



Transforming Community Equipment Services

England

The College of Occupational Therapists (COT) believes that everyone in England, regardless of whether they pay for themselves or are supported by the state, has the right to information, advice and assistance to help them select the most appropriate equipment.

Occupational therapists have the expertise to assist people with selecting and using equipment to help them engage in and achieve their desired potential in life's occupations. In other words, to help people look after themselves (self care), enjoy themselves (leisure), contribute to their family and their community (work, learning, social and economic activities) and care for others (caring activities).

Growing expectations about choice, access, and convenience in health and social care are a fact of modern life. In order to meet these expectations and the changing demographic needs of the population in England a review of equipment services was carried out by the Care Services Efficiency Delivery programme (CSED). The retail model, transforming community equipment services (TCES), was developed. It aims to give everyone more choice and control over the services they receive and to give people who pay for themselves (i.e. self-funders) the help, advice and information they need when selecting and using equipment.

TCES will not change the way users and carers who need state support are assessed. It will, however, provide greater opportunities for occupational therapists to support and enable people, especially those who are not entitled to help from the state sector.

Occupational therapists will continue to provide assessments. They are well placed to:

- Be independent needs assessors
- Support the development of independent needs assessors by offering training, advice and governance.

Occupational therapists are expert needs assessors. They have the knowledge and skills to provide advice, information and assessments, to make recommendations and offer training to those people, who need, choose, use and supply equipment.

Occupational therapists work with their clients and their clients' carers and family to provide a range of interventions, including help, advice and rehabilitation as well as different strategies and techniques to use as an alternative to equipment. For more information see COT's Position Statement *The value of occupational therapy and its contribution to adult social service users and their carers* (COT 2008) and go to www.cot.org.uk.

The COT supports the principles of choice, autonomy and personalised services to enable people to engage in and achieve their desired potential in life's occupations, regardless of their ability to pay. Everyone has the right to receive high quality, equitable services, where service users and their families and carers are at the heart.

Key recommendations

Occupational therapy staff will:

- Work in partnership with their clients to help them obtain appropriate equipment that will enable them to achieve their desired goals.
- Build on existing evidence to become champions and advocates of more empowered equipment users: they will be their advisors, trainers and partners.
- Provide equipment users with information, instructions and demonstrations, as appropriate, so they use equipment safely and with the maximum benefit.

Occupational therapists will continue to:

- Use and develop their expertise to identify a range of solutions for people who have complex needs and, where appropriate recommend equipment, including bespoke equipment, to promote independence and wellbeing.
- Have regard for the safe use and recommendation of appropriate equipment, whilst taking into account their clients' desired goals and lifestyle, including housing, employment, education, rehabilitation and other services and equipment they may be using.
- Support colleagues to develop preventative services so people who are planning for their future needs, will receive appropriate and timely assistance.

COT will:

- Work with stakeholders to develop robust, equitable services and share examples and evidence of good practice.
- Continue to promote the expertise and unique knowledge and skills of occupational therapists that are essential to delivering satisfactory outcomes for equipment users.
- Support occupational therapy staff to be champions and advocates, who work in partnership with their clients.
- Support occupational therapists to work with manufacturers to develop new products made from recyclable materials, to offer choice and value for money, and to meet the changing expectations and needs of equipment users.
- Work with CSED with the aim of ensuring:
 - Assessors work to minimum acceptable standards, have received appropriate training and work within the limits of their abilities.
 - All equipment users receive services that are provided by accredited retailers or suppliers of equipment.
 - Specialist or bespoke equipment is provided by appropriately trained and skilled retailers and suppliers, who will work with occupational therapists and equipment users during assessment and provision and ensure products are set-up correctly to fit each equipment user's individual needs.
 - Equipment for those people who need help after surgery or because they are terminally ill, e.g. short-term loans, is available promptly and removed in a timely manner.
 - Provision is made for those people who cannot get to retail outlets or cannot assemble and fit equipment themselves.
 - Equipment users receive information to help them select equipment, use and care for equipment safely, and about ownership and their responsibilities e.g. for maintenance.

Background

About occupational therapy:

Occupational therapists work across all health and social care providers. They have worked for the NHS and local authority social services departments since they were established (COT 2008).

Health and wellbeing are influenced by a person's ability to engage in life's occupations. Restoring a person's ability to function independently and exercise choice and control over his/her daily activities increases productivity and life satisfaction (Law, Steinwender and Leclair 1998, Vrkljan and Miller-Polgar 2001).

