

PROVINCIAL STANDARDS OF PRACTICE

Released: December 2003

**Newfoundland and Labrador
Occupational Therapy Board**

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SUBMITTED BY THE PROVINCIAL STANDARDS COMMITTEE

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Provincial Standards of Practice Committee

In Newfoundland and Labrador, the provincial legislature delegated the regulatory authority over occupational therapy to the Newfoundland and Labrador Occupational Therapy Board (NLOTB). Regulation is aimed at preventing harm to the public, by setting compulsory rules of conduct and standards of practice within the profession.

As a regulatory organization, two basic functions are required of the Board:

1. To set conditions for entry into the profession (licensure)
2. To monitor members to ensure adherence to the laws, regulations and standards that govern practice.

By being a self governed profession, occupational therapists have significant control over setting standards for practice and ethical conduct. In many ways self regulation is a mark of a true profession in the eyes of the public. With the mandate of the organization in mind, NLOTB supervised the formation of a Standards of Practice Committee in the late 1990s. As a regulated profession, it was recognized that it is essential that therapists understand the laws, regulations and standards that govern occupational therapy in this province.

The Committee was instructed that the Standards were to:

Be in the public's best interest;

Apply to all individual licensed occupational therapists in the province of Newfoundland and Labrador, regardless of geographical location, experience, or area of practice;

Be measurable statements for accountability; and

Be the basis for competency, and not measures of excellence.

The committee members consisted of occupational therapists representing rural practice, acute care, mental health, private practice occupational rehab, as well as the Professional Practice Coordinator for Occupational Therapy at the HealthCare Corporation of St. John's, a representative of the NLOTB, and the Provincial Fieldwork Coordinator for Occupational Therapy. The committee started meeting formally in September 2002, and reviewed occupational therapy standards developed by other provincial professional and regulatory associations. Association of Canadian Occupational Therapy Regulatory Organizations (ACOTRO) documents were used as a framework for the development of these standards. A draft of the Standards was circulated in April 2003 and feedback was sought from CAOT, ACOTRO, the NLOTB consumer representative and NLAOT. This feedback was utilized in the development of these standards.

PREAMBLE

DEFINITION OF OCCUPATIONAL THERAPY

Occupational Therapy (OT) is a client-centered health profession which addresses problems that impede the functional and adaptive behavior of a person's occupational performance in the areas of self care, productivity and leisure. Impairments may be caused by physical, psychological or environmental factors. Interventions with our clients include the use of occupation or meaningful activity to develop, maintain, rehabilitate or augment a client's ability to function.

Occupational Therapy focuses on enabling clients to develop healthy patterns of occupations. Occupation includes everything that a person does to care for himself or herself and others (self-care), enjoy life (leisure), and contribute socially and economically to their communities (productivity). Enabling clients in occupations gives meaning and provides choice in life (Enabling Occupation: An Occupational Therapy Perspective, CAOT 1997)

Occupational Therapists work in various roles including that of a clinician, educator, consultant, administrator, researcher, advocate, or case manager.

The practice of OT in Newfoundland and Labrador can occur within settings such as hospitals, long term care facilities, community agencies, private homes, schools, private practice, and industry.

Occupational Therapists practicing in Newfoundland and Labrador are regulated by the Occupational Therapists Regulations under the Occupational Therapists Act (1997).

PURPOSE OF THE STANDARDS

The Standards of Practice are intended to define professional competency - the knowledge, skills, behaviors and judgment - required for accepted, safe occupational therapy practice in the province of Newfoundland and Labrador. The Standards do not replace professional decision making and clinical reasoning but provide the occupational therapist with a decision making framework based on the client's needs, the professional code of ethics, the Occupational Therapists Act and the Occupational Therapists Regulations, the research supporting a particular area of practice and available human and financial resources. The Standards of Practice are applicable to all occupational therapists licensed under the Act, regardless of the geographical area, setting or focus of the practice. All occupational therapists are accountable for their practice, their decisions, and their actions.

The Standards of Practice are a guideline for conducting ethical OT practice. The standards also represent a measure against which all occupational therapists' practice may be compared. They are intended to assist clients, the public, employers, legislators, administrators and other healthcare professionals to understand occupational therapy practice.

The Standards of Practice are intended to be used by licensed occupational therapists in the province of Newfoundland and Labrador to:

- Evaluate their practice or measure their performance;
- Develop plans to address any identified discrepancies;
- Re-evaluate their performance;
- Endeavor to maintain the highest possible skill in the interest of protection of the public who they serve.

The Standards are also intended to be used to guide the Newfoundland and Labrador Occupational Therapy Board (NLOTB) in activities related to the process of establishing professional competency as well as quality assurance activities.

Finally, it is anticipated that the Standards will be used as a basis for peer reviews, as well as to facilitate research to validate practice and evaluate the impact of occupational therapy on the health of the population of Newfoundland and Labrador.

