



Occupational Therapy in the Early Intervention in Psychosis Service

Introduction

With its holistic approach, occupational therapy (OT) fits well within the Early Intervention in Psychosis model which looks at the individual as a whole and includes environment, social networks and motivations, as well as supporting recovery through identifying person specific goals.

Occupational therapists (OTs) work generically as Lead Practitioners across Sussex; we are based in Bognor Regis, Worthing, Horsham, Brighton, Hailsham and Hastings. We are increasing in number and work alongside our fellow Lead Practitioners who are historically mental health nurses as well as social workers.

Define

Occupational therapy can be defined as "the therapeutic use of everyday life activities (occupations) with individuals or groups for the purpose of enhancing or enabling participation in roles, habits, and routines in home, school, workplace, community, and other settings" (AOTA, 2014).

Currently

- We are working towards promoting the difference OTs can bring to the multidisciplinary team (MDT) and in establishing OT specific interventions.
- We use mandatory EIPS outcome measures to help identify people who have occupational related needs which they would like support with.
- We are using the Model of Human Occupation (MOHO) tools more frequently and specifically using the Model of Human Occupation Screening Tool (MOHOST) as an outcome measure for OT interventions.
- We supervise, champion and support the Individual Placement Support Workers (Vocational Specialists).
- We promote physical health through interventions including walking groups and healthy eating groups.
- We identify clients in 'delayed recovery' and offer thorough OT assessments.
- We use client feedback to prioritise group interventions.
- We are able to offer sensory assessments due to our breadth of training.

Challenges

- How to promote OT to MDT colleagues and fit OT specific work into already busy caseloads
- Lack of resources including appropriate environments
- Prioritising budget for OT interventions
- Prioritising staffing for group activities
- Lack of supervision hierarchy in EIPS

Successes

- Increasing number of OT led groups
- Positive feedback from clients
- Use of MOHO outcome measures to demonstrate change

Guidelines

We seek to carry out our work in line with the Royal College of Occupational Therapists (RCOT) campaign: "Getting my life back: Occupational Therapy promoting mental health and wellbeing in England" (RCOT, 2018). This states how OTs are able to use their skills in supporting people with mental health difficulties in areas such as education, employment and physical health. In the Early Intervention in Psychosis Service (EIPS), OTs can have an impact on supporting people to engage in healthy occupations, decreasing the risk of serious health conditions. We also have a critical role in supporting people to obtain work by assessing the demands of the role and the environment. OTs also have key skills within EIPS to help people stay in education by looking at strategies to make the course more manageable alongside their mental health.

The National Institute for Health and Care Excellence (NICE) offers specific guidance around prevention and management of psychosis. 1.3.1.3, updated 2014, states that "Early intervention in psychosis services should aim to provide a full range of pharmacological, psychological, social, occupational and educational interventions for people with psychosis."

Their assessment and care planning guidelines for first episode psychosis state that assessment should address multiple domains, most of which fall under the definition and remit of OT such as: >> physical health and wellbeing >> psychological and psychosocial >> developmental >> occupational and educational >> quality of life. (NICE, 2014)

These domains clearly link to those outlined in Occupational Therapy Practice Framework: Domain and Process (AOTA, 2014), namely: occupations, client factors, performance skills, performance patterns, and context and environments.

In Progress

We recently established the EIPS OT forum to share current practice and develop ideas to introduce across the Sussex teams.

Promoting OT in EIPS is work in progress but it feels very positive to have made a start; we look forward to an EIPS OT Professional Lead to provide additional support with future planning.

References:

American Occupational Therapy Association (2014) Occupational Therapy Practice: Framework: Domain and Process. 3rd ed. American Journal of Occupational Therapy [online]. 68 (Supplement 1), pp. s1-s48. Available at: https://ajot.aota.org/article.aspx?articleid=1860439 (Accessed 5 January 2020)

RCOT (2018) Getting my life back: Occupational Therapy promoting mental health and wellbeing in England. [online] Available at: https://www.rcot.co.uk/promoting-occupational-therapy/occupational-therapy-i proing-lives-saving-money [Accessed 5 January 2020]

National Institute for Health and Care Excellence (2014) Psychosis and schizophrenia in adults: prevention and management. Available from: https://www.nice.org.uk/guidance/cg178/chapter/1-Recommendations#first-episode-psychosis-2 [Accessed 05 January 2020]