



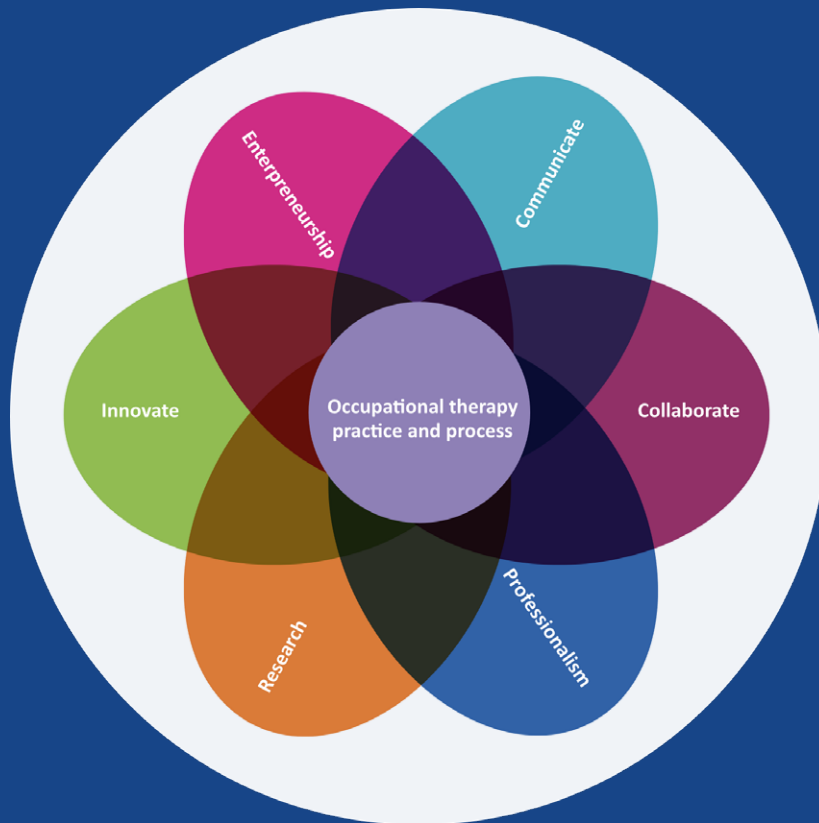
Landelijk
Opleidingsoverleg
Ergotherapie

The Competency Profile Occupational Therapist

Colophon

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Introduction



The Competency Profile Occupational Therapist describes the seven competencies mastered by the beginning occupational therapist. Together with the Occupational Therapy Professional Profile, it provides an up-to-date and future-oriented impression of the profession. The competencies direct the curricula of the occupational therapy study programmes.

The core of the competence profile is formed by the specific competence 'occupational therapy practice and process', reflecting the identity of the occupational therapist.

Based on the heart of this flower, the profession-specific expertise colours the actions of the occupational therapist in the six generic competencies, which are represented in the flower petals. As a paramedical professional, the occupational therapist shares these competencies with other healthcare professionals.

The generic competencies are interrelated. Therefore, the flower petals overlap. Side-by-side competencies are often most closely related.

Background

In this background you will find:

- the development process of the Occupational Therapist 2023 Competency Profile
- the structure of the competency profile and the structure of the description of each competency
- the target group of this competency profile and the definitions used
- the references.

Development process of the Occupational Therapist Competency Profile 2023

To stay in tune with developments in the profession and higher professional education, the Occupational Therapist Competency Profile was revised in 2022 on behalf of the National Coordinating Committee for Occupational Therapy Education in the Netherlands. This was done in conjunction with the revision of the Occupational Therapy Professional Profile by the Dutch Association of Occupational Therapy. The revision of the competency profile is based on the Competencies Occupational Therapy 2013 (Verhoef and Zalmstra).

