

Advanced Practice Professional Issue Forum 2010 Report & Recommendations

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Introduction

At the 2009 annual conference in Ottawa, the Canadian Association of Occupational Therapists (CAOT) held a Professional Issue Forum (PIF) focusing on advanced practice in occupational therapy in Canada. The event resulted in a series of recommendations to the CAOT Board. One of the key recommendations was that the members of the Board convene a Task Force to continue to develop an understanding of advanced practice in Canada and move toward developing a definition that could be used across the country. The Board accepted this recommendation, convened a task force and working group, and planned a second PIF so that the members of this group could share their efforts and obtain feedback from CAOT members at the 2010 annual conference in Halifax.

The forum was held at the Halifax Marriott Harbourfront Hotel on May 28th 2010 from 8:30 am-11:30 am. The event was facilitated by Marcia Finlayson and Maureen Coulthard. There were 42 participants representing a mix of clinicians, academics, regulators, students and staff of professional organizations. The purposes of the 2010 advanced practice PIF were to:

- Review key findings and recommendations from 2009 advanced practice PIF,
- Review the tasks and process used by the advanced practice task force and working group,
- Highlight findings from the survey conducted by the advanced practice task force and working group,
- Debate three potential ways of framing advanced practice in occupational therapy that have emerged from the work to date in order to guide future CAOT efforts.

This report will summarize the 2010 PIF, the discussions arising, and the recommendations that stemmed from those discussions.

Key Findings and Recommendations from the 2009 advanced practice PIF

Marcia Finlayson set the stage for the 2010 advanced practice PIF by summarizing the report of the 2009 event (Finlayson & Craik, 2009). She explained that the 2009 PIF was used to explore the meanings & key issues related to advanced practice; exchange information & perspectives about the factors influencing advanced practice, and develop recommendations for CAOT about the next steps the organization should consider in terms of addressing advanced practice in the profession.

These objectives were achieved in 2009 by reviewing how the term advanced practice was currently being used in the profession, how it is being used in nursing and physiotherapy, and by identifying key definitional challenges from the perspective of three stakeholder groups (clinicians, managers, regulators). These perspectives were shared through a panel presentation followed by small group discussions.

Upon conclusion of the 2009 advanced practice PIF, it became clear that Canadian occupational therapists needed a national vision of what advanced practice could and should be in Canada and that this definition needed to:

- Be portable and applicable across the provinces and territories despite regulatory variability,
- Acknowledge the continuum of skills and the diversity of practice areas,
- Support career laddering in the profession, and
- Be useful to employers and educators to prepare for and support AP in occupational therapy.

As a result, the final report from the 2009 advanced practice PIF recommended that CAOT develop a multi-stakeholder task force to:

- Conduct an environmental scan and needs assessment of advanced practice in Canada,
- Use findings to sort out key issues and develop a national definition of advanced practice for occupational therapy, and
- Determine the educational requirements for advanced practice in Canada.

Tasks and Process Used by the Advanced Practice Task Force and Working Group

Maureen Coulthard, Director of Standards at CAOT, explained how CAOT used the 2009 advanced practice PIF report to guide the development of a pan-Canadian task force and working group. The group included representatives from clinical practice, administration, ACOTRO, CAOT, university faculty, provincial government human resources planning, and representatives from the Canadian Nursing Association and the Canadian Physiotherapy. A full list of members of the Task Force and Working Group is provided in Appendix A.

The task force and working group regularly conducted teleconference meetings and e-mail communications between December 2009 and May 2010. Members reviewed background documents related to advanced practice details available from Christiane Des Lauriers, developed survey questions for the environmental scan and needs assessment, and developed plans for 2010 PIF. During the course of their efforts, many questions arose for the members of the task force and working group. Some of these questions included:

- How do we differentiate among advanced practice, proficient practice (as defined by the Occupational Therapy Profile) and specialized practice?
- How will defining advanced practice in occupational therapy contribute to concerns within and outside of the profession about “credential creeping”?
- In the process of defining advanced practice in occupational therapy, how do we balance protection of the public with our professional desire to continue to improve services by advancing the profession?
- How would advanced practice in occupational therapy affect recruitment and retention of occupational therapists?

Many other issues and concerns were identified as the task force and working group continued their efforts. Ultimately, the members expressed concerns that rushing to address such an important issue was not in the best interest of the profession in Canada since any decisions that were made would have long lasting effects. Consequently the task force and working group decided that preparing a definition prior to the 2010 advanced practice PIF was not realistic and that focusing on the environmental scan and needs assessment was more appropriate. They pursued this task by developing a CAOT member survey with the understanding that the information generated would serve as a foundation for further discussion. The guiding questions of the survey were:

- How prevalent is advanced practice in Canada?
- What do occupational therapists in advanced practice positions do?
- Are there differences between occupational therapists who are in advanced practice positions and those who are not?
- Do CAOT members feel a definition of advanced practice is important?
- What do CAOT members perceive as the potential benefits of defining advanced practice in occupational therapy?

