



College of Occupational
Therapists of Ontario

STANDARDS FOR THE SUPERVISION OF STUDENTS





STANDARDS FOR THE SUPERVISION OF STUDENTS

Store at Tab #2 of your Registrant Resource Binder

Introduction

The *Regulated Health Professions Act* (RHPA, 1991) acknowledges occupational therapists as autonomous practitioners. Regulation of the profession also requires that occupational therapists practice according to established standards and principles of practice, and apply these consistently in a responsible and intentional manner within the health care environment. Although each area of practice has its own unique characteristics and issues, the principles that guide practice are constant and apply across all environments.

As one component of their responsibility and commitment to the profession of occupational therapy, occupational therapists actively participate in the education of student occupational therapists through fieldwork supervision. In the interest of the public, as well as the profession, the College of Occupational Therapists of Ontario supports occupational therapists as student supervisors and emphasizes their continuing accountability in this role for safe and ethical practice. In assuming the role of student supervisor it is expected that responsibility to the client will be paramount when facilitating student learning.

Occupational therapists assign the tasks of providing components of care to students. Assigning is the allocation of responsibility for the delivery of particular aspects of occupational therapy service components, which are not controlled acts as defined in the *Regulated Health Professions Act* (RHPA, 1991).

The purpose of this document is to ensure occupational therapists in Ontario are aware of the minimum expectations for supervision of Student Occupational Therapists, Student Occupational Therapist Assistants, and students from other health professions.

College publications contain practice parameters and standards which should be considered by all Ontario occupational therapists in the care of their clients and in the practice of the profession. College publications are developed in consultation with occupational therapists and describe current professional expectations. It is important to note that these College publications may be used by the College or other bodies in determining whether appropriate standards of practice and professional responsibilities have been maintained.

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APPLICATION OF THE STANDARDS FOR THE SUPERVISION OF STUDENTS

- The following standards describe the minimum expectations for occupational therapists when providing supervision to students.
- The performance indicators listed beneath each standard describe more specific behaviours that demonstrate the standard has been met.
- While it is not expected that all performance indicators will be evident all the time, it is expected that they could be demonstrated if requested.
- It is expected that occupational therapists will always use their clinical judgement to determine how to best meet client needs in accordance with the standards of the profession.
- It is expected that occupational therapists will be able to provide a reasonable rationale for any variations from the standard.

OVERVIEW OF THE STANDARDS FOR THE SUPERVISION OF STUDENTS

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1. Accountability

To ensure public protection, as well as safe, ethical and quality practice, Registrants supervising students will assume professional responsibility and accountability for the occupational therapy care provided by students. Registrants will balance the need to encourage students' autonomy and learning with a level of supervision appropriate to the occupational therapy care assigned, and the knowledge, skill and clinical reasoning of the students. Registrants are accountable to the College for supervision and the assignment of tasks to students.

In preparing the student for direct client care, occupational therapists may consider activities such as: discussing the client situation with the student before involving them with the client, providing appropriate education materials, and practising assessments/intervention sessions. OTs may also utilize such strategies as direct observation, case conferencing, written assignment, and written documentation as well as de-briefing following the student's direct care activity.

Standard 1

The occupational therapist supervising students will assume professional responsibility and accountability for the safe, appropriate, and ethical care provided by students.

Performance Indicators

The occupational therapist will:

- 1.1 Have knowledge of the student's level of skill, knowledge, experience and confidence through dialogue with the student and information from the university, prior to involving students in providing services to clients;
- 1.2 Ensure sufficient time is provided to the student for training and education in assigned service components to facilitate safe and ethical care;
- 1.3 Be responsible for the decision to assign appropriate service components to the student in terms of the client's status, related environmental factors, and the student's level of competency to ensure that client care will not be compromised;
- 1.4 Prepare the student for direct client care using activities such as practice sessions/interventions, discussions of the client's situation, and provision of education material;
- 1.5 Assume responsibility in assessing the current and ongoing competence of the student to perform assigned occupational therapy service components;
- 1.6 Determine accountability for the student's assessment and evaluation, when more than one OT is working with the student;

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- 1.7 Be aware of how the client is progressing and responding to the assigned service components being provided by the student;
- 1.8 Put strategies into place to assist with balancing the student supervision requirements with client care requirements;
- 1.9 Discuss any concerns with the client that they may have regarding the services provided by the student.

2. Registrant Competency/Experience

In order to provide a valid learning experience and evaluation of the student, the occupational therapist should have the competency to perform the assigned intervention themselves. Registrants should undertake to provide student supervision if following a reflective process, they feel competent and confident to do so.

Occupational therapists who move into a new area of practice will determine their level of competence to undertake supervising a student in the new practice area. OTs may consider sharing responsibility for student supervision, if appropriate, or necessary, when providing student supervision for the first time.

