

A yellow circle with a black L-shaped bracket on its left side, framing the title text.

Vocational Rehabilitation: A Model for Stroke

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[Contents of session]

- Our Service
- Initial Outcomes
- Key Partners
- Future Plans

[Borough of Tower Hamlets]



[Defining service need...]

- Were we meeting best practice for stroke?
 - Limited guidelines for vocational rehab
 - Views of stroke survivors

- Were vocational goals being met?
 - Restrictions of 3/12 remit of Community Stroke Team (CST)
 - Gaps in other service providers
 - Role and remit of OT in stroke/neuro services

[So...whose job is it?]

- There is a need for specialist employment support for people with stroke....
- There is a need for appropriate, adequate (work) rehabilitation for people with stroke!

[Why OT?]

- Historical focus for profession
- OT models: basis on 'meaningful occupation'
- Task analysis, task modification
- Rehabilitation for work roles

[Tower Hamlets VR Service]

- Run by OT
- Adding to existing MDT neuro services
- Working alongside acute, rehab and community sectors
- Caseload of stroke, MS, ABI (any neurological condition)

[Service Ethos]

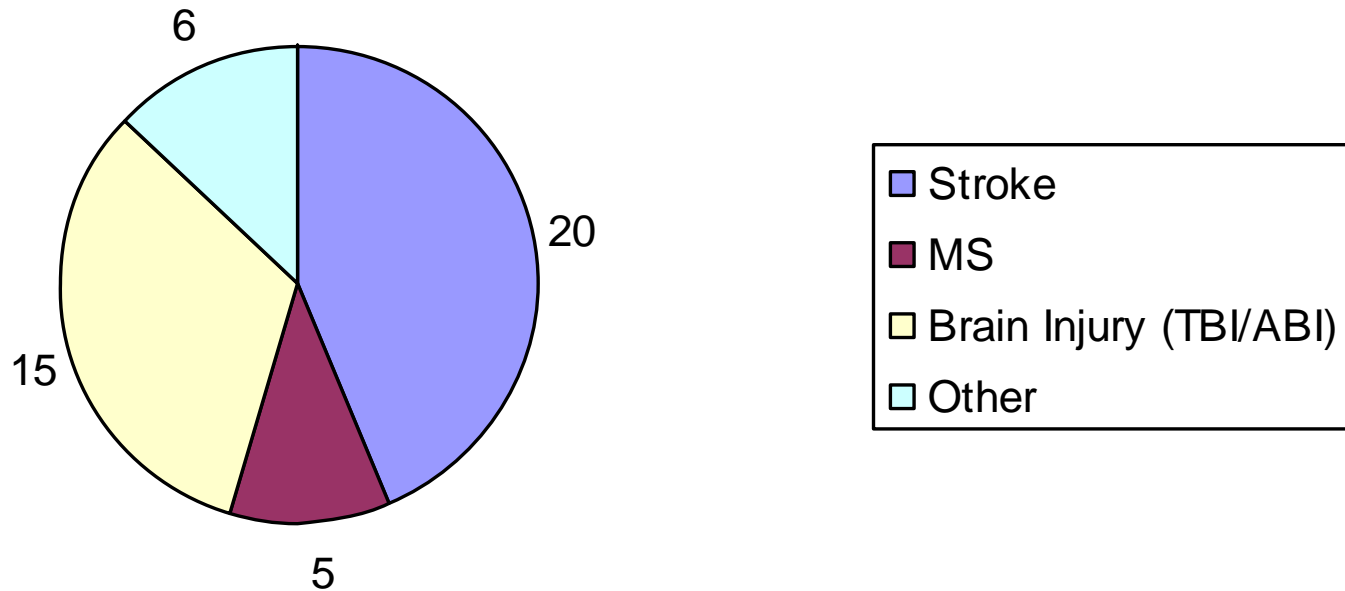
- Rehabilitation
- Responsiveness
- Flexibility
- Early intervention
- Collaborative working
- Health promotion

[Service Delivery Process]