Survey Findings

Methods: The questions on the self-reported survey were developed iteratively and collaboratively by the task force and working group members, with input from Marcia Finlayson and Maureen Coulthard. Two pre-tests were done to ensure that the wording of items and their responses was clear and comprehensive.

Once the survey items were determined, it was translated into French. Both versions of the survey were administered through Fluid Survey and also made available through a weblink on the CAOT website. CAOT members were notified about the survey and invited to participate through a e-mail blast. The survey was available on-line for three weeks in late March and early April of 2010. Copies of the surveys are provided in Appendix B.

Survey responses were analysed using descriptive statistics and bivariate comparisons (t-tests, chi-squared tests). Questions that provided participants with the option to provide comments were analyzed by categorizing similar responses together to identify common themes.

Findings: A total of 619 members responded to the survey (582 in English, 37 in French). Table 1 provides a demographic summary of respondents.

Table 1: Participants in the AP Questionnaire (N=619)

Variable	Response options	Count	%
Age	20 - 29 years	81	13.1%
	30 - 39 years	168	27.3%
	40 - 49 years	180	29.2%
	50 - 59 years	155	25.2%
	60+ years	32	5.2%
Gender	Male	43	7.0%
	Female	573	93.0%
Highest academic degree	Certificate/Diploma	24	3.9%
	Bachelor's	392	63.6%
	Master's (entry level professional)	83	13.5%
	Master's (post-professional)	97	15.7%
	Doctorate	20	3.2%
Any specialist certification or credential?	No	454	75.4%
	Yes	148	24.6%
Did being an occupational therapist make you eligible for your current position?	Yes	596	97.9%
	No	4	.6%
	Not sure	9	1.5%
Primary job responsibility	Direct service provider	429	70.3%
	Educator	29	4.8%
	Researcher	12	2.0%
	Manager	35	5.7%
	Professional leader/coordinator practice leader	55	9.0%
	Association/Government/Para Government	10	1.6%
	Other	40	6.6%
Employers CIHI category	General hospital	143	23.4%
	Rehabilitation hospital / facility	80	13.1%
	Mental health hospital / facility	31	5.1%
	Residential care facility	31	5.1%
	Assisted living residence	1	.2%
	Community health centre	68	11.1%
	Visiting agency / business	24	3.9%
	Group professional practice / clinic	42	6.9%
	Solo professional practice / clinic	40	6.5%
	Post-secondary education institution	31	5.1%
	School or school board	32	5.2%
	Association / government / para-government	32	5.2%
	Industry / manufacturing and commercial	2	.3%

	Other - employer type not described	51	8.3%
	N/A	1	.2%
	Unknown	2	.3%
Region	Newfoundland	15	2.5%
	Nova Scotia	35	5.8%
	New Brunswick	32	5.3%
	Prince Edward Island	5	.8%
	Quebec	31	5.1%
	Ontario	237	39.0%
	Manitoba	26	4.3%
	Saskatchewan	21	3.5%
	Alberta	87	14.3%
	British Columbia	105	17.3%
	Yukon	0	.0%
	North West Territories	2	.3%
	Nunavut	0	.0%
	Outside of Canada	11	1.8%
Type of community in which you live	Urban or suburban	481	79.0%
	Small town	70	11.5%
	Rural	55	9.0%
	Remote	3	.5%
Current job designated or classified as AP	No	445	73.3%
	Not sure	117	19.3%
	Yes, designated by my employer	27	4.4%
	Yes, classified by my union	7	1.2%
	Yes, classified by another authority	11	1.8%

Across all respondents, 45 indicated that their position was designated as advanced practice. The designation was made by job title and job description (55%), by job description only (31%), and by experience (4%). The remaining individuals did not indicate how their position was designed as advanced practice.

Using t-tests and chi-squared tests, several comparisons were made between those respondents who reported being in an advanced practice and those respondents who were not. No statistically significant differences were found between the two groups in terms of age, gender, or academic degree. Individuals who reported being in an advanced practice position were less likely to report that their *primary* job responsibility was direct service provision and more likely to report that it was being a professional leaders / coordinators ($p=0.01$). They were also more likely to have an additional specialist credential ($p<0.0001$).

Comparisons were also made across the specific responsibilities of respondents' positions according to their job descriptions (self-reported). Respondents were provided with a list of eleven potential responsibilities and asked to check all that applied to their position. When

comparing individuals who reported being in an advanced practice position to individuals who did not, no significant differences were found in the proportion of each group who:

- Provided direct occupational therapy services to clients (individuals or groups);
- Contributed to the analysis or development of standards, quality initiatives, policies and procedures, and/or practice guidelines;
- Developed and delivered educational programs for others (clients, caregivers, students, public or other members of the multidisciplinary team);
- Led or actively participated in the development and implementation of original research projects;
- Led or actively participated in transferring research knowledge into the practice setting;
- Disseminated knowledge through publication (peer-reviewed, professional magazine or other);
- Provided professional leadership to develop and advance the field;
- Supervised and trained other staff; or
- Managed budgets.

