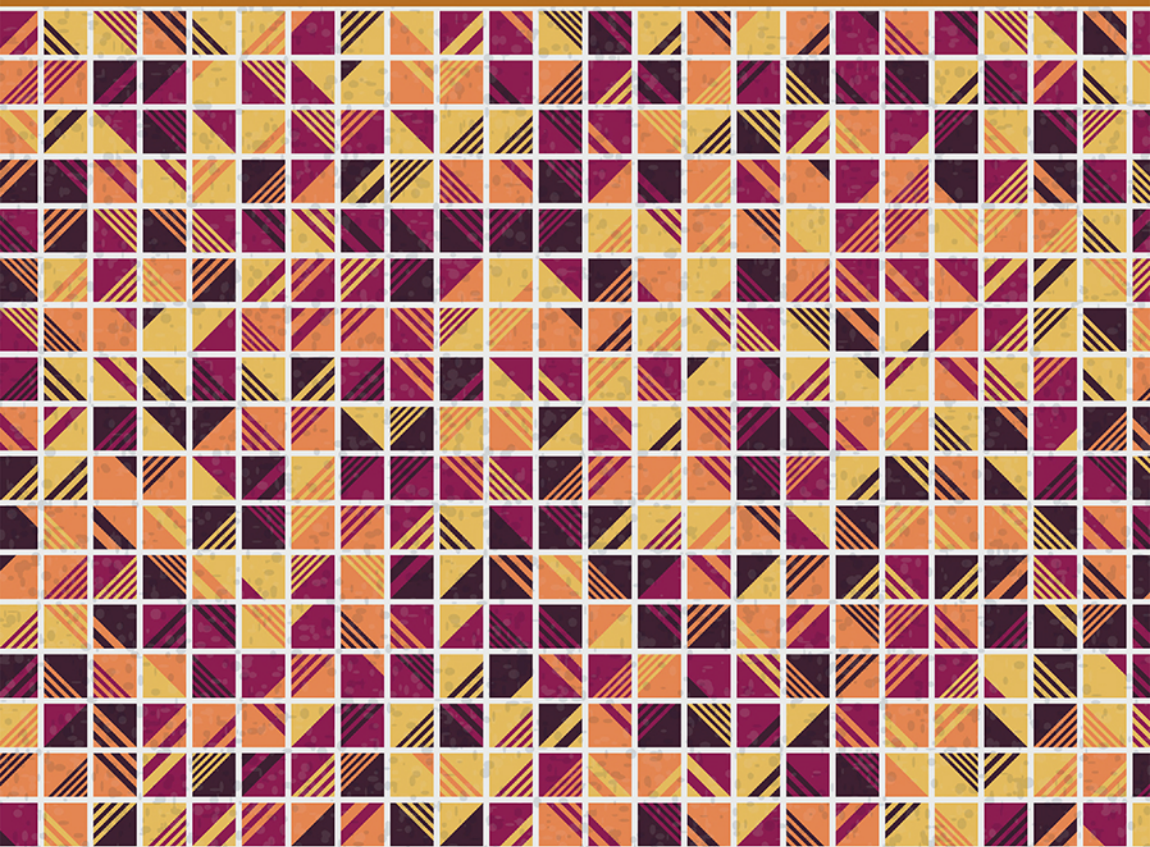


OPTIMAL COLLABORATION FOR THE OCCUPATIONAL THERAPIST AND OCCUPATIONAL THERAPIST ASSISTANT



HEATHER GILLESPIE

"Occupational therapy in Canada stands at a pivotal juncture, where the importance of effective collaboration between occupational therapists (OTs) and occupational therapist assistants (OTAs) cannot be overstated. Heather Gillespie, whose extensive career and contributions have significantly shaped the discourse on OT-OTA collaboration, is a prominent figure in this endeavor. Heather has consistently championed the integration of OTAs into the professional practice landscape.

