

Allied and Scientific Health Office

Allied Health Practice Profile



Allied Health Practice Profiles: Occupational Therapy

Purpose

The Allied Health Practice Profiles (AHPP) aim to provide a resource for each profession's use when reviewing the services they provide to SA Health clients.

Allied health service structures are in the majority a matrix model and cover many clinical areas within health services. Whilst this allows for agility, flexibility and responsiveness allied health services need to be able to clearly articulate why they provide services to clients or why they refer on to other services. This AHPP outlines the continuum of service provision based on the identification of key work practices and core business for each profession.

The AHPP articulates the scope of practice that are common amongst allied health professionals (Core Practice Profile) alongside the specific scope of practice for each profession (Specific Practice Profile). These profiles will assist allied health professions when reviewing their services to identify work that is no longer supported by the business unit that requires referral on and opportunities to provide full core business services. It will also allow allied health to clearly identify where they can assist other professions in their requirement to be working at the top of their scope through provision of extended scope of practice services.

The AHPP is intended as a guide for service provision and not a restrictive or conclusive list. The profiles will evolve with time as practices develop and change and thus will be updated periodically. The online version is the correct version and once printed may be out of date.

In this environment of change and models of care development it is important that professions are clear and consistent across the state in their communication about what they can or do provide to clients in South Australia.

Information in the resource

Information in the resource focuses on clinical rather than management roles in order to keep the statements specific to clinical care undertaken by allied health professionals and assistants. The scope of practice roles are mapped across a continuum from an assistant role through to advanced and extended roles. These statements are based on core services rather than competencies to circumvent the need to attach a classification level.

Context within the Transforming Health agenda

Through the implementation of the Transforming Health agenda, allied health services are being asked to provide wide ranging information including but not limited to; describing their roles, identifying innovative practice models, providing evidence for their service models, identifying efficiencies and opportunities to work to their full scope of practice and clearly articulating how they will contribute to the Transforming Health agenda. The AHPP are a starting point for Local Health Network allied health professions to be able to clearly describe their roles, what they do and don't do and the opportunities to work towards a full scope of practice in line with Transforming Health models of care directions.

Scope of Practice Definitions

This document maps the scope of practice for occupational therapy across a continuum from allied health assistants through to advanced and extended scope roles. The following definitions apply to this document:

Allied Health Assistant encompasses technical staff who are trained to support allied health professionals with their practice. They may work for one professional group or a range depending on their work roles and tasks. Allied health assistants will be supervised by allied health professionals with a combination of direct and indirect support and will be assigned tasks based on their level of competence, knowledge and experience.

Transition Scope is relevant for clinicians who are new to their profession or new to their role and are developing their core skills. The time a clinician spends in transition will vary from person to person and amongst areas of practice. Clinicians in transition receive intensive support and supervision while they build their competence, skills, knowledge and clinical reasoning skills.

Consolidation Scope encompasses a degree of competence, experience and skill that allows the clinician to work relatively autonomously in their work role. They feel confident in their role, have the ability to support others in their skill development and demonstrate effective clinical reasoning and reflective practice relevant to that work role.

Advance Scope of Practice: is a level of practice characterised by an increase in clinical skills, reasoning, critical thinking, knowledge, experience and complexity of service provision so that the practitioner is an expert working **within** the scope of established contemporary practice¹

Extended Scope of Practice: is a level of practice which incorporates practice beyond the established, contemporary scope of practice. Competencies and training pathways for extended scope roles, for registered and self-regulating allied health professional groups, continue to be refined in South Australia¹

Patient refers to service users who utilise allied health services. For the purpose of these profiles, patient includes client, consumer, service user, customer and other similar terms

¹ Scope of Practice Roles in SA Health Policy Directive.

