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Utilisation of resources rather than additional funding: Reallocation of Occupational Therapy staff to create a more holistic approach and wider skill mix of staff across two acute areas of OT practice.

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Overview of project:

The Accident and Emergency and acute medical occupational therapy teams have been merged together to allow for a seamless service for patients, more timely allocation of patients, increasing seven days a week service and an increase in staff moral.

Reason for project:

The Accident and Emergency (A&E) and Medical teams were separately seeing patients within the hospital, the Accident and Emergency team on a 7 days a weeks basis in A&E and the medical team on a 5 days a week basis. The Accident and Emergency team were having difficulty covering weekends and often only having one member of staff available to work but on a week day had at times too many staff for the unpredictable workload. The medical team were having difficulty screening their referrals for appropriate allocation and they were not able to respond to referrals in a timely manner.

Key stakeholders:

Patients have been at the centre of the change. Patients were not seen in a timely manner from the acute medical occupational therapy team due to staff case holding and being unable to screen referrals for appropriateness prior to allocating cases. An allocation meeting was held once a week to allocate patients. From the accident and emergency occupational therapy team there was limited staff, to cover weekends causing staff to be stretched at a weekend but at times have many members of staff on a week day.

What was done and timeframe:

In 12 months the teams have been merged together. The teams have merged together so that on a day to day basis Occupational Therapists are on an on call basis for A&E allowing patients to be seen as sooner. The team is bigger allowing more cover for weekends and to allow the medical patients to be screened/seen at the weekends. The medical patients are also seen more quickly because if patients are urgent there are more occupational therapists to see the patients. There is more cover for junior staff to be supported by senior staff.