

# Living Well, Living Fully: The Power of Occupational Therapy within Community Rehabilitation Service

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## Introduction

The Community Rehabilitation Service (CRS) offers short-term, multidisciplinary input to clients recently discharged from the hospital setting.

There are three strands of referrals received to the service:

1. Bed based rehabilitation
2. Home based rehabilitation, providing 'care and therapy' input
3. Home based rehabilitation, providing 'therapy only'. No care element required or the care element is provided by family members and/or a long term care package has restarted.

CRS are essential in maintaining the flow between acute hospital setting, facilitating timely discharges and providing care in the community. The service assists in maintaining individuals in their own home environment for as long as possible, preventing hospital readmissions where able.

There is growing emphasis on supporting people to recover in their own home environment, the Intermediate Care Framework (2023), reinforcing 'home-first' pathway.

## Right Support, Right Time

The Occupational therapists (OTs) are assessing and providing rehabilitation input to these clients, with the aim to maximise independence, reduce dependency on formal care services and improve quality of life.

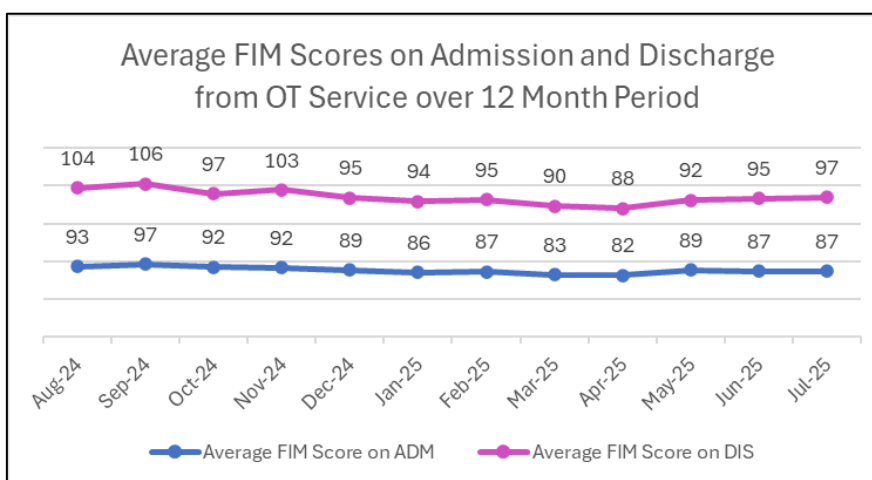
The standardised outcome measure used is the Functional Independence Measure (FIM)- UK Version 2.2. Developed originally in the 1980s, it includes 18 items; 13 motor items and 5 cognitive items, each rated on 7 levels.

The FIM allows us to capture the client's improvements and the positive impact of our service interventions.

## Impact of Our OT Service

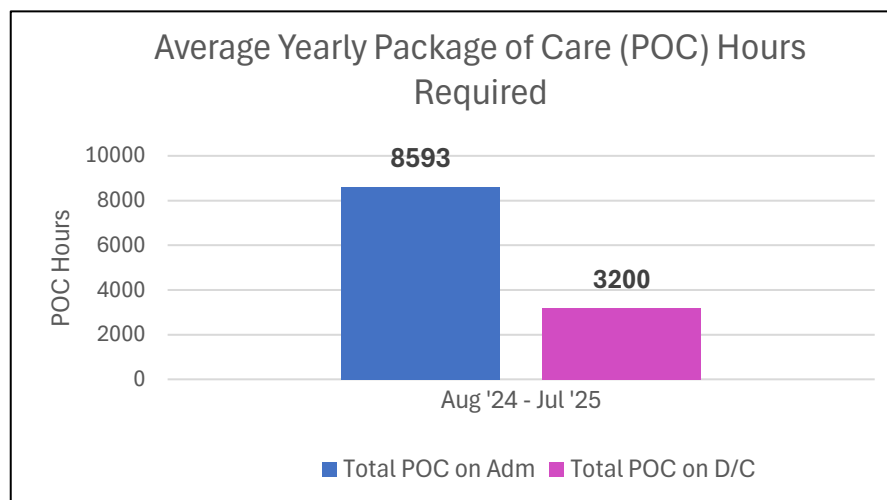
CRS in the BHSCT subscribe to the National Health Service (NHS) Benchmarking Network. The following data represents the 2024-2025 annual review of our home based service. The key outcomes were:

- 91.1% of referrals accepted onto the service
- Average time from referral to commencement of service 3.4 days
- The median duration of service was 23.9 days.
- **37.9%** of patients captured in the clinical case reviews experienced a reduction in their care packages following service provision.
- Additionally, **98.3%** of patients reported feeling they were treated with respect and dignity while receiving care from the service.



**Mean 8.6% improvement** in the FIM UK score per service user over last 12 months

**Mean 62.8% reduction** in care package hours following CRS OT input over last 12 months (August '24- July '25) Based on £20per hour care fee; **estimated saving of £107,860**



## Key Strengths of Our Service

- Multidisciplinary working, harnessing unique skills of OT, physiotherapy, social work and pharmacy.
- The plasticity of our OT role, adapting to the service and client's needs.
- Interventional and impactful service, rewarding witnessing client's progress.



## Future Service Development

- Increasing representation of OT within CRS
- Increasing the awareness of CRS to improve the quality of referrals
- Flow out of CRS; securing an alternative discharge pathway for clients who require a longer term POC when their period of rehabilitation is complete.

## References

- Turner-Stokes L, Siegert RJ. (2013) *A comprehensive psychometric evaluation of the UK FIM+FAM*. Disability Rehabilitation, 35(22): 1885-1895.
- NHS England (2023) *Intermediate Care Framework for Rehabilitation, Reablement and Recovery Following Hospital Discharge*. Accessed at: [England.nhs.uk](https://www.nhs.uk)
- NHS Benchmarking Network (2025) *Intermediate Care Provided at Home 2025 Summary Report*. Accessed at: [nnhsbenchmarking.nhs.uk](https://www.nhs.uk)