Advocating for occupational wellbeing and occupational justice for patients in a forensic psychiatric setting through a graded prevocational skills programme

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The Prevocational Skills Programme in Context

- Referral Psychiatric Hospital specialising in acute involuntary mental health and Forensic Psychiatry
- Ward Multi disciplinary Team (MDT) programme is limited
 - Idleness, boredom, occupational imbalance and occupational alienation
 - Adverse events and risk taking behaviour
 - Institutionalisation
- High number of Forensic Mental Health Care Users (FMHCUs) relapsing within projects.

The Prevocational Skills Programme in Context

- Based on Vona Du Toit's Model of Creative Ability and Kielhofner's Model of Human Occupation.
- Graded and divided
 - Aims
 - Supervision
 - Responsibilities
 - Complexity
- The Activity Participation Outcome Measure (APOM) is used to track changes as the FMHCUs progress through the programme.

Why a Prevocational Programme?

- Meaning of work
- Benefits of employment (Van Niekerk, 2005)
- MHCUs are often excluded from employment
 - Functional difficulties
 - Stigma
- Skill development along with intervention in the domains of social, work, Activities of daily living (ADL's) and Instrumental activities of daily living (IADLs)

Overview of the Prevocational programme



Low socioeconomic area Primary school Unemployed

30 day observation period Found not fit and not responsible Admitted as a state patient

Ward catering for Moderately Intellectually Impaired MHCUs

Activities unhealthy Impaired ADLs and IADLs Reserved with poor basic social skills

Ward Projects

Initially compiled by: C. Brooke and M. Jacklin Revised by: N. Erasmus and N. Rautenbach

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Area of participation	Expectation	Types of activities	
Type of action	Explorative (Therapist directed)	Baking Gardening	
Task concept	Unconsolidated	Mobile shops Recycling	
Amount of steps	1-3		
Supervision needed	Maximum		
Organization of	Needs maximum assistance		
environment			
Use of tools	Explorative handling of tools	(Du Toit,2004)	



Industrial Therapy Workshop

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Area of Participation	Expectation	Types of activities	
Type of action	Explorative (Patient directed)	Gardening Shoe Repair Paper craft Car wash Woodwork Sewing Beading Bag making Soap making	
Task concept	Developing		
Amount of steps	3-5		
Supervision needed	Moderate		
Organization of	Moderate to minimal assistance		
environment		Hair salon	
Use of tools	Explorative	Refreshments	
	More appropriate		











Industrial Therapy Shop

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Area of Participation	Expectation	Types of activities
Type of action	Experimental	Library Book shop Second hand store
Task concept	Becomes fully consolidated	
Amount of steps	5-7	
Supervision needed	Minimal	
Organization of environment	Needs minimal assistance	
Use of tools	Handling of tools mostly appropriate	(Du Toit,2004)











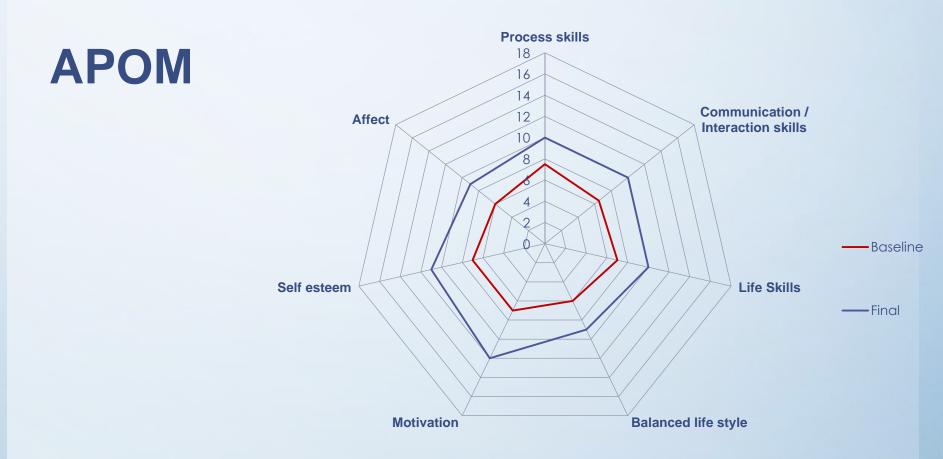
Tuck shop

Initially compiled by: C. Brooke and M. Jacklin Revised by: N. Erasmus and N. Rautenbach

Area of Participation	Expectation	Types of activities	
Type of action	Experimental Imitative	Working the cash register	
Task concept	Consolidated	Recording sales Working in the	
Amount of steps	More than 7 steps	kitchen Preparing food Stock taking	
Supervision needed	Minimal to none		
Organization of environment	Needs minimal to no assistance		
Use of tools	Handling of tools appropriate	(Du Toit,2004)	

Grading between levels

Ward projects	IT Workshop	IT Shop	Tuck shop
Follows instructions (Max Support)	Follows instructions (Mod support)	Follows instructions (Min support)	Follows instructions independently
Work habits modelled of group leader	Work habits	Coping and conflict management skills	Stress management skills
Sustain activity participation for entire session	Work endurance (4 hour work day)	Work endurance (5 hour work day)	Work endurance (7 hour work day)
Basic money handling	Complexity of calculations	Record keeping	Record Keeping
Basic social skills	Social presentation	Higher order social skills	Higher order social skills
Basic hygiene	Personal presentation	Refined forms of self-care	Personal management



Successes to date

- Tracking improvement
- Caters for a variety of MHCUs
- Forms an integral part of MDT intervention
- Sustained Employment
 - Graded nature of the programme
 - Improve or maintain functioning
- Meaning, purpose and identity

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