The significance of this topic is underscored by the findings of my doctoral work, which highlighted a critical need for resources and interventions that support OT-OTA intraprofessional collaboration. Throughout my work, I frequently heard the importance of OT-OTA intraprofessional collaboration emphasized, not only as a means to ensure access to necessary occupational therapy services, but also for its positive impact on client and organizational outcomes, and for the future of occupational therapy. As healthcare delivery evolves, this book marks the first resource in Canada that provides strategies to enhance intraprofessional collaboration in occupational therapy, promoting a more inclusive and effective practice for the benefit of all Canadians."

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Optimal Collaboration for the Occupational Therapist and Occupational Therapist Assistant

This book acts as a guide for occupational therapists to develop and continually evaluate trusting working relationships with occupational therapist assistants (OTAs), resulting in more effective occupational therapy service delivery to clients. To combat the misunderstandings between occupational therapists and OTAs, this book provides theoretical knowledge, practical learning, and case study examples to guide and develop positive working relationships between occupational therapists and OTAs. The importance of developing this trusting intraprofessional relationship is discussed in detail, and recommended approaches are reviewed. Described methodologies can be utilized to determine appropriate involvement of OTAs in specific client treatments, allowing for a consistent and effective synergy within occupational therapy. This book is an ideal read for occupational therapist students and occupational therapists currently working in a clinical practice setting, as well as for rehabilitation managers and employers. It is also a beneficial resource for OTA students and OTAs working within the profession.

Heather Gillespie, B.O.T., has been an occupational therapist in Canada since 1977 and has collaborated with OTAs throughout her career. She currently teaches OTA students online through Medicine Hat College in Alberta.



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Optimal Collaboration for the Occupational Therapist and Occupational Therapist Assistant

Heather Gillespie

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Preface

Reflecting over her career as an occupational therapist in Canada, the author realizes that improving individuals' occupational participation to promote a sense of well-being would have been significantly more challenging without the valuable work of occupational therapist assistants (OTAs), or support personnel as they were previously named. OTAs' contributions to the therapeutic process are invaluable and result in more timely and effective healthcare delivery. The author has been fortunate to collaborate with these colleagues as a clinician, fieldwork supervisor, educator, manager, and mentor in various environments and geographical locations. Throughout her professional journey, she has expanded her skills and knowledge of specific interventions by being receptive to the previous experiences and new ideas of these co-workers, which in turn can only benefit those within healthcare.

Partnering with occupational therapist assistants (OTAs) in the provision of optimal client care has developed into a professional passion for the author, from which the idea of developing this book was born. Forming a collaborative relationship leads to the occupational therapist and the OTA combining their skills and knowledge to explore the meaning and purpose of occupations (CAOT, 2024, p. 2). This book will discuss the knowledge and skills required for this relationship to be successful and to ensure the collaboration continues to evolve within the occupational therapy profession.

The author was unaware of the profession of occupational therapy until she was hired as a secretary within a rehabilitation centre during the summer before her grade 12 high school year. The position was within the occupational therapy department and her role was to type the therapists' reports and treatment plans. She also had the opportunity to observe therapists

providing a variety of treatments to their patients. This job sparked the author's interest in becoming an occupational therapist as she could be creative and assist people who were experiencing challenges in their daily lives. Following investigation of the educational requirements needed, she applied to the local university. She was fortunate to be accepted into the occupational therapist diploma program following grade 12 in 1974 and has enjoyed this profession ever since.

Beginning her career as an occupational therapist in 1977 in Regina, Saskatchewan, the author was able to experience the on-the-job-training model of OTAs firsthand. The rehabilitation aides, as they were titled in her initial clinical work setting at a rehabilitation centre, had been working in their roles in occupational therapy for many years; this led to their "training" the therapists in what they did, and guiding the author as to how they should be supervised when they were treating her patients. This subject was minimally addressed in university education, and although she did experience support personnel assisting with occupational therapy service delivery during fieldwork placements, there remained confusion as to their role and the therapist's responsibilities in their supervision. The mentoring and guidance from occupational therapist colleagues regarding the process for assignment of tasks and supervising OTAs was extremely beneficial as the author began her career. This soon resulted in an increase in her competence and confidence in building this intraprofessional collaboration.

