



Hannah Murphy

Specialist
Occupational
Therapist

Non–Acute Hospitals –
Rehabilitation

Can you give us a brief work history?

I graduated in 2014 and have been working as an OT since January 2015. I have worked primarily in inpatient care – in the acute hospitals, non-acute hospital and rehabilitation. I have also worked in integrated care community teams and I have some experience working in mental health and addictions. I have been in my current post for two years.

What made you decide to be an O.T.?

I always knew I wanted to work in healthcare and help others. At school a careers teacher signposted me to OT. I researched it more online and on the Ulster University website and I felt it was for me.

How did you train for this role/educational route?

I finished my A-levels at secondary school and I applied for Ulster University. I also had to do the HPAT and passed it. When I got my A-level results, I was one grade off the desired grades for entry and I almost didn't get into OT. I rang Ulster University every day for two weeks after I received my results and eventually enough people had confirmed/denied their places on the course and I got my place. I was so grateful as I couldn't imagine doing anything else.

What does a typical day involve?

I work in non–acute rehabilitation, mostly care of the elderly. Most days, there will be a personal care (washing and dressing) assessment first thing in the morning, where we assess how much help a person needs to transfer out of bed, get washed, get dressed and ready for their day. Then we check if there are new patients to the ward and we add them to the electronic record system. Then we have a multidisciplinary team meeting everyday where we discuss patient's needs and discharge plans. We will then prioritise who needs an OT assessment/review that day and see them. In the afternoon, there is usually a family meeting where we liaise with a patient's family re: their rehab progress, discharge planning, equipment needs etc. I will also do my note recording throughout the day too.

What do you like best about your job?

I really enjoy working as part of our OT team and as part of the wider multidisciplinary team on the ward with my physio, AHP, social work, nursing and medical colleagues. I also love working with the elderly patients, they always have interesting stories and often look forward to their rehab as many of them are keen to return to be as independent as possible with their daily activities.

What advice would you give anyone thinking of doing your job?

OT is often about thinking outside of the box and being holistic - we always need to consider the whole person. It is also demanding in rehabilitation - meeting patient and family expectations, working in a pressurised ward environment and working in teams who may be short staffed. It is really enjoyable but it's important to be mindful that there are days you will feel overwhelmed by it all and that is ok. It is also important to remember that you are one practitioner who can only do so much in a day. The health system is constantly changing and the pressures and demands can change so prioritisation is essential. Always remember the benefits of good communication and team working.

Anything else?

Self-care is the best care – if you don't take care of yourself, you won't be able to take care of others!