OCCUPATIONAL THERAPY ASSISTANTS:
POLICY STATEMENTS
AND
GUIDELINES

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Replaces: "Occupational Therapy Support Staff: WAAOT Policy Statement, September 1986"

Incorporates: “Occupational Therapy Support Staff: Their Role and Function in Occupational Therapy Services, AAOT 1988” and “Guidelines for the Supervision of Occupational Therapy Support Staff, WAAOT 1992”.

OT AUSTRALIA WA acknowledges the Australian Physiotherapy Association for allowing us to use their document Physiotherapy Assistants: Policy statements and Guidelines as a reference.
INTRODUCTION

This document has been prepared to present the policies and guidelines of OT AUSTRALIA WA in relation to the employment of Occupational Therapy assistants. As the specific service delivery objectives of Occupational Therapy practices vary considerably the employing Occupational Therapist is responsible, within the parameters of these policies, for determining the scope of activity of the Occupational Therapy assistant.

In developing these policies and guidelines OT AUSTRALIA WA has placed emphasis on obligations it has under the Occupational Therapists Registration Act 1980 (the Act) and the essential standards that, pre-eminently, control the practice of Occupational Therapists: these being the OT AUSTRALIA WA Standards of Conduct and Practice\(^1\) and Code of Ethics\(^2\). The policies relating to the employment of Occupational Therapy assistants make up the first part of the document, followed by the guidelines. The guidelines are dependent on the policies and must be used in conjunction with the relevant policy.

Throughout the document the term "employing Occupational Therapist" is used to encompass all Occupational Therapists with the actual or delegated responsibility for the recruitment, supervision and performance management of Occupational Therapy assistants. Thus, an employing Occupational Therapist in a facility is the Occupational Therapist responsible for the Occupational Therapy service.

It is contrary to the Act for anyone other than a registered Occupational Therapist to practice or to imply practice as an Occupational Therapist.

DEFINITION

The Occupational Therapy assistant is a skilled technical health worker who under the supervision of an Occupational Therapist, assists in a client's intervention program. The extent to which the Occupational Therapy assistant is involved in intervention depends upon the Occupational Therapists Registration Act, the policies of the health facility, the direction of the supervising Occupational Therapist, the needs of the client and the capacity/training of the Occupational Therapy assistant.

The term Occupational Therapy assistant does not encompass people employed to provide reception, clerical, or housekeeping duties only. The policies regarding

\(^1\) OT AUSTRALIA WA Standards of Conduct and Practice 2004
\(^2\) OT AUSTRALIA NATIONAL Code of Ethics 2001
Occupational Therapy assistants, however do apply to such employees if they participate to any degree in implementing client intervention programs.

Where Occupational Therapy assistants are employed under conditions of a state or federal award, and allowing that these conditions do not contravene the Act, that award may determine the designation and scope of activity.
1. POLICY STATEMENTS

1.1 EDUCATION OF OCCUPATIONAL THERAPY ASSISTANTS

Formal training for Occupational Therapy assistants should be encouraged to ensure an appropriate knowledge base and minimum standards of practice, and should be supplemented by workplace based training specific to the requirements of the particular position.

It is the responsibility of the employing Occupational Therapist to determine the scope of the training required by the particular Occupational Therapy assistant. The employing Occupational Therapist must, at all times, be aware of and be responsible for the performance of all duties delegated to the Occupational Therapy assistant.

1.2 SUPERVISION OF OCCUPATIONAL THERAPY ASSISTANTS

The Occupational Therapy assistant is responsible to and must only work under the close direction of a registered Occupational Therapist as per the Occupational Therapists Registration Act.

In circumstances where the Occupational Therapy assistant is working in an isolated situation where an Occupational Therapist is not employed full-time on site, the Occupational Therapist responsible for the supervision of the Occupational Therapy assistant must be clearly designated and contactable as required during work hours. The assistant will only work under the instructions of a client management plan developed and documented by the Occupational Therapist.

The special needs of health services in remote areas must also be considered in the development of supervision protocols.

1.3 ROLE OF THE OCCUPATIONAL THERAPY ASSISTANT

Occupational Therapy assistants must not substitute for an Occupational Therapist in the areas of assessment, diagnosis, program planning, program evaluation or client/family education. Employing Occupational Therapists should consider each

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3 “During work hours” implies the normal work hours for the Occupational Therapist for that particular service/place.
intervention in terms of the Occupational Therapists Registration Act and the Standards of Conduct and Practice when developing the particular range of activities in which Occupational Therapy assistants may participate.

