



New Brunswick Association of Occupational Therapists Practice Guidelines: Assignment and Supervision of Occupational Therapy Support Personnel (2018)

Introduction

Occupational therapy support personnel are widely used in occupational therapy services throughout New Brunswick. The New Brunswick Association of Occupational Therapists (NBAOT) endorses this practice as a means of expanding public access to occupational therapy services by allowing occupational therapists to better utilize their professional skills.

In order to protect the public interest, occupational therapists must demonstrate accountability for the assigning process, including the decision to assign and the monitoring and supervision of the support personnel to whom the task is assigned. These practice guidelines are intended to support, not replace, the exercise of professional judgment by therapists in particular situations.

The purpose of this document is two-fold:

- 1) to define support personnel and their role in the provision of occupational therapy services in New Brunswick and
- 2) to ensure that occupational therapists in New Brunswick are aware of the minimum expectations for the supervision of occupational therapy support personnel.

This document has been prepared through a review of current documents from other Canadian occupational therapy regulatory jurisdictions and by consulting the *Canadian Association of Occupational Therapists Practice Profile for Occupational Therapy Support Personnel and Guidelines for Supervision*.

Definitions

Support personnel

Occupational Therapy support personnel are service providers who are knowledgeable

and competent in the field of occupational therapy through experience, education or training. They are directly involved in the provision of occupational therapy services under the supervision of a registered occupational therapist. Occupational therapy support personnel are not eligible for registration with the New Brunswick Association of Occupational Therapists. As non-regulated individuals, they can be referred to by a number of different titles including, but not limited to, support person(nel), rehabilitation assistant (RA), and occupational therapist assistant (OTA).

Assignment

Assignment is the process whereby the occupational therapist allocates responsibility for the delivery of particular aspects of occupational therapy service components to an unregulated health/social care/other related service provider.

Consultation

Consultation is the process of providing expert advice (e.g. recommendations, education, training) or facilitating problem solving regarding a specific issue with another care provider, groups of individuals or organizations, on a time-limited basis. The *consulting* occupational therapist is unlikely to *assign* occupational therapy service components to support personnel and does not have continuing responsibility for supervising the quality of the ongoing service of the provider, unless the consultation includes programming, service implementation and/or evaluation.

Supervision

Supervision is a process whereby the occupational therapist provides continuous and interactive feedback to the support personnel to ensure appropriate delivery of service components. Supervision may be direct - where the occupational therapist is physically present while the service is being provided, or indirect - where the occupational therapist is not physically present at all times. Indirect supervision also includes regular monitoring. Monitoring can be provided through a variety of methods – examples include, but are not limited to, auditing of notes, chart review and periodic direct observation.

Occupational therapy service components

Occupational therapy service components refer to occupational therapy service such as assessment, goal setting, treatment or program engagement, education, consultation, etc.

Responsibilities

The occupational therapist assigning a component of an occupational therapy service has the responsibility to determine and demonstrate appropriate assignment, supervision and documentation.

He/she will ensure the following are addressed:

That the **client** –

- Understands and consents to occupational therapy support personnel carrying out components of the service
- Receives service that is not compromised by the assignment

That the **support personnel** –

- Understands his/her role and responsibilities
- Clearly identifies his/her role as assisting the supervising occupational therapist
- Is competent to provide the service safely and effectively
- Receives appropriate training to carry out tasks/procedures
- Acknowledges accountability to the supervising occupational therapist in completing assigned tasks
- Understands how and when to contact the supervising occupational therapist
- Changes or modifies tasks within limits established by the supervising occupational therapist
- Documents appropriately as directed by the supervising occupational therapist

That **documentation** –

- Includes evidence that appropriate consent was received
- Includes plans regarding the assigned service components
- Includes that support personnel notes were reviewed by supervising occupational therapist

Expectations

The occupational therapist will be fully accountable for all occupational therapy service components assigned to support personnel. Occupational therapists need to consider the following process when assigning service components to support personnel:

- Carry out an assessment and determine if any components can be assigned
- Obtain consent from the client
- Assign service components, including documentation of same
- Establish a supervision and communication plan
- Document the plan

- Evaluate the assigned service components
- Direct changes, modifications and any withdrawal of assigned service components
- Terminate assigned service components

Generally, the occupational therapist **should not** assign any of the following service components to support personnel:

- Screening of referrals/interpretation of the need for occupational therapy services;
- Initiation of occupational therapy service;
- Aspects of assessment requiring occupational therapy professional/clinical Judgement (occupational therapy support personnel may be involved in collecting simple or rote data to be used by the occupational therapist in the assessment);
- Interpretation of assessment findings;
- Planning of intervention and goal identification/modification of an intervention beyond the limits established by the supervising occupational therapist;
- Intervention where ongoing analysis and synthesis is necessary to closely monitor and guide client progress;
- Communication (written or verbal) of occupational therapy recommendations, opinions, findings;
- Personal counselling of clients, families/caregivers, etc.
- Determination of caseload;
- Decision to discharge/discontinue/conclude services and related discharge planning;
- Referral of client to other professional or agencies;
- Occupational therapy components in which the occupational therapist is not fully competent to direct.

The occupational therapist may not be accountable for performance management issues and administrative tasks related to the occupational therapy support personnel as accountability in this area is usually determined by the program, facility, business or organization that funds the services.

The occupational therapist is **not** professionally accountable for the delivery of service components by support personnel in the following situations:

- The support personnel deliberately performs occupational therapy service components that have not specifically been assigned by the supervising occupational therapist; or
- The support personnel performs occupational therapy service components that are outside the parameters of service set by the supervising occupational therapist.

The occupational therapist is responsible for an adequate level of supervision. If the supervisor of the occupational therapist becomes aware of either of these situations, he

or she needs to intervene immediately and appropriately, including taking steps to prevent reoccurrence of the situation.

References

Canadian Association of Occupational Therapists. (2009). Practice Profile for Support Personnel in Occupational Therapy. Appendix B: Guidelines for the supervision of assigned therapy services components. Ottawa, ON.

College of Occupational Therapists of British Columbia. (2011). Practice Guideline – Supervising Support Personnel. Victoria, BC.

College of Occupational Therapists of Ontario. (2011). Standards for the Supervision of Support Personnel. Toronto, ON.

PEI Occupational Therapists Registration Board (2014): Practice Guideline: Assignment and Supervision of Occupational Therapy Support Personnel (OTSP). Charlottetown, PE

College of Occupational Therapists of Nova Scotia Practice Guideline (2013): Assigning of Service Components to Support Personnel. Halifax, NS.