JOB SUMMARY

The Clinical Occupational Therapist II provides responsible professional and clinical leadership/supervisory occupational therapy work. Applies clinical knowledge and skills to plan, implement, co-ordinate, evaluate and oversee occupational therapy services. Work includes client management for the area of practice, input into program and policy development, project development, quality initiatives, participating in evidence-based practice, education, and community capacity building. Performs in the capacity of sole charge for a site of a multi-site organization, or are clinical lead/supervisory over other occupational therapy professional and support personnel.

Key and Periodic Activities

Provides clinical leadership/supervisory activities to Occupational Therapy Services either as a clinical lead/supervisory, or as a sole charge role. Responsibilities may include all or some of the following activities:

— Provides clinical delivery of occupational therapy (OT) services, including client management, referrals to other services/disciplines, screening, assessment, intervention, ongoing evaluation, treatment plan development, and discharge management. Communicates assessment findings to clients, families, and interdisciplinary team and documents assessment results, treatment plans, and outcomes.

— Provides program leadership and supervision by reviewing requests for service, prioritizing and managing waitlists, analyzing and evaluating caseload assignments, evaluating OT service delivery, recommending and implementing changes as required, overseeing equipment needs and ensuring safety checks and repairs.

— Supervises staff by organizing and assigning caseload, monitoring and approving leave, delegating clinical tasks, teaching clinical skills, proving feedback on performance, and assisting in performance planning. May participate in the recruitment and selection process. Develops and implements orientation programs.

— Participates in strategic planning and quality initiatives; contributes or develops, evaluates and implements standards of process, protocols, policies and procedures and evaluates OT services; participates in the audit and the peer review process. Participates in outcome measurement activities, program planning and development. Maintains workload measurement and program statistics and may provide input into and monitor the OT budget.

— Participates in various committees, patient rounds, and case conferences, acts as a consultant to
### Key and Periodic Activities

OT services, promotes the practice environment, and educates clients, community, and health professionals regarding OT services, practices, and clients care and needs. May conduct OT in-services, or lectures.

- Performs as a clinical lead or sole charge for specialized OT activities such as driving assessments; complex postural setting assessments including the design and fabrication of devices or equipment; work place assessments, co-ordinate recovery/return to work processes including accommodations; conduct home or work-site visits to facilitate daily living activities, teach clients vocational skills; perform ergonomic assessments and evaluate workstation reviews; and recommends, prescribes, or assesses therapeutic equipment, devices or aides.

- Advocates for funding sources which may involve completing applications.

- Attends meetings, case conferences, and professional practice groups.

- Keeps up to date on profession by reading current research in professional journals and attends continuing education teleconferences, workshops, and conferences.

- Participate in traveling clinics.

- Co-ordinates clinical placements and evaluates the work of students.

- Orders department supplies and equipment.

### SKILL

#### Knowledge

**General and Specific Knowledge:**

- Knowledge of:
  - Ongoing standards, codes, policies and trends and developments in field.
  - Design, development, delivery, and assessment of Clinical Occupational Therapy Services.
  - Program planning, policy development, and program evaluation.
  - Strategic direction and service delivery, as it relates to field.
  - Workload measurement tools and adaptive aides.
  - Adult learning principles.
  - Organizational policies and procedures.

- General knowledge of disciplines relating to Occupational Therapy.

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

- 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, basic life support (BLS), or training specific to program area and/or driver’s license, etc.

**Years of Experience:**

- Minimum: 2 to 3 years of experience.

**Competencies:**
— Ability to design, develop, implement and evaluate applicable therapy programs.
— Policy design and development.
— 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 (assessment process), ask questions, provide routine and complex information, gain the cooperation of others to ensure interventions are implemented, provide expert advice/counselling, promote the services and ideas, provide care/comfort/nurturing, advocate to government support services for client needs, resolve disputes, and provide formal presentation, education and training.

— 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 and to discuss programming or service issues with the manager.

— Most significant contacts are with clients and their families, manager, healthcare and community professionals, government services, and suppliers and sales representatives for equipment and therapeutic supports. Interactions also occur with government employees, and manager and may occur with professional associations and advisors.

**EFFORT**

**Physical Effort**

— The demands of the job occasionally result in considerable fatigue requiring the need for strength and endurance.

— Constantly lifting or moving objects or equipment up to 25 lbs. (i.e. therapy balls, mats, tables, benches, toys, wheelchairs, etc.), and occasionally assisting, supporting, or pushing and pulling clients up to and over 50 lbs. in wheelchairs, or in the case of children handling them to ensure their safety. May have to assist clients who occasionally are required to lift various objects over 50 lbs.

— 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. Gross motor skills and the use of heavy equipment are 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 and drives to and from sites/homes within the region. Regularly sits to perform clinical documentation or administrative functions on the computer and observe or counsel clients. When in clinic or therapy sessions may work in awkward or cramped positions.

— Fine/finger precision work is required when performing work on the computer, when teaching 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 for observation and monitoring of clients (some may be nonverbal) in therapy for both assessment purposes and their health and safety. Visual concentration is also required for writing reports/documents, performing work on the computer such as entering data in records and research, and for driving.

