

OCCUPATIONAL THERAPY UNIT ANNUAL REPORT 2025

1. INTRODUCTION

The Occupational Therapy Service is a core component of the hospital's healthcare and rehabilitation system, dedicated to enabling individuals, groups, and populations across the lifespan to engage meaningfully in activities of daily living, productivity, and leisure that may be affected by physical, psychological, or social challenges. Grounded in a client-centered and occupation-based approach, the service utilizes purposeful and meaningful activities, environmental and equipment modification, task adaptation, therapeutic techniques, physical modalities, as well as education and professional consultation to maintain, enhance, and develop functional capacities. These interventions support clients in fulfilling their roles optimally and improving overall quality of life within their cultural and social contexts (WFOT, 2018; AOTA, 2020). Service delivery is integrated within the hospital care pathway and implemented in close collaboration with multidisciplinary healthcare teams to ensure comprehensive, coordinated, and effective patient care.

The Occupational Therapy Unit is located at Level 2, Door M, Specialist Clinic Block for physical rehabilitation services, while psychiatric services are provided through the Psychosocial Rehabilitation Unit adjacent to the Psychiatric Ward. The unit is equipped with service counters, treatment and assessment rooms, staff offices, and supporting facilities. Established in the mid-1980s, the service initially focused on clients with physical disabilities and operated from the hospital's former clinical block before relocating in the 1990s to its current location to expand service capacity. In 2000, the scope of services was further extended to include psychiatric care for both adults and children through the establishment of a dedicated Psychiatric Occupational Therapy Extension Unit, reflecting the unit's continued commitment to comprehensive and inclusive hospital-based rehabilitation services.

2. DEPARTMENT OBJECTIVES

The Occupational Therapy Unit is guided by the following objectives in the provision of its services:



3. SERVICES PROVIDED

The Occupational Therapy Unit provides comprehensive physical, cognitive and psychosocial rehabilitation services for both inpatients and outpatients across a wide range of clinical specialties. Services span from neonatal, paediatric, to geriatric care, ensuring continuity of rehabilitation across the lifespan. In addition, the unit conducts functional and environmental assessments through home, school, and workplace visits to support safe discharge planning, reintegration, and continuity of care. Service delivery is guided by an occupation-based and client-centred framework focused on developing, restoring, and maintaining clients' physical, cognitive and psychosocial abilities to achieve optimal levels of independence. Intervention strategies prioritise the identification and reduction of environmental and task-related barriers, and include environmental adaptation, task modification, prescription and training in the use of adaptive aids and equipment, therapeutic skill development, and structured education for clients, family members, and carers to enhance performance in Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADL) within the hospital care pathway. The services provided are outlined below.

 Paediatric Rehab Developmental intervention, sensory processing and integration, school readiness, play-based therapy, feeding and self-care training and paediatric palliative support.	 Orthopaedic and Musculoskeletal Rehabilitation Hand therapy, upper and lower limb rehabilitation, spinal rehabilitation, amputee rehabilitation, fracture and post-surgical rehabilitation, and diabetic foot care.
 Neurological Rehabilitation Stroke rehabilitation, traumatic brain injury (TBI), spinal cord injury, and neurodegenerative disorders, including cognitive-perceptual and functional retraining.	 Burn Rehabilitation Pressure garment fitting, compression therapy, scar management, splinting, and functional recovery programmes.
 Oncology Rehabilitation Functional rehabilitation, fatigue management, lymphoedema support, activity modification, and return-to-activity programmes for patients undergoing or post-cancer treatment.	 Geriatric Rehabilitation Functional independence training, falls prevention, cognitive screening, home safety and discharge planning, and caregiver support.
 Palliative Care Services Comfort-focused interventions, positioning, assistive devices, caregiver education, and quality-of-life enhancement.	 Orthogeriatric Services Post-fracture rehabilitation, mobility and self-care retraining, discharge planning and multidisciplinary care for older adults with orthopaedic conditions.
 Return-to-Work and Vocational Rehabilitation Work capacity evaluation, functional and cognitive work simulation, job demand analysis, graded work reconditioning, and employer liaison support.	 Acute Care and Early Rehabilitation Services Early mobilisation, activities of daily living (ADL) training, positioning, splinting, and discharge planning, for inpatients across medical and surgical wards.
 Visual Rehabilitation Services Visual-perceptual and functional vision training, compensatory strategies, environmental adaptation, and employer liaison support.	 Home, School, and Workplace Visits Functional and environmental assessment, accessibility review, task and role analysis, graded work reconditioning, and employer liaison support.
 Return-to-Driving Assessment and Rehabilitation Driver risk assessment, cognitive-perceptual and physical skills evaluation and retraining, adaptive strategies, and prescription of vehicle modifications.	 Aids and Adaptation Services Prescription and training in the use of adaptive aids, assistive equipment, splint fabrication, and environmental adaptations to enhance safety and functional independence.