The employing Occupational Therapist must ensure compliance with the provisions of both statute and common law as they apply in WA when defining the scope of activity of an Occupational Therapy assistant.

Where the employing Occupational Therapist delegates responsibility for written reporting and documentation to the Occupational Therapy assistant, clearly defined guidelines must be in place to ensure compliance with the requirements for content of the reports and requirements for review and counter-signing of the documentation by the Occupational Therapist.

1.4 CODE OF CONDUCT

1.4.1 The Supervising Occupational Therapist

The supervising Occupational Therapist is required to fulfil the requirements of the policies of OT AUSTRALIA WA (as referenced in the Introduction), or be considered in breach of the Code of Ethics and Standards of Conduct and Practice. Further, supervising Occupational Therapists need to be aware of the potential relevance of these policies to the legal interpretation of “reasonable duty of care”.

Particular reference should be made to Standards of Conduct and Practice Section E, parts 6 Delegation, 10 Management of Human Resources and 11 Supervision and Professional Support. Part 6 states:

“Occupational Therapists shall:

Acknowledge that people who consult an Occupational Therapist or who receive services from an Occupational Therapist are entitled to assume that a person who has the knowledge and skill to practise their profession will carry out their treatment at a competent level.

Ensure that whenever they give tasks to another person to carry out on their behalf, that person has the knowledge, skills and expertise to carry out the tasks safely and effectively.
• If that person is not a health professional, they must not be asked to do the work of a health professional.
• If that person is a health professional, they must not be asked to do work that is outside their scope of practice.
• If they are training to be a health professional, the delegating Occupational Therapist should ensure they are competent to carry out the task safely and effectively.

Whenever delegating a task to another, always continue to give adequate and appropriate supervision and remain responsible for the outcome.”

1.4.2 The Occupational Therapy Assistant must:
• Respect the rights, privacy and dignity of all individuals.
• Recognise the extent and limitations of their expertise and undertake only those activities that are within their competence and which have been delegated by the employing Occupational Therapist.
• Hold in confidence all personal information entrusted to them, except where disclosure to the supervising Occupational Therapist is in the best interests of the client/colleague.
• Follow the workplace Code of Conduct including loyalty to the employer and recognising the boundaries of therapeutic relationships.
• Be aware of and comply with relevant legislation including Equal Opportunity, Occupational Safety and Health and Disability Services Acts.
• Be culturally sensitive.
Preamble: These guidelines for the employment of Occupational Therapy Assistants are underpinned by Section 1 Policies and must not be used in isolation to the policies.

2. GUIDELINES FOR THE EMPLOYMENT OF OCCUPATIONAL THERAPY ASSISTANTS

2.1 EDUCATION OF OCCUPATIONAL THERAPY ASSISTANTS

The employing Occupational Therapist will specify the minimum academic and personal qualifications required for the particular position, including acceptable recognised formal training programs and any specific competencies that are required and unique to the position.

An orientation and workplace based training program should be provided, that identifies standards of compliance and the time frame for achievement to facilitate performance appraisal.

The in-service training program must be relevant to the skill requirements of the particular position and may include attendance at Occupational Therapy department/practice in-service sessions. Training should include:

- Guidelines for all documentation carried out by the Occupational Therapy assistant. The guidelines identify:
  - Content required,
  - Placement of documentation; that is, in the patient’s case notes or as designated,
  - Requirements for counter-signing by the Occupational Therapist, and,
  - Procedures for review by the Occupational Therapist.
- Hazard identification, risk assessment and reporting to the Occupational Therapist hazards such as, but not limited to, manual handling, fire and safety, cardio-pulmonary resuscitation, first aid, infection control and other hazards covered under legislative requirements relevant to the workplace.

2.2 SUPERVISION OF OCCUPATIONAL THERAPY ASSISTANTS

No person may be designated an Occupational Therapy assistant or such other terminology as may imply Occupational Therapy assistant unless an Occupational Therapist acts clearly as the supervisor.
2.2.1 Lines of Responsibility

The lines of responsibility must be defined by the employing Occupational Therapist and must indicate clearly:

(i) That the Occupational Therapy assistant is responsible to the employing Occupational Therapist or to a staff Occupational Therapist as designated by the employing Occupational Therapist:
   - The Occupational Therapist responsible for instructing and supervising the Occupational Therapy assistant;
   - The transmission and documentation of instructions;
   - The procedure should the designated Occupational Therapist not be present:
     - In the actual workplace of the employee.
     - In a sole therapist service if the Occupational Therapist is absent from duty.
     - In the case of the resignation of the Occupational Therapist and the inability to recruit a replacement.