Five years into her career, the author relocated to an acute care hospital that had not recently employed an occupational therapist. She was "assigned" an assistant who had worked under the supervision of physiotherapists but did not have experience working alongside occupational therapists. This was her opportunity to "train" the assistant on-the-job as deemed appropriate. Over time, a trusting and effective professional collaboration was developed which has lasted to the present day. They were able to provide competent, ethical occupational therapy as an intraprofessional team with a clear understanding of each other's roles.

It was during her next career move to another acute care setting that the formal education program for occupational

therapist assistants and physiotherapist assistants (OTA & PTA) was initiated in the province. The author had again successfully trained an OTA on-the-job and was concerned about this being taken away from her, as assistants would now receive a formal college education. Her view was that she would educate assistants in what she believed they needed to know and that a formal education program was not necessary. She also felt somewhat threatened that the graduates may know more than she did, or at least be more current in their knowledge as it was approximately 18 years since she had graduated as an occupational therapist. When asked to offer a fieldwork placement for the first student cohort, the author declined, stating honestly that she was not comfortable with the ten-month formal education program. This response was accepted, but the head of the education program strongly encouraged the author to enter into a dialogue with the students who would be receiving fieldwork experiences from physiotherapist colleagues in order that she become more informed about the education program. She followed up on this and came to realize these students did have critical knowledge and skills – for example, they knew the difference between occupational therapy and physiotherapy (not common knowledge at that time for many healthcare professionals), and they were aware of various physical and mental health conditions throughout the lifespan in addition to appropriate treatment options for specific conditions. This discovery changed her thinking, and she did offer an OTA fieldwork placement the following year – and was extremely pleased with the student's performance! A few years later, the author was offered the opportunity to manage the same OTA & PTA education program, as well as to instruct the OTA courses. This offer was accepted and, as a result, further increased her understanding of the OTA role and the foundational knowledge they brought to occupational therapy. She also learned the benefits of their dual training in both occupational therapy and physiotherapy; a single OTA/PTA could therefore help clients who required treatments from both disciplines. The author believes that the turning point in her career was when she realized the critical contributions made by formally educated

OTA colleagues in assisting clients to reach their occupational participation goals.

As her own occupational therapist career continued to develop, the author began volunteering with the provincial occupational therapy association, including holding the position of President. Following this, she represented Saskatchewan as a Board Director within the Canadian Association of Occupational Therapists and has continued to be involved with CAOT on various committees and task groups, many related to increasing the involvement of OTAs within the profession.

Following a provincial relocation in 2001 to British Columbia, she was made aware that the understanding of, and confidence in, the OTA role varies within different jurisdictions. In some areas there is a greater knowledge but in other areas the inclusion of OTAs in occupational therapy service delivery is poorly understood and supported. She was fortunate to be given the opportunity to resume teaching OTAs through online delivery within the OTA/PTA Program at Medicine Hat College in Medicine Hat, Alberta in 2009 and currently continues in this instructor role. The online delivery format provides access to those residing in various locations across the country to pursue their career as an OTA/PTA from the environment where they reside, and the author continues to learn about the successes and challenges for OTAs within various jurisdictions. This experience encouraged her to create the goal of further advocating for the OTA role within this great profession across the country.

The idea of developing this book therefore came to fruition to assist all those involved in the profession of occupational therapy, including occupational therapists, occupational therapist educators, student occupational therapists, OTAs, OTA students, OTA educators, practice leaders, managers, and employers in the understanding of the OTA knowledge and skill base, critical thinking abilities, and potential roles in occupational therapy service delivery. In addition, it is imperative that all team members and those in management positions recognize, understand, and are supportive of the responsibilities and limitations of OTAs within each work environment. Furthermore, the provincial and

territorial occupational therapy associations need to understand the role of OTAs by providing appropriate resources and guidance for their members. It is also important for occupational therapist regulatory organizations to comprehend the OTA role, and ensure the public is protected through the safe delivery of occupational therapy by OTAs who are being supervised by regulated occupational therapists.