Allied Health Common Core Practice Profile²

	Allied Health Assistant	Transition Scope	Consolidation Scope	Advanced Scope	Extended Scope
Assessment	Gathering of background information from case notes/patient to support clinical assessment Gathering routine information from clients, family and service providers Assists AHPs with clinical assessments as directed With appropriate competency based training, conducts basic screening assessments Prepares assessment resources/equipment for instrumental assessments and assists AHPs with equipment operation	Complex, comprehensive assessment of patient needs relevant to clinical need with supervision Critically analyse assessment findings in relation to clinical care needs and liaise with team to set priorities and plans with supervision Making valid interpretations of assessment findings based on sound clinical reasoning Use of appropriate evidence based tools Undertakes assessments in order to plan for therapy goals, ongoing care needs, potential to regain independence and suitability for rehabilitation or suitable early intervention approaches Is an active member of the Multi-disciplinary team in assessment, goal planning and discharge planning	Complex, comprehensive assessment of patient needs relevant to clinical need Critically analyse assessment findings in relation to clinical care needs and liaise with team to set priorities and plans Application of a wide range of assessment and therapeutic interventions to clients with complex needs Reviewing and incorporating relevant evidence and/or accepted best practice into the assessment and management of patients	Specialised assessment of patients	Highly complex and specialised clinical assessment, may take on roles of other professional groups relevant to area of specialty
Case management/Care coordination	Assisting with the making of appointments and liaison with other community agencies. Arranging client appointments, making routine reminder calls and following up patient nonattendances as appropriate. Monitor patients who are stable and awaiting service provision and provide updates and information as it becomes available Monitor patients in community settings and provide updated information to allied health professionals as available	Actively contribute to ward rounds and/or clinical meetings Contribute to multidisciplinary problem solving Effective communication with patients, carers, and relevant other personnel involved in patient care to facilitate improved health and discharge outcomes Contributes to case management processes providing information based on outcome of comprehensive assessment in conjunction with input from patient, family, carers, multidisciplinary team and service providers	Manages complex case coordination Liaising with other Health Professionals on matters relating to patient care by communicating with the relevant staff and relevant others, as necessary, to ensure patient assessment and treatment by clinician is coordinated and appropriate	Coordinates care of highly complex patient groups Coordinates case coordination over multiple services in highly complex and volatile client/clinical environments	
Intervention	Assisting with, and participating in group and individual intervention programs Assisting with inpatient & outpatient services Preparing and maintaining therapy rooms/materials and packing up/cleaning therapy rooms/resources as required Carrying out of predetermined programs with patients with direct/indirect supervision Preparing patients for therapy Monitoring patients response to intervention	Complex, multifaceted interventions across a range of clinical areas based on clinical need with supervision. Run preprogramed therapy groups for patients in conjunction with other team members or with indirect supervision Goal setting with patients and carers to ascertain therapy priorities and methods Delegating appropriate tasks to assistants ensuring that dedicated tasks are performed safely and effectively	Treatment planning for intervention/support services based on comprehensive assessment Specialised, complex, multifaceted interventions using evidence based practice	Undertakes evidence based practice reviews and critical analysis to determine best practice for a given specialised area or generalist team Provides direction in regards to intervention strategies, practices and evidence for an allied health department or specialised area Developing new intervention methods based on evidence based practice, technology, patient needs and available resources	

 $^{^{\}rm 2}$ All Allied Health Professionals will include these core services in their role PUBLIC-I1-A1