Consequently, the findings regarding job classification and job responsibilities indicate that the difference between occupational therapists who identify being in an advanced practice position are different from those who do not in terms of their *primary* job responsibility, not the overall range of duties performed.

Survey respondents were also asked about the importance of defining advanced practice for occupational therapy in Canada, regardless of the designation of their current position. Seventy percent of respondents said it was very important or important (31% and 39%, respectively). An additional 26% reported that developing a definition was somewhat important, and the remaining 4% reported that it was not important. These importance ratings did not vary significantly by age, gender, specialist credential, or years in practice. Nevertheless, individuals who were currently unsure of their position designation (i.e., advanced practice or not) were more likely to report that developing a definition was at least somewhat important ($p=0.03$).

All respondents who reported that developing a definition was at least somewhat important were asked to rate the extent to which such a definition would offer added value for the profession, employers, the public and policy makers. A four-point rating system was used: none, low, moderate and high.

Across respondents, the top benefits for the profession were identified as being:

- Recognition (70%)
- Acknowledgement of advanced practice (66%)
- Specialization opportunities (65%)
- Career laddering opportunities (51%)

The top benefits for employers were identified as being:

- Highly trained occupational therapy workforce (52%)

- Occupational therapy workforce that can fulfill broader range of responsibilities (48%)
- More autonomous occupational therapy workforce (42%)

The top benefits for the public were identified as being:

- Access to highly trained workforce (51%)
- Greater access to most current evidence-based occupational therapy services (44%)

The top benefits for policy makers were identified as being:

- Highly trained occupational therapy workforce (46%)
- Occupational therapy workforce that can fulfill broader range of responsibilities (46%)
- Greater access to most current evidence-based occupational therapy services (45%)

The final question on the survey was open ended and invited respondents to add any additional comments or concerns that they wished to express about advanced practice and the CAOT efforts on this issue. Overwhelming, the comments thanked CAOT for bringing the issue forward and noted that there is a critical need to define advanced practice since there is a lack of understanding of this term and what it means both within and outside of the profession. At the same time, respondents also expressed the need for caution as CAOT moves forward, noting that it is critical that the process of defining advanced practice does not lead to a devaluation of occupational therapy roles that are not designated as advanced practice.

Ultimately, the qualitative comments indicated both positive and negative perspectives on advanced practice. On the positive side, advanced practice was seen as offering opportunities for professional growth, public awareness, recruitment and retention benefits and career laddering. On the negative side, concern was expressed about the potential to devalue the work of occupational therapists not designated as advanced practice, whether financial compensation would follow the title, and if advanced practice vacancies could be filled. Concerns about regulation were also expressed. Respondents also noted that an advanced practice designation must recognize and acknowledge clinical experience and credentials, academic achievement, involvement in knowledge translation and the dissemination of information and expertise, professional leadership, and the ability to critically analyze, influence and develop policies and programs.

Discussion on the Ways of Framing AP in Occupational Therapy in Canada

During the last half of the forum, attendees were provided with three potential ways of framing advanced practice in occupational therapy in Canada (i.e., as a specialist, as an extended scope practitioner, as a global leader) (Appendix D). Attendees reflected on these options, discussed them in small groups, and then shared their thoughts with the larger audience. Through these discussions, the complexity, nuances and challenges of describing advanced practice were reinforced. It became clear that none of the three potential ways of framing advanced practice were fully satisfactory because of the many logistical and regulatory issues that each of them could bring about. Attendees emphasized the need for CAOT to proceed cautiously and

strategically as any decision will have long lasting impacts on the profession, consumers and other stakeholders. They noted that although a definition of advanced practice may offer benefits, there is also the risk of splintering an already small profession, devaluing therapists who are not in advanced practice positions, and reducing access to occupational therapists rather than improving it.

As the discussion continued, several key themes emerged. They were as follows:

1. CAOT must position the organization and the profession strategically in order to take into account population needs, career laddering, and recognition. The organization must be clear about the goal (s) of pursuing any activities related to advanced practice.
2. CAOT must be proactive and future oriented rather than reactive when it comes to advanced practice (e.g., avoid pursuing advanced practice as a “catch up” because other professions are doing it).
3. CAOT must remain aware of and sensitive to the potential risks and repercussions of advanced practice both within and outside of the profession.
4. CAOT must acknowledge the differences in responding to the evolving systems in which occupational therapists are working, addressing therapists’ individual needs and motivations to advance within their own careers, and defining advanced practice. In other words, CAOT must distinguish between *advanced* practice and *advancing* practice.

Final Recommendation for the CAOT Board

Upon conclusion of the 2010 advanced practice PIF, it was recommended that CAOT develop a position statement to put forth a vision and set of core principles (rather than a definition) that can guide future efforts related to advanced practice in occupational therapy in Canada.

