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Session 3.1**Five characteristics of effective occupational therapy in emerging fields of practice****Creek J, Freelance practitioner, UK**

Worldwide, occupational therapy is developing and expanding into new areas. Our professional theory base, which was developed for practice within mainstream settings, is adapting to meet the needs of emerging fields. Radical new theories are also being developed, mainly in places where mainstream health and social care services are inadequate to meet the occupational needs of populations. These theories are based on current ideas, such as human rights (Whiteford and Townsend 2011) and community development (Watson 2004). However, this theory development is still at an early stage.

This paper describes the findings of a PhD study, undertaken at Sheffield University. The aim was to explore how the practice of occupational therapy in marginal settings might move forward both the practice and theory of occupational therapy.

The study was a qualitative exploration of occupational therapy practice outside mainstream settings. The sample was nine projects, four based in Africa and five in the UK; all designed to address occupational needs that were not being met by mainstream services. Data were collected through in-depth interviews with staff involved in the projects. Interview transcripts were analysed using thematic and interpretive analysis.

The study found that occupational therapy practice on the margins realizes five professional characteristics in action: openness, agency, commitment, flexibility and resourcefulness. These characteristics are described and their implications for occupational therapy education and service delivery are explored.

The paper concludes that integration of these five characteristics into the occupational therapy theory base has the potential to change the focus of pre-registration education, the ways that services are delivered, and how we conceptualise professionalism.

Ethical issues were considered, including informed consent, anonymity, and data storage. Approval was given by Sheffield University ethics committee on 26 March 2006.

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Keywords

Theory, Research, Practice development

Session 3.2**Change and transformation through supported volunteering****Fegan C, Sheffield Hallam University, UK**

Social and cultural implications of mental ill health, including unemployment and worklessness mean that individuals may experience exclusion from activities that provide meaning and purpose. For some individuals, inclusion through paid work may not be a primary goal because it has been found to be too stressful or too demanding in relation to their psychosocial functioning, and so other occupations are considered to be meaningful. The option of supported volunteering as meaningful occupation for service users can have a positive impact on personal recovery. Finding meaning and appropriate challenge from work is as important for those who volunteer as it is for those who are in paid work (Leufstadius et al 2009). The aim of this doctoral study was to investigate how service users perceived their experience of volunteering. University and NHS ethical approval was gained. The study adopted a constructivist approach to grounded theory (Charmaz 2006) for data collection and analysis of eighteen in-depth interviews and was conducted in two phases. This paper describes the findings and highlights the following themes to represent the volunteering experience: 1) treading carefully at first; 2) using my experience; 3) rehearsing for a new direction; 4) discovering my new self; 5) volunteering as validation. These themes support a substantive theory that supported volunteering can enhance recovery because it fosters positive risk taking and validates a valued identity that integrates a mental health experience. The findings of the study suggest that mental health professionals, including occupational therapists, are in a unique position to build partnerships with service users to support their recovery and vocational aspirations by providing opportunities for volunteering. Mental health services should also consider ways in which they can provide volunteering opportunities as part of a recovery oriented service within their organisations.

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Keywords

Mental health, Vocational rehabilitation/work, Recovery and rehabilitation, Inclusion

Session 3.3**Diabetes: charting a course of health and wellbeing in the sea of life****Youngson A, Cox D, Wilby H, Cole F, University of Cumbria, UK**

In the UK 2.9 million people are diagnosed with diabetes and an estimated further 850,000 people may not be aware that they have this condition (Diabetes UK, 2012). The impact on health and social care costs is significant, with increased

risk of further chronic complications, as well as considerable personal difficulties for the individual and their family. The aim of this study is to describe the lived experience of those with type 1, type 2 and pre-diabetes, to ascertain what helps or hinders successful self-management in relation to lifestyle. This qualitative study forms the first part of the first author's doctoral thesis enquiring into the role of occupational therapy in meeting the demands of this health issue, to promote and drive change in approaches to prevention and self-management. Following ethical approval from the University of Cumbria, seven people with type 1, type 2 or a diagnosis of pre-diabetes were recruited using a self-selecting convenience sample. Digitally recorded unstructured interviews focussed on the lived experience of each participant and were analysed using qualitative mixed methods, including the use of creative metaphor. Findings have revealed the complex interplay between the person and their life circumstances when managing or attempting to prevent diabetes. Examples will be given of participants' stories and their feelings about living with, or with the threat of, diabetes. The contribution of creative metaphors in analysis will also be discussed and how this shaped the next stage of the research. Diabetes is not an easy condition to control. An in-depth understanding of the pressures of living with (or with the threat of) diabetes will enable occupational therapists to take a specific occupational, rather than medical, approach to enabling people to manage successfully in the context of their particular lifestyle, and to drive change in this area.

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Keywords

Research, Long term conditions (including neurological), Health and wellbeing, Participation

Session 3.4

Correlation between OT and nursing levels of functioning of clients with intellectual disability

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Background: Different assessment instruments are used by occupational therapists (Vona du Toit Model of creative ability-creative participation assessment (De Witt 1997)) and nursing staff (Fairview self-help observation scale (Fourie et al., 1999)) to determine the level of functioning of clients with intellectual disability. Differing assessment outcomes cause conflict between the professions in regards to service delivery and the implementation of therapy plans. The aim of the study was to determine how well the information from the two instruments correlate and whether the levels of functioning (creative ability) as assessed by occupational therapists, correlate with the level of functioning found by the nursing staff on the Fairview self-help observation scale.

Methodology: Ethical clearance was obtained from the Department of Health and the University of the Witwatersrand. Assessment data from 2010 to 2012 were gathered by the occupational therapist from an existing hospital database on 586 patients. A descriptive correlation study design was used to determine the correlation between the creative ability levels and the Fairview self-help observation scale.

Results: Results show the average level of functioning to be 24 months on the Fairview self-help observation scale and self-differentiation (level 2) on the creative participation assessment. A spearman rank correlation test indicated a good to excellent correlation (0.84) between levels of creative ability and the developmental levels of the Fairview self-help observation scale. Changes in developmental skills (measured by the Fairview) will, therefore, be reflected in the level of creative ability.

Impact on service users: The Fairview self-help observation scale correlates well with the creative participation assessment, indicating that professions can continue to use profession-specific measures and, therefore, avoid further conflict in the development of therapy plans.

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Keywords

Learning disability, Mental health, Practice development, Service transformation

Session 4.1

Sight loss among older people: making a difference through joint working

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Among those over 60, one person in every nine has serious sight loss; this rises to one in every three among those over 85. Sight loss makes daily tasks more difficult, reduces mobility and increases risk of falls. Older people with a visual impairment report high levels of isolation and depression. A range of health, social care, and voluntary services exist to provide support. As part of the refreshed UK Vision Strategy (Vision 2020 UK Ltd), the Adult UK Sight Loss Pathway sets out a map of best practice in delivering services for adults with sight loss. The Pathway places an emphasis on early intervention and ensuring that services are well coordinated across health and social care.

Occupational therapists (OTs) will encounter older people with sight loss who have not so far attended services to get a diagnosis, and those who need support with daily living and environmental adaptation. The objective of this seminar is to build an understanding of how OT professionals can assist older people with sight loss to access support through the stages of the Sight Loss Pathway, enabling them to contribute to maintaining independence and staying safe. We will highlight