Advancing excellence in occupational therapy

CAOT Position Statement: Quality occupational therapy services (2010)

Occupational therapy services enable people to engage in everyday living, through occupation (Townsend & Polatajko, 2007). National guidelines are required to promote professional and workplace responsibilities for quality service delivery in occupational therapy. Guidelines must address the unique elements that characterize excellence in occupational therapy services and the application of evidence-based and client-centred processes to attain effective and meaningful occupational outcomes. The guidelines can serve as a basis to address systemic barriers to quality service delivery as well as inform advocacy efforts and promote healthy working environments.

Recommendations

In 2007, the Canadian Association of Occupational Therapists (CAOT) launched the latest set of guidelines for occupational therapy in Canada entitled, Enabling occupation II: Advancing an occupational therapy vision for health, well-being & justice through occupation (Townsend & Polatajko, 2007). These guidelines present occupational therapy’s emerging language and models promoting quality client-centred, evidence-based, and occupation-based practice. CAOT has also produced the Profile of Occupational Therapy Practice in Canada (CAOT, 2007) and the Practice Profile for Support Personnel in Occupational Therapy (CAOT, 2009). These profile documents outline the skills, knowledge, and duties required by occupational therapists and support personnel to ensure quality occupational therapy services are provided. In addition to utilizing these documents to inform quality practices, CAOT recommends the following quality-service guidelines for occupational therapy services:

1. A clear description of the occupational therapy services. This description includes the vision, mandate, goals, and the specific steps taken by all parties to provide occupational therapy services.
2. Sufficient financial, human, and other resources to carry out effective actions throughout the practice process (e.g., assess, implement, monitor/modify, evaluate).
3. Hiring practices that ensure all personnel have the appropriate competencies and credentials to perform their job functions.
4. Sufficient time to practice within an evidence-based, client-centred framework for enabling occupation.
5. Quality monitoring and improvement mechanisms that relate specifically to an evidence-based, client-centred and occupation-based practice environment.
6. Appropriate processes to determine caseload assignments.
7. Mechanisms and resources for continuing professional education.
8. Recognize and nurture teamwork.
9. Appropriate mechanisms to promote communication within the organization and among team members.
10. Mechanisms to support and promote client access to occupational therapy services.
11. Workplace health as a priority and supported with organizational processes.
12. Processes to maintain the integrity of occupational therapy practice including but not restricted to mentoring of entry-level occupational therapists, supervision of support personnel, monitoring of practice standards and performance management.
13. Mechanisms to provide quality fieldwork and education experiences to student occupational therapists.

Initiatives

To enable occupational therapists to develop and deliver quality services, CAOT will:

1. Work in collaboration with the profession and stakeholders that have a direct interest in the advancement of quality occupational therapy services in the public and private sectors throughout Canada. Stakeholders include unions, government, researchers, employers, employees, members of the public. This will ensure strategies to promote quality-service guidelines are implemented.
2. Facilitate or support knowledge translation resources and activities that offer professional development to implement the guidelines.
3. Provide occupational therapists with access to research-based evidence to support implemen-
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CAOT is a professional not-for-profit national voluntary organization that provides resources and services to develop excellence in occupational therapy services. Occupational therapists are graduates of university programs with baccalaureate or Master’s entry-level degrees and are regulated health professionals in all 10 provinces.

Occupational therapists work with individuals, families, groups, communities, organizations and populations; with people of all ages, and levels of ability to promote health, well-being and justice through occupation. Occupations are groups of activities and tasks of everyday life that people are engaged in such as work, volunteerism, school, leisure and personal care. Occupational therapists provide quality services in health care organizations, community services, schools, and industry in both the public and private sectors. An evidence-based, client-centred approach is central to occupational therapy service delivery (CAOT, Association of Canadian Occupational Therapy University Programs [ACOTUP], Association of Canadian Occupational Therapy Regulatory Organizations [ACOTUP], & Presidents’ Advisory Committee [PAC], 1999).