Appendix A: Members of the Advanced Practice Task Force and Working Group

TASK FORCE

A

	Position	Background
Sandra Bessler	Consultant	Panel Member Advanced Practice PIF 2009
Tricia Dickson	Advanced Practice Clinician	Panel Member Advanced Practice PIF
Kathy Corbett	Registrar/CEO College of Occupational Therapists of BC	ACOTRO Representative
Maureen Coulthard (Committee Chair)	Director of Standards CAOT	CAOT Representative

WORKING GROUP MEMBERSHIP/REPRESENTATION

Stakeholder Group	Representative Contact Name	Title/Position
Regulatory Organization	Pat Edney	Associate Registrar, Alberta
Professional Association	Nicola MacNaughton	President NBSOT
Practice Leader	Patti Erlendson	Practice Leader Vancouver
Clinician Representatives	Lorna Bain	Clinician coordinator, allied health educator, arthritis program, Ontario
	Jane Cox	Clinician, lecturer, mentor , Ontario
Administrator/ Employer	Marlene Stern	Administration / professional leader background, Manitoba
Government	Susan Illmayer	Government Rep., British Columbia
Other Professional Group with AP Experience	Jossette Roussel	CNA Ontario
Academic; Other Professional Group with AP Experience	Linda Woodhouse	PT Professor McMaster University
Academic	Liz Townsend	OT professor – Dalhousie U
ACOTUP	Susan Rappolt	OT Professor – U of T

Appendix B: Copies of the Advanced Practice Survey

Exploration of advanced practice in OT in Canada

Introduction

Across Canada and around the world, the term “advanced practice” is being used increasingly by occupational therapists and their employers, and occupational therapy educators and regulators. To date, there is no consensus about the meaning of advanced practice (AP) in occupational therapy. In response, CAOT has initiated a project to examine AP in Canada. The ultimate goal of this work is to develop a clear understanding of AP that can be shared across the country.

As a CAOT member, we are asking for your input for this project. The survey that follows will enable the project team to determine:

- the extent to which CAOT members currently hold AP positions and if so, what the nature of these positions are,
- how CAOT members characterize AP based on the current Canadian practice environments,
- whether defining AP is important from the perspective of CAOT members.

This survey will take you approximately 10 minutes to complete. It is divided into three parts:

Part 1: Demographic profile – This information will help us describe the characteristics of the survey respondents, allow future comparisons across sub-groups who respond, and compare respondents to the general CAOT membership.

Part 2: Environmental Scan of current AP positions – This information will allow us to describe the current situation with respect to AP in Canada at this time (e.g., job titles and classification, settings in which these positions exist, educational requirements, etc.)

Part 3: Factors that need to be further understood with respect to AP in occupational therapy in Canada. This information will allow us to identify the most critical factors that occupational therapists believe need to be addressed during on-going discussions about AP in occupational therapy in Canada.

Findings from this survey will be presented at the 2010 Professional Issues Forum at the CAOT conference.

Part 1 - Demographic Profile

Question 1

What is your current age?

- 20 - 29
- 30 - 39
- 40 - 49
- 50 - 59
- 60+

Question 2

Are you:

- Male
- Female

Question 3

What year did you graduate from your entry-level occupational therapy degree? (enter the year of your graduation).

Question 4

What is your highest academic degree?

- Certificate/Diploma
- Bachelor's
- Master's (entry level professional)
- Master's (post-professional)
- Doctorate

Question 5

In addition to your academic degree, do you hold any specialist certification or credential?

- No
- Yes, please identify:

Question 6

What is your current job title?

Question 7

Did being an occupational therapist make you eligible for your current position?

- Yes
- No

Question 8

Within your current job, what is your primary responsibility? (check one)

- Direct service provider
- Educator (major role as educator for a particular target group)
- Researcher (major role is in knowledge development and dissemination of research)
- Manager (includes first level management of a particular program through to senior most management positions)
- Professional leader/coordinator practice leader (direct service provider with a leadership role in professional practice within an employment setting).
- Association/Government/Para Government (an organization or government that deals with

regulation, advocacy, policy development, program development, research and/or the protection of the public at a national, provincial/territorial or municipal level)

Other:

Question 9

Which of the following CIHI categories best describes your primary employer? (check one)

- General hospital
- Rehabilitation hospital / facility
- Mental health hospital / facility
- Residential care facility
- Assisted living residence
- Community health centre
- Visiting agency / business
- Group professional practice / clinic
- Solo professional practice / clinic
- Post-secondary education institution
- School or school board
- Association / government / para-government
- Industry / manufacturing and commercial
- Other - employer type not described
- N/A
- Unknown

Question 10

In what region do you currently work? (check one)

- Newfoundland
- Nova Scotia
- New Brunswick
- Prince Edward Island
- Quebec
- Ontario
- Manitoba
- Saskatchewan
- Alberta
- British Columbia
- Yukon
- North West Territories
- Nunavut
- Outside of Canada

Question 11

What term best describes the area in which you work? (check one)

- Urban or suburban
- Small town

- Rural
- Remote

Part 2 - Environmental Scan

Question 12

Is your current job designated or classified as an advanced practice position?