	and modifying to a limited extend to meet patients level of function Liaising with clinicians regarding patient progress and their response to interventions Making of therapy resources Preparing therapy services, rooms, resources, etc. Escorting and/or organising transport for patients to/from therapy areas	Sets therapy goals and implements appropriate management/therapy, counselling and education to patients and carers with non-complex needs. Provides programs for AHAs		
Interdisciplinary care	Articulate role in interdisciplinary team and assist as required	Articulate role within interdisciplinary team Seek support from senior members of team as required Working collaboratively with members of other disciplines within the hospital or community setting Contribute effectively to interdisciplinary team planning regarding care and treatment of client Attending and actively participating in ward rounds and/or client meetings	Participate in interdisciplinary clinical and planning activities	
Service provision /Coordination	Disseminating information to patients Sending/receiving referrals completed by clinician Following up on support services on request Maintains patient appointment scheduling including associated booking system requirements, transport etc.	Managing complex needs of patients, carers and families as relevant to caseload with support Identifying required support services Making referrals to support services Contacting support services and other systems to coordinate and collaborate regarding service provision Ensuring appropriate clinical handover for patients being transferred to the care of other professionals using appropriate tools and guidelines relevant to organisation Advising and liaising with external organisations which may require exchange of information on patients to ensure appropriate care of patients by a variety of communication processes involving professionals, family and/or relevant others	Managing complex needs of patients, carers and families as relevant to caseload Manages discipline staff resourcing, goods and services to ensure service needs are met which ensure optimal outcomes for patients, carers and families, other consumers/stakeholders	Developing service delivery models/services/clinics based on unmet need Evaluating service delivery models/services
Advocating		Provides an integrated approach to patient management through counselling, discussion, educating and training patients, families, carers and staff in specific techniques to be followed Liaises with families/carers, other health service staff and relevant community service agencies with regards to assessment findings and recommended management plans. Advocates for clients and their family in order	Advocating for clients and their family within the hospital and when referring to community services and other agencies Encouraging the active participation of patients and their families/ carers in their assessment and treatment, enabling them to achieve the optimal level of independence Implements new initiatives which improve outcomes for patients, families and / or community, involving consumers in	

Discharge planning	Delivering resources or information to patients Giving routine information about services in the community	to access appropriate ongoing management e.g. referral to community services and agencies Makes referrals to external service providers and coordinates care for discharge Referrals are accepted and responded to by community agencies	consultation and development of relevant policies and procedures Leads complex discharge planning	Applies expert clinical knowledge in regards patient care to ensure safe and sustainable discharge across a range of highly complex patient needs	
		Ensures relevant and appropriate clinical handover and completion of appropriate discharge documentation Contacts support services to coordinate service provision Contributes to complex discharge planning			
Documentation	Assisting the inpatient staff by helping to prepare documentation and supportive resource information. Documentation in medical records, and written and verbal reporting on intervention Document service provision/education/resources/equipment provided to patients Documents clinical handover to other care providers using established systems Adheres to minimum standards for documentation	Documented evidence of intervention in case notes Document assessment findings, intervention outcomes, discharge plans, family/carer needs/concerns, ongoing needs and potential barriers for discharge/recovery	Provision of high quality written reports/assessment to be included in case notes Completes appropriate documentation as per allied health, discipline and service guidelines	Writes proformas, guidelines and standards for documentation Support staff with complex documentation needs Document data, patient outcomes, discharge planning outcomes, barriers to discharge etc. for management or hospital wide committees	
Supervision	Participates in direct and indirect supervision activities	Participate in supervision, performance appraisal, professional development, clinical reflection Supervise students as appropriate Seeking guidance and supervision from experienced staff when more complex problem solving, professional decision making and practice skills are required	Participate in supervision, performance appraisal, professional development, clinical reflection Supervise students and clinical staff as required Provide professional supervision and management to clinicians within team	Participate in supervision, performance appraisal, professional development, clinical reflection Supervise supervisors Coordinate and supervise student supervision program Conduct performance appraisals	
Quality assurance /Risk	Collection and analysis of data to provide information on patient progress or services Participation in team quality activities, research and evaluation maintaining required statistics, recording accurate and timely workload data Develops resources e.g. handouts	Participating in quality improvement activities, research and performance enhancement programs Contributing to the development of departmental and organisational procedures and policies Actively promote contribution of allied health staff to the delivery of high quality health care Contribute to service development and planning Evaluate own practice	Participate in quality management, quality assurance and risk management activities Contribute to service development Encourage and foster positive culture and safe work environment Work in collaboration with other health professionals to achieve optimal client outcomes Develop and foster a culturally appropriate, respectful and safe work place	Develop and implement quality, risk management projects and monitor quality of service provision Develop and maintain an appropriate system of referral and work allocation ensuring equitable distribution of workload within the team Developing and maintaining team priority setting Monitoring workloads and practice standards through regular supervision Represent team/service at working parties/committees as required	