Occupational therapists help people with a wide range of needs develop or restore their ability to carry out daily occupations and activities to ensure they achieve maximum independence and autonomy.

Occupational therapy interventions include assessments of need and, where appropriate, the recommendation of equipment. They provide training, support and advice to equipment users about equipment and their environment (Karaskowsky and Finlayson 2001).

The provision and use of appropriate equipment enables people to be independent by reducing their dependency on others and preventing loss of confidence and depression (Marks 1997, Winchcombe and Mandlestam 2006). However, using the wrong equipment or using the wrong equipment at the wrong time can be detrimental to a person's health and wellbeing.

Occupational therapists have the skills and knowledge to advise about over-use or over-specification of equipment and timely withdrawal of equipment e.g. during recovery or rehabilitation. They are also skilled to train and supervise other equipment assessors to ensure they are competent.

Occupational therapists have been key to the development and management of many of today's community equipment services.

For more information about occupational therapy go to www.cot.org.uk

About TCES:

At the time of writing, TCES is part way through pilot or 'shadow running' projects. Data is being collected and has yet to be analysed before a fuller picture of its operational impact will be seen.

TCES aims to deliver personalised services to help people anticipate and plan for any future needs for themselves, their families and their friends. It supports the government's proposals around prevention and giving the people of England choice and control for their health and social care services. It complements other initiatives such as Putting People First (Commission for Social Care Inspection et al 2007) and Individual Budgets and Self-directed Care (www.in-control.org.uk).

TCES is a retail model that proposes a much larger pool of needs assessors, which will include independent practitioners. Needs assessors may be attached to retail outlets and demonstrator centres, or they may work independently. They will also continue to be within health and social services, to meet the needs of those requiring help from the state.

The TCES model will not change the way users or carers who need state support are assessed and will not change any statutory duties placed upon NHS or local authority social services departments. The model suggests that it will free up therapy time for re-enablement. Re-enablement is already happening through rapid response teams and intermediate care and is not dependent on the TCES model. Furthermore, the increasing complexity of needs of some equipment users means it is unlikely that occupational therapists' time will become available to see more people unless the workforce is increased.

The model hopes to open up new opportunities for self-funders with 'independent needs assessors' who will provide private assessments of equipment needs. 'An independent needs assessor is a local qualified professional who can, for a fee, carry out a full assessment of equipment needs and will be able to issue a 'private' prescription for any products' (CSED 2008).

Within the TCES retail model equipment will be provided by accredited retailers or suppliers. They will be able to give state supported users choice by offering to either exchange equipment for a prescription or topping up existing prescriptions to an equipment user's product of choice suiting their lifestyle or preference.

For more information about TCES go to www.csed.csip.org.uk

References

Care Services Efficiency Delivery Programme (2008) Care services efficiency delivery. London: Care Services Improvement Partnership. Available at: www.csed.csip.org.uk/workstreams/transforming-community-equipment--wheelchair-services/community-equipment-a-vision-for-the-future/shadow-running-launch.html?keywords=%2527locally%2520qualified%2520professionals%2527 Accessed on 05.02.08.

College of Occupational Therapists (2008) Position Statement: *The value of occupational therapy and its contribution to adult social service users and their carers*. Available at www.cot.org.uk (In press)

Commission for Social Care Inspection, English Community Care Association, General Social Care Council et al (2007) *Putting people first*. London: Department of Health.

Kraskowsky LH, Finlayson M (2001) Factors affecting older adults' use of adaptive equipment: review of the literature. *American Journal of Occupational Therapy*, 55(3), 303–310.

Law M, Steinwender S, Leclair L (1998) Occupation, health and well-being. *Canadian Journal of Occupational Therapy*, 65(2), 81-91.

Marks O (1997) Equipped for equality. London: Scope. Available at: www.scope.org.uk/downloads/action/publications/toolkit.pdf Accessed on 14.03.08.

Vrkljan B, Miller-Polgar J (2001) Meaning of occupational engagement in life-threatening illness: a qualitative pilot project. *Canadian Journal of Occupational Therapy*, 68(4), 237-246.

Winchcombe M, Mandlestam M (2006) *Getting on with our lives?* Manchester: Disabled Living North West.

Publication date:	April 2008
Lead group:	Professional Practice
Review date:	TBC