Over the past decade, quality management and continuous improvement systems initially developed in the private sector have influenced the health and educational sectors in Canada. System-wide approaches to quality improvement such as total quality management and continuous quality improvement have been introduced into many health service organizations. Evaluation systems using utilization indicators and outcome measures have taken on more importance to senior administrators in health service organizations and provincial governments as a means of assessing the quality of programs and for allocating resources (McBride, Klaiman, & D’Avignon, 2001). CAOT also supports the work of the Quality Worklife - Quality Healthcare Collaborative (QWQHC). This collaborative is made up of 13 national health organizations and its work is guided by more than 45 quality of worklife experts. QWQHC was formed to develop and promote a national framework and strategy on quality of worklife to improve health system delivery and patient outcomes (QWQHC, 2008). This initiative has resulted in the development of a number of Quality Worklife indicators that will be of interest to occupational therapists, managers, and employers.

Internal quality improvement initiatives are used to monitor and improve service quality in conjunction with external accreditation processes. Examples of accreditation processes include the Canadian Council on Health Services Accreditation (CCHSA) health accreditation reports (CCHSA, 2008). Such accreditation processes address occupational therapy within a teamwork environment and do not specifically address standards for occupational therapy service provision.

As regulated health professionals, occupational therapists are accountable for the quality of the services they provide (ACOTRO, 2001; CAOT, 2002b;
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Townsend & Polatajko, 2007). In an environment of ongoing fiscal restraint, massive health restructuring and increased public accountability, occupational therapists are concerned about the impact of organizational and workplace demands on the quality of services they are able to deliver to their clients. They are working in less secure employment situations characterized by contract, casual and part-time employment with high caseloads. Occupational therapists report that workplaces have demands for high productivity and few resources to support service provision and professional development.

Organizational restructuring has resulted in flattening of hierarchies and the removal of middle management positions with more administrative responsibilities and less support for the occupational therapist providing direct service to the client. In many situations occupational therapists are supervised by other health professions and within such structures they report few opportunities for professional support and leadership. Professional requirements for an evidence-based service are frequently placed in conflict with employer demand for high caseloads and cost-effective services. While occupational therapists recognize that quality services are rooted in the application of evidence in their practice, many report lack of access, time, and economic resources as barriers to achieving this critical activity (von Zweck, 2003).

Glossary of Terms

Client-centred practice: Is based on enablement foundations and employs enablement skills in a collaborative relationship with clients to advance a vision of health, well-being, and justice through occupation. (Townsend & Polatajko, 2007) Client-centred occupational therapists demonstrate respect for clients, involve clients in decision making, advocate with and for clients’ needs, and otherwise recognize clients’ experience and knowledge (CAOT, 1997; 2002a).

Clients: In occupational therapy may be individuals, families, groups, communities, organizations, or populations who participate in occupational therapy services by direct referral or contract, or by other service and funding arrangements with a team, group, or agency that includes occupational therapy (Townsend & Polatajko, 2007).


Enabling occupation: The process of facilitating, guiding, coaching, educating, prompting, listening, reflecting, encouraging, or otherwise collaborating with people so that they may choose, organize and perform those tasks and activities of everyday life which they find useful and meaningful in their environment (CAOT, 1997; 2002a).

Occupational therapy is the art and science of enabling engagement in everyday living, through occupation; of enabling people to perform the occupations that foster health and well-being; and of enabling a just and inclusive society so that all people may participate to their potential in the daily occupations of life (Townsend & Polatajko, 2007).

References


Canadian Association of Occupational Therapists (2002b). *Profile of occupational therapy practice in Canada*. Ottawa, ON: CAOT Publications ACE.


Canadian Association of Occupational Therapists (2009). *Practice profile for support personnel in occupational therapy*. Ottawa, ON: CAOT Publications ACE.