- No
- Not sure
- Yes, designated by my employer
- Yes, classified by my union
- Yes, classified by another authority (Please specify):

Question 13

Is your position designated or classified as advanced practice in the following (check one):

- Job Title only
- Job description only
- Job title and job description
- Other, please specify:

Question 14

What is the minimum academic degree requirement of your position?

- Diploma
- Bachelor's
- Master's (entry level professional)
- Master's (post-professional)
- Doctorate

Question 15

In addition to the minimum academic degree requirement, does your position also require a certification, credential or additional advanced training?

- No
- Yes, requires advanced training either from my employer or another entity.
- Yes, requires a certification or credential. Please identify:

Question 16

What are the specific responsibilities of your position according to your job description? (Check all that apply)

- Provide direct occupational therapy services to clients (individuals or groups).
- Contribute to the analysis or development of standards, quality initiatives, policies and procedures, and/or practice guidelines.
- Develop and deliver educational programs for others (clients, caregivers, students, public or other members of the multidisciplinary team).

- Lead or actively participate in the development and implementation of original research projects.
- Lead or actively participate in transferring research knowledge into the practice setting.
- Disseminate knowledge through publications (peer-reviewed, professional magazine or other).
- Provide professional leadership to develop and advance the field.
- Supervising and training other staff.
- Manage budgets
- Go beyond typical occupational therapy practice activities allowed in your province or territory.

Please give examples:

Question 17

Based upon your job description and responsibilities, do you believe that your position should be designated or classified as an advanced practice position?

- Not sure
- No
- Yes, please explain:

Question 18

What are the specific responsibilities of your position according to your job description ? (Check all that apply)

- Provide direct occupational therapy services to clients (individuals or groups)
- Contribute to the analysis or development of standards, quality initiatives, policies and procedures, and/or practice guidelines
- Develop and deliver educational programs for others (clients, caregivers, students, public or other members of the multidisciplinary team).
- Lead or actively participate in the development and implementation of original research projects.
- Lead or actively participate in transferring research knowledge into the practice setting.
- Disseminate knowledge through publication (peer-reviewed, professional magazine or other)
- Provide professional leadership to develop and advance the field.
- Supervise and training other staff.
- Manage budgets.
- Go beyond typical occupational therapy practice activities allowed in your province or territory.

Please provide examples of such activities:

Part 3: Factors that need to be further understood with respect to AP in occupational therapy in Canada.

Question 19

Do you feel that it is important for CAOT to develop a definition of AP for Canadian occupational therapists?

- 1 Not important
- 2 Somewhat important
- 3 Important
- 4 Very important

Question 20 - introduction

From your perspective, please rate the potential added value of having a Canadian definition of advanced practice for occupational therapy in each of the following categories.

Question 20a

Please rate the extent to which a Canadian definition of advanced practice in occupational therapy would offer added value for members of the profession in each of the following areas

	1 None	2 Low	3 Moderate	4 High
Career development and laddering opportunities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recruitment tool	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Retention tool	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Higher status within the workplace	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recognition of advanced capability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Expanded professional scope	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Acknowledgement of advanced practice in OT	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specialization opportunities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Question 20b

Please rate the extent to which a Canadian definition of advanced practice in occupational therapy would offer added value for employers of occupational therapists or private practitioners in each of the following areas:

	1 None	2 Low	3 Moderate	4 High
Recruitment tool	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Retention tool	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Highly trained occupational therapy workforce	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Occupational therapy workforce that can fulfill broader range of responsibilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Occupational therapy workforce that can work more autonomously	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Better protection against poor quality occupational therapy services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Employer recognition of advanced qualification and skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Question 20c

Please rate the extent to which a Canadian definition of advanced practice in occupational therapy would offer added value for clients and the general public in each of the following areas:

	1 None	2 Low	3 Moderate	4 High
Access to highly trained occupational therapy workforce	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to occupational therapists who can work more autonomously	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1 None 2 Low 3 Moderate 4 High

- | | | | | |
|--|-----------------------|-----------------------|-----------------------|-----------------------|
| Greater access to the most current, evidence-based occupational therapy services | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Better protection against poor quality occupational therapy services | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Question 20d

Please rate the extent to which a Canadian definition of advanced practice in occupational therapy would offer added value for policy makers, managers, etc., in the systems in which occupational therapists work (e.g., health care, schools, community programs, government,..) in each of the following areas:

1 None 2 Low 3 Moderate 4 High

- | | | | | |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| Recruitment tool | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Retention tool | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Highly trained occupational therapy workforce | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Occupational therapy workforce that can fulfill broader range of responsibilities | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Occupational therapy workforce that can work more autonomously | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Greater access to the most current, evidence-based occupational therapy services | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Better protection against poor quality occupational therapy services | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Question 20e

Any other comments about the added benefit or potential issues and concerns with having a Canadian definition for advanced practice in occupational therapy?

Thank you... for your time.

Findings from this survey will be presented at the 2010 Professional Issues Forum at the CAOT conference.

