

First National Conference of Occupational Therapists working in Diverse Settings

School of Health Sciences – September 7th 2016

#UOBDIVOT16



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Evidencing your

occupational therapy

practice for HCPC registration



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Diverse Practice in Health Professions

What does the



say ?



CPD:

“You must undertake CPD to stay registered with us. We have set standards which your CPD must meet. Every time you renew your registration, you will need to confirm that you have met these standards.”

Source: Information for registrants:
Continuing professional development and your registration
(HCPCb, 2015; 2)



Standards of Proficiency

“When you are registered for the first time, this means that you meet all of our standards of proficiency for your profession.”

“After you have been registered with us, we recognise that your scope of practice may change so that you can no longer meet all of the standards of proficiency for your profession.”

Source: Information for registrants:
Continuing professional development and your registration
(HCPCb, 2015; 11)



Changing Scope of Practice

“As long as you make sure that you are capable of practising safely and effectively within your scope of practice, and do not practise in areas where you are not able to do so, a changing scope of practice will not normally cause us concern.”

Source: Information for registrants:
Continuing professional development and your registration
(HCPCb, 2015; 11)



HCPC Reference to Practitioners working in Diverse Settings and Emerging roles

“we have [...] received a number of enquiries from people who [...] have moved into a role that is related to their profession, but not directly part of it.”

“We do not want to exclude people from the Register who work in these kinds of newer roles, or people who are using their professional skills in some capacity but are worried that they will not be considered to be ‘practising their profession’ in a traditional, direct way”

Source: Information for Professional Returning to the register:
Returning to Practice (HCPCa, 2012; 11)



Definition of ‘practising your profession’

“For the purposes of renewing registration, or determining whether return to practice requirements need to be met, we have defined ‘practising your profession’ as”

“drawing on your professional skills and / or knowledge in the course of your work”

“You will need to make a personal decision about whether you are doing this.”

Source: Information for Professional Returning to the register:
Returning to Practice (HCPCa, 2012; 11)



Standards of Proficiency Occupational Therapists

Standards of proficiency 1 to 12 and 15 are generic
and relevant to all health professions



Standards 1 – 12 + 15:

1. safe and effective practise safely within your scope of practice
2. legal and ethical practise of your profession
3. maintain fitness to practise
4. autonomous professional, using own professional judgement
5. awareness of culture, equality and diversity
6. non-discriminatory
7. maintain confidentiality
8. communicate effectively
9. work appropriately with others
10. maintain records appropriately
11. reflect on and review practice
12. assure the quality of practice
15. Establish and maintain safe practice environment



Standards 13 and 14: relate specifically to Occupational Therapy

13. understand the key concepts of the knowledge base relevant to their profession

14. be able to draw on appropriate knowledge and skills to inform practice.

These are the areas in which we really need to demonstrate that we are 'practising our profession' with therapeutic occupation as central to our role.

Source: Health & Care Professions Council, *Standards of proficiency: Occupational Therapists* (HCPC(c), 2013; 12-15)



Evidencing evidence-based practice in diverse settings and emerging roles

How do we demonstrate our evidence-based decision making ?

“Evidence based practice requires that decisions about health [and social] care are based on the best available current, valid and relevant practice. These decisions should be made by those receiving care, informed by the tacit and explicit knowledge of those providing care, within the context of available resources”

(Dawes et al. 2005, quoted in Moores & Bannigan, CJOT, 2009)



Developing evidence based Practice in emerging roles

Moores & Bannigan propose using inclusive professional terminologies, suitable to settings outside of traditional medical/clinical settings:

“The phrase professional thinking is [...] used in preference to clinical reasoning because it is more inclusive, respecting that occupational therapists work in a wide range of settings”

(Moores & Bannigan, 2009; 343)



Evidencing evidence-based practice in diverse settings and emerging roles

Moore & Bannigan's visual representation of evidence-based decision making in our practice:

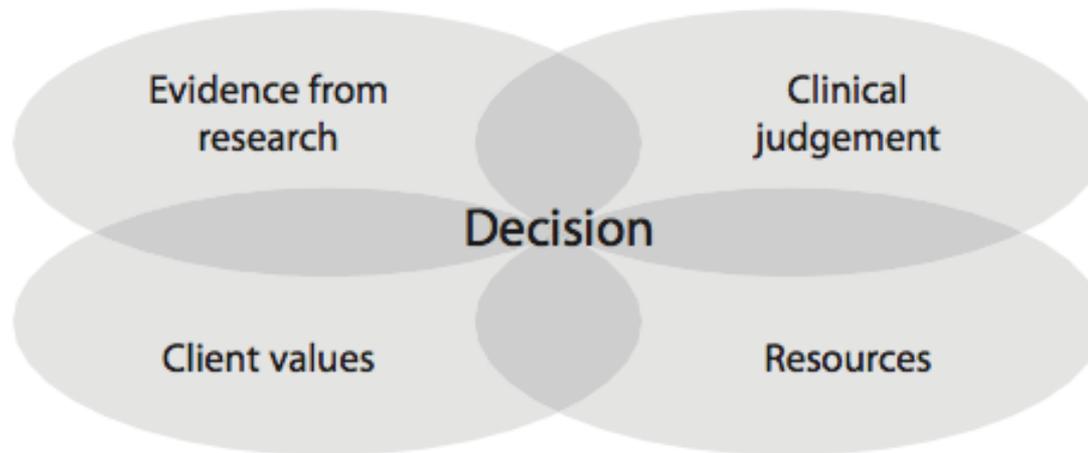


Figure 1: Evidence based decision making
(Moore & Bannigan, 2009; 344)



How can we use this visual representation to demonstrate our evidence based practice ?

Evidence base	Professional Reasoning and Judgement
Client values	Resources

Developed from: Fig 1: “Evidence based decision making”,
Moore & Bannigan, 2009; 344)



How can we use this visual representation to demonstrate our evidence based practice ?

Evidence base	Professional Reasoning and Judgement
Research Guidelines Professional Standards Legislation Theory	Your professional experience Your learning from your practice Your learning from your peers, supervisors and managers Your learning from working with clients Theory eg: clinical reasoning styles

Developed from: Fig 1: “Evidence based decision making”,
Moore & Bannigan, 2009; 344)



How can we use this visual representation to demonstrate our evidence based practice ?

Client values	Resources
What do your clients think and feel ? What is important to them and their families ?	What are the resources available to you ? What resources are available to your service ? What resources are available to your clients ?

Developed from: Fig 1: “Evidence based decision making”,
Moore & Bannigan, 2009; 344)



Ask yourself...

- How does the model apply to me?
- What evidence can you include in each section ?
- Are there areas you are particularly proud of, that
• you feel you can demonstrate really well ?
- Are there areas in which you feel less confident in
being able to produce evidence ?



Useful documents from COT



British Association of Occupational Therapists
and College of Occupational Therapists

Log in with your membership and search for:

Essential Briefings

- Definitions and Core skills
- Extended Scope Practice
- Insurance requirements for HCPC registration

COT / BAOT Briefings

- Professional Indemnity Insurance for BAOT members
- Employment relations briefings:
- Applying for a 'non-traditional' role – some points to consider
- Social Enterprise – what you need to know
- Generic working: guide for BAOT/Unison stewards
- Management Briefing: Supervision

COT emerging role OT network

<http://www.cot.co.uk/areas-practice/new-roles-profession>

Post qualifying framework

Source: College of Occupational Therapy website: www.cot.co.uk (COT, 2015)



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References

Bannigan & Moores, 2009, *A model of professional thinking: integrating reflective practice and evidence based practice*, No.5, Volume 76

COT - College of Occupational Therapy, 2016
[accessed on 16.3.16 at: [ww.cot.co.uk](http://www.cot.co.uk)]

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HCPC(b), 2015, Health & Care Professions Council, *Information for registrants: Continuing professional development and your registration*, London, [accessed on 16.3.16 at: http://www.hpc-uk.org/assets/documents/10001314CPD_and_your_registration.pdf]

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References

- College of Occupational Therapists (2016) **New roles for the profession**

Accessed on 5.7.16 at: [<http://www.cot.co.uk/areas-practice/new-roles-profession>]