4. STAFFING SUMMARY

In 2025, the Occupational Therapy Unit underwent notable staffing changes following the promotion of three occupational therapists, which, together with two existing unfilled posts, resulted in a total of five vacant positions during the year. Through formal justification and discussions with head of profession, the unit was prioritised for post filling, and all vacancies were successfully filled by the end of the year. The department is headed by a U12 officer and currently comprises 24 occupational therapists and 3 attendants (PPK). With the department now operating at full staffing capacity, continued improvements in service delivery, operational efficiency, and overall performance are anticipated across its clinical and rehabilitation services.

Table 1: Staffing and post of Occupational Therapist

NO.	NAME OF POST / GRADE	POST			TOTAL
		NO	FILLED	VACANT	
1.	Pegawai Pemulihan Perubatan Carakerja U12	1	1	0	1
2.	Pegawai Pemulihan Perubatan Carakerja U9	1	1	0	1
3.	Jurupulih Perubatan Carakerja U8	1	1	0	1
4.	Jurupulih Perubatan Carakerja U7	3	3	0	3
5.	Jurupulih Perubatan Carakerja U6	3	3	0	3
6.	Jurupulih Perubatan Carakerja U6 (TBK)	5	5	0	5
7.	Jurupulih Perubatan Carakerja U5	9	9	0	9
8.	Jurupulih Perubatan Carakerja U5 (Kontrak)	1	1	0	1
9	Pembantu Perawatan Kesihatan U1	3	3	0	3

5. WORKLOAD

Table 2 : Occupational Therapy workload for inpatient and outpatient for the year 2025

Month	Inpatients			Outpatients			Total Patient s	Total treatment modalities
	New	Follow up	Total	New	Follow up	Total		
Jan	280	554	834	119	826	945	1779	5325
Feb	280	517	797	114	878	992	1789	5386
Mac	263	651	914	170	921	1091	2005	6263
Apr	259	460	719	113	748	861	1580	5120
May	225	480	705	161	869	1030	1735	5418
Jun	260	368	628	162	770	932	1560	5032
Jul	262	662	924	155	985	1140	2064	6701
Aug	253	569	822	132	792	924	1746	5717
Sep	255	472	727	143	802	945	1672	5377
Oct	298	902	1200	168	1050	1218	2418	7210
Nov	323	835	1158	146	1044	1190	2348	7092
Dec	354	678	1032	195	885	1080	2112	6398
Total	3312	7148	10460	1778	10570	12348	22808	71039