An important basis for the revised profiles is a survey using questionnaires among Dutch occupational therapists (n=567) (Koops-van 't Jagt, 2021). In addition, stories about the current professional practice were collected from 14 occupational therapists and 2 occupational therapy students (Mies, 2021). The data from the questionnaire survey and the story survey were analysed, and the results and conclusions were discussed in several reflection sessions. This led to concrete recommendations on the content and form of the revised profiles for the writing groups of the new Occupational Therapy Professional Profile and Occupational Therapy Competency Profile. Joan Verhoef and Annerie Zalmstra formed the writing group for the competency profile.

To revise the competency profile, the authors also consulted relevant documents, such as competency profiles of other healthcare and social study programmes, international occupational therapy competency frameworks and reports by The Netherlands Association of Universities of Applied Sciences on developments in higher professional education. Important developments in healthcare and higher education such as healthcare technology, (digital) healthcare skills, opportunity inequalities and health, sustainability, and research skills have been integrated into the competence descriptions. Current legislation was also consulted, as well as occupational therapy guidelines and standards.

Together with a working group of six lecturers from the six occupational therapy educational programmes, choices were made about the structure of the new competency profile, the content of the competencies and the elements of the descriptions. The writers developed the chosen structure and content into a draft version, in consultation with the writers of the professional profile and with feedback from an advisory board group. The terminology used was aligned with the revised professional profile.

The lecturers' working group consisted of Stéfanie Anisuzzaman (Hanze University of Applied Sciences), Koen van Dijk (Amsterdam University of Applied Sciences), Hill Jonker (University of Applied Sciences Arnhem Nijmegen), Jantina Kroese (ProEducation), Petra Panis (Zuyd University of Applied Sciences) and Michelle van Vliet (Rotterdam University of Applied Sciences).

This draft was presented to students and lecturers of the six occupational therapy educational programmes at the Universities of Applied Sciences, and to the professional field committees of those educational programmes. The feedback was processed, with the starting point being that the competencies are clearly and concretely described, but also offer room for the various educational programmes to place their own emphasis. Questions and differences in feedback were discussed with the advisory board and the authors of the Occupational Therapy Professional Profile.

This resulted in a final version of the competency profile, which was submitted to a text editor for textual and linguistic feedback. This final version was then submitted to the working group of lecturers of the six educational programmes. The sectoral advisory body healthcare higher education of The Netherlands Association of Universities of Applied Sciences and the Dutch Association of Occupational Therapy advised positively on this version. The National Coordinating Committee for Occupational Therapy Education adopted the competency profile.

Structure of the competency profile

The CanMEDS model (Canadian Medical Education Directions for Specialists) was chosen as the structure of the Competency Profile Occupational Therapist. The argument for this choice is that the occupational therapist competency profile is thus in line with competency profiles of other healthcare sector educational programmes in the Netherlands. In this competency profile, the CanMEDS roles have been translated into competencies, as this is more recognisable in Dutch occupational therapy practice. Each competency is described in a key sentence, a description, characteristic actions, methodical steps and some examples. Each competency is also illustrated with visual material.

The definition of competence used was: “A competence is a particular combination of knowledge, skills and attitude to act appropriately, purposefully and responsibly in occurring professional situations” (Cedefop, 2016). The World Federation of Occupational Therapy (WFOT, 2022) defines competencies for occupational therapists as an integration of individual activities that are measurable and essential to occupational therapy professional practice. These activities require knowledge of occupational therapy concepts, theory and processes, personal values, and attitudes to enable effective and safe professional practice.

The Competency Profile Occupational Therapist has one profession-specific and six generic competencies, represented in a flower shape. The specific competence Occupational therapy practice and process forms the heart of the flower. This competence reflects the occupational therapist’s identity and expertise. Based on the heart, the profession-specific expertise colours the occupational therapist’s actions in the six generic competencies illustrated in the petals. As an allied health professional, the occupational therapist shares the following competencies with other healthcare professionals: communicate, collaborate, professionalism, research, innovate, and entrepreneurship. The petals overlap. This means that the competencies cannot be so strictly separated from each other, but in practice are closely aligned and partly overlapping or related. The order was deliberately chosen; adjacent petals or competencies are more strongly related. There is also coherence with other competencies.