Many of the examples provided within the book's content are based on the author's clinical and professional experiences throughout her career, or from information that she learned through presentations and workshops either as a presenter or as a participant. Recognizing that the scenarios do not cover all areas of practice, she nonetheless is optimistic that the processes described will assist readers in applying the material to their individual work situations.

It is the author's intent that the information provided within this book will enable the occupational therapist and OTA optimal collaboration, both to enhance and evolve the profession of occupational therapy and to ensure that clients achieve their best sense of well-being.

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Canadian Association of Occupational Therapists. (2024). *Competencies for Occupational Therapist Assistants*. Retrieved from: <https://caot.ca/document/8146/Competencies%20OTA%20EN%20Feb%208%202024.pdf>

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I first want to acknowledge Dr. Patricia (Patty) Rigby, an occupational therapist colleague whom I initially met when we both worked in Saskatchewan. Patty was a dear friend and an esteemed colleague, with her research contributing to extensive growth within our occupational therapy profession. After Patty's relocation to work at the University of Toronto, we had the opportunity to reconnect at the 2015 CAOT conference in Winnipeg, Manitoba. I shared my involvement in advocating for increased recognition of OTAs within our profession but was unsure of additional ways to proceed. Patty strongly recommended that I write a book on the OT and OTA collaboration, which was the initial inspiration for this book. Unfortunately, Patty passed away in 2018 resulting in a devastating loss for our profession, and I want to take this opportunity to share how grateful I am for her encouragement to initiate this project.

I am extremely grateful to Sandy Gerber for sharing her expertise in developing effective collaborations through her book *Emotional Magnetism: How to Communicate to Ignite Connection in Your Relationships*. Sandy's description of the four emotional magnets she refers to as Safety, Achievement, Value, and Experience is a productive tool that assists in understanding our decision-making processes and how we interact with others. Sandy's knowledge of communication has been very beneficial to me in growing my personal relationships as well as within my career as an occupational therapist. As is reinforced in my book, building trusting relationships is necessary between occupational therapists and occupational therapist assistants (OTAs) to ensure that effective, safe, and ethical treatments are provided to all clients. Building collaborative relationships in the overall work setting is also necessary to ensure a safe working environment. My experiences over the years working in clinical practice, management, and as

an educator for therapist assistants have reinforced that effective communication with clients and families, colleagues, employers, partners such as medical vendors, and students is essential to achieve successful outcomes. After completing Sandy's quiz and learning that my emotional magnet is Safety, I am now more aware of how I approach individuals and groups. Sandy's book has also taught me how to better understand the emotional magnets of others for better connections. Thank-you, Sandy, for this outstanding resource!!

I have been fortunate to collaborate with many OTAs throughout my clinical career, which greatly improved the timely and positive outcomes for clients within our care. I want to acknowledge a specific OTA colleague, Avril McCready-Wirth, who contributed her extensive knowledge and strong skillset in a collaboration to occupational therapy within an acute care hospital setting in Regina, Saskatchewan. The treatments we provided as an occupational therapy team assisted our clients in receiving the treatment they required in an effective, safe, and timely manner within a welcoming environment, and I have included some of these shared experiences within the book. Another recent OTA connection I have developed is with Debra Cooper, an OTA/PTA in Toronto, Ontario. Debra is the Chair of the CAOT OTA/PTA Practice Network and she has made incredible progress in involving OTAs within our profession. She agreed to contribute to Chapter 2, *Developing Trusting Relationships*, from an OTA perspective and I am so appreciative of being able to include her areas of expertise.

I am extremely grateful to my friend Lori Amdam who has shared her healthcare expertise as it pertains to this book and who has been an excellent listener and supporter of this project. My instructor colleagues at Medicine Hat College have provided encouragement and insight throughout this process, and the team at CAOT offered excellent resources and assistance when I needed their guidance.

