



HEALTH PROFESSIONS LICENSING AUTHORITY

TITLE: Occupational Therapists' Supervision of Support Staff – Position Statement and Guidelines

EFFECTIVE DATE: 18 September 2006

REVIEWED: August 2008

BOARD: Occupational Therapists Board of the Northern Territory

Preamble

This document is consistent with and recognises the 'Occupational Therapy Support Staff Policy' endorsed by the Council of Occupational Therapists Registration Boards (Australia and New Zealand) Inc (COTRB).

Occupational therapy support staff are persons employed to assist occupational therapists in providing an occupational therapy service. Support staff may be referred to as aides, assistants, or activity supervisors, and some form of training for these roles is available in most States/Territories in Australia and New Zealand.

Their involvement in occupational therapy programs enables professional staff to make more efficient and effective use of their own time and skills.

The following Guidelines are given so that an aide/assistant will not unwittingly be placed in a position, which could be described as an offence under the Act, or an employer placed in a position of aiding and abetting the offence.

Legislative requirements.

The title 'Occupational Therapist' is reserved for individuals registered in that category. Therefore, support staff must not use the title 'Occupational Therapist', be represented as an 'Occupational Therapist' or lead anyone to believe they are an 'Occupational Therapist'.

Section 101 Offence to practise health care if unregistered;

(1) A person must not –

- (a) carry out an act that by or under an Act is required to be carried out by a health practitioner; or
- (b) carry out an act that by or under an Act is required to be carried out by a health practitioner holding a practising certificate, unless he or she is registered or enrolled and holds a practising certificate.

Penalty 500 penalty units¹

Section 103 False claims

Subsection (1) and Subsection (2) make it an offence for a person to hold themselves out or allow themselves to be held out as being registered or enrolled if they are not registered or enrolled and hold a current practising certificate.

Penalty 500 penalty units

¹ A penalty unit is a monetary sum as defined in the *Penalty Units Act 1999*.

Positions Statements

1. Occupational therapy support staff must work under the supervision of a registered occupational therapist.
2. Occupational therapy support staff should be directly responsible to either the employing occupational therapist or a designated occupational therapist. In the absence of the nominated occupational therapy supervisor, provision should be made for alternative method of supervision by another occupational therapist.
3. Occupational therapists supervising support staff must ensure that:
 - The assistant is clearly and correctly identified as an assistant.
 - The assistant understands the limits of their responsibilities.
 - The assistant is trained to the level appropriate for the tasks required in that facility.
 - The assistant is provided with clear direction as to the work to be undertaken.
 - There are clearly defined lines of communication.
 - The quality of the work of the assistant is regularly evaluated to ensure they are safe, effective, efficient and competent.
 - At no time is an assistant to be requested or required to undertake a task, which is outside their competence or cannot be delegated as defined in this policy.

Occupational therapists in these circumstances retain ultimate responsibility for the management of their patient or client.

4. The occupational therapist supervising support staff should ensure the supervisee is informed of the importance of the following:
 - Respect for the rights and dignity of clients.
 - Confidentiality.
 - Loyalty to the occupational therapy service.
 - Standards of personal conduct.
 - Legal responsibilities.
 - Limits of competence.
 - Standards of care.
5. The following activities should not be the responsibility of support staff:
 - a. Interpretation of referrals for occupational therapy.
 - b. Conducting initial interviews with patients/clients.
 - c. Undertaking assessment procedures. It may be appropriate for an occupational therapist to develop screening tools that can be used by an assistant but the assessment process and finalisation is the full responsibility of the occupational therapist.
 - d. Developing goals or a problem list for clients/patients.
 - e. Planning, instituting and modifying treatment programs – unless done in consultation with an occupational therapist.
 - f. Recording patient/client progress in medical records or treatment files unless instructed to do so and with the report being countersigned by the supervising occupational therapist.
 - g. Giving interpretative information to patients/clients, relatives or other staff.
 - h. Discharge planning.