(ii) An Occupational Therapy assistant employed in a service that does not directly\(^4\) employ an Occupational Therapist must only be employed as per Policy 1.2 and must have:
   - A specifically designated Occupational Therapist supervisor.
   - Documented instructions for all Occupational Therapy assistant duties from the supervising Occupational Therapist that are regularly reviewed, at least monthly or more frequently at the discretion of the supervising Occupational Therapist.
   - Direct interaction with the Occupational Therapist supervisor at the place of work at least once per month.
   - Ready access to the Occupational Therapist supervisor by telephone or e-mail at all times during working hours.
   - A designated contact person/organisation who will respond in an emergency, particularly if the assistant works in usual or occasional isolation such as domiciliary and community programs.

2.2 Reporting Processes

The position description of the Occupational Therapy assistant must specify:
   - The required methods and frequency of reporting.

\(^4\) Direct employment means that the Occupational Therapist is a permanent full-time or part-time employee of the service.
• Methods of reporting and documentation for client participation and progress that include exceptional and adverse events.
• The process for reporting emergency situations to the appropriate health care professional.
• Methods of recording client attendances.

2.3 ROLE OF OCCUPATIONAL THERAPY ASSISTANTS

2.3.1 Position Description

A description for each Occupational Therapy assistant position should be documented specifying the following detailed information:
• Position designation.
• Qualifications, training and skill requirements.
• Specific competencies required for the position.
• Supervision and reporting responsibilities.
• Documentation processes.
• Evaluation/performance appraisal methods.
• Duties that are to be undertaken.
• Conditions of employment including salary, hours of work and leave entitlements.

The position description should be dated and signed by the employee. The employee should have a copy for reference and a copy should be retained in the employer's files. The position description should be reviewed at least annually, preferably in conjunction with performance appraisal. A sample list of duties is given as Appendix 1.

2.3.2 Performance Management of Occupational Therapy Assistants

Since the employing Occupational Therapist is responsible for the standard of the care provided by the Occupational Therapy assistant it is essential that ongoing evaluation of their performance is undertaken to ensure that they have appropriate skills and knowledge to deliver quality care.

The position description should indicate specifically the performance management procedures that will be used, including:
• A performance review three months following the commencement of employment.
• An annual performance development appraisal with the supervising Occupational Therapist.
• The services provided by the Occupational Therapy assistant meet the established standards eg. Review of client and the documentation of care.
• Identifying the relevance and currency of skills and areas of deficit.
• A written education development plan to maintain and enhance competence and skills.

2.3.3 Function of Occupational Therapy Assistants

The Occupational Therapist must undertake the client assessment, develop and initiate intervention, plan the client’s discharge and instruct the Occupational Therapy assistant precisely about the task to be performed including relevant safety precautions to be observed.

The Occupational Therapist must not delegate any activity that requires the unique skill, knowledge and judgement of an Occupational Therapist.

The Occupational Therapy assistant must not under any circumstances:
• Initiate or interpret referrals for Occupational Therapy.
• Conduct initial Occupational Therapy assessment or clinical screening interviews with clients.
• Undertake Occupational Therapy assessment procedures.
• Develop a diagnosis or give interpretive information to patients/clients, relatives or other staff members.
• Plan, institute or modify intervention programs without prior consultation with the Occupational Therapist.
• Conduct Occupational Therapy discharge planning.

2.3.3.1 Tasks that may be delegated
(Dependent on the Occupational Therapists Registration Act of WA allowing such delegation to occur)

The Occupational Therapy assistant may undertake non-treatment activities as required by the service, such as:
• Escorting clients.
• Reception of clients.
• Preparing clients and equipment for intervention carried out by the Occupational Therapist.
• Preparing and maintaining the therapy environment to ensure optimal physical conditions prevail, including lighting, temperature, cleanliness,
maintenance of supplies, maintenance of designated equipment and equipment availability.

The Occupational Therapy assistant may undertake receptionist, clerical and housekeeping duties according to the requirements of the service subject to the processes and procedures specified by the Occupational Therapist. Such processes and procedures should be developed in accordance with acceptable standards of:

- Client safety.
- Environmental safety.
- Staff occupational health.
- Infection control.
- Quality improvement.
- Conditions of employment, including Award or EBA.