The profession-specific occupational therapist competency covers the complete occupational therapy process and practice. This includes all client-oriented professional competencies from 2013, namely: screening, assessment and analysis, treatment and counselling, advice to third parties and support and empowerment. Based on current developments and sources, prevention has been added.

Structure of the competence description

Each competency is described as follows:

- 1. Core sentence:** concise description of the essence of the competence in one sentence.
- 2. Description:** description of what you do as an occupational therapist (or occupational therapy student) in relation to this competency.
- 3. Characteristic actions:** a summary of actions in which competence becomes visible and testable. For each competency about ten actions are described; the summary is often ordered.
- 4. Methodical steps:** these are derived from process models or methods appropriate to the competence. The steps are theory-based and focus on achieving a goal. In some of the competencies, the steps represent a linear sequence, in other competencies they reflect a cyclical process, and in some competencies, they are independent of each other.
- 5. Examples:** three examples are described for each competency. The examples illustrate working with individual clients, as well as working in a community or an organisation.

Target group and definitions

This competency profile is intended for occupational therapy students, lecturers, and internship supervisors. The profile is written in professional language so that students become familiar with the terminology used in practice.

Client, community, and organisation are defined as follows:

- **Client:** individual and carers. Carers are people who are close to the person, such as family members, friends and/or neighbours, and who support the person in some way. The term carers is used instead of system. Depending on the context, instead of client, the term person, patient, resident, learner, citizen, employee, neighbourhood resident, visitor, consumer, rehabilitant, pupil can also be used. A carer or legal representative can also be the client. The competence descriptions alternate between client and person. The term client is often used in the authentic professional context in which the student learns during his educational programme. The term is consistent with competency profiles for other educational programmes.
- **Community:** a group of people who belong together and have something in common. For example, a community in the neighbourhood or a village community.
- **Organisation:** a partnership of individuals who share a common goal. It may be a foundation, association, school, company, welfare, or healthcare organisation, committed to or responsible for enabling occupational participation of their members, pupils, employees, clients, residents.

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Occupational therapy practice and process

The occupational therapist methodically supports clients, communities, and organisations to achieve the desired change in daily activities and participation.

Discription

As an allied health professional, you work based on a vision that meaningful daily activities and participation contribute to people's health and well-being. Based on the premise that everyone is entitled to participation, you will contribute to an inclusive society in which everyone can use their own abilities and participate fully. You are always focused on both the person and the environment in which the person performs meaningful daily activities (person-centred and context-based). Besides working with the client and the carer, you can also work with a group within a community or organisation.

The goal of occupational therapy is to promote or maintain daily activities, self-management and participation for people who experience temporary or permanent problems in these areas due to physical, cognitive, psychological, or social limitations. In this process of change, daily occupation is both the goal and the means of occupational therapy (occupation-based). The client's question and experience and your own professional expertise are starting points of the process.

You start from the capabilities and strengths of the client and the environment. You consider the client's health literacy. You also tailor your healthcare and services to the cultural, social, and economic situation of the client.

You work in a goal-oriented and process-oriented way, using theoretical and practice models. Together with the client, you explore and analyse questions about everyday activities in meaningful roles in the areas of selfcare, productivity and leisure and questions about participation in social activities. In the analysis, you always consider how the person, activities, tasks and roles and environmental factors influence each other. You then decide together with the client what the personal goals are and what is an appropriate plan of action to realise a desired future perspective.

You try out solutions together with the client, considering the client's own habits and routines, and practical implications.

You can also work with a group of clients who have similar goals, if the group process can contribute to clients' process of change or if it is more efficient.

Change of action can focus on:

- . maintaining or re-learning daily activities, or learning how to perform daily activities differently,
- . learning and developing new daily activities,
- . performing daily activities more efficiently, effectively, and safely,
- . coping with loss of activities or participation,
- . creating environmental conditions to promote everyday occupation and participation.