Exploration de la PA

Introduction

Le terme « pratique avancée » est utilisé de plus en plus par les ergothérapeutes et leurs employeurs, de même que par les enseignants et les organismes de réglementation en ergothérapie au Canada et à travers le monde. Jusqu'à présent, aucun consensus n'a été atteint quant à la définition et à la signification de la pratique avancée en ergothérapie. Afin de pallier cette situation, l'ACE a entrepris un projet en vue d'examiner la pratique avancée au Canada. Le but ultime de ce projet est de parvenir à une vision claire de la pratique avancée pouvant être partagée à travers le Canada.

À titre de membre de l'ACE, nous vous invitons à participer à ce projet, en nous faisant part de vos commentaires et de votre opinion sur cette question. Le sondage qui suit permettra à l'équipe du projet de déterminer :

- la mesure selon laquelle les membres de l'ACE occupent actuellement des postes en pratique avancée et, le cas échéant, les caractéristiques de ces postes;
- comment les membres de l'ACE caractérisent la pratique avancée en fonction des milieux de pratique canadiens actuels;
- si les membres de l'ACE considèrent qu'il est important de définir la pratique avancée.

Il vous faudra environ 10 minutes pour répondre à ce sondage. Le sondage est divisé en trois parties :

Partie 1 : Profil démographique – ces renseignements nous aideront à décrire les caractéristiques des répondants au sondage, à faire de futures comparaisons entre les sous-groupes de répondants et à comparer les répondants à l'ensemble des membres de l'ACE.

Partie 2 : Analyse environnementale des postes actuels en pratique avancée – Cette information nous permettra de décrire la situation actuelle en ce qui concerne la pratique avancée au Canada (p. ex., titre et classification des emplois, milieux dans lesquels ces postes existent, exigences en matière de formation, etc.).

Partie 3 : Facteurs qui doivent être mieux compris en ce qui concerne la pratique avancée de l'ergothérapie au Canada. Cette information nous permettra de cibler les principaux facteurs qui, selon les ergothérapeutes, doivent être abordés lors des discussions sur la pratique avancée en ergothérapie au Canada.

Les résultats de ce sondage seront présentés lors d'un forum sur une question professionnelle qui aura lieu dans le cadre du Congrès 2010 de l'ACE.

Question 1

Quel âge avez-vous actuellement?

- 20 - 29
- 30 - 39
- 40 - 49

- 50 - 59
- 60+

Question 2

Êtes-vous :

- un homme
- une femme

Question 3

En quelle année avez-vous terminé votre formation de niveau d'entrée en exercice de l'ergothérapie?
(Inscrivez l'année d'obtention de votre diplôme).

Question 4

Quel est votre plus haut degré de scolarité?

- Certificat/Diplome
- Baccalaureat
- Maitrise (niveau d'entree en exercice de la profession)
- Maitrise (niveau post-professionnel)
- Doctorat

Question 5

Mis à part votre diplôme universitaire, avez-vous d'autres attestations ou titres de spécialiste?

Non

Oui, veuillez préciser:

Question 6

Quel est le titre de l'emploi que vous occupez actuellement?

Question 7

Est-ce que le fait d'être ergothérapeute vous a rendu admissible à votre poste actuel?

- Oui
- Non

Question 8

Dans votre emploi actuel, quelle est votre principale responsabilité? (Cochez une seule réponse)

- Fournisseur de services directs
- Enseignant (role majeur à titre d'éducateur pour un groupe cible particulier)

- Chercheur (rôle majeur dans la production de connaissances et la diffusion de la recherche)
- Gestionnaire (allant des postes de gestionnaires de premier niveau d'un programme donné aux postes de cadres supérieurs)
- Leader professionnel/coordonnateur de la pratique/chef des services professionnels (fournisseur de services directs ayant un rôle de leadership associé à la pratique professionnelle, dans un milieu de travail)
- Association/organisme gouvernemental/organisme paragouvernemental (organisation ou organisme gouvernemental chargé de réglementation, de la revendication, du développement de politiques, du développement de programme, de la recherche ou de la protection du public, aux échelons national, provincial/territorial ou municipal)
- Autre, veuillez préciser:

Question 9

Laquelle des catégories de l'ICIS suivantes décrit le mieux votre principal employeur? (Cochez une seule réponse)

- Hôpital général
- Hôpital/Établissement de réadaptation
- Hôpital/Établissement de soins de santé mentale
- Établissement de soins pour bénéficiaires internes
- Résidence de soins assistés
- Centre du santé communautaire
- Agence de services/Enterprise de services
- Pratique ou clinique professionnelle en groupe
- Pratique ou clinique professionnelle en solo
- Établissement d'enseignement postsecondaire
- École ou commission scolaire
- Association/organisme gouvernemental/organisme para-gouvernemental
- Industrie manufacturière et commerciale
- Autre - type d'employeur non décrit
- S/O
- Indéterminé

Question 10

Dans quelle région travaillez-vous actuellement? (Cochez une seule réponse)

- Terre-Neuve
- Nouvelle-Écosse
- Nouveau-Brunswick
- Île-du-Prince-Édouard
- Québec
- Ontario
- Manitoba
- Saskatchewan
- Alberta
- Colombie-Britannique

- Yukon
- Territoires du Nord-Ouest
- Nunavut
- À l'extérieur du Canada

Question 11

Quel est le terme qui décrit le mieux la région dans laquelle vous travaillez? (Cochez une seule réponse)

- Région urbaine ou suburbaine
- Petite ville
- Région rurale
- Région éloignée

Partie 2 – Analyse environnementale

Question 12

Votre emploi actuel est-il désigné ou classé comme un poste en pratique avancée?