The Occupational Therapy assistant may function as a direct assistant to the Occupational Therapist helping with procedures requiring two people, such as:

- Transporting (lifting/moving) clients.
- Performing bilateral assisted activities.
- Assisting with planning of activities programs.
- Assisting with group activities
- Assisting with the application and removal of splinting devices or adaptive equipment.

Under the **specific instruction** of an Occupational Therapist the Occupational Therapy assistant may:

- Assist clients with their Occupational Therapy rehabilitation programs as specified in their care plan.
- Assist with the planning and implementation of individualised or group therapeutic programs under the direction of the Occupational Therapist.
- Supervise the practice of established functional programs such as personal hygiene, wheelchair management, recreational activities or leisure.

2.3.3.2 **Treatment Modalities that may be delegated in specific circumstances**

(i) **Where the Occupational Therapists Registration Act of WA allows such delegation to occur, and**

(ii) **Where the supervising Occupational Therapist is on-site, available to give precise instruction at the time of treatment and available to respond**
immediately to any changes, problems or queries, the following modalities may be applied by the Occupational Therapy assistant:

- Lymphoedema pump
- Vibrator appliances

In such instances the Occupational Therapy assistant will apply the modalities according to the following procedure:

- The treating Occupational Therapist must assess the client prior to each intervention.
- The Occupational Therapy assistant must be trained by the supervising Occupational Therapist in the correct procedure for the safe application of the modality.
- The site and spread of treatment must be clearly delineated by the treating Occupational Therapist at the time of intervention.
- The frequency and duration of intervention to be received by the client must be set by the treating Occupational Therapist.
- The treating Occupational Therapist must undertake all warning and safety procedures; instruct the client in the contraindications and the expected reactions of the modality to be applied.
- In the event of the occurrence of pain, discomfort or unexpected change of skill behaviour, reported symptoms must be reported to the treating Occupational Therapist immediately.
- The treating Occupational Therapist must reassess the client at the conclusion of the delegated modality.
- The Occupational Therapist bears full responsibility for the use and application of the modality.

(iii) Further, the Occupational Therapy assistant may prepare for, but not apply, formal Occupational Therapy or health profession assessments such as the Hierarchic Dementia Scale (HDS), Functional Independence Measure (FIM), and Mini Mental Status Examination (MMSE).

2.3.3.3 Treatment Techniques and Modalities that may not be delegated:

The following activities **may not** be delegated to an Occupational Therapy assistant under any circumstances:

- Pressure care assessment, prescription and intervention including providing advice about the suitability of beds and chairs, or other specialised equipment.
- Assessment, prescription and/or fabrication of
  - Splinting
• Specialised seating and wheelchairs
• Specialised equipment, aids and appliances eg cutlery or writing tools
• Home and environmental installation or modifications
• Counselling or education of clients outside the scope of the client intervention program defined by the Occupational Therapist.

2.4 ETHICAL PRINCIPLES

The Occupational Therapy assistant should be aware of the ethics of the service including:
• Respect for the rights and dignity of the individual
• Confidentiality
• Standard of care
• Limits of competence
• Legal responsibilities
• Loyalty to the employer
• Standards of personal behaviour
APPENDIX 1. Sample List of Occupational Therapy assistant duties:

The Occupational Therapy assistant general duties under the supervision of the employing Occupational Therapist may include:

- As a member of the Occupational Therapy staff, contribute to the provision of an effective Occupational Therapy service.
- Liaise effectively with other Occupational Therapy staff and when appropriate, with other health professionals.
- Form appropriate therapeutic relationships with clients.
- Undertake group and individual client programs as directed by the Occupational Therapist and in accordance with the care plan devised by the Occupational Therapist.
- Regularly report details of client contacts to the employing Occupational Therapist.
- Document reports as directed.
- Participate in Occupational Therapy staff meetings and in other meetings as required.
- Undertake such administrative “housekeeping” duties as may be designated by the employing Occupational Therapist.
- Participate in Occupational Therapy inservice education as required.
- Assist Occupational Therapists with planning and implementation of individual or group patient/client programs.
- Prepare and maintain the therapy environment ensuring that optimum physical conditions prevail such as lighting, temperature, seating, space, safety, cleanliness and tidiness.
- Maintain treatment supplies and equipment.
- Operate and maintain machinery and equipment and arrange for repairs or replacement as instructed by the Occupational Therapist.
- Counsel or educate clients within the scope of the client intervention program defined by the Occupational Therapist.

DISCLAIMER:

Please note as future developments continue that these guidelines will be periodically reviewed and updated when circumstances warrant.