Occupational therapy can also focus on prevention to prevent or limit the decline in capabilities for daily occupation and participation.

You work evidence-based, integrating your professional knowledge and experience with the preferences and experiential knowledge of the client and with available evidence. Wherever possible, you use available guidelines, reliable and valid instruments (interviews, observations, questionnaires, or tests) and interventions whose effectiveness has been demonstrated in research.

You use different types of professional reasoning, such as narrative, interactive, procedural, pragmatic, ethical, scientific, political, and conditional reasoning. This allows you to involve various perspectives, consider alternatives and justify your choices.

Characteristic actions

The occupational therapist works methodically to change or maintain the daily occupations and participation of clients, communities, or organisations. The occupational therapist:

- . **connects:** discusses with the client the reason for contacting the occupational therapist and provides insight into what occupational therapy can offer the client,
- . **screens:** makes an inventory of occupational problems of the client who presents without a doctor's referral, checks for medical 'red flags' and concludes whether occupational therapy is indicated,
- . **explores:** identifies and analyses, in dialogue with the client, the occupational problems experienced in the areas of selfcare, productivity and leisure, environmental factors and also the wishes and possibilities for change. Applies knowledge from medical, psychological, and social domains in the analysis,
- . **shared decision making:** discusses the treatment options, discusses the benefits and risks of the various options and alternatives, clarifies client's preferences and assists in weighing up and deciding on the desired treatment or care, jointly determines desired outcomes, priorities, goals, and a plan of action: based on the exploration and analysis and shared decision-making, determines together with the client the priorities and long-term goals, aimed at enabling to participate in the activities of everyday life and in society, with the corresponding short-term goals. Establishes a plan of action with the client to achieve these goals,
- . **carries out the action plan:** selects interventions to achieve the goals (see text box). Checks whether the desired change is going to be achieved during the interventions, and adjusts the plan, if necessary,
- . **evaluates and completes the treatment:** evaluates with the client whether the goals have been achieved, and the client's satisfaction with the results and the process. Uses subjective data (satisfaction) and objective data (measuring the change by repeating an interview, observation, questionnaire or test) for the evaluation. Makes follow-up appointments if necessary.
- . **reports:** reports clearly, timely and in a professional manner on the progress, results and/or recommendations, in accordance with the procedures of the organisation.

The occupational therapist can use various interventions to influence daily occupation and participation:

- training in:
 - . (re)learning (basic) skills, tasks, and activities,
 - . applying strategies (e.g., cognitive strategies or energy-saving strategies),
 - . the use of aids, assistive devices and (healthcare) technology, to reduce, compensate for or restore physical, cognitive, psychological and/or social disabilities so that performance of daily activities is improved or restored.
- advice on:
 - . daily activities, such as simplifying or changing their order,
 - . the physical environment, aids, general and personalized assistive devices and (healthcare) technology,
 - . informal or professional support from the social environment, such as informal caregivers, parents, volunteers, carers, teachers, or colleagues, to promote or restore clients' self-management and participation in the environment in which they live, reside or work.
- coaching in:
 - . changing daily activities,
 - . making choices for a different balance in daily activities,
 - . strengthening self-management and self-direction,
 - . developing a new future perspective to promote or restore self-management, and participation,
- counselling of carers to optimise their support of the client while keeping attention to their own activities and well-being,
- offer vocational support by finding suitable employment, prevention of absenteeism, job retention and reintegration by analysing both task and environment, and working together with the client and employer to find suitable solutions and workplace adjustments, taking into account laws and regulations to promote sustainable employability,
- provide education about an occupational pattern and a lifestyle that promote health to prevent (increased) limitations in daily activities and participation, and prevent (more expensive) healthcare,
- group treatment through training, education, or advice to support clients in increasing knowledge, skills, and awareness, where sharing experiences and being able to learn from each other contributes to strengthening self-management, self-direction and participation,
- guiding a group of people in an organisation by adapting the living, working and learning environment, or changing occupational performance or routines or procedures, to enable or facilitate the performance of activities for a group of people in the organisation, or to prevent complaints.
- supporting a group of people in a community, an initiative of citizens or interest group in strengthening their own capabilities and self-direction to increase participation and inclusion of (vulnerable) groups in the society.

