I. FUNDAMENTALS OF PRACTICE

1. Ethics: Adheres consistently to the American Occupational Therapy Association Code of Ethics and site’s policies and procedures.
   • Demonstrates work behaviors that reflect an understanding of professional standards and code of ethics appropriate to the practice environment.
   • Maintains appropriate boundaries.
   • Observes federal and state regulations relating to confidentiality.
   • Recognizes and appreciates that professional standards and code of ethics are an integral component of being a professional.
   • Identifies and addresses ethical concerns in the context of clinical supervision.

2. Safety: Adheres consistently to safety regulations. Anticipates potentially hazardous situations and takes steps to prevent accidents.
   • Demonstrates awareness and understanding of observation levels.
   • Reviews chart and/or seeks to understand information from appropriate sources to attend to changes in status; asks questions when in doubt.
   • Maintains sharps count.
   • Maintains an awareness of and adheres to all pertinent hospital safety policies and procedures.

3. Safety: Uses sound judgment in regard to safety of self and others during all fieldwork-related activities.
   • Aware of role during restraint and seclusions on the unit.
   • Demonstrates the ability to de-escalate patients.
   • Utilizes appropriate body mechanics in working with patients.
   • Identifies and reports safety concerns to supervisor and/or appropriate clinical staff.
   • Assesses own ability to provide safe treatment and identifies situations that require further knowledge and/or assistance.

II. BASIC TENETS OF OCCUPATIONAL THERAPY

4. Occupational Therapy Philosophy: Clearly communicates the values and beliefs of occupational therapy, highlighting the use of occupation to clients, families, significant others, and service providers.
• Able to explain occupational therapy at a level consistent with level of understanding.
• Able to articulate the role of occupational therapy to staff during treatment team meetings and when planning milieu activities.
• Selects activities that reflect an understanding of the patient’s interests and occupational values.

5. **Occupational Therapist/Occupational Therapy Assistant Roles:**
Communicates the roles of the occupational therapist and occupational therapy assistant to clients, families, significant others, and service providers.
- Able to communicate clearly the rationale for occupational therapy interventions provided to the patients, families, and the treatment team.
- Articulates an understanding of the role of the OTA in the behavioral health care setting in a manner that reflects a value and appreciation for the contribution of the OTA.
- Able to articulate an understanding of the role delineation between the various levels of professional and paraprofessional staff, including OTs, OTAs, and activity therapists.

6. **Evidence-based Practice:** Makes informed practice decisions based on published research and relevant informational resources.
- Able to discuss assigned readings in clinical supervision.
- Able to articulate rationale for selection of activities.
- Uses sound clinical reasoning backed by published research and/or relevant resources to make informed intervention decisions.

### III. EVALUATION/SCREENING

7. **Gathers Data:** Under the supervision of and in cooperation with the occupational therapist and/or occupational therapy assistant, accurately gathers relevant information regarding a client’s occupations of self care, productivity, leisure, and the factors that support and hinder occupational performance.
- Accepts responsibility and is aware of the importance of thorough data gathering.
- Demonstrates an understanding of psychiatric diagnosis and its impact on occupational performance.
- Selects and filters relevant and important information from all data collected.

8. **Administers Assessments:** Establishes service competency in assessment methods, including but not limited to interviews, observations, assessment tools, and chart reviews within the context of the service delivery setting.
• Accepts responsibility and is aware of the importance of accurate assessment.
• Observes standardized techniques in using standardized assessment tools.

9. **Interprets:** Assists with interpreting assessments in relation to the client's performance and goals in collaboration with the occupational therapist.
   • Able to objectively analyze and select pertinent data from assessment to develop an accurate profile of the patient's strengths and weaknesses.
   • Interprets data objectively and according to standardized or non-standardized method.
   • Uses sound clinical reasoning.

10. **Reports:** Reports results accurately in a clear, concise manner that reflects the client's status and goals.
   • Documents results of the assessment and reassessment following department policies and procedures.
   • Reports verbally and/or in writing unusual or critical information gathered during the assessment to the appropriate staff members.
   • Reports performance data objectively.
   • Contributes to the discharge plan in a manner that reflects an understanding of functional level at the time of the patient's discharge and the available environmental supports in the anticipated discharge setting.