				Conducting relevant research and promulgating the results Leading and supporting team members in conducting research and evaluation activities	
Professional Development	Maintaining and developing knowledge and skills in relation to position requirements Undertakes Credentialing / competency training for advanced AHA roles e.g. swallow screening	Maintaining and developing clinical and professional knowledge and skills Participating in departmental and organisational professional development programs Complete annual professional plan and training as required to maintain registration/professional association membership as required	Professional development undertaken and where relevant, current approaches are integrated into clinical practice Understand and identify professional strengths, limitations and challenges Complete annual professional plan and training as required to maintain registration/professional association membership as required		
Education /Research	Support group work planning and interventions Prepare for education sessions as directed by clinician Provide research support to implement research projects such as collection of data	Contribute under direct supervision to development of research proposal Conduct literature reviews to support research proposal Collection and collation of data Run pre-prepared education sessions for patients and their families/community members/staff	Develop a research proposal and implement with direct support Conduct research into current practice standards Run education sessions/clinics/presentations on a range of topics relevant to clinical expertise for staff, consumers, community groups, students	Provide education to other health professionals in relation to advanced roles and tasks Developing an education strategy for a local health network or department Lead research projects requiring ethics approval, organisational support or specialised research skills	Provide education to other health professionals in relation to extended scope roles and tasks
Equipment Provision	Maintains equipment required for services Assists therapists in the issue and adjustment of equipment/aids for patients Assists clinicians in operation of equipment for instrumental assessment. Cleans and maintains clinical equipment. Key equipment reprocessing including cleaning and high level disinfection of clinical equipment with appropriate training. Assists with ordering and supply of patient equipment and general clinic supplies				

Occupational Therapy Specific Practice Profile³

Occupational therapy is a client-centred health profession concerned with promoting health and wellbeing through occupation. The primary goal of occupational therapy is to enable people to participate in the activities of everyday life. Occupational therapists achieve this outcome by working with people and communities to enhance their ability to engage in the occupations they want to, need to, or are expected to do, or by modifying the occupation or the environment to better support their occupational engagement⁴.

Occupational Therapy	Allied Health Assistant	Transition Scope	Consolidation Scope	Advanced Scope	Extended Scope
Assessment		Effective and efficient occupational performance assessment including; functional/developmental/physical/cognitive/environ mental/psychosocial/emotional needs with indirect supervision Critically analyse functional issues in relation to clinical care needs and liaise with team to set priorities and plans with supervision	Comprehensive assessment of complex occupational performance skills including; functional/developmental/physical/cognitive/environ mental/psychosocial/emotional needs Critically analyse functional issues in relation to clinical care needs and liaise with team to set priorities and plans	Assessment of highly complex occupational performance issues Certified hand therapist specialised assessments Lymphoedema certified assessment Driver training assessments	Assessment of highly complex occupational performance issues and components outside of normal occupational therapy scope of practice
Case management/ Care coordination		Case management role may be undertaken within the multidisciplinary team in relation to complex patients in the community or acute setting with supervision— particularly in rehabilitation, community mental health, intermediate care	Case management role may be undertaken within the multidisciplinary team in relation to complex patients in the community or acute setting – particularly in rehabilitation, community mental health, intermediate care Case management/care coordination of complex patients who are at risk of hospitalisation, harm to self or others who may require collaboration/coordination with other agencies to maintain/obtain a degree of independence		
Intervention					
Rehabilitation/ Therapy	Providing specific functional therapy/rehabilitation as directed by occupational therapist including; ADL retraining, upper limb/ visual motor/ sensory/ psychosocial interventions	Provision of physical/ cognitive/ psychosocial/ developmental therapy/ rehabilitation in response to comprehensive assessment and care planning with supervision Comprehensive client centred goal setting with complex patients in order to determine rehabilitation priorities, plans and methods	Working with highly complex patients requiring extraordinary support measures and supporting other occupational therapists with complex patient care with supervision Provision of comprehensive rehabilitation programs across a range of clinical areas in relation to patients functional needs and goals Identifying areas for improvement in rehabilitation practice	Developing new rehabilitation methods /protocols based on evidence based practice, technology, patient needs and available resources	Management of highly complex occupational performance issues and components outside of normal occupational therapy scope of practice
Service provision/ Coordination	Making of therapy resources Preparing therapy services, rooms, resources, food etc.	Managing complex functional support needs for patients, carers and families with supervision Maintaining knowledge and resources in relation to service and equipment providers, environmental modifications, modified equipment, technology and new therapeutic practices	Coordinating and collaborating with service providers/agencies in relation to complex patient groups i.e. Disability SA, National Disability Insurance Scheme (NDIS), Lifetime Insurance Agency, My Aged Care etc.	Developing new support services in conjunction with service providers based on clinical needs of patient groups	
Equipment prescription	Maintaining stocks of equipment Ordering and chasing up equipment delivery	Prescribing basic activities of daily living (ADL) and mobility equipment to patients Prescribe, fit and/or customise ADL/mobility equipment/aids for patients with varying functional	Prescribe, fit and/or customise ADL/mobility equipment/aids for patients with varying functional needs Prescribe/customise assistive technology for varying	Prescribe car modifications	Work with suppliers/manufacturers to develop new/modified equipment based on population trends and clinical needs