Methodical steps





Communicate

The occupational therapist communicates respectfully and effectively with clients, professionals, and other persons involved, to support change in daily occupation and participation of the client(s).

Description

You connect with clients and their carers, communities and organisations with an open and professional attitude and establish trust in you as an occupational therapist and in the occupational therapy process that you will initiate. To achieve this, you respect the other person's autonomy and you listen actively and attentively. You are able to communicate in a variety of situations with a wide range of clients from different backgrounds. You are sensitive to social and cultural diversity.

You enable communication and mutual understanding, and agreements are clear. You provide clear information about all stages of the occupational therapy process and make decisions together with the clients and their carers. In doing so, you invite the client and carers to share with you information, preferences, and considerations.

You deliberately choose an appropriate communication medium. You match this choice to the capabilities and preferences of the other person.

You communicate clearly and with an open attitude with other professionals and other persons involved. You build and maintain professional relationships. You always respect individuals' privacy and trust.

Your written reports are professional. You use guidelines or regulations that are applicable in the context.

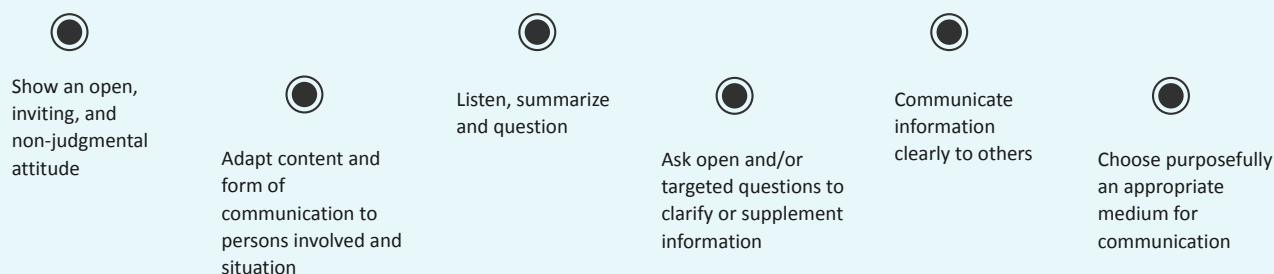
You are skilled in oral, written, non-verbal and digital communication.

Characteristic actions

The occupational therapist:

- is respectful and communicates from an open and equal attitude
- attunes communication to the other person and their values and socio-cultural background, information needs, communicative abilities and (digital) health literacy
- creates an open conversation to support the other person's self-direction and promote shared decision-making,
- reflects the perspective of the other person, without judging, creating environmental conditions to promote everyday occupation and participation.
- doses information: consciously determines what information is given, to whom, in what way and when,
- is clear and correct in oral, written, and digital communication about all phases and aspects of occupational therapy,
- is digitally skilled, uses communication technology and other supportive forms of communication, such as visual
- communicates in a manner appropriate to the role and responsibility as a healthcare professional and to the context, support, digital communication, or eHealth,
- deals adequately with aggression, inappropriate behaviour, and challenging behaviour,
- reports results and advices clearly, timely and professionally, according to the organisation's procedures,
- adheres to applicable laws and regulations for confidentiality, safety and privacy and applicable reporting standards.

Methodical steps





Collaborate

The occupational therapist collaborates purposefully with professionals and other persons involved within and outside the own organisation, to enhance daily occupation and participation of the client(s).

Description

You work together with occupational therapists, other professionals, other professionals involved, or organisations inside and outside healthcare, to jointly achieve goals and results with and for the client(s), community or organisation. The starting point is that you provide person-centred care and effective services. You work together professionally on the basis of a shared vision, shared goals, one (healthcare) plan and shared responsibility. You also work together with relatives and volunteers as equal partners.

