



## Melissa McMurray

Specialist  
Occupational  
Therapist

Ferns Resource Centre

### Can you give us a brief work history?

I initially began a Band 5 rotational post with the SHSCT in the area of community physical disability & elderly for 10 months. I then rotated into acute mental health inpatient wards and remained there for five and a half years, progressing to a Band 6 post. Currently I am in the resource centre and have been for about five years. I provide mental health, cognitive and functional assessments with treatment to inpatients, community, and primary mental health clients. I provide mainly group work such as creative therapies, relaxation, safety planning, recovery through activity, mindfulness, vocational work, self-esteem and mood management and, if identified, will arrange for basic equipment provision if clients also have physical needs.

Currently I am involved with a project of resetting the mental health services under Primary Mental Health Care/Psychology working with the East London Foundation Trust who already have a psychological therapy service. My role will be to promote and influence the need/role for an OT.

### What made you decide to be an OT?

I remember an OT coming to my house to see my brother who had broken his leg playing football and had a Ilizarov frame on following surgery. I remember the difficulty he had managing the back steps, and the shower over the bath at home due to pain with weight bearing. The OT arranged for a grab rail at the step and provided him with a bath board so he could sit whilst having a shower. This allowed him independence and preserved his dignity.

### How did you train for this role/educational route?

I attended Southern Regional College after high school and completed AVCE Health & Social Care which allowed me to gain two A-levels. I also completed A-level Business studies, so achieving two As and a B in my A-levels allowed me to attend the University of Ulster Jordanstown for four years to complete a BSc Hons in OT and achieving a 1st class degree.

### What does a typical day involve?

First things are coffee, emails, and a team meeting (nurse, social worker, manager, and Cognitive Behavioural Therapy staff), to screen new referrals and allocate appropriate professionals to see them. Following this I could have a new assessment or a review client to see, or a planned group to take. I will then complete my notes/assessments/outcome measure results for these contacts and if needed link in with other professionals or family members. At times I will have training to complete or OT governance meetings to attend. The good thing is I have my own caseload and plan my own day.

### What do you like best about your job?

What I like best is that every day is different and I never know what a client will present with. There is satisfaction in seeing how a client progresses through treatment onto a road of recovery.

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

Would recommend getting a rotational post so you can experience different fields of OT work to see what you like or don't prior to staying in one area.

### Anything else?

Just go for it as it is so rewarding.