STANDARDS

1. Maintains Professional Responsibility

- 1.1 Recognizes that self-regulation of the profession is a privilege and that each member has a continuing responsibility to merit this privilege.
- 1.2 Adheres to regulatory statutes and guidelines
 - 1.2.1 Understands, integrates and applies the Regulation, Code of Ethics, Standards of Practice & pertinent guidelines into practice and works within relevant legislation.
 - 1.2.2 Understands the necessity, obligation and process to take action to report unsafe, unethical or incompetent OT practice.
 - 1.2.3 Understands the obligation of protection to the public and acts accordingly.
 - 1.2.3a) Knows and applies the principles of public protection.
 - 1.2.3b) Takes actions to ensure terms of agreement as described in a contract with payer/employer are not in contravention of professional obligation to client.
- 1.3 Practices within the scope of professional and personal abilities and limitations.
 - 1.3.1 Demonstrates an understanding of how the practice setting impacts the scope of practice. Cues: economic, cultural, institutional setting, etc.
 - 1.3.2 Engages in a process to identify personal and professional abilities and limitations that may impact on professional practice.
 - 1.3.3 Takes action to ensure that these do not affect quality of practice.
 - 1.3.4 Is able to define and manage professional overlaps in scope of practice with other professionals. Cues: interdisciplinary teams, alternative therapies, dual certification and/or practice.
- 1.4 Maintains the essential competencies of practice.
 - 1.4.1 Engages in a process of evaluation of one's own professional practice incorporating self-evaluation, peer feedback, or other appropriate methods.
 - 1.4.2 Takes action to address deficiencies to enhance practice.
 - 1.4.3 Develops and implements a plan for continual professional improvement.
- 1.5 Acts with professional integrity
 - 1.5.1 Accepts responsibility for actions and decisions.
 - 1.5.2 Shows respect for the dignity and privacy of clients.
 - 1.5.3 Establishes and maintains appropriate professional boundaries.
 - 1.5.4 Recognizes and addresses conflicts of interest (real or perceived).
 - 1.5.5 Demonstrates sensitivity to clients' values and beliefs.
 - 1.5.6 Understands and enters into associations, with the knowledge that professional integrity should be maintained. Cues: Community networks and contacts, business associations.
- 1.6 Recognizes and accepts responsibility for contribution to the growth and development of the profession.
 - 1.6.1 Demonstrates willingness to teach and be taught within the context of practice.
 - 1.6.2 Recognizes own individual set of skills, knowledge and abilities, and their potential contribution to the profession.
 - 1.6.3 Demonstrates willingness to share these individual set of skills, knowledge and abilities. Cues: participation in professional activities and associations, etc.

2. Demonstrates Practice Knowledge

2.1 Maintains knowledge and skill base relevant to professional practice.

- 2.1.1 Demonstrates an understanding of the relationship between occupation and health and of the central value of occupation in occupational therapy.
- 2.1.2 Demonstrates practice that integrates knowledge of the various theoretical models and approaches in current occupational therapy practice.
- 2.1.3 Demonstrates the knowledge, abilities and technical skills required to provide safe, efficient and effective service in the area of practice.
- 2.1.4 Knows professional, personal and continuing education needs as they relate to practice knowledge.

2.2 Demonstrates knowledge of and adherence to legislative and regulatory requirements relevant to the province and area of practice.

- 2.2.1 Knows and adheres to legislative requirements that apply to specific practice area and/or apply in the agency or institution within which the practice takes place. Cues: consent process, health information, limits of and protection of confidentiality and privacy, child protection, mental health, occupational health, safety requirements, human rights, funding agency legislation, Special Assistance Programs, etc.

3. Utilizes a Client-Centred Practice Process

3.1 Defines and clarifies one's own scope and context of practice.

- 3.1.1 Identifies the knowledge, skills and abilities that are required in order to provide the appropriate service to the client.
- 3.1.2 Communicates scope of service and parameter to clients, referring agents and relevant others. Cues: frequency and duration of service, variance, etc.
- 3.1.3 Identifies and communicates to client and relevant others the strengths and limitations of practice. Cues: available funding, access to services, personal knowledge and skills, etc.

3.2 Identifies client and stakeholders in the practice process and establishes and maintains a professional relationship with each.

- 3.2.1 Identifies the recipient(s) of occupational therapy service as the clients(s).
- 3.2.2 Explains in detail, what is expected of the client, stakeholders, third party payer and relevant others that impact or complement service, e.g. family, team members, advocates, teachers, caregivers, and other agencies regarding the service to be provided.
- 3.2.3 Establishes and maintains a professional relationship with the client and stakeholders, and communicates with each accordingly.
- 3.2.4 Demonstrates sensitivity to issues arising from multiple stakeholders.