In the collaboration, you make clear what your expertise as an occupational therapist is and you are familiar with the expertise of other professionals. You respect in the collaboration the expertise of others and deploy your own expertise complementary to the knowledge domains and competencies of others. You regularly exchange information in order to align methods and achieve shared goals.

You work in education, projects, or research with other professionals with different areas of expertise to improve healthcare and client services.

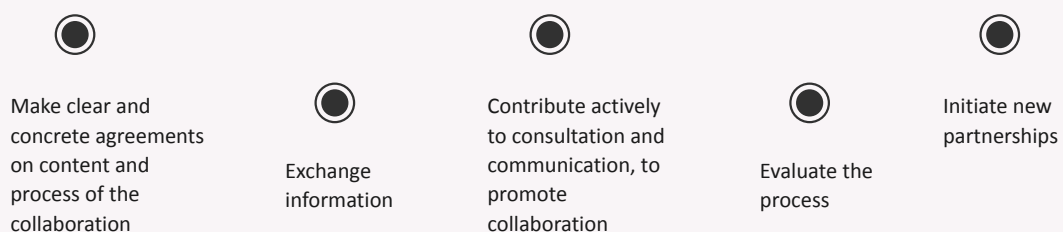
You actively profile the profession in local, regional and/or national networks. If necessary for client service or project implementation, you take the initiative to build a new network.

Characteristic actions

The occupational therapist:

- builds and maintains good working relationships with colleagues, other professionals, relatives, and volunteers,
- actively contributes to both process and content of the collaboration, making clear agreements on communication, division of tasks and decision-making,
- contributes to the shared goals for the (healthcare) plan or projects,
- informs others about the occupational therapist's areas of expertise and own role in the joint (healthcare) plan for the client or in joint projects,
- demonstrates awareness of other professionals' expertise, roles, and responsibilities,
- aligns one's own healthcare and services with those of others to achieve shared goals and to coordinate healthcare, and recognises the other's expertise as complementary,
- shares knowledge and experience and is open to propositions from others,
- takes responsibility for both the results of its own share and the joint results,
- takes initiative to establish and maintain collaborative relationships, including in an intercultural and/or international environment,
- positions the occupational therapy profession's capabilities in collaborative relationships and networks.

Methodical steps





Professionalism

The occupational therapist acts with integrity and responsibility and works on one's own professional development and on the development of professional practice to provide good quality occupational therapy healthcare and services.

Description

You work with integrity and ethics with clients and their relatives, communities, and organisations and with professionals and other persons involved. In the therapeutic relationship, you create safety and handle your position as an expert with care. You tailor your services to the client's needs and the organisation's policies and capabilities. You act in accordance with the standards and values of the profession as described in the professional code. You use available guidelines and comply with applicable laws and regulations. You adopt a transparent attitude and are accountable for your work. You work within the limits of your own expertise. You are positively critical of your professional performance and take responsibility for its development. You deliberately apply reflection and feedback. You actively work on your sustainable employability.

You can articulate your vision on the quality of occupational therapy healthcare and services, monitor and assess occupational therapy outcomes against relevant quality frameworks. Where appropriate, you systematically improve the quality of healthcare and service provision.

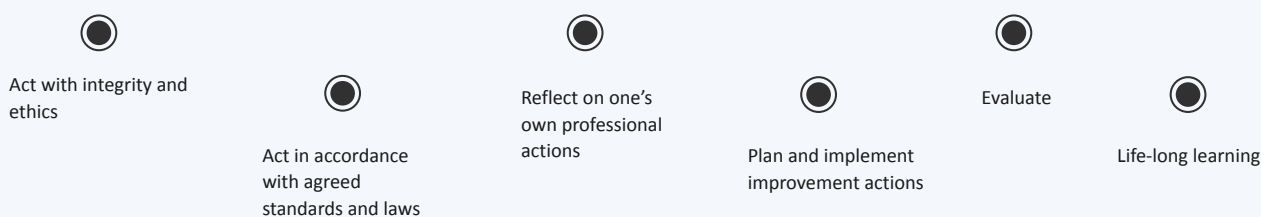
As a member of the profession, you will contribute to the profiling and professionalisation of occupational therapy.