- Non
- Incertain
- Oui, dsigné par mon employeur
- Oui, classé par mon syndicat
- Oui, classé par une autre compétence (veuillez préciser):

Question 13

Votre emploi actuel est-il désigné ou classé comme un poste en pratique avancée face aux aspects suivants (cochez une seule réponse) :

- Titre du poste seulement
- Description d'emploi seulement
- Titre du poste et description d'emploi
- Autre, veuillez préciser:

Question 14

Quel est le degré de scolarité minimal requis pour occuper votre poste?

- Diplôme
- Baccalauréat
- Maîtrise (niveau d'entrée en exercice de la profession)
- Maîtrise (niveau post-professionnel)
- Doctorat

Question 15

Mis à part le degré de scolarité minimal requis pour votre poste, ce poste exige-t-il une attestation professionnelle additionnelle, un titre professionnel additionnel ou une formation avancée additionnelle?

- Non

- Oui, mon employeur ou une autre entité exige une formation avancée pour ce poste
- Oui, ce poste exige une attestation professionnelle ou un titre professionnel. Veuillez préciser :

Question 16

Quelles sont les responsabilités spécifiques de votre poste, selon votre description d'emploi? (Cochez toutes les réponses qui s'appliquent)

- Prestation de services directs d'ergothérapie aux clients (individus or groupes)
- Participation à l'analyse ou à l'élaboration de normes, à des initiatives liées à l'amélioration de la qualité ou à l'élaboration de politiques et procédures ou de lignes directrices relatives à la pratique
- Conception et prestation de programmes éducatifs pour d'autres intervenants (clients, aidants, étudiants, public ou autres membres de l'équipe multidisciplinaire)
- Direction ou participation active à l'élaboration et à la mise en œuvre de projets de recherche originaux
- Direction ou participation active au transfert des connaissances dans le milieu de la pratique
- Diffusion des connaissances par la publication d'articles (revues examinées par les pairs, journaux professionnels ou autres)
- Leadership professionnel pour le développement et l'avancement du domaine
- Supervision et formation du personnel
- Gestion des budgets
- Réalisation d'activités dépassant le champ d'activité de l'ergothérapie sanctionné dans votre

province ou territoire. Veuillez donner des exemples de ce genre d'activités :

Question 17

Compte tenu de votre description d'emploi et de vos responsabilités, croyez-vous que votre poste devrait être désigné ou classé comme un poste en pratique avancée?

- Incertain
- Non

Oui, veuillez expliquer:

Question 18

Quelles sont les responsabilités spécifiques associées à votre poste, selon votre description d'emploi? (Cochez toutes les réponses qui s'appliquent)

- Prestation de services directs d'ergothérapie aux clients (individus ou groupes)
- Participation à l'analyse ou à l'élaboration de normes, à des initiatives liées à l'amélioration de la qualité ou à l'élaboration de politiques et procédures ou de lignes directrices relatives à la pratique.
- Conception et prestation de programmes éducatifs pour d'autres intervenants (clients, aidants, étudiants, public ou autres membres de l'équipe multidisciplinaire)
- Direction ou participation active à l'élaboration et à la mise en œuvre de projets de recherche originaux
- Direction ou participation active au transfert des connaissances dans le milieu de la pratique
- Diffusion des connaissances par la publication d'articles (revues examinées par les pairs, journaux professionnels ou autres)
- Leadership professionnel pour le développement et l'avancement du domaine

- Supervision et formation du personnel
- Gestion des budgets
- Réalisation d'activités dépassant le champ d'activité de l'ergothérapie sanctionné dans votre

province ou territoire. Veuillez donner des exemples de ce genre d'activités :

Partie 3 : Facteurs qui doivent être mieux compris en ce qui concerne la pratique avancée de l'ergothérapie au Canada

Question 19

Croyez-vous qu'il est important que l'ACE élabore et adopte une définition de la pratique avancée pour les ergothérapeutes canadiens?

- 1 Pas important
- 2 Un peu important
- 3 Important
- 4 Très Important

Question 20 - Introduction

Selon votre perspective, veuillez évaluer la valeur ajoutée éventuelle de l'adoption d'une définition canadienne de la pratique avancée en ergothérapie, pour chacune des catégories suivantes.