3.3 Understands and negotiates roles and responsibilities appropriate to the OT service with clients and stakeholders.

- 3.3.1 Discusses client expectations with regards to occupational therapy services with all stakeholders, including the client, and takes action to ensure mutual understanding and agreement concerning services to be provided.

- 3.4 Ensures informed consent prior to and throughout service provision.**
- 3.4.1 Knows and adheres to regulatory, legislative and service requirements regarding informed consent.
- 3.4.2 Knows the principles of and demonstrates in practice a process for obtaining informed consent.
Cues: risk of harm, risk of doing nothing, capacity, range and benefits of services, release of information, limits of confidentiality.
- 3.4.3 Ensures that the client understands and agrees to the involvement of other providers of OT services, other than the OT.
Cues: assistants, kinesiologists, aides, students, etc.
- 3.4.4 Identifies situations where informed consent may be problematic and takes steps to rectify the problem.
Cues: children, unwilling participants, cognitively impaired clients, certified clients.
- 3.5 Demonstrates a systematic client-centred approach in the delivery of occupational therapy services.**
- 3.5.1 Demonstrates use of strategies that engage the client in a collaborative approach. Cues: interview techniques, Canadian Occupational Performance Model, enabling processes, therapeutic use of self, etc.
- 3.5.2 Implements a collaborative process with the client and/or caregiver in order to:
- build rapport and trust within the relationship;
 - enable client to identify issues;
 - determine the appropriate service delivery approach, e.g. consulting, educating, direct intervention, assessment, etc.;
 - support client to examine risks and consequences of options;
 - recognize situations when service should not continue and take action;
 - identify occupational performance issues;
 - determine and clarify client concerns, expectations and priorities;
 - establish measurable and obtainable objectives to attain targeted outcomes according to type of services being offered;
 - determine intervention options according to type of services being offered;
 - determine the frequency and duration of service according to type of services being offered;
 - refer to additional services if appropriate;
 - ensure the implementation of the chosen options;
 - reassess the service for modification
 - establish with client when service is complete or when service cannot be completed and plan for an effective discontinuation.
- 3.6 Utilizes and/or refers to reasonable and appropriate resources to support client needs.**
- 3.6.1 Identifies resources needed to provide safe and effective occupational therapy service. Cues: support personnel, time, equipment, environment, etc.
- 3.6.2 Identifies need for and availability of external resources to provide support to client.
Cues: funding, equipment, community services, other professional services, social agencies, etc.

- 3.7 Maintains timely and accurate records consistent with provincial regulatory requirements.**
- 3.7.1 Knows and applies the various regulations that are specific to record keeping in occupational therapy.
Cues: provincial, institutional, employer, national regulations.
- 3.7.2 Prepares and maintains records that accurately reflect service provided. Cues: informed consent, results of assessment, interventions, client involvement and other relevant information.
- 3.7.3 Ensures that clients are informed of their right to view their personal record and the process to do so.
Cues: appropriate ownership of medical files, agency policies on access to files.
- 3.8 Within practice, demonstrates sound clinical and professional judgement and responsible decision-making.**
- 3.8.1 Establishes and takes into account factors that have an impact on the occupational performance of the client. Cues: environment, resources, client condition.
- 3.8.2 Selects the appropriate tools and methods of evaluation for gathering relevant information.
Cues: age, diagnosis, setting, functional limitations.
- 3.8.3 Formulates measurable and observable objectives, based on client expectations and assessment results.
- 3.8.4 Selects the appropriate type of intervention based on a consideration of relevant factors.
Cues: desired outcomes, client capacity, risks, benefits, contraindications, resources, and environment.
- 3.8.5 Determines the frequency, duration and discontinuation of service.
Cues: according to the type of intervention, the desired outcomes, client expectation, resources.
- 3.9 Within practice, formulates, articulates and demonstrates sound clinical reasoning.**
- 3.9.1 Gathers objective and subjective information.
- 3.9.2 Gathers relevant information to complete a thorough and appropriate assessment. Cues: age, diagnosis, setting, functional limitations, resources.
- 3.9.3 Investigates alternative explanations for occupational performance deficits. Cues: barriers, psychosocial components, financial resources, etc.
- 3.9.4 Utilizes and integrates current evidence based knowledge.
Cues: literature search, consultation with experts, client experiences, clinical experience, previous outcomes, etc.
- 3.10 Engages in a reflective and evaluative approach to practice and integrates findings into practice.**
- 3.10.1 Evaluates the service provided in terms of effectiveness, efficiency and client satisfaction with regards to the goals and desired outcomes.
- 3.10.2 Reflects on evaluation findings, determines their implications and adjusts, modifies or terminates services accordingly.

