

## PRE AND POST OPERATIVE OCCUPATIONAL THERAPY REGIME FOR TOTAL SHOULDER REPLACEMENT

This guidance does not override the individual responsibility of health professionals to make appropriate decision according to the circumstances of the individual patient in consultation with the patient and /or carer. Health care professionals must be prepared to justify any deviation from this guidance.

### INTRODUCTION

This Occupational Therapy (OT) guideline has been agreed with the OT Manager for the acute hospitals NHS trust in Worcestershire and is to be used with patients having total shoulder replacement, hemi shoulder replacement and shoulder resurfacing

### THIS GUIDELINE IS FOR USE BY THE FOLLOWING STAFF GROUPS :

All qualified and unqualified Occupational Therapy staff working in trauma and orthopaedics

### Lead Clinician(s)

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Approved by:

Trauma & Orthopaedic OT Clinical Governance  
Group on:

19<sup>th</sup> September 2018

Therapies Clinical Governance Group:

28<sup>th</sup> November 2018

OT Clinical Governance Group on:

3<sup>rd</sup> October 2018

Review Date:

28<sup>th</sup> November 2020

This is the most current document and should be used until a revised version is in place

**Key amendments to this guideline**

<b>Date</b>	<b>Amendment</b>	<b>Approved by:</b>
10 <sup>th</sup> June 2015	Refer to age UK/Patient flow for further assistance at home. Changed discharge criteria and monitoring tool	Therapies Clinical Governance Group and OT Clinical Governance Group
August 2017	Document extended for 6 months as per TMC paper approved 22 <sup>nd</sup> July 2015	TMC
December 2017	Sentence added in at the request of the Coroner	
December 2017	Document extended for 3 months as per TLG recommendation	TLG
March 2018	Document extended for 3 months as approved by TLG	TLG
June 2018	Document extended for 3 months as per TLG recommendation	TLG
August 2018	Document extended for 6 months as per email from Julie Elliot while new manager is in place and key docs page approved	Julie Elliott
August 2018	Changed title of document	OT Clinical Governance Group and trauma and orthopaedic OT clinical governance Therapy management clinical governance group

**PRE AND POST OPERATIVE OCCUPATIONAL THERAPY REGIME FOR TOTAL SHOULDER REPLACEMENT****INTRODUCTION**

All qualified OT staff working in an Orthopaedic area should be aware of the existence of the guideline and the location of where a copy of the guideline is kept.

**DETAILS OF GUIDELINE**

Patients covered under the guideline include:

- Total shoulder replacements

**Pre-op 1:1 appointment**

- Screening assessment of patients occupational performance and environment. if the patient consents to intervention or contact next of kin if patient lacks mental capacity. if not already completed
- Establish hand dominance
- Check and advise on height measurement sheet.
- Completion of pre-op home visit to fit identified equipment if required.
- Advise on post-op shoulder precautions patients will be required to follow and advise how to apply these to daily occupational performance..
- Advise on how to apply and remove shoulder immobiliser for personal care tasks
- Ensure patient receives a Total Shoulder Replacement Booklet
- Discharge from Occupational Therapy preop service if no further problems are anticipated post operatively..

**Post-op**

(Day 1 = the first day after the operation date)

Only to be seen if not discharged at pre-op or re referred from MDT

**Day 1 Onwards**

- Check consultants post operative management plan
- Complete OT intervention plan

**Discharge criteria**

1. To be discharged pre-op once all assessments completed and equipment in situ, no problems anticipated for discharge.
2. To be discharged from occupational therapy once the occupational therapy intervention plan is complete.

**MONITORING TOOL**

How will monitoring be carried out?

*Audit of OT notes*

Who will monitor compliance with the guideline?

*8a/7*

STANDARDS	%	CLINICAL EXCEPTIONS
Elective total shoulder replacement patients will be seen pre-operatively	100%	None
Elective shoulder replacement patients will be discharged from pre-op when possible.	95%	Patient medically unfit/social circumstances

**REFERENCES**

- In patient Occupational Therapy Assessment and Treatment procedure WAHNSHT
- Out patient Occupational Therapy Assessment and Treatment procedure WAHNSHT

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Committee / Group
Occupational Therapy Clinical Governance Group
Therapies Clinical Governance Group
Occupational Therapy Trauma and Orthopaedic Clinical Governance Group