Last, but definitely not least, is the incredible support I have received from family. My brother Al Gillespie is skilled at writing and has been there when I needed his ideas on topics to include and how they should be presented. My daughters

Jennifer Magotiaux and Tanya Magotiaux, who grew up having to listen to their mom always talking about occupational therapy, provided some excellent thoughts and concepts throughout this process and gave me strong encouragement when I needed it. I am so very grateful for the ongoing support of my husband Jim Morris, who has consistently been there for me since I made the decision to write this book. He gladly offered a second pair of eyes to review my written drafts and make potential alterations from the beginning to the point of completion. Jim's son, Sean Morris, kindly gifted me an author resource, notebook, and pen when I decided to create this book and has continued to regularly check in on my progress. Jim's daughter, Laurie Gardner, consistently provides ongoing support and has been a positive influence throughout this project. I am more than grateful to have such incredible support from my family.

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OTA Education, Fieldwork, and Accreditation

Objectives

After completing this chapter, the reader will be able to:

- ◆ Understand the profession of occupational therapy.
- ◆ Recognize the role of occupational therapist assistants (OTAs) in occupational therapy service delivery within rehabilitation.
- ◆ Understand the history of OTA training in Canada.
- ◆ Recognize the foundational knowledge and skills of OTA graduates from an accredited education program.
- ◆ Be aware of culturally safe approaches learned by OTAs during occupational therapy service delivery.
- ◆ Learn of the benefits of intraprofessional education opportunities including fieldwork for both student occupational therapists and OTA students.

Key Terms

- ◆ Occupational therapy
- ◆ Occupational therapist
- ◆ Occupational therapist assistant (OTA)

- ♦ Occupational therapist competencies
- ♦ OTA competencies
- ♦ Cultural safety
- ♦ Accreditation standards
- ♦ OTA knowledge base
- ♦ Clinical practice skills
- ♦ Fieldwork education
- ♦ Role-emerging placements
- ♦ Intraprofessional fieldwork collaboration

Frequently Asked Questions (FAQs) are included at the end of this chapter.

What Is Occupational Therapy?

Occupational therapy is described on the CAOT website as “a type of health care that helps to solve the problems that interfere with a person’s ability to do the things that are important to them” (CAOT, 2024a). It promotes health, well-being, and quality of life by supporting access to, initiation of, and sustained participation in the things that clients want and need to do in their daily life, with the people and in the places that they want to participate in these occupations (Egan and Restall, 2022). Those working within the diverse occupational therapy profession assist clients of all ages and health status, who are experiencing or are possibly at risk of experiencing difficulties participating in their daily activities. A master’s degree in occupational therapy is the minimal educational requirement for entry-level education in Canada for occupational therapists.

Occupational therapy is a healthcare profession that is not clearly understood by the general public or by many other healthcare disciplines, managers, and employers within Canada. The author’s extensive clinical experience and numerous communications with colleagues over the years has indicated that the term “occupational therapy” is often met with confusion, along with the question “What does that mean?” Clients have expressed concern about what their occupational therapy treatment will

be, many believing it has to do with jobs within the context of the word “occupation.” This may also result in a panic reaction by older adults who frequently respond by saying “I don’t want to find a job – I have worked all of my life and now I am retired.” This can result in some clients declining occupational therapy treatment based on their interpretation of the meaning of “occupation.” Although initial occupational therapy was associated with work, the profession has diversified into several different practice areas. A clear explanation by the occupational therapist of the current significance and meaning of the term “occupation” as it relates to the therapy will provide clarity for the client and caregivers in increasing their understanding and how it will potentially assist them in meeting their needs. This transparency will also assist the client or substitute decision-maker to feel comfortable providing informed consent that is required to proceed with assessment and treatment planning.

