
POSITION DESCRIPTION

SECTION A: Position Identification POSITION TITLE: Occupational Therapist		CLASSIFICATION	
DEPARTMENT		DIVISION	
POSITION #	MANAGEMENT	EXCLUDED	BARGAINING UNIT

SECTION B: Reporting Structure

Your Supervisor's Title:

His/Her Supervisor's Title:

Other positions that report to your immediate supervisor:

SECTION C: Program/Functional Area

(Provide a brief description of the Program Area or Organizational Unit in which the position is located. This Section should include whether services are multi-site, multi-disciplinary, site, district, provincially or regionally focused; nature of population served, etc.)

SECTION D: Position Summary

The Occupational Therapist (OT) is one of the collaborators in the Collaborative Care Model, participating in the provision of holistic, comprehensive care to meet the needs of patients/clients. As a member of the team, the OT participates in the overall plan of care with the patient/client by providing occupational therapy services.

Occupational Therapy Services are indicated when engagement in the occupations of everyday living becomes a challenge or engagement is at risk of becoming a challenge.

The vision and goals of Occupational Therapy, include environmental and system level actions with or for individuals and groups, such as:

- Enabling community re-engagement
- Adapting and designing programs and the environment for safety and inter-dependence
- Coordinating community connections for community / social inclusion
- Advocating with patients/clients and the community to develop resource supports
- Educating patients/clients, families, etc. to manage chronic disease and disability
- Enabling optimal participation in home, work, community, and society
- Enabling participation in all aspects of everyday life

Occupational Therapy assessment involves the identification of Occupational Performance Issues, challenges related to occupational engagement and the identification of strengths and barriers related to the Occupations, Environment, and Person. Assessment methods include, but are not limited to: Functional Assessment and task analysis of self-care, leisure and productivity occupations; and standardized assessments.

The OT contributes to the patient's/client's plan of care based on the analysis of assessment findings, chosen theoretical approaches, clinical best practices, critical thinking, and collaboration with the patient/client.

Occupational Therapy Interventions aim to facilitate safe, functional, engagement in self-care, productivity and leisure occupations; and minimize barriers that impede engagement in occupations. Intervention may include on one or more of the following: remediation, adaptation, compensation, prevention, health promotion, or education. Interventions typically target the person, occupation, and environment collectively as these elements are inter-related. Interventions may take place in the medical surgical unit, or in functional environments (e.g., home, school, community locations, and work) relevant to the client.

In collaboration with the patient/client, his/her support system and the health care team, the OT monitors patient's/client's response to intervention and modifies/grades treatments, care plan, and discharge plans, as indicated.

SECTION E: MAJOR RESPONSIBILITIES: (indicate approx % of time spent on each)

Professional Accountability:

1. Carries out assessment, plan implementation, discharge planning and education in accordance with DHA policies and procedures, the Occupational Therapy Code of Ethics, the National Occupational

Therapy competency requirements, and the Occupational Therapy Act of Nova Scotia.

2. Conducts self within legal/ethical/professional obligations and requirements.
3. Performs beyond entry level competencies and within medical directives and delegated medical functions as approved for the practice setting as per the the National Occupational Therapy competency requirements, and the Occupational Therapy Act of Nova Scotia.
4. Identifies the patient/client, based on each unique situation, and identifies the patient's/client's support system (e.g., family, significant others, caregivers, community, etc.) and works as a champion of patient/client-centered care.
5. Ensures provision of occupational therapy services at a systems level and with a focus on population health.
6. Respects the individuality, autonomy and confidentiality of the patient/client and ensures the patient/client is treated respectfully and uses a patient/client-centred approach involving shared decision making and responsibility with the patient/client.
7. Demonstrates professional integrity and a commitment to the well-being of all patients/clients.
8. Delivers professional services incorporating education, research and effective management of practice.
9. Engages in professional development and lifelong learning activities.
10. Completion of workload measurement statistics.
11. Orientation of new employees and mentoring/preceptoring of new and existing employees as appropriate.
12. Acts as a mentor / preceptor for student clinical internships.

