



O.T'S FOCUS ON ASSESSING A PATIENT'S FUNCTIONAL STATUS AND SETTING GOALS TO HELP MAXIMISE THEIR ABILITY TO CARRY OUT MEANINGFUL TASKS (OR "OCCUPATIONS") OF THEIR OWN



OCCUPATIONAL THERAPY IS ALL ABOUT PROBLEM SOLVING. OT'S AIM TO GET TO THE ROOT OF A PATIENT'S MAIN ISSUES, AND UNPICK THEM TO HELP THE PATIENT REACH THEIR OWN SPECIFIC GOALS, WHATEVER THEY MIGHT BE

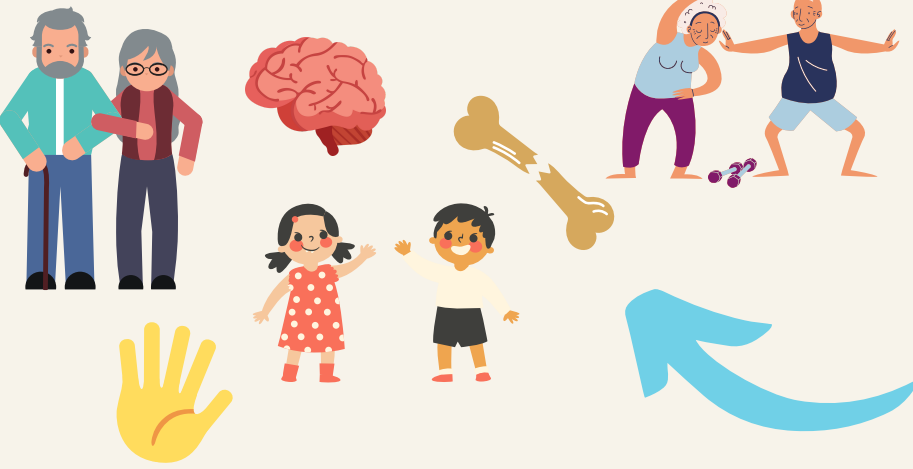


OT'S WORK IN LOTS OF SETTINGS, SPECIALISING IN FRAILITY, PAEDIATRICS, MENTAL HEALTH, ORTHOPAEDICS, RHEUMATOLOGY... THEY WORK IN HOSPITAL WARDS, EMERGENCY DEPARTMENTS, IN THE COMMUNITY, IN PRISONS... THE LIST GOES ON!

A DAY IN THE LIFE OF AN OCCUPATIONAL THERAPIST



EACH PATIENT RESPONDS DIFFERENTLY TO THERAPY, SO O.T'S APPLY THE CONCEPT OF 'GRADING', WHERE THEY INCREASE OR DECREASE THE DIFFICULTY OF THE INTERVENTION DEPENDING ON HOW THE PATIENT RESPONDS



THE O.T. ROLE WITHIN THE MDT IS FREQUENTLY MISUNDERSTOOD, AND THEY'RE KEEN TO PROMOTE THEIR PROFESSION AND EDUCATE OTHERS IN THE VALUE THEY BRING TO THE TEAM