Characteristic actions

The occupational therapist:

- acts in accordance with the professional code,
- presents and behaves in a manner appropriate to the context,
- works in an organised manner and according to schedule, and keeps appointments,
- refers to other professionals when the limit of own expertise has been reached, or when, based on own norms and values, the professional relationship is in question,
- reflects on own actions and results through careful professional reasoning about choices in the occupational therapy practice and process and ethical choices, and accounts for them,
- methodically monitors, assesses and - if necessary - improves the quality of process-related action by using peer-review, peer-consultation or another method,
- tracks national and international developments in occupational therapy,
- works in an organised manner and according to schedule, and keeps appointments,
- develops own expertise in a planned way, including by reading (international) occupational therapy literature, attending (international) training, and participating in conferences and/or supervision,
- guards own professional interest in the organisation and weighs it against the organisation's interest,
- profiles the unique features of occupational therapy services and shows what the profession stands for.

Methodical steps





Research

The occupational therapist demonstrates research capability: shows an inquiring attitude, applies research findings of others, and can conduct practice-oriented research, to support the underpinning and development of professional practice.

Description

You demonstrate a curious and constructively critical attitude towards the underpinnings and effectiveness of the occupational therapy you provide.

Your actions are based on guidelines and available knowledge. You apply the method of evidence-based practice, you systematically search for professional and experiential evidence and assess its reliability and applicability in context. You can deal with complex and sometimes contradictory information.

If reliable or applicable knowledge to solve a practice problem is lacking, you can methodically create knowledge by conducting practice-oriented research. In doing so, you contribute to the development of knowledge needed to improve the daily activities and participation of clients, communities, or organisations. You act in accordance with the applicable guidelines for responsible conduct of research. You make the collected knowledge applicable for professional practice and thus contribute to the improvement of occupational therapy practice. You can also contribute to solutions for social issues.

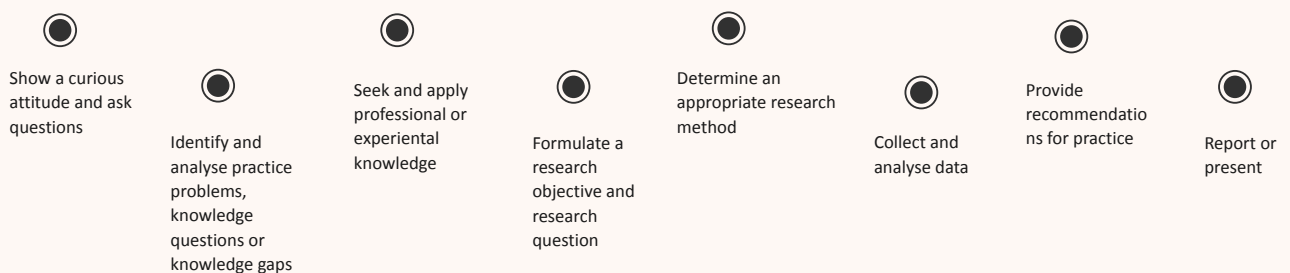
Practice-oriented research can contribute to underpinning, innovation, quality improvement or knowledge development. As a researching professional, you thus contribute to the further development of the profession.