Communication and Collaboration:

1. Establishes and maintains effective communication with patients/clients, relevant others and professional colleagues.
2. Maintains an accurate account of care given through clear, concise, written and verbal communication and evaluates, communicates and documents patient/client response to care in a timely manner.
3. Develops and maintains information systems to ensure appropriate access to accurate, objective, relevant information about the patient/client and general occupational therapy services.
4. Collaborates, partners, and communicates with the individual, family, community, health care team and service providers when there is a difference between the care plan and the wants, needs and abilities of the patient/client.
5. Demonstrates effective collaboration and inter-professional teamwork by consulting and sharing information with other health professionals, family and community organizations in a timely manner, provided patient/client consent is obtained where required, to ensure comprehensive, safe service delivery.
6. Facilitate collaboration across the continuum of care, including improved communication between community, tertiary hospitals, regional hospitals, etc.
7. Facilitate discharge planning and transitions across the health care continuum, ensuring the patient's/client's needs are met in appropriate setting.
8. Participation in staff meetings or working group meetings.
9. Participation in and /or leadership of program planning, research, continuous quality improvement initiatives, committees, staff education, safety initiatives, and accreditation as requested.
10. Demonstrates effective verbal and non-verbal communication abilities to prevent adverse events.
11. Communicates effectively in special high-risk situations to ensure the safety of patients/clients.

Interprofessional Competencies:

1. Describes one's roles and responsibilities and scope of practice clearly to other professionals/patients/clients.
2. Describes overlapping aspects of own professional knowledge and skills with other health professionals and paraprofessionals.
3. Recognizes and respects the role, responsibilities and competence of other professions / paraprofessionals in relation to one's own.
4. Demonstrates respect and trust to ensure that collaborative relationships are fostered.
5. Practices within own scope of practice, code of ethics, standards and/or clinical guidelines while working within a collaborative patient/client-centered relationship.
6. Works with others to assess, plan, provide and review care to maximize health outcomes for individual patients/clients.
7. Gathers assessment data from all health professionals/paraprofessionals/patient/client/family involved in care.
8. Demonstrates effective sharing of information and exchanging of ideas.
9. Integrates information from each health professional/paraprofessional/patient/client/family to develop common patient-centered goals.
10. Participates effectively and appropriately in an interprofessional health care team to optimize patient/client safety.

Assessment:

1. Participates in screening and prioritizing referrals to Occupational Therapy to determine the individual's need for Occupational Therapy Services as required. Identifies the patient/client, based on each unique situation, and identifies the patient's/client's support system (e.g., family, significant others, caregivers, community, etc.).
2. Assesses the patient/client through interviewing and conducting functional and standardized assessments, to identify Occupational Performance Issues (OPIs); challenges related to occupational engagement, strengths and barriers related to the Person, Occupations, and Environment, and their interaction with one another.
3. Consults with the patient/client on options for service; explains and obtains patient/client consent.
4. Selects an appropriate theoretical approach to address the patient's/client's occupational performance issues.
5. Advocates with patient/client to establish positive first contact, consults on options for service; educates and collaborates to establish/remind patient/client of previous signing and document consent.
6. Engages with patient/client to build rapport and the relationship, clarify values, organize a schedule and places to meet for assessment.
7. Collaborates with patient/client to identify priorities for assessment and possible expected outcomes.
8. Collaborates with members of the healthcare team and patient/client to collect, validate and expand assessment data.
9. Documents and communicates pertinent information in a timely and concise manner.
10. Monitors, through assessment data, the ongoing status of the patient/client.
11. Recognizes changes in occupational performance and engagement, functional abilities, and health care needs and adjusts the care plan accordingly.
12. Initiates discharge planning with the patient/client, the patient's/client's support system, and the health care team.

Planning:

1. Engages the patient/client in the goal setting process to identify the patient's/client's priorities.
2. Engages in critical thinking, analyzes and interprets assessment data for the patient/client, his/her support system and the health care team to identify the patient's/client's occupational performance issues, strengths and weaknesses.
3. Re-evaluates and adjusts theoretical approach(es) as necessary to fit with the patient's/client's Occupational Performance Issues (OPIs).
4. Through collaboration with the patient/client, develops the plan of care based on the analysis of assessment findings, chosen theoretical approaches, clinical best practices, and the patient's/client's vision for his/her life opportunities.
5. Initiates planning and establishes short and long term goals, expected outcomes, a plan of care, and a discharge plan.
6. Applies knowledge of pertinent Occupational Therapy and related healthcare research and evidence to care planning; uses current knowledge to justify plan of care.
7. Integrates interdisciplinary and multiagency factors into the care plan.
8. Negotiates and communicates with the patient/client, his/her support system, the health care team, and service providers when there is a difference between the care plan and the wants, needs and strengths of the patient/client.