³ Specific occupational therapy roles will provide a range of these core services

⁴ World Federation of Occupational Therapists, 2011 accessed online 1.3.2016 http://www.wfot.org/Portals/0/PDF/STATEMENT%20ON%20OCCUPATIONAL%20THERAPY%20300811.pdf
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	Maintaining good networks with equipment suppliers	needs with support	patient needs		
	ечиртел заррнега	Prescribe/customise assistive technology for varying patient needs with support	Identify barriers for timely equipment provision and work with suppliers/services to advocate for patient/health service needs		
Environmental modifications	Liaise with builders in relation to modification progress	Prescribe basic environmental modifications Prescribe complex environmental modifications based on patient/carer needs with supervision Identify short term solutions to environmental barriers to enable safe discharge home while awaiting permanent modifications where appropriate with supervision	Prescribe complex environmental modifications based on patient/carer needs Identify short term solutions to environmental barriers to enable safe discharge home while awaiting permanent modifications where appropriate Prescribe major/complex environmental modifications where multiple agencies/professionals are involved in order to discharge a highly complex patient home	Develop proformas/ guidelines/ training/ support systems for staff prescribing environmental modifications Design training modules in relation to environmental modifications Collaborate effectively with building/housing industry services in relation to environmental modifications, building standards and patient trends/needs	
Loss of capacity /Decision making abilities		Undertaking cognitive and/or occupational performance assessments to ascertain cognitive capacity and functional issues in order to plan for ongoing care needs, potential to regain independence and suitability for rehabilitation	Undertaking cognitive/occupational performance assessments with complex, aggressive or challenging patients to ascertain cognitive and functional capacity		
Education		Provide clients and family members with information on services, equipment, modifications, supports available including contact with appropriate community resources where necessary Providing patients, carers and families education in relation to their functional/occupational abilities and limitations including but not restricted to: safe use of equipment, manual handling, energy conservation, work simplification, falls prevention, ADL training/retraining, modified functional tasks, information about their condition, self-management with supervision	Education provided to other health professionals in relation to OT role and tasks		
Discharge planning	Deliver, fit and educate patients/carers on equipment provision and safe handling	Conduct complex discharge planning with patients including service provision, equipment provision, environmental modifications and/or referral to rehabilitation or other therapy services	Conduct highly complex discharge planning and support assistant and AHP1 staff with their complex cases Provide a flexible, innovative approach to discharge planning and responds to various hospital/health service demands as required		
Documentation		Document and draw up basic home modifications/equipment modifications as required	Document high level reports regarding patients with complex needs and issues advocating for resource intensive services, equipment, environmental modifications or insurance		

Version Control and Change History

Version	Date From	Date to	Amendment
V1	September 2017	September 2020	

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