Question 20a

Veuillez évaluer la mesure selon laquelle l'adoption d'une définition canadienne de la pratique avancée en ergothérapie serait une valeur ajoutée pour les membres de la profession, pour chacun des aspects suivants :

	1 Aucune	2 Faible	3 Moyenne	4 Élevée
Développement de la carrière et possibilités de gravir les échelons	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outil de recrutement de l'effectif	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outil de maintien de l'effectif	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Statut plus élevé au sein du milieu de travail	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reconnaissance des compétences avancées	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Élargissement du champ d'activité professionnel	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reconnaissance de la pratique avancée en ergothérapie	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Possibilités de spécialisation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Question 20b

Veuillez évaluer la mesure selon laquelle l'adoption d'une définition canadienne de la pratique avancée en ergothérapie serait une valeur ajoutée pour les employeurs d'ergothérapeutes ou pour les ergothérapeutes exerçant en clinique privée, pour chacun des aspects suivants :

	1 Aucune	2 Faible	3 Moyenne	4 Élevée
Outil de recrutement de l'effectif	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	1 Aucune	2 Faible	3 Moyenne	4 Élevée
Outil de maintien de l'effectif	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Main-d'oeuvre très spécialisée en ergothérapie	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Main-d'oeuvre en ergothérapie pouvant assumer un plus grand éventail de responsabilités	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Main-d'oeuvre en ergothérapie pouvant travailler de manière plus autonome	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Meilleure protection contre les services d'ergothérapie de mauvaise qualité	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reconnaissance des compétences et connaissances avancées, par l'employeur	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Question 20c

Veillez évaluer la mesure selon laquelle l'adoption d'une définition canadienne de la pratique avancée en ergothérapie serait une valeur ajoutée pour les clients et la population en général, pour chacun des aspects suivants :

	1 Aucune	2 Faible	3 Moyenne	4 Élevée
Accès à une main-d'oeuvre très spécialisée en ergothérapie	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accès à une main-d'oeuvre en ergothérapie pouvant travailler de manière plus autonome	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Plus grand accès à des services d'ergothérapie actuels et fondés sur les preuves	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Meilleure protection contre les services d'ergothérapie de mauvaise qualité	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Question 20d

Veillez évaluer la mesure selon laquelle l'adoption d'une définition canadienne de la pratique avancée en ergothérapie serait une valeur ajoutée pour les décideurs, les gestionnaires, etc., au sein des systèmes dans lesquels les ergothérapeutes travaillent (e.g., services de soins de santé, écoles, programmes communautaires, gouvernement,...), pour chacun des aspects suivants :

	1 Aucune	2 Faible	3 Moyenne	4 Élevée
Outil de recrutement de l'effectif	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outil de maintien de l'effectif	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Main-d'oeuvre très spécialisée en ergothérapie	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Main-d'oeuvre en ergothérapie pouvant assumer un plus grand éventail de responsabilités	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Main-d'oeuvre en ergothérapie pouvant travailler de manière plus autonome	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1 Aucune 2 Faible 3 Moyenne 4 Élevée

Plus grand accès à des services d'ergothérapie actuels et fondés sur les preuves

Meilleure protection contre les services d'ergothérapie de mauvaise qualité

Question 20e

Avez-vous d'autres commentaires sur les avantages ou les problèmes ou préoccupations possibles face à l'adoption d'une définition canadienne de la pratique avancée en ergothérapie?

Appendix D: Three ways of framing advanced practice in occupation therapy

The following descriptions were provided to the PIF participants to elicit discussion about the potential ways to frame advanced practice in occupational therapy in Canada. These descriptions were developed based on the background documents that were reviewed by the Task Force and Working Group, as well as the findings of the survey.

Description #1 - Specialist

Advanced Practice Occupational Therapists have additional post-graduate training or credentials that qualify them in a specific domain of occupational therapy (e.g., hand therapy, driver specialist, environmental design). They are proficient practitioners as outlined in the OT Profile and work within the regulated scope of practice. They are specialists and are sought out by others for consultation because of their expertise. They demonstrate exceptional professional reasoning and judgment and may be involved in research, knowledge translation, program and policy development within their area of specialty.

Description # 2- Extended Scope

Advanced Practice Occupational Therapists have received additional training in order to perform duties that extend beyond the regulated scope of occupational therapy practice. Because of these duties, they have extensive levels of independence, autonomy and accountability. They are proficient practitioners as outlined in the OT Profile. They are sought out by others for consultation because of their expertise. They demonstrate exceptional professional reasoning and judgment and may be involved in research, knowledge translation, program and policy development within their area of specialty. They provide education among professional and intersectoral groups.

Descriptor #3 – Global Leader

Advanced Practice Occupational Therapists have additional knowledge and competencies that qualify them in a specific domain of occupational therapy. Their area of expertise may include direct care, program development, administration, policy development, education or research. They work beyond proficient practice as outlined in the OT Profile and within regulated scope of practice. They demonstrate exceptional professional reasoning, judgment and expertise. They excel in explaining and using theory, drawing on experience, and building research and intersectoral collaboration to meet complex client, policy and program needs.

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