- 4. Utilizes Effective Communication**
 - 4.1. Identifies and communicates with key individuals, organizations and groups with whom collaboration is necessary.**
 - 4.1.1. Determines with clients the right to, and need for, information of relevant others and obtains or shares information accordingly.
 - 4.2. Uses client-centred principles in the communication process.**
 - 4.2.1. Shares appropriate knowledge with clients and relevant others.
 - 4.2.2. Works collaboratively with the client and relevant others to understand and establish desired outcomes. Cues: strategies that involve client and relevant others in decision-making.
 - 4.2.3. Uses strategies that empower the client. Cues: facilitating, guiding, coaching, educating, prompting, listening, reflecting, etc.
 - 4.2.4. Ensures that clients are enabled to make informed decisions. Cues: provide information and/or documentation about risks, benefits, limitations, alternatives, etc.
 - 4.2.5. Fosters openness and honesty by adopting an appropriate communication style and/or supporting and facilitating reciprocal communication. Cues: verbal, non-verbal and written communication, understandable, meaningful and non-judgemental communication.
 - 4.3. Respects and considers the information and opinions of clients and relevant others.**
 - 4.3.1. Demonstrates active listening skills.
 - 4.3.2. Seeks the opinions and perspective of relevant others. Cues: colleagues, peers, other team members, family, referral agents, caregivers, employers, teachers, etc.
 - 4.3.3. Demonstrates receptiveness to clients' and relevant others' perspectives that serve the best interest of the client.
 - 4.4. Maintains a professional relationship in all communications.**
 - 4.4.1. Demonstrates an understanding of styles of communication and their impact on the professional relationship by communicating with clients and relevant others with respect and dignity.
 - 4.4.2. Fosters collaborative relationships in practice by identifying and minimizing barriers to communication. Cues: individual barriers such as auditory, language, culture, cognitive, etc., administrative barriers such as procedures, policies, organizational culture, etc.).
 - 4.4.3. Manages discrepancies or conflicts in a diplomatic manner.
 - 4.5. Demonstrates timely and effective communication.**
 - 4.5.1. Communicates in a manner that is timely, complete, accurate, concise and reflective of the service.
 - 4.6. Maintains confidentiality and security in the transmission, storage and management of information.**
 - 4.6.1. Adheres to legislation, regulatory requirements and facility/employer guidelines regarding: protection of privacy, security of information, and storage.
 - 4.6.2. Establishes and/or adheres to provincial and facility policies and procedures for the management of information. Cues: acquiring, documenting, using, transmitting, storing and disposing information.
 - 4.6.3. Takes action to minimize foreseeable risks to privacy and confidentiality of information. Cues: information technology, encryption, communications devices, etc.

5. Engages in Professional Development

5.1. Demonstrates a process of self-evaluation related to one's practice.

5.1.1. Identifies areas requiring new learning. Cues: knowledge, skills, abilities and attitudes.

5.1.2. Identifies learning strategies for professional growth.

5.2. Participates in on-going professional development.

5.2.1. Actively participates in the acquisition of new knowledge and skills. Cues: Identified areas of deficiency, self-directed life long learning.

5.2.2. Demonstrates the integration of new knowledge, skills, and behaviour into practice.

5.3 Identifies and utilizes appropriate resources in the support of evidence-based practice.

5.3.1. Recognizes and utilizes various sources of information to support evidence-based practice. Cues: research articles, databases, guidelines, expert opinion, conferences, discussion groups, client expectations and testimony, previous experience, etc.

5.3.2. Reviews critically, and integrates, the information obtained in the support of evidence-based practice.

6. Manages the Practice Environment

6.1 Contributes to a practice environment that supports client-centered occupational therapy as well as a safe, ethical and effective service.

6.1.1 Demonstrates the use of management and operational structures.

Cues: policies, procedures, waiting list management, referral criteria.

6.1.2 Manages practice to ensure consistency with regulatory requirements.

Cues: code of ethics, workplace safety, harassment legislation, labour laws, etc.

6.1.3 Demonstrates an awareness of and takes appropriate action to address real or perceived conflicts between the regulatory requirements and the practice environment requirements.

6.1.4 Actively engages in a continuous process for evaluation and improvement of occupational therapy services.

6.2. Identifies potential risks in practice and takes action to minimize risks.

6.2.1. Identifies and addresses potential risks to client, self and others within practice setting.

6.2.2. Follows a process for resolving ethical and safety concerns and issues, and documents as appropriate.

6.3. Demonstrates responsibility for occupational therapy service components assigned to staff, assistants and others under the therapist's supervision.

6.3.1. Understands and adheres to regulatory requirements and/or guidelines relating to the assignment of tasks and supervision of personnel and occupational therapy students.

6.3.2. Utilizes strategies and processes to ensure that assigned components are implemented safely, ethically and effectively.

6.3.3. Maintains a documented process for assigning components of the program.

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