

Promoting and supporting **'work' as a health outcome** is a key target in current UK policy and guidance from professional organisations. Health and social care practitioners are being asked to ensure that 'work' is routinely addressed early on following illness or injury but our own research, and the wider evidence base, suggest that many practitioners report feeling ill-equipped to do this.

We are a team of experienced practitioners and educators who deliver postgraduate academic programmes and CPD in Occupational and Vocational Rehabilitation at the University of Salford and have developed bespoke training packages for practitioners across a range of routine and specialist practice settings; such as the following educational event for the Greater Manchester Stroke and Neuro-Rehabilitation Operational Delivery Networks.

Thirty stroke / neurological practitioners attended a **two-day educational event** aiming to help delegates explore their current practice in relation to vocational rehabilitation and identify aspects of their practice that could be enhanced or developed to support those service users for whom staying in or returning to work may be feasible and important.



Content included

- underpinning drivers and evidence
- bio-psycho-social assessment
- a stepped approach to practice
- work focused planning and management
- reporting and sharing information
- ethical and legal issues and
- resources to support practice

A cascade learning package (worked up in collaboration with the delegates at the event) was also provided to enable the spread of knowledge and good practice.

Evaluation showed that the delegates: -

- ✓ found the training relevant to their practice and appropriately pitched and enjoyed the balance of theory, practical work, and opportunities for interaction

- ✓ valued the use of real-life examples from practice in discussions and case studies; appreciated the resources provided, particularly the AHP Fitness for Work Advisory Report, assessment tools and planning resources
- ✓ had identified areas of their practice that could be enhanced or developed

Planning to change practice: there were a small number of delegates already operating at a specialist VR level who reported that they could develop their practice further but were hindered by lack of resources, they therefore intended to try to influence commissioning decisions about VR.

For the majority of delegates however, there was a clear commitment to changing or enhancing their practice; demonstrated through several (many repeated) comments, which include:



- bringing the work question into practice earlier; encouraging all staff throughout teams to start 'sowing seeds' with earlier conversations about work
- being more structured in VR assessments and interventions
- taking more ownership for VR, not asking GPs to recommend modifications
- adapting the VR approach according to service users' needs
- building on the positives (what service users can do)
- VR is a topic for all so will share with MDT and acute – not just community occupational therapists
- using the AHP Fitness for Work Advisory Report (or using it more effectively)
- thinking more broadly about assessment and goal setting with those who may have been told they won't go back to work; considering as many different alternatives as possible
- facilitating more self-management in the VR process
- meeting with other agencies, such as supported employment to confirm what interventions they can offer
- re-prioritising work activity analysis over other areas
- encouraging communication within the workplace
- feeling more confident in my role
- recommending the course to colleagues

If you would like more information on educational packages or would like to discuss bespoke training for your team / service, please get in touch with:

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Quoting reference: Stroke & Neuro in your email