





POSITION STATEMENT ON DUAL PRACTICE

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Preamble

The practice of more than one profession by the same practitioner raises questions regarding the regulation and accountability of a practitioner who is functioning in dual roles. In these circumstances there is potential for clients to be misled with respect to the qualifications or role of the service provider. This position statement has been developed to assist therapists who engage in dual practice, the practice of more than one profession, with decisions about when it is appropriate to include interventions in their occupational therapy practice and when it is appropriate to separate their practice and cease to hold themselves out as occupational therapists.

Definitions

Dual Practice: A therapist is engaging in dual practice when he or she is practicing as an occupational therapist and also as another regulated or unregulated practitioner.

Regulated Health Profession: Any discipline covered by the *Regulated Health Professions Act (RHPA)*

Scope of Practice

The scope of practice of occupational therapy has been clearly defined in the Act as follows:

The practice of occupational therapy is the assessment of function and adaptive behaviour and the treatment and prevention of disorders which affect function or adaptive behaviour to develop, maintain, rehabilitate or augment function or adaptive behaviour in the areas of self-care, productivity and leisure.

The scope of practice of occupational therapy is broad and includes the application of interventions that are considered within the public domain. As such many occupational therapy interventions may be perceived to also be within the scope of practice of another profession. More and more often, occupational therapists are attending educational programs and augmenting their occupational therapy knowledge base with the knowledge derived from other bodies of knowledge, such as ultrasound, aromatherapy and behaviour modification. These enhanced skills are often used within the scope of practice of occupational therapy to meet the needs of clients. It is expected that this trend will increase over time as alternative therapies and other forms of intervention become more common place and are considered useful in the

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management of occupational dysfunction. However, the question arises as to when it is more appropriate to cease to hold oneself out as an occupational therapist and to instead declare oneself as a practitioner of another regulated or unregulated provider group.

College Jurisdiction

The mandate of the College of Occupational Therapists of Ontario is to protect the public. The College has an obligation to ensure that unqualified individuals do not perform occupational therapy services and that the services of its registrants conform to an appropriate quality standard. The College of Occupational Therapists of Ontario only has jurisdiction over its registrants. As such, the College's investigations must be focused on the practice of occupational therapy and the legislated scope of occupational therapy practice. Dual practice by registrants of the College of Occupational Therapists of Ontario creates confusion surrounding issues of jurisdiction and impairs the resolution of complaints in the public interest. Through the appropriate separation of practice the registrant ensures that the public is fully aware of the profession they are practicing at a given time and the related obligations. In addition the public is more likely to understand which, if any, College the practitioner is responsible to for his or her practice. In addition, if a complaint is lodged, the College is more easily able to determine to what extent it should scrutinize the alleged conduct.

Registrant Accountability

Registrants are responsible for ensuring that they have the knowledge, skills and abilities to provide the services they choose within their occupational therapy practice. Furthermore, they are responsible for ensuring that they are functioning within the scope of practice of occupational therapy when using the title "Occupational Therapist" or its abbreviation.

As stated earlier, any assessment or intervention that does not include one of the controlled acts specified in the RHPA is considered to be in the public domain. As occupational therapy is within the public domain, and where an occupational therapist augments his or her practice with a public domain skill, the occupational therapist would be seen to be practicing within the scope of the profession. For example, if a therapist uses aromatherapy to assist a client with stress management during occupational performance this would not be considered dual practice. If, however, an occupational therapist uses aromatherapy to assist a client with relaxation in labour and delivery, he/she would be functioning outside the scope of practice of occupational therapy and would be required to distinctly separate this service from all occupational therapy services.

When intervention includes a delegated controlled act that is within the scope of practice of occupational therapy and the competency of the therapist, the therapist may include the act within his/her occupational therapy practice. If, however, the therapist is also a registrant of another health regulatory College that has authority to perform a controlled act, and he or she is not receiving delegation for that act, it is imperative that the therapist separate his or her practice and not hold him/herself out to be an occupational therapist when performing that act.

The application of any knowledge-based skill for a purpose that does not fall within the scope of practice of occupational therapy is not considered occupational therapy and a registered OT should not perform the skill in his or her capacity as an OT.

Additional Issues

To adhere to the guidelines in this document it is important to also address the following issues:

A) Business Practice

When engaged in dual practice, an occupational therapist must ensure that the client is aware of which profession he or she is practicing at any given time, thereby assisting the client in understanding which college, if any, has primary jurisdiction over his or her performance. This is best achieved by booking separate appointments, issuing separate bills, etc.

B) Maintenance of Records

In the circumstance of dual practice, the maintenance of separate records is advised. This would include, but is not limited to, all clinical, financial and administration records. Appointment schedules should also be maintained separately. Occupational therapists are responsible for ensuring that OT records are maintained according to College guidelines.

C) Conflict of Interest

The potential for conflict of interest issues to arise is heightened when engaging in dual practice. It is particularly important that the practitioner is not seen to be referring to him or herself for personal gain. Individuals participating in dual practice should manage the potential for conflict of interest according to the College guidelines on conflict of interest.

D) Practice Hours

When reporting currency hours at the time of annual registration the registrant is only permitted to include hours when he or she has practiced as an occupational therapist.

Summary

Occupational therapists actively developing and augmenting their practice must give careful consideration to whether they are utilizing these skills within the scope of occupational therapy. This position statement serves as broad guidance on delineating dual practice when required.