



# **PRACTICE STANDARD FOR ASSIGNMENT OF OCCUPATIONAL THERAPY SERVICE COMPONENTS**

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## Introduction

The Saskatchewan College of Occupational Therapists (SCOT) is responsible for regulating occupational therapy (OT) practice in Saskatchewan and in doing so supports the public's right to safe, competent, and ethical care by occupational therapists. Practice Standards are developed to outline the regulatory expectations of all occupational therapists in Saskatchewan. The SCOT Practice Standards apply to all registrants of the College.

## How Practice Standards are Developed and Updated

Practice Standards are developed by utilizing foundational documents. The College monitors and revises Standards regularly utilizing committees and key partners.

[The Occupational Therapists Act, 1997](#)

[SCOT Regulatory Bylaws](#)

[Saskatchewan Occupational Therapists Code of Ethics](#)

[Competencies for Occupational Therapists in Canada \(2021\)](#)

[Association of Canadian Occupational Therapy Regulatory Organizations \(ACOTRO\) Position Statement regarding Utilizing Occupational Therapist Assistants in Occupational Therapy Service Delivery \(2019\)](#)

[Scope of Practice for Occupational Therapists in Saskatchewan \(2020\)](#)

## How Practice Standards are Used

### Client and the Public

Occupational therapy clients and the public use the Standards to understand what they can expect from occupational therapists. These expectations include knowing that services are being provided in ways that are accessible, culturally sensitive, equitable, and inclusive.

### The College

The College uses the Standards in all statutory programs to ensure that applicants and registrants have the competencies and skills to practice effectively, to address questions or concerns about the registrant's practice, and to review and support the provision of quality services.

Failure to comply with the Standards constitutes professional misconduct.

### Occupational Therapists

Clinical and non-clinical occupational therapists are expected to use these Standards in their daily practice and, when requested by the College, be able to demonstrate how their practice meets the expectations/performance indicators.

In applying the Standards, the occupational therapist must use professional judgement in the following ways:

- Determine how to best meet client needs in accordance with the Standards.
- Understand that these Standards are the College's interpretation of regulatory and practice expectations. When the Standards and legislation conflict, the legislation prevails.
- If workplace policies conflict with the Standards, collaborate with their employer to identify and work toward resolving the differences in the clients' best interests.

### **Employers**

Employers of occupational therapists use the Standards to know and follow the College's expectations of occupational therapists working within their organization.

### **Educators and Students**

Educators and students use the Standards to inform curriculum and placement expectations.

## **Glossary of Terms**

**Occupational Therapist Assistants (OTAs):** Individuals who are **not** licensed occupational therapists with the SCOT, but who demonstrate skills to perform assigned occupational therapy service components with appropriate supervision by a licensed occupational therapist with the SCOT. Given that occupational therapist assistants are not regulated, and their job title is not protected, these individuals may have a variety of education, training, and experiences. As well, they may be referred to by several different titles which include, but are not limited to, therapy assistant, rehabilitation assistants, support personnel, and kinesiologists. The occupational therapist assistant represents themselves as an assistant to an occupational therapist.

**Client:** People who are receiving occupational therapy services. This may be an individual or a collective, such as a group, community, or organization.

**Occupational Therapy Services:** All aspects of the occupational therapy practice process including service components. It entails collaboration between the occupational therapist, client, and other key partners to promote the health and wellbeing of the client. Services may be provided by direct, indirect, or remote practice.

# PRACTICE STANDARD FOR ASSIGNMENT OF OCCUPATIONAL THERAPY SERVICE COMPONENTS

## Purpose

An occupational therapist may assign tasks to individuals as part of the delivery of occupational therapy services. For the purpose of this document, these individuals will be referred to as occupational therapist assistants (OTAs). This Practice Standard provides direction for the assignment of occupational therapy service components to individuals who are not registered with SCOT and are working under the direction of the assigning occupational therapist, who is licensed with SCOT.

The Practice Standard for the assignment of occupational therapy service components to OTAs has been developed to reduce risks to the public receiving indirect services from an occupational therapist in the province of Saskatchewan. The Standard outlines that the occupational therapist is expected to:

- be accountable,
- determine and mitigate risks,
- establish an environment conducive to supervision,
- define roles and responsibilities, and
- develop a supervision and communication plan.

The occupational therapist will **not** assign occupational therapy services to non-regulated individuals that require the professional judgment or dynamic reasoning of a regulated professional such as:

1. interpretation, screening, or initiation of a referral for occupational therapy services,
2. assessment, including analysis and interpretation of assessment findings,
3. intervention planning and determination of goals and objectives,
4. selection of treatment strategies or procedures,
5. modification of an intervention beyond established limits and safety parameters,
6. referral of a client to other professionals or agencies,
7. decisions regarding discharge planning, and
8. determinations on the outcome evaluation of the occupational therapy service.

