural therapy/occupational therapy principled-based course, promoting self-management of health.

IMPACT

An evaluation of the service using the EQ5D-L tool demonstrated statistically significant improvements. Service users' average self-rated health scores significantly improved between entering and leaving the service. Those on sick leave when they entered the service generally experienced the greatest health gains.

Testimony from a person accessing the service.

"I strongly believe that this type of treatment that deals with the source of mental health problems is the most effective and I hope that extra funding can be found to improve these services locally."

OUTCOME

People with disabilities and long-term conditions are supported by employers

HOW

3 Work within occupational health departments to support the health and wellbeing of staff

As over 99% of the UK population work for small and medium sized employers (SMEs)¹⁵ many employees have limited access to occupational health services. The NHS, however, is the largest employer in the UK and its staff sickness rate causes major issues for frontline services.

NHS workers on average take 14 days as sick leave every year. Stress, depression and other mental health conditions are cited as the main cause of sickness.¹⁶

With ever decreasing budgets, lower recruitment rates, an ageing workforce, longer working life expectation and greater physical, mental and emotional demands, staff working in the NHS frequently feel the pressure when providing quality patient care. Inevitably and paradoxically, staff members' own health and wellbeing can suffer resulting in high sickness rates, staff turnover and low morale.

To effectively support employees' mental and physical health, occupational therapists need to work in partnership with occupational health and human resource departments to provide staff health and wellbeing services. Employing occupational therapists within occupational health services can play a vital role in closing the disability employment gap through interventions that support the recruitment and retention of people with health conditions and disabilities.

Quote from an employee:

"I cannot praise the service enough, nor could I praise the occupational therapist any higher. Without the support offered and the treatment received, I can guarantee that I would not be back in work at this present moment"

Service Example: Staff Health and Wellbeing Greater Manchester Mental Health NHS Foundation Trust

An occupational therapist was tasked with improving on the Commissioning for Quality and Innovation (CQUIN) Action Plan for recruitment, retention and staff satisfaction. Following an analysis of the barriers to engaging in occupations that support health and wellbeing at work, the occupational therapist focused on initiatives which would have the biggest staff impact.

These were:

- A review and relaunch of the staff wellbeing webpages
- A trust-wide health and wellbeing day
- A short training course for managers on health and wellbeing promotion.

IMPACT

There was significant improvement in the CQUIN score for staff health and wellbeing. The occupational therapist now works in an organisational development role, delivering ongoing initiatives in health and wellbeing and focusing on mental health and wellbeing at work following the recommendations from the Thriving at Work report.¹⁷

Service Example: Occupational Therapy Health and Wellbeing (OTHWB) Service, The Royal Liverpool and Broadgreen University Hospitals

The OTHWB service is led by an occupational therapist who provides both preventative and individually tailored assessments and interventions. This includes interventions such as task analysis assessments to make improvements to workspaces, as well as individual staff assessments and interventions to support them with managing their health and wellbeing and equality training for managers.

IMPACT

242 employees were seen by the service between January 2017 and January 2018. A cost savings analysis was conducted based on the findings from a service effectiveness questionnaire, which was sent to 60 people who had accessed the service during this time.

Average time on sick leave	(months)
Before intervention	2.11
Post intervention	0.28

The data confirms a statistically significant decrease in the amount of time staff spent away from work due to sick leave following access to the OTHWB service. From this, the reduction in sick leave across 30 sample employees equates to a **cost saving of £98,994. This equates to: three band 5 staff or four band 4 staff for a year.**

Emily's story – Cardiff and Vale University Health Board

Emily is an occupational therapist with a number of complex long-term medical conditions. The constant changing of her postural position was leading to pain and fatigue making it difficult to meet the demands of her job and affecting life at home.

Emily has required gradual adjustments in order to maintain her health and to be able stay in work. She has been supported to accept her disability, acknowledge her strengths, adapt to her environment and embrace change e.g. using an electric wheelchair.

IMPACT

Emily has remained in work with no episodes of long-term sickness absence and has maintained a healthy work life balance. She has been encouraged to share her skills, including supporting occupational therapy students with disabilities and additional learning needs and has been nominated for Educator and Mentor of the Year by Cardiff University.

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To achieve the three recommendations contained within this report, services should deploy occupational therapy expertise to

OUTCOME

HOW

3 People with disabilities and long-term conditions are supported by employers.

SPECIALIST
Support employers to fulfil the requirements of the Equality Act

3 Work within occupational health departments to support the health and wellbeing of staff.

2 People with health conditions are able to self-manage in the workplace.

TARGETED
Training and support for work coaches and those that provide vocational skills training
Vocational assessments and interventions

2 Develop vocational services that support people to access and/or maintain employment.

1 Advice on self-management is readily available.

UNIVERSAL
Health and work champions
Allied Health Professionals Health and Work Report

1 Advise on work for people with health conditions.

The full list of references for this report is available at www.rcot.co.uk/ilsm

Find out more: www.rcot.co.uk/ilsm

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Find out more: www.rcot.co.uk/ilsm