11. **Establish Goals:** Develops client-centered and occupation-based goals in collaboration with the occupational therapist.
    • Recognizes the importance of client-centered practice and the involvement of family and caregivers in the treatment process.
    • Demonstrates clinical reasoning skills to identify steps to solve problems in patient treatment and to establish goals.
    • Grades and/or changes activity or method to achieve treatment goals.

**IV. INTERVENTION**

12. **Plans Intervention:** In collaboration with the occupational therapist, establishes methods, duration and frequency of interventions that are client-centered and occupation-based. Intervention plans reflect context of setting.
    • Chooses graded activities and/or preparatory activities that will be most effective in maximizing the patient's occupational performance and allows for ongoing assessment of the patient's functional capacity and readiness for discharge.
13. **Selects Intervention:** Selects and sequences relevant interventions that promote the client’s ability to engage in occupations.
   - Recognizes the value in using the most effective strategy to achieve individual goals and maximizes the patient’s interest in the treatment program.

14. **Implements Intervention:** Implements occupation-based interventions effectively in collaboration with clients, families, significant others, and services providers.
   - Offers occupations (occupation-based activity, purposeful activity, preparatory methods) that match the patient’s performance skills, patterns, context, activity demands, and patient factors.

15. **Activity Analysis:** Grades activities to motivate and challenge clients in order to facilitate progress.
   - Demonstrates the ability to identify more than one appropriate strategy for a given problem area.
   - Appropriately revises and adjusts selected activities to adapt to a change in the patient’s condition.

16. **Therapeutic Use of Self:** Effectively interacts with clients to facilitate accomplishment of established goals.
   - Develops and maintains rapport with patients, families, and/or significant others that enhances the therapeutic relationship.
   - Develops and maintains rapport with patients that enhances the therapeutic relationship.

17. **Modifies Intervention Plan:** Monitors the client’s status in order to update, change, or terminate the intervention plan in collaboration with the occupational therapist.
   - Demonstrates the ability to be flexible with intervention plans and adapting to changes in the milieu or patients in a timely manner.

**V. COMMUNICATION**

18. **Verbal/Nonverbal Communication:** Clearly and effectively communicates verbally and nonverbally with clients, families, and/or significant others, colleagues, service providers, and the public.
   - Develops and maintains rapport with patients, families, and/or significant others that enhances the therapeutic relationship.
   - Communicates appropriate information to interdisciplinary treatment team in a professional manner.

19. **Written Communication:** Produces clear and accurate documentation according to site requirements. All writing is legible, using proper spelling, punctuation, and grammar.
• Progress notes are concise and reflect information on occupational performance.
• Reports unusual and/or critical information in writing.

VI. PROFESSIONAL BEHAVIORS

20. **Self-Responsibility**: Takes responsibility for attaining professional competence by seeking out learning opportunities and interactions with supervisor(s) and others.
   • Defines personal expectations and goals for the affiliation.
   • Self-directed in determining learning strengths and challenges.

   • Adjusts behavior in response to cues and direction from supervisor, staff, and the environment.

22. **Work Behaviors**: Demonstrates consistent work behaviors including initiative, preparedness, dependability, and work site maintenance.
   • Consistently maintains professional behaviors in the workplace. This includes, but is not limited to, taking initiative, being prepared and dependable, and assuming a professional demeanor.
   • Arrives on time and consistently completes work assignments on time.

23. **Time Management**: Demonstrates effective time management.
   • Organizes treatment and nontreatment responsibilities in order to ensure that responsibilities are completed in a timely and professional manner.

24. **Interpersonal Skills**: Demonstrates positive interpersonal skills including but not limited to cooperation, flexibility, tact, and empathy.
   • Consistently maintains professional behaviors in the workplace, including, but not limited to, professional appearance, showing respect for other professionals, and presenting in a professional and confident manner.

25. **Cultural competence**: Demonstrates respect for diversity factors of others including but not limited to socio-cultural, socioeconomic, spiritual, and lifestyle choices.
   • Respectful and open to diverse backgrounds and ideas in the treatment setting. Seeks to understand the patient’s perspective and context when collaborating in treatment. Careful to not impose one’s own beliefs and values on clients.
   • Able to access translation services as needed.

*Developed 8/04*