It is also important to explain the occupational therapist’s role to the clients, including regulation if they reside in a Canadian province, and to discuss their collaboration with occupational therapist assistants within their work environment.

Occupational Therapist Assistants (OTAs) – Who Are They?

Literature reviews over the past 20 years indicate that the role of occupational therapist assistants (OTAs), or support personnel, continues to be an important component in clients’ ability to access occupational therapy, as well as to ensure cost-effectiveness.

- ♦ Occupational therapists must use innovative strategies, including developing partnerships with support personnel, to promote occupational therapy service delivery through improving accessibility and cost-effectiveness (von Zweck & Gillespie, 1998, p. 60).
- ♦ OTAs and occupational therapists working together can provide safe and quality care in economically uncertain healthcare environments (Blake, Park, & Brice-Leddy, 2015, p. 14).

- ♦ “With heavy workloads and an ongoing need for quick patient discharges from hospital, occupational therapists benefit from working with occupational therapist assistants (OTAs) to allow them more time for assessments and discharge planning” (Vo & Feenstra, 2015, p. 23).
- ♦ Early supportive discharge for complex neurology rehab patients through “collaboration with home care teams, and in particular the delegation of rehabilitation tasks to rehabilitation assistants, is elegantly simple but hugely effective” (Blandford, 2018, p. 29).

However, there needs to be an increased understanding by occupational therapists, practice leaders, and therapy managers of the skills and knowledge that OTAs bring to clinical practice. Occupational therapists need to feel confident in involving OTAs appropriately in client intervention programs. OTAs also need to understand their role and that they are accountable to the supervising occupational therapist when delivering client interventions.

The changes within our economic and political environments which are resulting in noticeable differences to the provision of Canadian healthcare, including rehabilitation, are forcing our profession to be open to alternative ways of delivering occupational therapy more cost-effectively, while ensuring that our clients receive efficient and ethical care. One approach to achieving this is through consistently involving OTAs in service delivery to enhance clients’ engagement in occupations.

The World Federation of Occupational Therapists (WFOT) 2019 Position Statement, *Occupational Therapy and Rehabilitation*, states that:

Occupational therapy has a substantial role in rehabilitation due to its:

- ♦ Appreciation of rehabilitation as a human right
- ♦ Person centred approach
- ♦ Expertise in understanding the complex interactions between the person/family/community, the environment and occupations

- ♦ Main goal being occupational engagement and full participation; and,
- ♦ Cost effectiveness for society.

(WFOT, 2019, p. 1)

This role can be augmented through building an effective occupational therapist and OTA collaboration in more work settings throughout the country.

Who are occupational therapist assistants or OTAs? On their website the Canadian Occupational Therapist Assistant and Physical Therapist Assistant Educators Council (or COPEC) states, “Occupational therapist assistants, or OTAs, work under the direction and supervision of occupational therapists to deliver assigned occupational therapy services. They work with clients on a one-to-one basis or in groups, to engage these individuals in meaningful activities, focusing on compensatory or remedial treatment interventions to either learn or re-learn how to achieve optimal independence and reducing barriers to function” (Canadian Occupational Therapist Assistant and Physical Therapist Assistant Educators Council, 2023).

However, as there is no regulation for OTAs in Canada and therefore no protection of title, it can be challenging to understand an OTA’s role in some environments. They can be identified in various ways such as support personnel, rehabilitation assistants, rehabilitation aides, occupational therapy assistants, OTA/PTAs – and the list goes on. The lack of protected title increases the confusion concerning an individual’s skills and knowledge. These can vary from someone who was trained “on-the-job” many years ago, to an internationally educated occupational therapist awaiting substantial equivalency to practice in Canada, to a graduate of a previous OTA/PTA certificate education program, to a graduate of a current accredited therapist assistant diploma education program. The role of an OTA can also be taken on by kinesiologists in private clinics, education assistants in the school system, or driver instructors in Driver Rehab programs on the condition that the therapy treatments they are providing have been assigned by a supervising occupational therapist who is accountable for the treatment being provided.