- Assessment
- Intervention
- Follow-up support
- Partnership Working

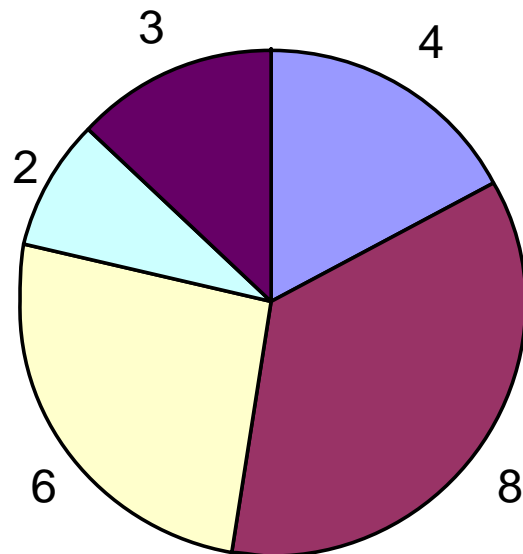
Our Referrals

VR Referrals by Diagnosis



Outcomes at 12 months

Outcomes at VR Discharge



- DNA
- Paid Work
- Work ready (no job)
- New roles (study, vol)
- Medically unwell

[Partnerships for work]

- Employers
 - Differing policies
 - Statutory vs local arrangements

- DEAs
 - Access to DWP programs
 - Outreach clinics

[Partnerships for work]

- Stroke consultants
 - Stroke clinic reviews
 - Medical sign-off for work issues (e.g. driving, occ health etc)
- GPs
 - The 'Fit Note'
 - Occupational Health reports

[Partnerships: 3rd Sector]

- Varied, borough-funded
- Differing levels of support
- Specialist areas e.g. benefits advice, advocacy, employment support
- Ask your DEA for local information

[Partnerships/Referrals]

- City Aphasia Clinic

- Connect

[Tower Project: JET]

- Job, Enterprise and Training Scheme
- Neutral environment: non-statutory
- Team of specialist advisers
- Strong links with local employers and support services
- Good understanding of Benefit and Access to Work Systems

[Partnership Working: JET]

- Joining forces:
 - Clinical and employment expertise
 - Local knowledge
- Types of working:
 - For existing clients: joint goals, regular case discussions
 - For new clients: Joint initial assessments, action planning

[VR role: Case Example 1]

- Jo, 54 years, married with one son
- CVA: left-side weakness, reduced attention/concentration
- Worked for 15 years as senior civil servant
- Referred while inpatient on stroke unit

[VR role: Case Example 1]

- Assessment
 - Job role
 - Worksite assessment
 - Impairment/activity

- Liaison:
 - Rehab team
 - Employer/line manager
 - DEA, Tower Project, Access to Work

[VR role: Case Example 1]

- Intervention:

- Graded RTW plan with home working
- Continuation of UL rehab program
- Review of work role including managing access issues into building
- Prompt response to issues as they arose
- Timely response to review needs: 2 months later, required follow-up

[VR role: Case example 2]

- Anne, 54 years, married with one son
- CVA: left-side weakness, reduced attention/concentration
- Worked for 15 years as senior civil servant
- Referred while inpatient on stroke unit

[VR role: Case example 2]

- Assessment
 - Job role
 - Worksite assessment
 - Impairment/activity

- Liaison:
 - Rehab team
 - Employer
 - DEA, Tower Project, Access to Work

[VR Role: Case example 2]

- Intervention:
 - RTW plan
 - Continuation of UL rehab program
 - Review of work role including managing access issues into building
 - Prompt response to issues as they arose

[New Developments]

- Developing an outreach service to NEL boroughs
- Developing a tariff for VR interventions:
 - Costs of service
 - Clear 'package of care'
 - Outcome measurement

[Conclusion]

- Work has value for our clients!
- OT role in work-focused rehabilitation
- Timeliness/public agenda for work schemes
- Importance of good partnership working: combining skills to achieve outcomes