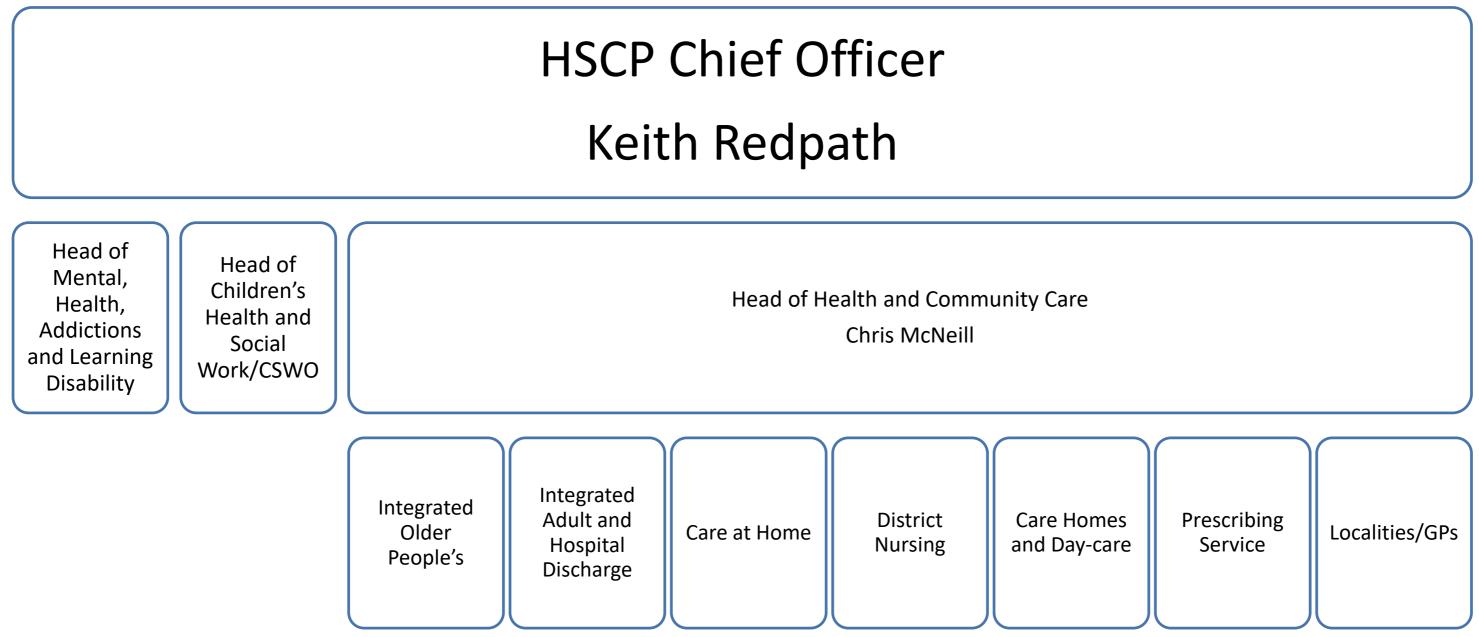
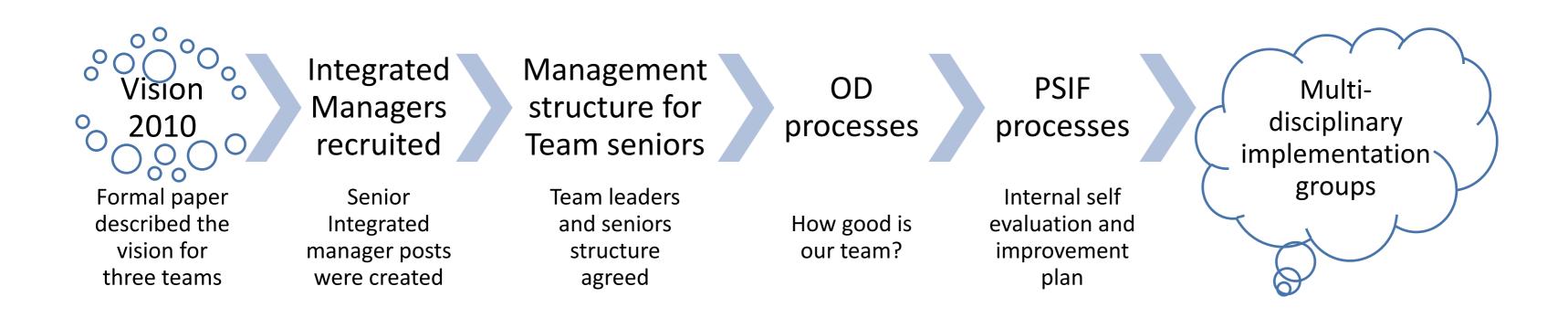
Hazel Kelly Team Lead Occupational Therapist, **Community Older Peoples Team**



Planning for integrated multi-disciplinary teams



Early agreed principles for all community based staff

Recording	Integrated	Joint	Joint	Dis
tool	induction	NHS/WDC	decision	
Carefirst	programme	budgets	making	

West Dunbartonshire Health & Social Care Partnership

> Discipline specific guidance

Team processes and guidance

- OT integration meeting with all qualified staff across 3 teams
- •Reviewed tasks undertaken in traditional SWOT and community health OT roles
- Removed tasks already completed by both
- •Explored why tasks on SWOT list not completed by health staff and vice versa
- •Agreed areas of OT practice to review in 2016

- •Progression through OT forum 2 working groups mix of health and SW OT staff in each
- Showers and kitchens initial areas
- Procedures for Integrated Occupational Therapy Services
- Practice Guide for Integrated Occupational Therapy Services
- •Ongoing progression at OT forum

- Supervision
- Identification of training needs (equitable access)
- Documentation
- •MARG
- Health and wellbeing wider team
- •Competencies
- •Blurring of roles (across team)

Benefits

- Person centred
- •Brought down barriers
- Improved knowledge and skills
- •Direct access to professional support
- Reduced duplication
- Improved access to training formal/informal
- •Managing risk on an individual basis
- Staff retention

Learning/challenges

- Involve staff at earliest opportunity
- Resistance to change real and perceived
- •Hugely labour intensive for management in terms of effort and commitment
- •Allow staff time own pace
- Revisit vision often and present in different formats
- •Allow opportunities to voice and acknowledge what is not working.
- •Support from OD