WELCOME TO OCCUPATIONAL THERAPY

CARE OF THE ELDERLY TEAM
**Occupational Therapy and Care of the Elderly**  
**In the Newcastle Upon Tyne Hospitals NHS Foundation Trust**

The Care of the Elderly OT team in the Newcastle Upon Tyne Hospitals NHS Foundation Trust is based at the Freeman Hospital.

Freeman Hospital – Wards 9, 13, 14, 15 and Melville Day Hospital.  
Ward 3 Walkergate (intermediate care unit) is moving to ward 17 Freeman Hospital in July 2011.

The team also provides OT cover to ward 16, a medical ward at the Freeman Hospital.

The admissions to the acute elderly wards can come from various sources including A & E, Emergency Admissions, and other acute medical, orthopaedic, neurological and surgical wards in the hospital and from home.

The Melville day unit is based at the DSC and has an active medical and rehabilitative role and provides a multidisciplinary assessment for older patients with predominantly physical problems.

Elderly patients requiring rehabilitation are often transferred to ward 9 ofr 14 Freeman or ward 3 Walkergate Hospital.

The Freeman team are based in an office within the disablement services centre in the Freeman grounds. The office allows the team to make any phone calls required and write up OT notes.

Normal working hours are 8-4 Monday to Friday.
**Occupational Therapy Intervention**

Occupational Therapy intervention includes full functional assessment of each patient to ensure safe discharge from hospital following admission. The Wards all have a multidisciplinary approach to the treatment and safe discharge of patients with regular MDT meetings to discuss progress and make plans. Patient's may not be discharged home but discharged to further rehabilitation wards or to residential and nursing homes after functional assessment.

Patients are admitted onto the care of elderly wards via many different speciality areas. If the patient has come from a different ward it is often helpful to liaise with that speciality team to discover if any OT intervention has taken place prior to their transfer.

Elderly patients often come in and out of hospital frequently; because of this previous OT notes are kept in the office so they can be referred to on readmission.

**Supervision**

Supervision takes place on a regular basis:
- Band 7 OT supervised by Head OT
- Band 6 OT’s supervised by Band 7 OT
- Band 5 OT’s supervised by Band 6 OT
- OT Assistants supervised by Band 5 OT’s

**Team Training**

- Takes place once a month on a Tuesday 12.30 –1.30 pm.
- All staff members and grades participate including students.
- Topics included are relevant to the speciality.

**Students**

- Students of all levels of training are regularly supervised by all qualified OT staff with more than one year post graduate experience.
<table>
<thead>
<tr>
<th>Ward</th>
<th>Location</th>
<th>Specialty</th>
<th>No of beds</th>
<th>Daily handover</th>
<th>MDT meetings</th>
<th>OT cover</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Level 5</td>
<td>Rehabilitation</td>
<td>28</td>
<td>Yes</td>
<td>2 weekly</td>
<td>Band 5 OT, 0.5 Band 7 OT</td>
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<tr>
<td>13</td>
<td>Level 6</td>
<td>Acute Elderly care</td>
<td>30</td>
<td>Yes</td>
<td>2 weekly</td>
<td>Band 5 OT</td>
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<tr>
<td>14</td>
<td>Level 6</td>
<td>Orthopaedic Rehabilitation</td>
<td>30</td>
<td>3x weekly</td>
<td>1 weekly</td>
<td>Band 5 OT</td>
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<tr>
<td>15</td>
<td>Level 6</td>
<td>Acute Elderly care</td>
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<td>Yes</td>
<td>2 weekly</td>
<td>Band 5 OT</td>
</tr>
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<td>18</td>
<td>Level 1</td>
<td>Acute Elderly care</td>
<td>30</td>
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<td>3 weekly</td>
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<td>MDU</td>
<td>DSC</td>
<td>Day hospital</td>
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<td>n/a</td>
<td>As required</td>
<td>0.5 Band 6 OT</td>
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<td>Walkergate 3</td>
<td>Walkergate. Moving to 17</td>
<td>Intermediate care</td>
<td>19</td>
<td>Yes</td>
<td>1 Weekly</td>
<td>Band 6 OT, 0.5 Band 5 OT</td>
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Primary Conditions
There are many conditions which result in elderly patients being admitted to hospital with but there are some primary conditions, which are more common, they are as follows:

- Cardiac Dysfunction
- Cellulitis
- Chest Infection
- Urinary Tract Infections (UTI's)
- Acute confusion due to infection
- Chronic Obstructive Pulmonary Disease (COPD)
- Chronic Pain
- Cognitive Impairment
- CVA/Hemiplegia
- Dementia
- Diabetes
- Falls
- Fractures
- Decreased mobility
- Oncology
- Osteoarthritis
- Parkinsons Disease
- Renal Impairment
- Rheumatoid Arthritis
- Sensory impairment

Patients are quite often admitted with more than one of the above problems

Assessment
Assessments can include the following:
- Activity Analysis
- Activities of Daily Living
- Environment
- Evaluation for Adaptive Equipment
- Cognitive Components
- Psycho-Social Skills/Components
- Screening of Sensory Skill & Components
- Visual Screening
- Work and Productive Activities
**Intervention**
The OT intervention on the care of the elderly wards can be split into numerous areas.

Performance areas in activities of daily living
- Dressing
- Feeding/Eating
- Functional Communication
- Functional Mobility
- Transfers
- Grooming and Hygiene
- Object Manipulation
- Socialisation

Work and Productive Activities
- Domestic ADL
- Safety Procedures

**Performance Components**
When completing interventions there are several performance components, which are looked at during the process. These areas are listed below.

*Neuromusculoskeletal*
- Muscle tone
- Postural control/alignment
- Range of motion
- Reflex
- Strength and endurance

*Motor*
- Bilateral integration
- Fine co-ordination/Dexterity
- Gross co-ordination
- Praxis
- Visual Motor Control

*Sensory*
- Biofeedback
- Perceptual processing
- Sensory/Processing
- Sensory Awareness

*Cognitive Integration and components*
- Object recognition
- Sequencing
- Use of standardised assessments (MEAMS and MMSE)
Psychosocial Skill and Components
- Coping skills
- Role performance
- Time management

Therapeutic Adaptations
- Adaptive equipment

Prevention
- Co-ordination of daily activities
- Energy conservation

Theoretical Models Guiding Practice
There are 6 main theoretical models that guide practice on the care of the elderly wards. They are:
- Rehabilitation approach
- Client centred approach
- Cognitive approaches
- Problem solving approach
- Compensatory approach
- Educational approach
Reading List – Elderly Care


