

'Mind the Gap!'

Piloting an Occupational Therapy service in a Multiple Sclerosis Clinic

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Background

Multiple sclerosis (MS) is a lifelong condition that affects the brain and spinal cord. It damages the layer that surrounds and protects the nerves, affecting how they carry messages around the body.

Current evidence related to MS care:

- Support for a multidisciplinary team (MDT) approach for people with MS and optimally to start at time of diagnosis
- Support for occupational therapy (OT) input in rehabilitation and community settings
- Support for MS care units, including an OT within the MDT team

At Monash Health:

- Patients with MS are seen in an outpatient MS clinic
- Prior to 2023 MS Clinic was attended by medical, nursing and physiotherapy staff

Lack of OT presence in the outpatient MS clinic was hypothesised to be a potential gap.

Aims

Research Question:

Is there a need for an OT service in the outpatient management of MS patients at Monash Health?

Aims:

- To identify and quantify the OT service gap
- To determine feasibility of an OT service
- To quantify and evaluate the OT service benefit

Methods

Pilot of OT service in MS Clinic: September- November 2023
'Walk in' consultative assessment/intervention

Patient Pre/Post Survey

- Features of the patient group
- To identify possible unmet need
- Awareness of the OT pilot service
- Evaluate the OT service provided

Clinical Audit

- Number of patients
- Referral source
- Time spent
- Referral reason
- Issues identified
- OT interventions

Staff survey

- Understanding of the OT role
- Confidence in making a referral to OT
- Perspectives on the value add of OT

Results - Patient Survey

Patient Pre-Survey

N=52 (83% <65 yrs)
81% no current OT
71% no current PT
36% want to see OT

Top 4 MS Symptoms

Sensory issues
Fatigue
Domestic occupation issues
Hand dysfunction

Patient Post Survey

Evaluation of OT service (N=22)

How important?



How helpful?



Should it be ongoing?



"Extremely **informative** and ever so **helpful**. Brought things to my attention that I never considered"
"The combination of **OT/PT** taught me a lot"

"Fantastic service and concept bringing **Allied Health** together with **Neurology** is very useful" "OT is something I'm sure all patients need."

Results - Clinical Audit

Top 4 referral reasons:

1. Mobility/balance issues
2. Upper limb issues
3. Vocation/work/study issues
4. Falls

Top 4 issues identified in assessment:

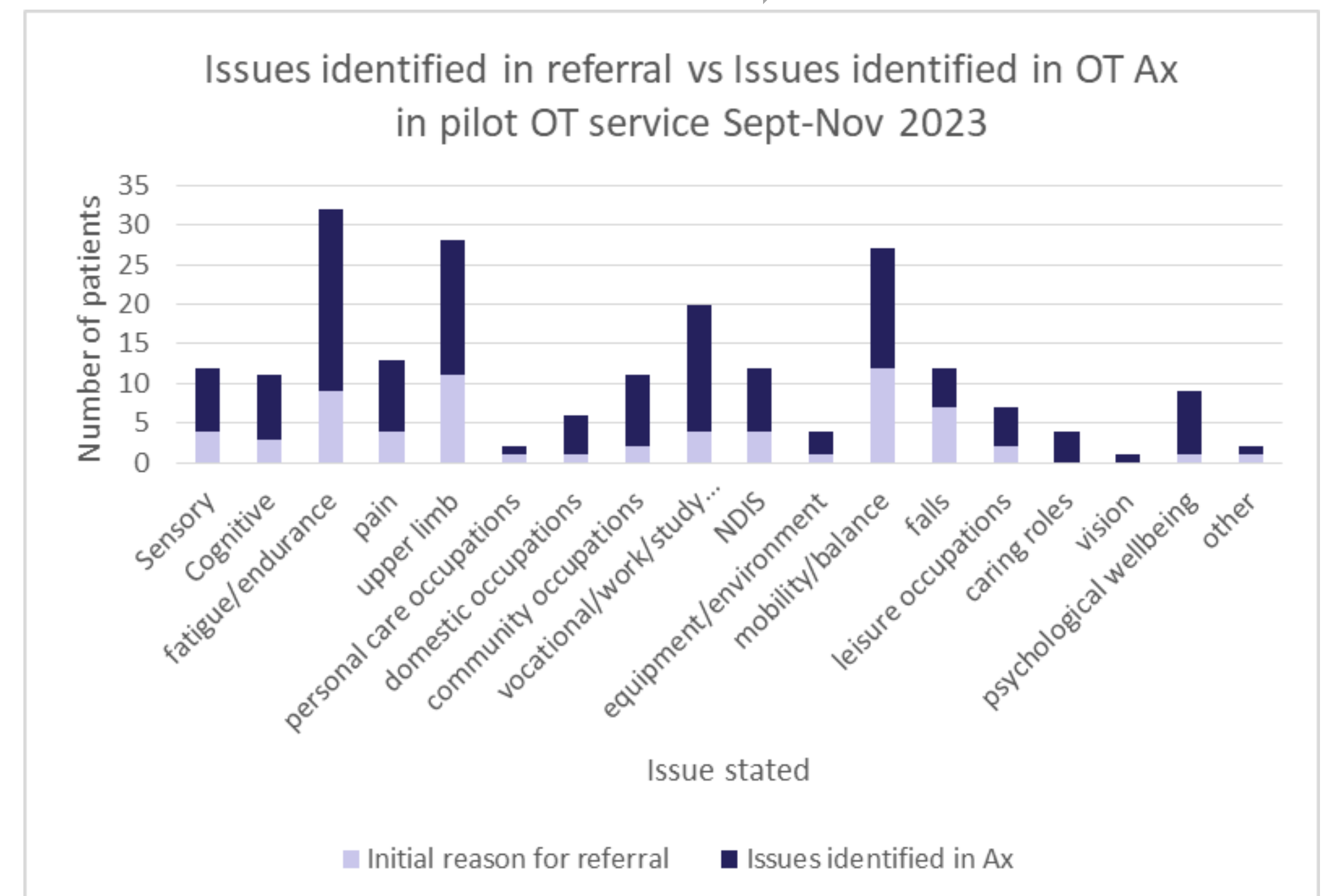
1. Fatigue
2. Upper limb
3. Vocation/work/study
4. Mobility/balance

Top 4 Interventions

- Education in/at time of clinic
- Sending resources/ links
- Referral to community allied health
- Home exercise program

37 patients

OT time 3.65 hrs/week



Results - Staff Survey

Staff N = 12

- OT adds value to clinic =100%
- OT should be a part of clinic =100%
- Staff very confident
- Understanding the OT role
- How to make a referral

"Having an OT in the clinic has **improved the care** for clients both from a **quality of care** perspective and from an **efficiency and time** perspective."

Conclusion



Service gap: Pre patient surveys identified people could benefit from OT input based on their symptoms, lack of a current OT and 1/3 identifying a need to see an OT. OT identified additional MS related issues, not identified on referral.



Service benefit: There was a qualitative benefit determined by staff and patients involved in the clinic with high ratings of satisfaction.



Feasibility: The operation of this clinic with the addition of OT better aligns with current MS guidelines and evidence. The OT service was deemed to be feasible based on patient referrals time spent and OT interventions provided.

References



Please scan the QR Code for an online reference list and to download PDF of poster.

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