

NHS GGC Vocational Rehabilitation Steering Group

Results from Baseline Audit

1.0 Purpose

The purpose of this paper is to:

- Highlight the key findings from the baseline audit of Allied Healthcare Professional employability/ vocational rehabilitation activity
- Detail next steps in responding to and addressing key findings

2.0 Background

A baseline audit was conducted within NHS Greater Glasgow and Clyde Acute Services to explore the contribution that Allied Healthcare Professionals can make to supporting their patients to return to work or access employment for the first time.

Supporting people with health conditions to return to, or stay in work, is for many people a vital part of their overall rehabilitation and it is well recognized that the right type of work is good for overall health and wellbeing. Work not only improves people's economic circumstances but also improves their self esteem and quality of life.

It is recognised that within Acute Services a considerable amount of activity by AHPs is already undertaken, in certain specialties, to assist patients to return to work or remain in employment. However the nature and extent of this activity was unclear making it difficult to establish the extent to which work outcomes were a focused part of AHP activity and as well as staff development requirements in this area.

3.0 Baseline Audit

A questionnaire was developed and distributed to all Occupational Therapists (OTs) and Physiotherapists (Physio) working within key rehabilitation sites throughout NHS GGC acute services. Key rehabilitations services were identified as those having longer episodes of care which would enable a greater opportunity for meaningful intervention. Services included: Rheumatology, Cardiac, Stroke, Neurology and Musculoskeletal.

The questionnaire aimed to determine:

1. The current provision of information routinely collated regarding employment circumstances.
2. The level of support currently offered / provided to patients groups to enter/ return to or remain in employment
3. Any additional support needs required to assist patients to seek or remain in employment.

4.0 Key Results

The results have been analysed by professional group.

4.1 Occupational Therapist (OT) response

- 100% of OTs reported that they asked patients about their employment status, 78% asked about length of time of work and 74% of OTs explored whether the health condition was causing problems for patients at work.
- 100% of OTs stated they recorded work status information manually as part of case notes. There was no mechanism for electronic recording.

Patients who are not in work

- 68% of OTs discussed with patients their interests in finding out more about their options for employment, training, education and or voluntary work. 45% of OTs stated they discussed what barriers might be stopping patients from accessing employment, training, education and or voluntary work. 42% of respondents discussed the benefits of work and health. 51% of OTs stated they actively referred patients to employment support services.
- When asked what employment support service they refer to, 88% of OTs stated they referred to Momentum Scotland and 57% of OTs to Job Centre Plus. No OTs currently referred to Local CHCP Bridging Services or Local Regeneration Agencies.
- When asked about barriers OTs face in supporting patients who are not in work to access employment support services, 60% of OTs stated a lack of knowledge about what services are available and 37% were unaware of referral routes to support.
- When asked what would support OTs to help patients not in work access employment opportunities / services, 73% requested upskilling in this area and 84% requested a greater knowledge of support services and clear referral routes into organisations of support.

Patients who are in work

- 70% of OTs stated that they currently advise patients on workplace adaptations, 79% advise/ problem solve on issues relating to travel and access to workplaces and 33% contact /liaise with employers.
- When asked what support services they refer patients who are in work to, 87% stated Momentum Scotland and 66% of OTs stated Jobcentre Plus.
- When asked about the barriers OTs face in supporting patients in work to access support, 77% stated a lack of knowledge of what supports are available in NHS GGC and 63% were unaware of the referral routes into organizations of support. 11% of OTs stated no barriers.
- When asked about what would support OTs to help patients in work access support, 69% stated upskilling in this area and 79% requested a greater knowledge of services of support and clear referral routes into organizations of support.

4.2 *Physiotherapist response*

- 96% of physiotherapists reported that they asked patients about their employment status, 85% asked about length of time of work and 82% explored whether the health condition was causing problems for patients at work.
- 87% stated they recorded work status information manually as part of case notes. 6% stated they record this information both manually and electronically.

