



## THE CONSCIOUS COMPETENCE MODEL

Store at Tab 5 of your Registrant Resource Binder

The foundation for the QA Program is the concept of *conscious competence*. To be fully competent, it is not enough just to do the right things. The practitioner must intentionally consider all the issues and be able to explain the rationale and intent behind her/his actions. Moreover, the practitioner should engage in this conscious decision-making in advance, rather than explaining after the fact.

As a professional, each occupational therapist (OT) is accountable for her/his own actions and practice. OTs are required to clearly demonstrate that they serve the client's best interest. An OT is expected to be intentional about the quality of practice she/he provides. Not only does she/he select the appropriate actions, but can explain fully the alternatives considered and why a particular decision and course of action was chosen. This is called *conscious competence*.

### CONSCIOUSNESS

Consciousness means that an individual deliberately considers all the relevant factors in making decisions or taking action. This applies to clinical decisions, professional behaviours and practice processes. As one gains experience, there can be a tendency to act based on habit or previous successes. While it is clearly important to benefit from experience, each situation has unique aspects and involves unique clients or stakeholders. Therefore, while you may reach a similar decision in the end, using a conscious decision-making process will maximize the potential for making the best decision. It is also important to be able to explain to others why you are making a specific choice in a specific situation. All Registrants should strive to be not only competent, but consciously competent.

Consciousness is also the first step in learning. In order to improve, an individual needs to become aware, or conscious of what she/he knows or does not know. This can occur in different ways; for example, through self-reflection, learning from experience or feedback from others).

### COMPETENCE

Competence is the capability to complete a task successfully. An individual may be highly competent in one sport, such as golf, but may not be competent in another sport, such as tennis. Competence varies by skill and task, and applies to professional behaviours, interpersonal and team skills, as well as technical skills. The term *essential competencies* describes the knowledge, skills and abilities required for an OT to practice safely, effectively, and ethically.

### THE CONSCIOUS COMPETENCE MODEL

- Unconscious Incompetence
- Conscious Incompetence
- Unconscious Competence
- Conscious Competence

## THE CONSCIOUS COMPETENCE MODEL

The four quadrants of the model are described as follows:

### UNCONSCIOUS INCOMPETENCE

An individual who is unconsciously incompetent does not realize that she/he does not know how to do the task or does not understand that she/he does not have the authority to perform the procedure. For example, an OT may perform a controlled act without appropriate delegation because she/he is unaware that it is a controlled act. This is unconscious incompetence.

### CONSCIOUS INCOMPETENCE

A consciously incompetent practitioner is aware that she/he does not know how to perform the task. For example, the OT above may become aware that she/he has inadvertently done a controlled act. She/he has moved to the stage of conscious incompetence. This stage is essential for learning to take place. Most practitioners will take feedback seriously, decide to learn more about controlled acts, and apply that knowledge to their practice. They will soon become consciously competent.

### UNCONSCIOUS COMPETENCE

A person who is unconsciously competent does a task well, but likely could not explain how to perform the task to others. If the individual's current approach were to become less successful, she/he would not be able to correct the situation.

For example, an OT may intuitively develop a particular approach over a period of time. In many situations the approach is successful, but sometimes it works less well. Unless the OT understands each component of the approach, can identify what is not working and make adjustments accordingly, she/he will be powerless to make the changes required to be successful in that situation.

Often, the unconsciously competent practitioner will repeat the original approach in a more forceful way rather than make adjustments. Adapting to a changing work environment can often be difficult. An individual who is unconsciously competent needs to become consciously competent.

### CONSCIOUS COMPETENCE

A consciously competent practitioner can perform a task well and understands the skill behind the task. This individual can explain what works and why. She or he can deliberately change course when needed because she/he understands the basic skills required. For example, the consciously competent OT will assess each situation and deliberately select a course of treatment and an interpersonal approach that is most likely to ensure success.

### The Consciously Competent Practitioner

One purpose of the College and the Quality Assurance Program is to facilitate the ongoing competence of its Registrants. The goal is for every occupational therapist to be consciously and intentionally competent about the practice of the profession.

A consciously competent practitioner is one who:

- **knows her/his strengths and limits;**
- **knows the guidelines and rules;**
- **makes good choices consciously and deliberately; and**
- **is able to explain why she/he took a particular course of action.**

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