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<p>Occupational Therapy New Zealand Whakaora Ngangahau Aotearoa (OTNZ-WNA)</p> <p><b>Interface between occupational therapy and other professions</b></p> <p><b>Position Statement</b></p>	 <p><b>OTNZ - WNA</b> Occupational Therapy New Zealand Whakaora Ngangahau Aotearoa</p>
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To be reviewed November 2004

## Background

This position statement has been developed in consultation with occupational therapists working in a variety of clinical areas in the health sector and it reflects the current thinking of occupational therapists.

It aims to communicate with key stakeholders (consumers, purchasers and other professions / agencies), the philosophy, key concepts, practice strengths, research needs and key issues for the development of effective interfacing between occupational therapy and other professions / agencies.

Professions that occupational therapists work with, may include (but are not limited to) the following;

Social Workers; psychologists, physiotherapists, speech-language therapists, medical practitioners, nurses, orthotists, teachers, builders, architects, activities/recreation coordinators, diversional therapists, recreational therapists, rehabilitation coaches, play specialists, dentists, dieticians.

## Context

Recent years have seen a growth in new professions, some of whose professional boundaries overlap with occupational therapy (e.g. therapeutic recreation, rehabilitation coaches), while others have upgraded their qualifications and professional standing (e.g. diversional therapy).

Restructuring in a number of hospitals as a result of quality assurance and funding initiatives (see Wright et. al. 2001, and Boyce 2001) have brought professions closer together in multi-disciplinary and interdisciplinary teams.

Governments are looking at new ways in which the health professions can be structured which may lead to blurring of the lines between professions (see Future Healthcare Workforce Project).

OTNZ-WNA also acknowledges the relevant legal, ethical, professional standards and current practice considerations that inform the practice of occupational therapists working in all fields and their relationship with other professions, particularly the Treaty of Waitangi.

## Philosophy

OTNZ-WNA believes that effective interface between occupational therapy and other professions / agencies will promote more collaborative and client-centred intervention with better overall outcomes for clients.

The benefits to clients from the expected improved working relationships among the members of the multidisciplinary team, are better outcomes and more efficient use of resources.

For the health professionals, the benefits come from having strength in numbers, sharing of ideas, additional learning, pro-active working relationships, lessened professional isolation and alienation

However, OTNZ-WNA believes that multi-disciplinary, interdisciplinary and transdisciplinary teams work best when each of the professions has a clear philosophy, works from its professional strengths and recognises its professional boundaries.

OTNZ-WNA recognises that in some instances occupational therapists will be held accountable for therapeutic interventions conducted by other professions, and their outcomes, and therefore they will have a supervisory or directive relationship with those professions. Nonetheless it is expected that occupational therapists will maintain a collaborative approach and non-judgemental attitude in such situations.

Where professional boundaries overlap OTNZ-WNA is committed to working constructively to resolve issues of role clarification, remembering to maintain the client as the centre of focus. As new professions whose boundaries overlap with occupational therapy develop, OTNZ-WNA will respond on a case by case approach on the basis of the following principles:

- Is there a genuine need that is not being met by occupational therapy or some other profession?
- Are the training courses adequate?
- Will the graduates of the training courses have jobs to go to?
- Are occupational therapists expected to supervise members of the profession both in training and in practice? If so, is this appropriate?

- Has OTNZ-WNA been adequately consulted about the development of the profession?

## Competencies and Expectations

Occupational therapists are able to articulate, and demonstrate occupational therapy knowledge, values, skills, role, philosophy and outcomes in occupational terms.

Occupational therapists have and demonstrate knowledge of other professions.

Occupational therapists demonstrate respect for other professions and agencies.

Occupational therapists know when they have reached the limits of their knowledge and skills – in other words their professional boundary.

Occupational therapists acknowledge the differences and similarities between the professions.

Occupational therapists have regular supervision that deals with issues such as role development and relationships with other professions.

Trust: respect and dignity towards others, confidentiality, consistency in words and deeds, in due processes which put people into their positions, honesty, fairness, reasonableness, justice, do as you say you will do, carry out occupational therapy role.

## Practice Strengths

Occupational therapists bring an occupational perspective of health to the multidisciplinary team: This is the concept that engagement in meaningful occupation directly impacts on the physical, mental, emotional and spiritual health of the individual.

Occupational therapists

- Use a collaborative, client-centred approach that recognises the importance of the client's values, strengths, deficits, wishes and goals;
- work from sound theoretical frameworks related to occupational performance and human development
- relate signs, symptoms, and environments to the client's performance in their occupations within self-care, work/productivity, leisure and relaxation.
- Consider the impact of the impairment on the client's life
- Acknowledge the client's physical, social, cognitive and educational achievements and capabilities
- work in the client's usual environments wherever possible
- are skilled in using assessments and interventions which relate to the client's occupational needs

- use professional reasoning which considers task analysis, task synthesis, task adaptation, environmental considerations and occupational performance.
- utilise a range of teaching-learning strategies
- assess the need for, and where necessary prescribe, specialised equipment designed to assist in activities of daily living
- use practical problem-solving strategies to achieve occupational goals.

## Day to Day Interface

Occupational therapists interface with other professions on a regular day to day basis. It is expected that occupational therapists will display a non-judgemental attitude and work in a collaborative way with other professions, while recognising their limits and being prepared to refer to more appropriate professions. It is also recognised that occupational therapists may be in a directive role with other professions and need to manage that appropriately.

Practical methods of day to day interface with other professions may include (but are not limited to);

- Communication: meetings – asking questions, talking, listening; individual interactions; documentation – reports, records/files, letters, individual education (or programme) plans; body language; oral and written language (terminology).
- Referrals to and from other people or agencies.
- Joint assessments, intervention, reports, decision-making with other professions or agencies.
- Assessments and opinions which feed into team decision-making
- Following policies of the organisation and team.
- Teaching and learning opportunities shared with other professions and agencies.
- Working collaboratively with people from other professions and agencies locally, regionally, nationally.

## Research

OTNZ-WNA believes that there is ongoing need for occupational therapists to conduct research into;

- Validating the effectiveness of occupational therapy in all areas of practice in order to substantiate interventions and raise awareness of occupational therapy and as such interface more effectively with other professions / agencies. An ability to articulate and demonstrate occupational therapy well

will enhance how other professions view and value occupational therapy as a profession.

- Collaborative projects looking at the impact of team work - looking at the similarities and differences between professions.

## Protection of Individual Indemnity

OTNZ-WNA believes that occupational therapists employed as occupational therapists in all settings within the health sector, should retain the title “occupational therapist” to clearly identify the professional role. This will assist to clarify boundaries, strengths and shared skills within the interface with other professions.

*Position statements are statements on political, ethical, social, cultural and practice issues that influence client well-being, the role and practice of occupational therapy or that affect Occupational Therapy New Zealand Whakaora Nganahau Aotearoa (Inc). They are frequently time limited and persons wishing to use them more than two years after publication should confirm their current status with the Executive Director of OTNZ-WNA.*

## References

- Boyce, Roslie A., 2001. Organisational governance structures in allied health services: A decade of change, *Australian Health Review*, Vol 24, No.1, *The Future Healthcare Workforce Project Second Report*, 1999. University of Bournemouth,
- Wright L, Malcolm L, Hendry C. 2001. *Clinical Leadership and Clinical Governance; a review of developments in New Zealand and internationally*. Unpublished report sent to Clinical Leaders Association of New Zealand for comment.

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