WELCOME TO OCCUPATIONAL THERAPY

CARE OF THE ELDERLY TEAM
The Care of the Elderly OT team in the Newcastle Upon Tyne Hospitals NHS Foundation Trust is set over 2 hospital sites. They are as follows:

Freeman Hospital – Wards 9, 13 and 15; Melville Day Hospital
Walkergate Hospital – Ward 1 Ward 2
Ward 3 (intermediate care unit)

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 longer slow stream rehabilitation are often transferred to 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.

The Rehabilitation service at Walkergate Hospital is provided from the Laurel Centre which has both OT and Physiotherapy facilities.
OT cover to the wards is as follows:

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<th>WARD</th>
<th>OT</th>
<th>ASSISTANT</th>
<th>CONTACT DETAILS</th>
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**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.
Speciality: Care of the Elderly (Acute)

Location: Level 6 Freeman Hospital

Number of Beds: 30
The ward is divided into male and female 6 bedded bays with 6 single cubicles.

Consultants: Dr Louw; Dr Davison; Dr Frearson

Senior Sister: Claire Mayfield
Junior charge nurse: Lee Gibbons

Physiotherapist: Sarah Soulsby Band 6
Band 5 – rotational every 4 months

Physiotherapy Assistant: Joanna Ord

Social Worker: Michaela Percy
Zafar-ul-haq

Method of Referral:
Ward staff can refer patients to the OT on the ward on a daily basis

There are two multi-disciplinary team (MDT) meetings.
Monday 11.00 am Dr Davison/Dr Frearson
Tuesday. 2.00 pm Dr Wynn/Dr Louw
Referrals can also be made via MDT meetings

The nurse’s station is located in the centre of the ward where patients nursing care plans can be found.
Diaries and a white board locating individual patients can be found at the nurse’s station
The medical notes are located in 3 trolleys in the doctor’s room
**Speciality:** Care of the Elderly

**Location:** Level 6

**Number of Beds:** 30

**Consultants:** Dr Gani; Dr Jay; Dr Wynne,

**Sister:**

**Physiotherapist:** Jane Cook

**Physiotherapy Assistant:** Derek Anderson

**Social Worker:** Sabah Meshykhi, Jim Gormley

**Method of Referral:**
Referrals can be made on a daily basis via the morning handover. There are two multi-disciplinary team (MDT) meetings. Monday – 12pm Dr Gani; Dr Wynne Thursday – 10.00am Dr Jay Referrals can be made at both MDT meetings
**Ward 9 Freeman extn 37009**

**Speciality:** Care of the Elderly (Acute)

**Location:** Level 5 Freeman Hospital

**Number of Beds:** 36  
The ward is divided into male and female 6 bedded bays with single cubicles.

**Consultants:** Dr Wynne, Dr Allcock, Dr Kerr

**Senior Sister:** Donna Lewthwaite  
**Junior Sister:** Sue Thompson/Katie Hickey

**Physiotherapist:** Pat Sherwood Band 6  
Band 5 – rotational every 4 months

**Physiotherapy Assistant:** Jackie Elliott

**Social Worker:** Anne Million, Christine McGorrie

**Method of Referral:**  
Ward staff can refer patients to the OT on the ward on a daily basis

There are three multi-disciplinary team (MDT) meetings.  
Tuesday 11.00am Dr Allcock 1.45pm Dr Wynne  
Thursdays 11.30 am Dr Kerr  
Referrals can also be made via MDT meetings

The nurse’s station is located in the centre of the ward where patients nursing care plans can be found.  
Diaries and a white board locating individual patients can be found at the nurse’s station  
The medical notes are located in trolleys in the doctor’s room
Speciality: Care of the Elderly (Rehabilitation)

Location: Walkergate hospital

Number of Beds: 23
The layout of the ward is divided into male and female bays with some single cubicles.

Consultants: Dr Frearson/ Dr Davison

Sister: Jill Cockburn

Junior Sister: Jane Perkins

Physiotherapist: Sue Haley/ Sarah Jane Herron

Physiotherapy Assistant: Sharon Martin/ Lisa Maddison

Social Worker: Stephen Knowles

Method of Referral:
There is a multi-disciplinary team (MDT) meeting. Thursday 9am
Referrals can be made at the MDT meetings. Referrals can also be made over the phone or in person

The nurse’s station is located in the centre of the ward where patients nursing care plans can be found. Diaries and a white board locating individual patients can be found at the nurse’s station
The medical notes are located in 2 trolleys in the sister’s office
**Ward 2 Walkergate extn 38502**

**Speciality:** Care of the Elderly (Rehabilitation)

**Location:** Walkergate Hospital

**Number of Beds:** 23
The layout of the ward is divided into male and female 2 and 45 bedded bays with some single cubicles.

**Consultants:** Dr Louw / Dr Tan

**Sister:** Jane Northwood

**Junior Sister:** Vera Hill

**Physiotherapist:** Sue Haley / Sarah Jane Herron

**Physiotherapy Assistant:** Lisa Maddison / Sharon Martin

**Social care assessment officer:** Margaret Rowntree

**Method of Referral:** Referrals can be made via the multi-disciplinary team (MDT) meeting.
Monday 1.30pm
Referrals can also be made over the phone or in person.

The nurse’s station is located in the centre of the ward where patients nursing care plans can be found.
Diaries and a white board locating individual patients can be found near the nurse’s station
The medical notes are located in 2 trolleys outside the sister’s room
Speciality: Intermediate care

Location: Walkergate Hospital

Number of Beds: 19
The layout of the ward 15 single rooms and 2/2 cubiced bays

Consultants: Dr Louw

Sister:

Physiotherapist: Fiona Littlewood

Social Worker: Jan Thornton

Method of Referral: Via intranet located under ward 3. Please follow instruction on screening tool.
**Melville day unit Freeman**

**Speciality:** Care of the Elderly (Outpatients)

**Location:** Freeman Hospital

**Number of patients:** up to 20 per day

**Consultants:** Dr Louw/ Dr Frewson/ Dr Wynn/ Dr Davison

**Sister:** Carol Formosa

**Physiotherapist:** Liz York

**Social Worker:** Duty

**Method of Referral:** Referral cards are completed by medical or nursing staff and placed in the OT tray

The medical notes/nursing notes for each day are stored in a trolley. Other notes are kept in filing cabinets at the reception.
Description of Specialty

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 and Intervention

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 spilt 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