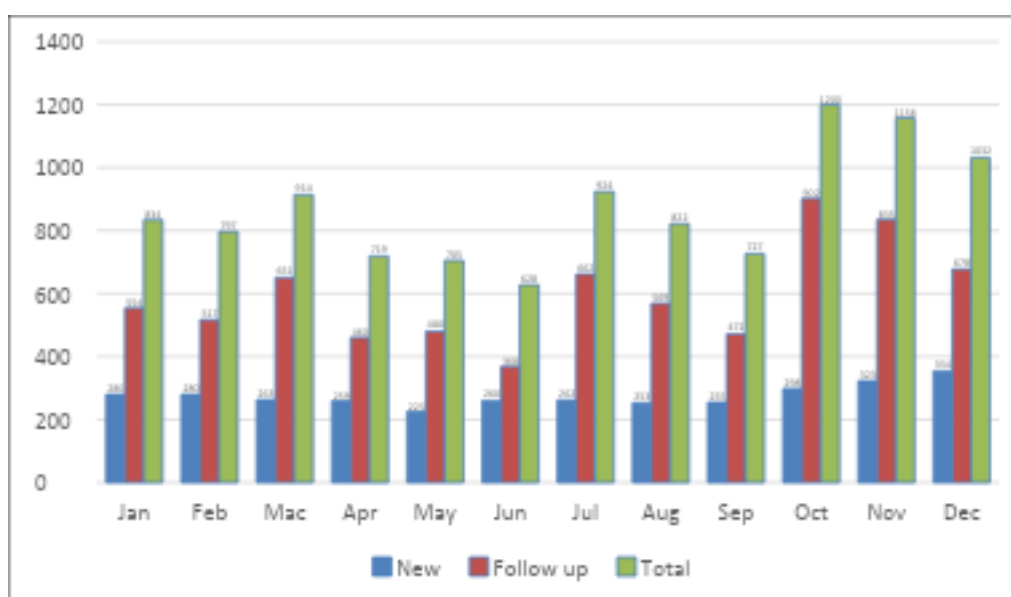


Figure 1: Inpatients Workload 2025

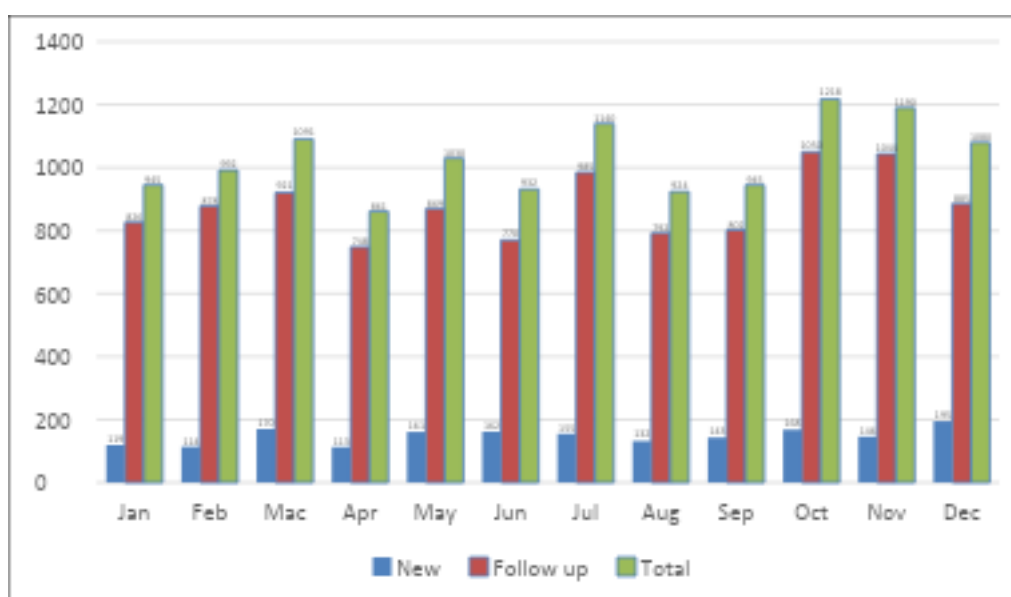


Figure 2 : Outpatients Workload 2025

Table 3: Total number of patients referred and treatment modalities 2021-2025

Year	Inpatients			Outpatients			Total treatment modalities
	New	Follow up	Total	New	Follow up	Total	
2021	1,847	2,358	4,205	808	5,423	6231	40447
2022	2,590	4,211	6,801	2,544	5,911	8455	62635
2023	3,201	9,144	12,345	1,672	11,752	13424	97843
2024	3517	7941	11,458	1437	10365	11802	75815
2025	3312	7148	10,460	1778	10570	12348	71039

6. ACHIEVEMENTS / AWARDS

- i) Silver : Poster presentation at Malaysian Occupational Therapists National Conference 2025



- ii) Runner Up : Aerodance Competition in conjunctions with World Diabetic Day 2025



7. DEPARTMENT ACTIVITIES FOR THE YEAR 2025



a) Pain Free Hospital Audit



b) Splinting Workshop



c) CME Unit



d) Joint Workshop in Managing Children with Special Needs 2.0



e) Stroke Awareness Campaign



f) OT Workshop in conjunctions with Sarawak Neurosurgery Update



g) World Osteoporosis Day



h) PPK Day Celebration



i) World Diabetis Day



j) 9th Asia Pacific Neuropsychiatry Conference



k) State Level World OT Day Celebration



l) Eid Mubarak Celebrations



m) Organised CME on Paeds Palliative Care



n) Hospital Open Day



o) Christmas Carolling



p) Christmas Party

8. FUTURE PLAN

Moving forward, the Occupational Therapy Unit will prioritise the development of clinical specialisation areas to strengthen professional expertise and enhance the quality of service delivery. Emphasis will be placed on structured training programmes and the integration of evidence-based practice to ensure that clinical interventions remain current, effective, and aligned with national and international standards. The unit also aims to improve and expand Activities of Daily Living (ADL) retraining facilities, alongside the systematic enhancement of medical assets and infrastructure to better support functional rehabilitation services. In parallel, the department will actively pursue quality improvement initiatives and increased involvement in clinical research to promote service excellence, support continuous performance monitoring, and contribute to the advancement of occupational therapy practice within the hospital setting.

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