Implementation:

1. Engages the patient/client in treatment (either individual or group) by providing interventions with an aim to maximize occupational functioning and minimize barriers that impede occupational engagement. Implementation of the plan involves promotion of safety, choice, and risk engagement.
2. Interventions may occur in an institutional environment or in the patient's/client's usual environment and may include one or more of the following: remediation, adaptation, compensation, prevention, health promotion, or education. Interventions typically target the person, occupation, and environment collectively as these elements are inter-related.
3. Teaches and coaches patients/clients and families in a flexible and creative manner using accurate and consistent information, which may include the development of educational materials.
4. Plans for timely completion of occupational therapy intervention, discharge planning and follow-up, as required, to meet patient's/client's needs.
5. Delegates appropriate tasks / activities to an Occupational therapy assistant, rehabilitation assistant, occupational therapy aide, or other members of the health care team.
6. Supervises Occupational Therapy Assistants, Rehabilitation Assistants, and Occupational Therapy Aides.

Evaluation:

1. Evaluates, communicates, and documents expected and unexpected responses to care, to the patient/client, his/her support system, and the health care team. Evaluates and monitors broad outcomes including healthy living, and reducing hospitalization.
2. In collaboration with the patient/client, his/her support system and the health care team, monitors patient's/client's response to intervention and modifies/grades treatments, care plan, and discharge plans, as indicated.
3. Discusses observations with and makes recommendations to interdisciplinary team and leaders to influence program development/evaluation.

4. Maintains an accurate account of care given through clear, concise, written and verbal communication and evaluates, communicates and documents patient/client response to care.
5. Continuously engages in critical thinking, and evaluates plan of care and makes revisions to plan as necessary in consultation and collaboration with other members of the health care team, patient/client, his/her support system.
6. Consults, collaborates, advocates, educates and engages the patient/client to optimize services.
7. Protects patient/client and family confidentiality, privacy and creates an overall environment that is safe and secure.
8. Terminates Occupational Therapy Services in agreement with clinical best practices, and/or when maximal therapeutic outcomes / functional gains are achieved.

Care Coordination for a Patient/Client or Group of Patients/Clients:

The OT may serve as the coordinator of care within the care delivery team depending on the needs of the patient/client population. In this role the OT will:

1. Provide leadership for ensuring that an integrated inter-disciplinary plan of care is created as early as possible in the patient/client experience for scheduled and unscheduled patients/clients.
2. Focus on ensuring that the patient/client care experience is coordinated and integrated within an interdisciplinary model of care, both within acute care and across the continuum of care.
3. Serve as a key resource to the family and patient/client.
4. Organize patient/client and family conferences as required to ensure active involvement in the development of the plan of care as well as the ongoing management and monitoring of progress.
5. Facilitate decision making through renewed processes of communication including scheduled rounds as well as ad hoc meetings to ensure timely flow and progression of the ongoing stay and discharge.
6. Identify barriers to smooth flow and timely progression and review with the team to rectify issues at the earliest possible moment.
7. Facilitate and coordinate referrals based on needs.
8. Ensure patient/client/family education by an appropriate person.
9. Participate in direct patient/client care delivery as per their defined scope of practice. Ensure and/or provide follow-up as needed including home visits, outpatient follow-up, etc.

Other Related Duties:

Other duties as assigned.

POSITION SPECIFICATIONS

SECTION F: MINIMUM FORMAL EDUCATION:

Education preparation accepted by the College of Occupational Therapists of Nova Scotia for Registration with the Nova Scotia College of Occupational Therapists.

SECTION G: CERTIFICATION/REGISTRATION/DESIGNATION

1. Eligible for registration with the College of Occupational Therapists of Nova Scotia.
2. Eligible for membership with the Nova Scotia Society of Occupational Therapists and the Canadian Association of Occupational Therapists.

SECTION H: SPECIAL KNOWLEDGE & SKILLS:

1. Thorough knowledge of Occupational Therapy practice, with an interest in program development and evaluation skills
2. Demonstrated accountability and responsibility.
3. Strong patient/client focus and ability to build solid patient/client/practitioner relationships.
4. Demonstrated collaboration and teamwork skills with the patient/client at the centre.
5. Commitment to continuous improvement and innovation.
6. Demonstrated leadership abilities.
7. Demonstrated planning, organization, and time management skills.
8. Commitment to promoting a culture that supports safety, ethical practices and organizational health.
9. Demonstrated good attendance in current and past employment.
10. Exemplary work history as demonstrated in current and past employment.
11. Computer skills (e.g., statistics input, word processing, email, etc.).
12. Annual Cardio-pulmonary Resuscitation certification (BCLS).
13. Physical capabilities to perform the duties of the position.
14. Travel may be required
15. Occupational Therapy is a diverse profession and additional courses/education/training in many specialized areas of practice may be required, e.g., pediatrics, stroke rehabilitation, seating, splinting, mental health services, etc.

SECTION I: NATURE AND AMOUNT OF EXPERIENCE:

(Indicate the nature and minimum amount of experience required to be able to competently meet the objectives of the position. This may include technical, professional, clinical or administrative experience, as well as supervision, management or direction of activities. It may also include experience from specific employment areas or types of organizations which would provide relevant experience.)