Standard 2

The occupational therapist will have at least one year's experience and have an appropriate level of knowledge, skill, judgement, and experience to ensure that he or she is competent to perform and supervise any clinical intervention, service or activity that is assigned to a student.

Performance Indicators

The occupational therapist will:

- 2.1 Have practised occupational therapy for at least one year or for more experienced occupational therapists, feel comfortable in their current setting prior to offering a clinical placement to students.
- 2.2 Ensure competency to provide student supervision by engaging in self-reflection and considering their level of skill and knowledge within the setting in which the OT is providing student supervision;
- 2.3 Seek support of their supervisor, professional practice leader, or other experienced OTs, if necessary.

3. Supervision of Students

Standard 3

The occupational therapist will provide students with an appropriate amount, type and level of supervision based on the student's competence, level of education, and based on the type of interventions that the student will perform.

Performance Indicators

The occupational therapist will:

- 3.1 Be familiar with the student's educational curriculum, including the OT program's philosophy and expectations;
- 3.2 Be aware of the student's progression within the educational program through discussions with the student and review of materials from the university, considering the student's:
 - 3.2.1 Level of knowledge of the OT curriculum,
 - 3.2.2 Current learning needs, previous clinical experiences, perceived weaknesses and apparent strengths;
- 3.3 Orient the student to the facility, the client caseload/workload, and each assigned client/task;
- 3.4 Evaluate the knowledge, skills and clinical reasoning of the student being supervised prior to assigning client care;
- 3.5 Ensure that the duties assigned to students are commensurate with the complexity of the environment/practice setting including consideration of the student's:
 - 3.5.1 Knowledge, skills and clinical reasoning,
 - 3.5.2 Level of education,
 - 3.5.3 Experience, and
 - 3.5.4 Confidence;
- 3.6 Develop, with the student, and document a learning process/plan appropriate to the student's level of knowledge, skills and abilities, utilizing a process of observation, instruction, evaluation and feedback in keeping with their current level of education or the expectations of the university program for this level;

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- 3.7 Determine and apply the most appropriate methods of supervision and communication with the student for all assigned occupational therapy service components;
- 3.8 Identify student performance issues and take appropriate action leading to a resolution of the situation;
- 3.9 Provide an appropriate amount of time for supervision of students, as mutually determined between the supervisor and the student;
- 3.10 Have a process in place for supervision and communication with the student for times when the occupational therapist is not physically present or available.

4. Risk Management/Safety Considerations

The occupational therapist will be responsible for ensuring that the supervision of students is delivered at an appropriate level based on consideration of the activities that the student will perform. This includes minimizing and managing any potential risk of harm to the client and providing safe quality care. Examples of high-risk situations may include but are not limited to transfers, clients with aggressive behaviours, suicidal ideation, visiting clients in the community when alone or when the client record indicates that there are risk elements in the client's home.

Issues of safety and risk management should be considered when determining an appropriate ratio of students to occupational therapists.

Standard 4

The occupational therapist will ensure that risk management issues are managed with the student in order to minimize any potential risk of harm to the client, student, the supervisor and others in the provision of safe, quality care.

Performance Indicators

The occupational therapist will:

- 4.1 Discuss the risks and benefits associated with assigning service components to the student with stakeholders as necessary to ensure safe and quality client care, i.e. the supervisor, manager, professional practice leader, the employer, the client/family, other team members, other stakeholders;

- 4.2 Identify potential risk indicators, safety concerns, and high-risk situations in general, that the student may encounter;
- 4.3 Evaluate the student's skill and ability to handle high-risk situations, determine and adjust the appropriate amount of supervision necessary to minimize risk;
- 4.4 Manage, communicate and discuss the risks for each client, before assigning service components to the student;
- 4.5 Debrief with the student regarding their perceptions of potential risks following a treatment session, especially when the OT may not have been present;
- 4.6 Provide the student with appropriate training, support and education in minimizing risk, and de-escalating risk situations in placements which may have high risk;
- 4.7 Develop an action plan with the student to address potential issues of risk and unsafe situations, such as being physically present with the student or until the student demonstrates competency in managing the risk situation;
- 4.8 Ensure the interests of the client and the provision of safe, ethical and quality practice are not compromised by providing student supervision;
- 4.9 Contact the student's university program if the student displays unsafe or risky behaviours that cannot be addressed by the supervisor, or if the supervisor has ongoing performance concerns regarding the student.

5. Informed Consent

The occupational therapist will ensure that there is compliance with the College's *Standards for Consent* (COTO, 2008) regarding the care delivered by all students. Clients should be made aware that some service components will be provided by a student and that their consent is required prior to the student engaging in delivering any intervention.

Definition

Intervention – An activity in which the OT engages with the client (e.g. assessment, treatment, education).