# Standards

## ACCOUNTABILITY

*The occupational therapist is expected to:*

### **1. Demonstrate reflective practice.**

- 1.1 Be competent to perform all occupational therapy service components assigned.
- 1.2 Inform the OTA who receives a task assignment from an occupational therapist regarding their accountability to the occupational therapist. It is the occupational therapist's responsibility to ensure:
  - a) the OTA demonstrates knowledge and skills to complete assigned tasks, and
  - b) tasks are not assigned to the OTA that are beyond their job duties, knowledge, skill level, and/or abilities.
- 1.3 Ensure compliance with relevant legislation, regulations, bylaws, competencies, and Practice Standards when assigning occupational therapy service components.

### **2. Ensure consent.**

- 2.1 Obtain informed consent from clients to receive occupational therapy service components provided by an OTA.
- 2.2 Collaborate and communicate with the client and other key partners the roles and responsibilities of the OTA.

### **3. Monitor and evaluate effectiveness of occupational therapy service components assigned to an OTA.**

- 3.1 Identify clinically relevant situations where an individual may benefit from task assignment as part of the occupational therapy service delivery.
- 3.2 Monitor and evaluate the client's responses to occupational therapy service components provided by the OTA and modify treatment components as needed based on evaluation findings.
- 3.3 Collaborate with the OTA for occupational therapy service delivery and use information from the OTA as appropriate to inform changes to the treatment plan.
- 3.4 Continuously monitor and evaluate the safety and effectiveness of occupational therapy services, including determining the status of the client and when to initiate, revise, or discontinue assigning service components to the OTA.
- 3.5 Discontinue the assignment to an OTA if:
  - a) no occupational therapists are available to provide supervision of the assigned occupational therapy service components,
  - b) the OTA's involvement is not effective or is unsafe, or
  - c) the client withdraws consent to receive services.

#### **4. Maintain appropriate documentation.**

4.1 Continuously monitor the OTA's documentation to confirm it is done in accordance with the SCOT Documentation Standard.

4.2 Continuously monitor the OTA's documentation to confirm it is done in accordance with the employer or contracting organization's documentation and privacy policies.

### **RISK DETERMINATION AND MITIGATION**

*The occupational therapist is expected to:*

#### **1. Evaluate the risks and benefits when considering assigning components of the occupational therapy service to an OTA.**

1.1 Identify risk factors, which include, but are not limited to, level of competency of both the occupational therapist and the OTA, additional occupational therapist and OTA factors, client factors, environmental factors, and elements of the assigned task. Consideration must be made for physical, emotional, and cultural safety.

1.2 Determine the level of risk. Consider both the probability of harm and the degree of impact, including:

- a) determining what steps can be taken to minimize risk of harm, and
- b) assessing risk for each component of the occupational therapy service independently.

#### **2. Only assign tasks upon assessing risk and determining that the assignment ensures safety.**

2.1 Assign service components only to OTAs and others who can demonstrate the skills to deliver the services components.

2.2 Provide ongoing monitoring of risk factors and safety, discontinuing assignment of service components as needed.

### **ESTABLISHING ENVIRONMENTS CONDUCIVE TO SUPERVISION**

*The occupational therapist is expected to:*

**1. Acknowledge and be aware of the power differential between the supervising occupational therapist and those who are receiving the work assignments. This includes awareness of both the inherent power differential within this relationship, as well as any additional biases and social structures that privilege or marginalized people and communities may experience. Practice self-awareness to minimize personal bias and inequitable behaviour based on social position and power.**

**2. Maintain professional boundaries and demonstrate professionalism in all interactions during the work assignment process.**

**3. Contribute to a practice environment that is culturally safer, anti-racist, anti-ableist, and inclusive. Foster an environment of psychological safety and collaboration, where those who have received**

work assignments are encouraged to voice concerns about unsafe, unprofessional, unethical, or oppressive behaviour.

4. Show leadership in the workplace, including supporting those receiving the work assignments.

## DEFINING ROLES AND RESPONSIBILITIES

*The occupational therapist is expected to:*

1. Communicate to clients and other key partners about the roles, responsibilities, and accountability of OTAs participating in the delivery of occupational therapy service components.
2. Observe the OTA's skills and abilities, then assign only those service components within the occupational therapist's and OTA's competency.
3. Receive and provide education to advance knowledge and skills of OTAs as needed.
4. Articulate when their role is to provide assessment with recommendations as a consulting occupational therapist. The occupational therapist is responsible for their recommendations, but not how the recommendations are carried out by others who are not an OTA.

## SUPERVISION AND COMMUNICATION PLAN DEVELOPMENT

*The occupational therapist is expected to:*

1. Provide the OTA with information on how and when to contact the supervising occupational therapist in emergency situations and who to contact if the supervising occupational therapist is not available either for planned or unexpected absences.
2. Provide continued supervision to the relevant degree and through the method (direct, indirect, or remote) required to ensure the safety and quality of the services provided by the OTA.
3. Determine and reinforce expectations regarding the frequency and type (verbal or written) of progress updates from the OTA, including immediately reporting to the occupational therapist any changes and concerns they have observed when interacting with a client.
4. Inform the OTA about the distinction between tasks that fall within the established supervision and communication plan, for which the supervising occupational therapist is accountable, and tasks that are not assigned by the supervising occupational therapist and, therefore, are not part of occupational therapy services. When the OTA performs tasks not assigned by the supervising occupational therapist, the OTA is accountable to their employer, manager, or assigning professional.