



# Occupational therapists' perspectives on work reintegration for neurological patients: an observational survey

## Authors

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# Introduction

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Vocational Rehabilitation: intervention that supports people in returning to work or maintaining their current work

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People with brain disorders: barriers to work participation and retention

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The role of OTs: improving quality of life, promotes autonomy and promoting both inclusion

# Objective of study

Analyse the Occupational Therapy approach to Vocational Rehabilitation in adult neurologic patients in the Italian healthcare context

# Methods

- Observational survey
- Target population: occupational therapists working in neurorehabilitation in the Italian healthcare system
- The survey was meticulously developed through a multi-stage process to ensure its appropriateness and relevance

# Questionnaire

- First, a brief review of the literature on the return to work of neurological patients was conducted to identify the main thematic areas
- Next, a focus group was organised with thirteen occupational therapists and five experts, including researchers and university lecturers, to discuss the results of the review and create the questions
- The survey consisted of 30 closed-ended questions and 4 open-ended questions

# Methods

- Participants were recruited through the TSRM-PSTRP professional orders in Italy and provided their informed consent
- Participation was voluntary and anonymous, with all data
- Data collection occurred in January and February 2025
- The answers to the closed questions were analysed using descriptive and inferential statistics
- The answers to the open questions were analysed using inductive thematic analysis

# Results – Ots characteristics

Characteristic		n (%) / mean ± SD
Gender	F:M	55:5 (91.7% vs 8.3%)
Age (years)		33.2 ± 7.6
Years of professional experience		9.9 ± 6.4
Geographic region of current work	Northern Italy	30 (50.0%)
	Central Italy	6 (10.0%)
	Southern Italy & Islands	11 (18.3%)
	Other	13 (21.7%)
Postgraduate academic training	Yes:No	31:29 (51.7% vs 48.3%)
Current workplace	Public healthcare facility	20 (33.3%)
	Private/contracted healthcare facility	27 (45.0%)
	Private practice / studio / other	13 (21.7%)
Experience in neurological VR	No, never	32 (53.3%)
	Yes, occasionally	23 (38.3%)
	Yes, often	5 (8.3%)

# Results – Closed questions

Questions	Response	n (%)
(Q14) Do you use an evidence-based assessment and intervention protocol specifically designed for VR?	Yes	5 (17.9%)
	No	<b>23 (82.1%)</b>
(Q16) How often is VR part of the rehabilitation process?	Often	6 (26.1%)
	Sometimes	<b>11 (47.8%)</b>
	Rarely	6 (26.1%)
(Q17) At what moment does VR become part of the rehabilitation process?	First days of rehabilitation hospitalization	1 (4.3%)
	Towards the middle of rehabilitation hospitalization	3 (13.0%)
	At the end of rehabilitation hospitalization	7 (30.4%)
	Outpatient or home-based phase	<b>10 (43.5%)</b>
	Secondary phase, distant from the rehabilitation process	2 (8.7%)
(Q21) Do you believe that the available scientific evidence is comprehensive and facilitates the therapist's choices during the stages of return to work?	Yes, it is exhaustive and facilitates choices	5 (22.7%)
	No, it is not exhaustive	<b>13 (59.1%)</b>
	I don't know	4 (18.2%)

## Q43 - What difficulties have you encountered in the process of reintegrating your patients into the workplace?

Theme	Description	Representative Quotation (Translated)
<b>1. Systemic &amp; structural barriers</b>	Obstacles rooted in the healthcare/job system: lack of dedicated services, complex bureaucracy, and absence of standardized protocols.	<i>"Scarce presence of dedicated professionals in the area. Lack of information on the bureaucratic procedures to follow."</i>
<b>2. Stakeholder reluctance &amp; communication gaps</b>	Challenges arising from employers' resistance to adapt workplaces and difficulties in establishing effective multi-stakeholder communication.	<i>"Lack of availability on the part of the employer."</i>
<b>3. Patient-related &amp; job-match difficulties</b>	Challenges related to the patient's psychological readiness, acceptance of new limitations, and the practical difficulty of finding a suitable job match.	<i>"Acceptance of one's own abilities."</i>

Q44 - In the process of reintegrating patients into the workplace, what skills could be useful for an OT to work effectively?

Theme	Description	Representative Quotation (Translated)
<b>1. Technical &amp; environmental assessment skills</b>	Competencies in on-site job analysis, ergonomic evaluation, and the use of specific assessment tools for the work context.	<i>"Specific evaluation of work environments."</i>
<b>2. Knowledge of legal-social systems</b>	Foundational knowledge of relevant legislation, disability rights, social services, and bureaucratic pathways to navigate the reintegration process.	<i>"Better knowledge of laws and instruments."</i>
<b>3. Interpersonal &amp; advocacy skills</b>	Skills for effective communication, negotiation, and collaboration with employers, teams, and patients, alongside client advocacy.	<i>"Relational competencies and communicative exchange within a team."</i>

# Discussion

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Occupational Therapy approach to vocational rehabilitation appears heterogeneous across the Italian healthcare context

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Limited standardisation of assessment and intervention strategies in return-to-work pathways

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Central role of Occupational Therapists in coordinating return-to-work processes

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Need to strengthen structured frameworks and professional competencies within OT practice

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# Conclusion

This study suggests a need for standardized protocols and enhanced training to support OTs in the work reintegration of neurological patients