

**Job Class Profile: Clinical Occupational Therapist I****Pay Level: CG-41 Point Band: 950-993**

Factor	Knowledge	Interpersonal Skills	Physical Effort	Concentration	Complexity	Accountability & Decision Making	Impact	Development and Leadership	Environmental Working Conditions	Total Points
Rating	7	5	4	5	6	5	5	4	5	
Points	327	83	25	24	180	108	103	86	54	990

**JOB SUMMARY**

The Clinical Occupational Therapist I provides professional occupational therapy work including assessment, treatment planning, implementation and evaluation of occupational therapy services. Provides preventative, diagnostic and therapeutic services, and education aimed at maximizing the client's occupational performance preventing or alleviating disability, improving self-care, community living, as well as life and vocational skills. May provide direction to occupational therapy support workers.

**Key and Periodic Activities**

- Provides assessment of a client's environment (social, physical, financial), occupational performance (self-care, productivity, and leisure) and occupational performance components (physical, cognitive, affective/behaviour), to identify priority occupational performance issues and possible goals. This includes review of the medical chart, interviewing the client, family, and staff, analyzing client's environment, and assessing client's skills to determine strength and limitations in performing daily activities.
- Plans, implements, and evaluates occupational therapy (OT) treatment plans to address occupational performance issues. This includes referring clients to other disciplines, teaching skills, providing training, prescribing, fitting, and training in the use of adaptive seating and wheelchairs, provision of feeding, dressing, grooming, toileting, and bathing aids, home modification recommendations which facilitate safe and independent function, designing and fabricating splints to prevent or correct deformity or improve function, fine motor exercises, and balance training, etc.
- Participates in interdisciplinary rounds and family meetings, consults with families, other health professionals, outside agencies, and community groups regarding clients care and treatments.
- Communicates and documents assessment results, intervention strategies, progress reports, outcomes, and consults in accordance with occupational therapy standards of practice and approved documentation protocols.
- Provides education to the client, family, caregivers, and healthcare team regarding home modifications, funding options, adaptive equipment, joint protection, energy conservation, injury prevention, the disease process, and its impact on daily functions.
- May supervise OT support personnel by assigning caseloads, delegating clinical tasks, and

### Key and Periodic Activities

- teaching clinical skills as required.
- May perform activities in, or refer clients to, specialized OT services such as assessments (i.e. driving, functional, complex postural setting including the design and fabrication of devices or equipment, ergonomic, job match, and work place); co-ordinate recovery/return to work processes including accommodations; conduct home or work-site visits to facilitate daily living activities; teach clients vocational skills; respond to crisis situations by providing education and support for clients in crisis; evaluate workstations; and recommend, prescribe, or assess therapeutic equipment, devices, or aides.
- Prioritizes requests for service and case management (i.e. identifying patients requiring assessment, intervention, or who are to be discharged).
- Maintains and records workload statistics.
- Participates in various committees, staff meeting, or teams involving development of care plans, policies and procedures, accreditation standards, program and resource planning, standards of practice, protocols, guidelines, and educational material, etc.
- Participates in the clinical education of OT students through offering clinical fieldwork placements.
- Identifies the need for and orders supplies.
- Maintains knowledge of OT practices, etc., through literature reviews, attending in-services, formal education courses and consulting with other Occupational Therapists.
- Orders department supplies and equipment.

## SKILL

### Knowledge

#### General and Specific Knowledge:

- Specific Knowledge of:
  - Ongoing standards, codes, policies and trends and developments in field.
  - Design, development, delivery, and assessment of Clinical Occupational Therapy Services.
  - Workload measurement tools and adaptive aides.
  - Organizational policies and procedures.
- General knowledge of:
  - Disciplines relating to Occupational Therapy and if working with a specific client population, may require knowledge of that discipline, as well as conditions, treatments, community supports and services.

#### Formal Education and/or Certification(s):

##### Minimum:

- Graduate degree specializing in Occupational Therapy.
- Certification with the Canadian Association of Occupational Therapy (CAOT) with a professional designation of Occupational Therapist, OT (R).
- Licensure with the Newfoundland and Labrador Occupational Therapy Board (NLOTB).
- Depending on the program area, may require additional training such as suicide intervention

(ASIST), non-violent crisis intervention (CPI), first aid, and basic life support (BLS), and/or driver's license, etc.

**Years of Experience:**

- Minimum: 1 to 2 years of experience.