Standard 5

The occupational therapist will ensure compliance with the *Standards for Consent* (COTO, 2008) when occupational therapy interventions are assigned to students.

Performance Indicators

The occupational therapist will:

- 5.1 Obtain and document informed consent from clients or their substitute decision-makers prior to involving students in the provision of service to clients;
- 5.2 Provide clients with detailed and specific information about the role and activities the student will perform, clarifying the responsibilities of the Registrant and the student;
- 5.3 Indicate to the client that there is the opportunity to refuse consent to involve students in their care;
- 5.4 Indicate to the client that consent for student involvement in their care may be withdrawn at any time.

6. Record Keeping

The occupational therapist will ensure that there is compliance with the *Standards for Record Keeping* (COTO, 2008) regarding the documentation performed by students, including their name and student status. Occupational therapy students will use the title *Student Occupational Therapist* or *Student OT* to ensure the public and clients are well informed.

Standard 6

The occupational therapist will maintain professional accountability for record keeping and documentation of care provided by students in compliance with the *Standards for Record Keeping* (COTO, 2008).

Performance Indicators

The occupational therapist will:

- 6.1 Ensure that the assignment of occupational therapy service components to the student, noting the student's full name, and their designation, is documented;
- 6.2 Document the client's consent to receive components of their occupational therapy programming from the student;

- 6.3 Ensure the student is informed of expectations related to record keeping, such as medical/legal issues, clinical accuracy, program evaluation needs, and the standards of the occupational therapy service, the program and the facility;
- 6.4 Review student documentation to ensure it reflects an accurate clinical analysis, client progress, safe and ethical recommendations/results, and administrative accuracy and compliance;
- 6.5 Co-sign student record keeping.

7. Professional Boundaries

The occupational therapist is responsible for maintaining professional boundaries in the protection of the public. Students, as members of the public, should be respected and treated in a professional manner. OTs have a responsibility to provide an objective evaluation for the student and therefore should take care to ensure that relationships with students remain professional and respectful. OT supervisors should be able to delineate the difference in behaviour between colleague and friend, in order not to confuse the student regarding the OTs manner. This is important especially in informal or close knit community practice settings.

OTs need to keep the balance between being encouraging, open, supportive and professional in order to maintain appropriate boundaries. Establishing clear learning goals and expectations may help to clarify potential boundary issues.

It is important to maintain professional boundaries to balance the ability to provide constructive feedback as well as to carefully point out to students the role differential, if the student oversteps the boundary. The supervisor and student need to be open to reflecting on their reactions to situations that involve boundaries, to discuss issues constructively and facilitate these occurrences into a positive learning experience for the student.

Standard 7

The occupational therapist will ensure that professional boundaries are maintained in the supervision of all students and in accordance with the *Standards for Professional Boundaries* (COTO, 2009). Occupational therapists should be aware of and manage the potential of boundary risks inherent in various situations involving the occupational therapist and student.

Performance Indicators

The occupational therapist will:

- 7.1 Establish and maintain professional boundaries with students at all times, showing respect for students;
- 7.2 Establish and present clear roles and responsibilities early in the placement for the OT Supervisor and the student;
- 7.3 Be aware of the potential for boundary violations in personal, private or prolonged interactions (e.g. where part of the OT placement takes place in the OTs home office, or when prolonged contact occurs in placements where driving to the client's home occurs);
- 7.4 Be aware of the potential for boundary violations in situations where the OT and student may spend time in social activities outside of the placement facility;
- 7.5 Manage communications that may lead to a boundary crossing, such as sharing of personal information;
- 7.6 Demonstrate respect for the student as a future professional and colleague by ensuring tasks assigned are appropriate and geared to meet the student's learning needs, not the personal needs of the supervisor;
- 7.7 Decide whether or not it is appropriate to supervise students with whom there has been a prior relationship such as family or friendship which may result in a conflict of interest;
- 7.8 Refrain from developing a personal friendship or a romantic relationship with a current student on placement.

8. Use of Title

Standard 8

The occupational therapist will ensure that students use the title *Student Occupational Therapist*, *Student OT*, *Student Occupational Therapist Assistant*, *Student OT Assistant*, or the title of their student professional designation to clearly identify their student status.

Performance Indicators

The occupational therapist will:

- 8.1 Ensure that students present their credentials clearly and transparently with clients, other professionals and stakeholders.

9. Role Emerging Placements

The occupational therapist may supervise a student who is providing occupational therapy service off-site, including in a role emerging placement. A role emerging placement is a setting that does not typically provide occupational therapy services. In this type of placement the student is coordinated and supervised by an off-site occupational therapist who is not employed in the setting. The student is assigned to a site staff person as a contact for site concerns. Important issues with a role emerging placement are safety and consent issues, which must be planned for and addressed. Care should be taken to discuss how the standards for occupational therapy services will be met if the supervisor is not present. It is important to reflect on the type of service provided, the risks to client and the amount of supervision that can reasonably be provided prior to agreeing to supervise students in a role emerging placement.