— **Auditory** concentration is regularly required to listen to clients and their families, co-workers and to perform specific tests (i.e. blood pressure of clients).

— **Touch** is regularly required when performing assessments on clients, and when handling clients during assessment. 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 administering and interpreting standardized tests, evaluating clients, monitoring clients for signs of distress or seizure activity, and entering a client’s data into the computer. 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 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.

— There are **time pressures and deadlines** to see referred or urgent clients, to document client’s information as per standards of practice, to submit workload measurements statistics, and to orientate and evaluate students. There may be multiple deadlines and time pressures when completing reports and to respond to client needs. **Interruptions** tend to occur throughout the day (i.e. phone calls from client’s wanting assistance), in order to accommodate clients’ requests.

— **Eye/hand coordination** is required for measuring, repairing, and adjusting of equipment and devices for clients, to teach skills, and to perform work on the computer.

— **Exact results and precision** are required when performing assessments, handling clients, identifying treatments or a plan of care, documenting client information, and completing workload measurement.

### Complexity

— Tasks and activities are different/unrelated and require the use of a broad range of skills and a diversity of knowledge (clinic work and clinical supervision).

— Typical complexities include assessing clients and developing customized programs to suit the needs of clients, working with clients in crisis, and developing strategies to assist clients with requirements/challenges. Administratively, complexity includes finding solutions to problems related to communication.

— Problems require a high degree of analysis and the use of evaluative and professional thinking to develop approaches to resolve occupational therapy related to specialized services. Must consider a wide range of factors and interdependencies from a clinical and administrative perspective.

— Complexities can typically be solved by defining practical solutions, following best practice guidelines and protocols from the Occupational Therapy Act, Occupational Therapy Professional Practice Council, Newfoundland and Labrador Occupational Therapy Board (NLOTB), the Canadian Association of Occupational Therapy (CAOT), legislation, and Acts.
As well, following guidelines, protocols, policies and procedures from the organization, legislation, internet, and advice from colleagues, manager, and clinical team.

**RESPONSIBILITY**

<table>
<thead>
<tr>
<th>Accountability and Decision-Making</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tasks and activities are somewhat prescribed and controlled.</td>
</tr>
<tr>
<td>Decisions related to patient care, caseload management, program development, student placements, assignment of tasks to OT support workers, team development, requests for maintenance of equipment, amount and frequency of travel, and some departmental purchases are made independently. In addition, administrative decisions such as supervision of staff, purchasing of supplies, and decisions related to arranging and attending interdisciplinary meetings are made independently. Provides input into the development of policies and procedures for the service or new programming and programs.</td>
</tr>
<tr>
<td>Requires approval for large equipment or resource purchases, overnight travel, travel claim reimbursement, schedule and policy changes, and media releases.</td>
</tr>
<tr>
<td>Has some discretion to interpret directions and apply guidelines related to the day-to-day operational issues for the service, committee participation, coaching and mentoring staff, changing or discontinuing client’s treatment, prioritizing waitlist, managing caseload, and using departmental funding for in-stock purchases.</td>
</tr>
<tr>
<td>Within predetermined limits has some discretion regarding clinical practice and treatment options, and specialized funding to purchase equipment or devices for clients. A high degree of discretion is exercised when determining a client’s needs and treatment, problem solving in crisis situations, program planning, scheduling services, and assisting a client in crisis.</td>
</tr>
<tr>
<td>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, and results. Provides guidance, advice, and supervision to other staff, as well as students and recommendations to the manager and/or OT lead regarding program activities.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tasks and activities have an impact on the immediate work area, within the department, outside the organization, and on clients.</td>
</tr>
</tbody>
</table>
| 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), to the client.

— Impact is also felt on the following resources: equipment, processes and systems, information, facilities, finances (i.e. equipment purchases), material and human resources, health and safety, and corporate image. The most significant impacts are on clients, and their health and safety.

— Errors that can occur when performing clinic activities include improper assessments; mistakes made when ordering equipment; or in measurements when assessing a home for modifications.

— Mistakes and/or errors are somewhat mitigated as licensure is required to practice and professional activities are monitored through a professional association. Also, guidelines and practices are followed within scope of practice. 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 job advice, guidance, and orientation to new employees, and on-the-job and formal classroom type training. May also perform team and project leader activities (i.e. act as the subject matter expert in the field), co-ordinate and supervise clinical placements, and involvement in organizing travelling clinics. May lead projects related to a speciality or clinical service or area.

WORKING CONDITIONS

Environmental Working Conditions

— Required to wear masks, gowns, and gloves when assessing infectious clients, 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. Follows working alone policy, and carries 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.

— Regularly exposed to usual/distracting noises, bodily fluids, odours, and infectious diseases. Occasionally exposed to physical dangers or threats, and to awkward/confining spaces when assessing clients and equipment. May travel to other sites (i.e. clinics, client’s home, schools, community buildings, etc.), sometimes in adverse weather conditions.