**Competencies:**

- Ability to design, develop, implement, and evaluate applicable therapy programs.
- Assessment and diagnostic skills.
- Oral, written, and cognitive communication skills.
- Computer and research skills.
- Ability to operate technical devices and related equipment/machines.

**Interpersonal Skills**

- A wide range of interpersonal skills are used to listen to information, conduct formal interviews (i.e. assessment process), ask questions, provide routine and complex information, provide expert advice/counselling regarding adaptive equipment and supports available in the community, etc., provide care/comfort/nurturing to upset clients and their families, provide direction and guidance to OT support staff, and teach clients regarding equipment use, and staff regarding safety and clients care.
- Communication skills are used to correspond with various stakeholders regarding supports and equipment and to document information. Skills are most frequently used to listen and provide complex and sometimes-sensitive information to clients and their families.
- Most significant contacts occur with clients and their families, OT staff, healthcare and community professionals, government services, and suppliers and sales representatives for equipment and therapeutic supports. Interactions also occur with other government employees and manager and may include professional associations and advisors.

**EFFORT**

**Physical Effort**

- The demands of the job occasionally result in considerable fatigue requiring the need for strength and endurance.
- Requires regularly lifting or moving objects or equipment up to 25 lbs. (i.e. splints, wheelchairs, dressings, bathing and toileting items, utensils, feeding aids, assessment tool kits, etc.), and assisting, supporting, or pushing and pulling clients and equipment up to and over 50 lbs. May have to assist clients who occasionally are required to lift various objects over 50 lbs.
- Occasionally, hand tools are used to make adjustments on equipment, and to use equipment that requires rapid physical movement and reflexes, as well as controlled movement such as lifting devices (i.e. Sara, ceiling track lifts, Hoyer lifts, and transfer aides such as boards. Gross motor skills and the use of heavy equipment are occasionally required when working with clients in performing therapeutic activities, or to move equipment such as bath benches, wheelchairs, etc.
- Regularly stands and walks when performing clinic activities or during home visits, and drive to and from sites/homes within the region. Occasionally, sits to perform clinical documentation on the computer, observe or counsel clients, and when on home visits may be required to climb

- stairs. When in clinic or therapy sessions, may work in awkward or cramped positions.
- Fine finger/precision is required on a regular basis when performing work on the computer, and occasionally it is required to teach fine motor skills such as printing, scissor use, etc., or using tools to adjust or repair equipment such as wheelchairs

### Concentration

- **Visual** concentration is required during sessions or home visits for observation and monitoring of clients (some may be nonverbal) in therapy for both assessment purposes (i.e. to identify impairments, physical abilities, and participation level), and their health and safety. Visual concentration is also required to read referrals, physician notes, for writing reports/documents, performing work on the computer such as entering data in records and research, and for driving to and from communities.
- **Auditory** concentration is regularly required to listen to clients and their families, co-workers and other staff and to listen for emergency codes announced on the overhead communication systems.
- **Touch** is regularly required when performing assessments on clients to palpate joints/bone deformities, swelling and warmth, to determine end ranges of active or passive movement, to assist with mobility, perform strength and placebo testing, and during the fabrication of orthotics and splints. The sense of **smell** is also used for life skills teaching such as cooking classes, and to detect a client's personal hygiene or the use of alcohol or substances.
- **Repetitive** tasks that require **alertness** include moving clients from one position to another, and observation to ensure the safety of a client and to prevent falls. Higher than normal levels of attentiveness or alertness are required when assessing or working with a client for their health and safety and to monitor them for signs of ill health.
- **Does not have control over the pace of the work** as often times there are unpredictable and urgent number of clients that need to be seen due to emergencies, patients being discharged, or patients who need to be seen after surgery.
- There are **time pressures and deadlines** to see referred or urgent clients, to document client's information as per standards of practice. There may be multiple deadlines and time pressures when completing reports and responding to client needs. **Interruptions** tend to be constant throughout the day (i.e. telephone calls or pages from health professionals, peers, or family members requesting information or assistance).
- **Eye/hand coordination** is required for documentation, patient handling, measuring, repairing, and adjusting of equipment and devices for clients, for driving to clinics, to teach life skills, and to perform work on the computer.
- **Exact results and precision** are required when performing assessments, scoring questionnaires, handling clients, identifying treatments or a plan of care, documenting client's information, measuring equipment/aides, and for fabrication of orthotics and splints.