In the instance of a role emerging placement where there may not be an identifiable client to assess and treat, the OT will need to consider how the standards of practice apply or may not apply in this setting. The occupational therapist should clarify these issues through discussion with the student and site supervisor.

Standard 9

The occupational therapist, when supervising student occupational therapist(s) in a role emerging placement, will ensure there is appropriate accountability, safety and collaboration with the placement site and the student.

Performance Indicators

The occupational therapist will:

- 9.1 Consider the following issues:
 - 9.1.1 Their own knowledge, skill and experience in supervising students;

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- 9.1.2 Their own knowledge, skill and experience in the role emerging placement's area of practice;
 - 9.1.3 Their level of comfort and ability to adapt to the less structured nature of role emerging placements;
 - 9.1.4 Their comfort with the potential risk issues related to supervising while not usually being on-site;
 - 9.1.5 Their ability to communicate with students and other disciplines and professions from a distance.
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- 9.2 Meet with the student and on-site supervisor at the beginning of the placement to outline appropriate roles for the student within the OT scope of practice;
 - 9.3 Develop a communication and supervision plan, both on and off-site, with the on-site supervisor and the student;
 - 9.4 Consider the student's skills and confidence in order to determine the appropriate level and amount of supervision;
 - 9.5 Plan specific details with the on-site supervisor and student regarding emergency and safety situations, and a secondary contact in the event that the primary supervisor is not available.

10. Controlled Acts

The *Guideline on Controlled Acts and Delegation* (COTO, 2002) outlines the controlled acts that may be delegated to occupational therapists. Students are not permitted to perform controlled acts authorized to occupational therapists by an exemption in the RHPA (e.g. acupuncture). At the current time, students may perform controlled acts delegated to the OT supervisor, under the supervision of the supervisor.

Delegation is a term used in the *Regulated Health Professions Act* (RHPA, 1991) that has been understood as the transfer of the legal authority to perform a controlled act or a component of a controlled act to a person regulated or unregulated, who is not normally authorized to perform the act. It is not considered delegation when a student becomes involved in a controlled act. The student is performing the controlled act under the supervision of the occupational therapist, who has been delegated the controlled act. The person delegating the controlled act should be made aware that a student will be performing the controlled act. This gives the delegator an opportunity to voice any concerns and have these addressed prior to the act being performed. When occupational therapists have direct access to a controlled act, delegation of the act is then not required, and students can be involved in the performance of the controlled act, with the supervision of the supervising therapist.

Standard 10

The occupational therapist may include the student occupational therapist in the performance of a controlled act that has been delegated to the occupational therapist, or to which the OT has direct access, when the student has an appropriate level of competency and confidence and the person delegating the controlled act to the OT is aware that the student will be involved.

Performance Indicators

The occupational therapist will:

- 10.1 Be competent to perform the controlled act, prior to involving a student in the performance of any controlled act;
- 10.2 If the controlled act has been delegated, ensure that the delegator is informed that the student will perform the act;
- 10.3 Be responsible and accountable to ensure that the student is capable of providing safe and ethical care when performing a controlled act;
- 10.4 Determine the student's competence, confidence and experience prior to including them in carrying out the controlled act;
- 10.5 Ensure that direct supervision is provided to the student.

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Legislative References:

The Occupational Therapy Act (1991)

The Regulated Health Professions Act (1991)

College References:

Standards for Consent (COTO, 2008)

Standards for Record Keeping (COTO, 2008)

Practice Guideline – Supervision of Student Occupational Therapists (COTO, 1996)

Use of Title (COTO, 2001)

Standards for Professional Boundaries (COTO, 2009)

Other References:

Oulikian, S., Irshad, D., Greenwood, H., Student Occupational Therapists, (2010) McMaster University Recommendations for the College of Occupational Therapists of Ontario: Standards for Supervision of Students, Research and Survey Findings.

Appendix A- Public Complaints

When a complaint is received by the College about the conduct and/or practice of a student, the supervision of that student by the registered occupational therapist will be investigated (with the approval of the complainant).

The occupational therapist is accountable to the College for the supervision of the student's practice within the guidelines as outlined above.

As student occupational therapists are not registered with the College, the individual making the complaint about the student will also be referred, by the College, to the appropriate university, where a review of the student's performance and conduct can be appropriately addressed.

Information related to unethical conduct of a student will, depending on the seriousness of the risk to the public, be investigated and a report held on file for the purpose of review at future registration with the College. An applicant with previous information on file will be provided an opportunity to respond to the College (e.g., as to its current relevance to registration) at the time of registration when a panel will review the application.