SECTION J: JUDGEMENT & INITIATIVE:

1. Carries out assessment, plan implementation, discharge planning and education in accordance with DHA policies and procedures, the Occupational Therapy Code of Ethics, the National Occupational Therapy competency requirements, and the Occupational Therapy Act of Nova Scotia.
2. Identifies the need for and coordinates occupational therapy services to maintain and enhance the occupational performance and engagement of the patient/client.
3. Continuously engages in critical thinking, and evaluates plan of care and makes revisions to plan as necessary in consultation and collaboration with the patient/client, his/her support system and other members of the health care team.
4. Articulates rationale for decisions that are based on clinical best practice, current theory and research
5. Intervenes when standards of practice are violated or not upheld.
6. Refers to appropriate professionals for issues beyond the profession's scope of practice and the individual's personal competence.
7. Seeks direction or assistance from other health care professionals as required.

SECTION K: TYPE AND LEVEL OF SUPERVISION EXERCISED:

1. Delegates appropriate tasks/ activities to an Occupational therapy assistant, rehabilitation assistant, occupational therapy aide, or other members of the health care team.
2. Supervision of Occupational therapy assistants, rehabilitation assistants, and occupational therapy aides.
3. Acts as a mentor / preceptor for students.

SECTION L: KEY RELATIONSHIPS:

1. Engages with patient/client to build rapport and the relationship, clarify values, organize a schedule and places to meet for assessment.
2. Collaborates with patient/client to identify priorities for assessment and possible expected outcomes.
3. Collaborates and communicates effectively with patient/client, his/her support system, team member(s) and internal/external resources to implement and coordinate plan of care/services.
4. Collaborates and works consultatively with team members, all levels of management, and other departments and agencies both internal and external to the organization.
5. Engages with Professional Associations.
6. Act as a Communicator, to promote of the profession of Occupational Therapy, and the concepts of occupational performance, occupational functioning and occupational engagement.

SECTION M: DEGREE OF RESPONSIBILITY FOR DECISIONS ON FINANCIAL, HUMAN AND MATERIAL RESOURCES:

Uses available physical, material and financial resources as required for safe, effective and efficient physiotherapy practice.

SECTION N: PHYSICAL DEMAND:

Physical capabilities to perform the duties of the position.

This could include working in awkward positions; sitting; stretching/reaching; on feet, standing/walking; pulling/pushing; lifting more than 40 lbs.; transferring patients/clients; crouching; and manual dexterity.

SECTION O: MENTAL & VISUAL DEMAND:

These include but are not limited to:

- Active listening / counselling / interviewing
- Clinical reasoning and critical thinking
- Observation
- Providing training/instruction to patients/students/families/caregivers
- Report Writing/documentation
- Data entry/computer use
- Health Record review

- Making presentations
- Driving

SECTION P: WORKING ENVIRONMENT and UNAVOIDABLE HAZARDS:

Work is inside in patient/client rooms, Occupational Therapy spaces, homes, schools, community

When car/service is provided in the homes, schools, day cares of clients the work situation is unique in that:

1. The work is generally done in the patient’s/client’s home in isolation from colleagues;
2. Employees are in the homes, schools, daycares of patients/clients where:
 - They may be unfamiliar with the physical layout of the space.
 - They are sometimes working in the presence of other family members, staff or visitors.
 - There is non-availability of immediate assistance when emergencies occur.
 - Contact with pets and wildlife may pose risk or injury.
 - The possibility exists of encountering individuals who are under the influence of alcohol or drugs
 - There is the possibility of encountering individuals who are confused, disoriented or incompetent
3. Employees may find themselves in unsafe working conditions, including space which is unsanitary or not structurally sound.
4. The employee must travel to and from patients’/clients’ homes, daycares, schools in all types of weather conditions.

SECTION Q: SAFETY (patient/client, worker & workplace)

The successful applicant will demonstrate good stewardship in the identification, reporting & mitigation of unsafe Acts or conditions

The successful applicant will:

1. Contribute to a culture of patient/client safety.
2. Work in teams for patient/client safety.
3. Communicate effectively for patient/client safety.
4. Manage safety risks.
5. Optimize human and environmental factors.
6. Recognize, respond to and disclose adverse events.

As per “The Safety Competencies: Enhancing Patient Safety Across Health Professions”, Canadian Patient Safety Institute.

Prepared by: _____ Date: _____

Signature

Name (Please Print)

Approved by: _____ Date: _____

Signature

Name (Please Print)

Approved by: _____ Date: _____

Signature

Name (Please Print)