### Complexity

- Tasks and activities are often quite different but require similar skills and knowledge with some being well-defined.
- Problems relating to assessment or treatment plans require analysis and assessment to determine cause. Solutions often can be provided in a team setting.
- Typical complexities include prioritizing referrals, assessing clients, and developing

customized programs to suit the needs of clients with the resources available or working with clients in crisis, and developing strategies to assist clients with requirements or challenges.

- Complexities can typically be solved by following advice from OT clinical leaders, peers, interdisciplinary team, and the manager. They can also be solved reviewing and following practice area manuals, standards, policies/procedures, Occupational Therapy Act, Occupational Therapy Professional Practice Council, the Newfoundland and Labrador Occupational Therapy Board (NLOTB), and the Canadian Association of Occupational Therapy (CAOT) guidelines and protocols, legislation, Acts, and internet resources.

## RESPONSIBILITY

### Accountability and Decision-Making

- Work is generally prescribed or controlled.
- Decisions related to caseload management, assessment, treatment strategies, referrals to other healthcare professionals, interpretation of assessment results are made independently. In addition, decisions related to prioritizing referrals on the waitlist, providing professional information within scope of practice, scheduling and attending committee meetings, delegating work to OT support worker(s), and evaluation of OT students are also made independently.
- Requires approval for decisions related to department programming, policy and procedure changes, capital equipment and supplies requests, travel claim reimbursement, and leave requests.
- Has some discretion to interpret directions and apply guidelines related to the appropriateness of referrals, and the decisions related to equipment/services requests, and whether to make changes to that request based on clinical judgment and practice.
- Within predetermined limits has some discretion regarding the management of caseload, waitlists, whether clients are medically able to complete an assessment or have therapy, the use of petty cash to purchase items for the department, and to work overtime in order to complete tasks. A high degree of discretion is exercised for professional recommendations and treatments, when determining a client's level of care, the requirements for supports, and for following safe work practices.
- Provides information, advice, and recommendations to members of the interdisciplinary team, clients, and their families, physicians, and students related to occupational therapy conditions, treatments, procedures, tests, plan of care, and equipment.

### Impact

- Tasks and activities have an impact on the immediate work area, within the department, outside the organization, and on clients.
- There are positive and negative impacts resulting from the decisions made regarding diagnosis, treatments, and tests being delivered to the client. Positive impacts can help improve client's functional ability; whereas, if assessments and treatments are not accurate, this could result in significant impacts (i.e. injury or loss of function), for the client.
- Tasks and activities also impact the following resources: equipment, processes and systems, information, health and safety, and corporate image. The most significant impacts are on clients, and their health and safety.
- Errors can occur when performing clinic activities and may include improper handling of

patients resulting in a fall or injury; improper assessments or intervention; and failure to provide adequate treatment and/or education which can result in repeat hospitalization. Mistakes made when ordering equipment or in measurements when assessing a home for modifications can result in unnecessary hospitalization, or care for the client.

- Mistakes and/or errors are mitigated as licensure to practice is required and professional activities are monitored through a professional association. As well, guidelines and practices are followed within scope of practice, and guidance and support is available from senior OT therapists. Clinic errors are identified and resolved within hours of identification.

#### **Development and Leadership of Others**

- Responsible for the supervision of a small work group (1 to 4 employees).
- Provides orientation, acts as a preceptor for students, and evaluates them during their fieldwork placements.
- May also perform team leader and/or project activities (i.e. act as the subject matter expert in their field, chair or co-chair various committees, work groups, and work on special projects within their discipline).

### **WORKING CONDITIONS**

#### **Environmental Working Conditions**

- Required to wear masks, gowns, and gloves when assessing infectious clients, safety goggles during the fabrication of orthotics, hard hat and steel toe boots in construction areas, and to practice universal safety precautions such as hand washing and body mechanics when lifting or positioning clients, follow working alone policy, and carry necessary equipment such as cell phones, flashlights, and safety kits when traveling to communities.
- There is limited likelihood of receiving minor injuries, illnesses, or a partial or total disability.
- Exposed to usual/distracting noises, bodily fluids, odours, infectious diseases when assessing clients, toxic or poisonous chemicals from glue used to bind the orthotics, and sharp objects (i.e. knives, scissors, and tools) during the fabrication of splints and orthotics, physical dangers or threats, and regularly are exposed to awkward/confining spaces when assessing equipment or doing therapy with clients. Occasionally, may travel to other sites (i.e. clinics, clients home, schools, community buildings, etc.), sometimes in adverse weather conditions.