Patients who are not in work

- 52% of physiotherapists discussed with patients their interests in finding out more about their options for employment, training, education and or voluntary work. 64% stated they discussed what barriers might be stopping patients from accessing employment, training, education and or voluntary work. 47% of respondents discussed the benefits of work and health. 29% of physiotherapists actively referred patients to employment support services.
- When asked what employment support service they would refer to, 62% of physiotherapists referred to Job Centre Plus, 45% to Momentum Scotland and 16% to local CHCP Bridging Services.
- When asked about barriers physiotherapists face in supporting patients who are not in work to access employment support services 66% of respondents stated they do not feel they have sufficient knowledge in this area and 64% stated a lack of knowledge about what services are available. 64% were also unaware of referral routes to support.
- When asked what would support physiotherapists to help patients not in work access employment opportunities / services, 51% requested upskilling in this area and 84% requested a greater knowledge of support services and clear referral routes into organisations of support.

Patients who are in work

- 73% of physiotherapists stated that they currently advise patients on workplace adaptations, 83% advise/ problem solve on issues relating to travel and access to workplaces and 28% contact /liaise with employers.
- When asked what support services they refer patients who are in work to, 61% stated Jobcentre Plus, 19% Local Bridging Services and 47% Momentum Scotland.
- When asked about the barriers physiotherapists face in supporting patients in work to access support, 71% stated a lack of knowledge of what supports are available in NHS GGC and 73% were unaware of the referral routes into organization of support. 16% of respondents stated they faced no barriers.
- When asked about what would support physiotherapists to help patients in work access support, 52% stated upskilling in this area, 86% requested a greater knowledge of services of support and clear referral routes into organisations of support.

5.0 Next Steps

NHS GGC Vocational Rehabilitation Steering Group have reviewed the above findings and agreed to the implementation of 3 key interventions.

5.1 Employability and Financial Inclusion Training.

Development and implementation of a ½ day training course aimed at:

- Increasing staff's understanding of the policy context relating to health, work and wellbeing
- Providing staff with basic information about the employability support services available for patients who aspire to progress towards and into work.
- Raising staff's awareness of how to access employability support services across NHS GGC
- Enabling staff to identify their role in supporting the employability aspirations of their patients
- Increasing staff's understanding of the financial situation in the UK and the benefits of financial inclusion services to patients
- Raising staff's awareness of the financial services available and how to access them

Training will be implemented as part of a phased approach. Phase 1 will include Cardiac, Rheumatology, Stroke, Musculoskeletal and Neurology services commencing from May 2010.

To support the employability element of the training a number of resources were developed including:

- Employability Referral Pathway
- Mapping of employability support services across Greater Glasgow and Clyde

Update Nov 2010:

- Phase 1 of the training programme was completed in November 2010. Over 100 staff took part in the training including some staff from the National Spinal Unit and the National Brachial Plexus Injury Unit both based at Southern General Hospital.
- Feedback from the evaluations have been very positive with some headline results in relation to the training impacting on staff practice detailed below:

Will today's training result in any changes to your current practice in relation to discussing and referring patients to employability and financial support services?

Yes	No
103	1

Below is a selection of comments from staff who attended the training:

- Prior to this training session would not have had any idea where to refer patients to.
- More confident in broaching the issue of finance and employability with patients now
- Having just begun work in the area of rheumatology this training has given me a strong foundation on which I can build my knowledge and skills. It has also increased my awareness of the importance of discussing these issues with my patients.
- Very relevant as a lot of our patients are at a stage where they have a change in circumstances and need to look at support for a return to work or change of employment
- I will be able to provide more information to patients about services and will address employability much more and at an earlier stage
- Yes I would now feel more confident about knowing where to refer people and raising the subject
- Feel more confident in discussing services that are available – more likely to refer on now that I know services that are out there.

5.2 Cardiac Rehabilitation Pilot: Systematic Inquiry Tool

Piloting of systematic employability and financial questioning within the Cardiac Rehabilitation service within 2 hospital sites to evaluate the impact of this approach on:

- Embedding learning from the training into the core practice of staff
- Enabling more patients' to access services that can support them to return to/ stay in work and access support for financial inclusion issues.

The pilot commenced in September 2010 and will be evaluated using a qualitative feedback method from staff at the 3 and 6 months point. The results will be used to inform the mainstreaming of this approach across the other Cardiac Rehabilitation sites as well as other Acute service settings.

5.3 Vocational Rehabilitation Pilot

Piloting of an enhanced vocational rehabilitation intervention within rheumatology services at the Southern General Hospital. This service will be targeted at individuals who would benefit from additional specialist support to return to, or stay in work. The service will be delivered for 12-18 months and evaluated to determine future use of resources/ skill mix within the rheumatology service as well as informing the delivery of vocational rehabilitation interventions in other acute service settings.