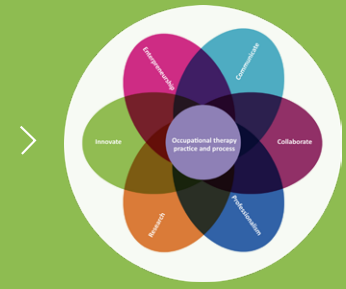
Characteristic actions

The occupational therapist:

- shows a curious attitude; is inquiring and critical, and open to other perspectives
- questions one-self and others about the underpinning, appropriateness or effectiveness of occupational therapy interventions and possible alternatives,
- Applies the method of evidence-based practice and bases one's own actions on available knowledge from guidelines, evidence and other professional sources, such as best practices, expert opinion, or experiential knowledge of clients,
- is capable to search and critically appraise professional knowledge (occupational therapy literature, research articles evidence) for validity and applicability,
- chooses and justifies an appropriate research method to answer the question, balancing methodological thoroughness with relevance for professional practice. tracks national and international developments in occupational therapy,
- works in an organised manner and according to schedule, and keeps appointments,
- derives concrete recommendations from the research results and tailors them to the organisation, in order to make the results of research applicable for a (specific) practice situation or organisation,
- is capable to report the results of practice-oriented research professionally in a report or article for a professional journal or present them to colleagues (team, regional group),
- reflects critically on own performance, evaluates which aspects of healthcare or services can be improved, considers alternative procedures and can appraise new knowledge or developments for relevance and applicability.

Methodical steps





Innovate

The occupational therapist improves or develops healthcare processes and services, to support everyday activities and participation of groups of clients, communities, or organisations.

Description

To find better or new solutions to questions posed by groups of clients, communities and organisations about everyday activities and participation, you combine creativity with analysis in a structured process.

You start from the users' perspective and their capabilities and wishes. In co-creation with the users and/or stakeholders, you identify the need for change, generate various ideas for the solution and make considerations to select an idea.

Part of your considerations is whether healthcare technology contributes to the solution. Together with the users, you determine how the solution can be useful in their situation or organisation.

You carry out a pilot and evaluate the solution with the users. If the results are positive, you take the initiative to get the new product, process or service permanently introduced into the situation or organisation. In doing so, you guard the balance between the users' interests on the one hand and what is organisationally and societally feasible on the other.

Characteristic actions

The occupational therapist:

- has a participatory approach and involves users in finding appropriate solutions,
- engages with users and stakeholders to identify the need for change,
- goes in search of new ideas through creative sessions, literature review and/or interviews,
- analyses different ideas and weighs them against each other,
- selects (with others) the most appropriate ideas,
- explores whether healthcare technology could be a solution in this regard,
- uses the chosen idea to design an improved or new healthcare process, product or an improved or new service that fits the situation or organisation,
- evaluates in a pilot with users whether the innovation or improvement meets expectations and produces the desired results,
- underpins choices made with users during the process,
- helps ensure that the process, product, or service is sustainably introduced into the situation or organisation.

Methodical steps





Entrepreneurship

The occupational therapist responds to changing demands and needs from society regarding daily occupation and participation of clients, communities and organisations and exploits opportunities, to practise and position occupational therapy

Description

You show an initiative and entrepreneurial attitude. You identify the possibilities of occupational therapy in existing situations and in changing healthcare practice where complex healthcare questions are increasing. As an occupational therapist, you respond to changing questions or needs of clients, communities, or organisations with regard to daily occupation and participation in society. You see and seize opportunities to position and profile occupational therapy within these. You can analyse opportunities and threats to determine the future position of occupational therapy. You are aware of how to use your occupational therapy expertise to address societal questions about daily occupation and participation, and you can make the benefits or value of occupational therapy visible to clients, referrers, and funders. You organise your work efficiently and deploy resources and materials appropriately to ensure the continuity of occupational therapy in the organisation. You also keep records of what you do and provide management and maintenance of resources and materials. You act in accordance with applicable policies and regulations. You are familiar with the financing of occupational therapy and what this means for your tasks and accountability.

Characteristic actions

The occupational therapist:

- . shows an entrepreneurial attitude and is future-oriented: takes initiative, makes proposals, and dares to seize opportunities,
- . identifies changes in healthcare practice and changing demands and needs of clients, communities or organisations regarding daily occupation and participation,
- . seizes opportunities for occupational therapy and takes initiatives to approach new target groups and/or offer new services, making considerations about societal interest,
- . profiles the profession in contact with other professionals and organisations,
- . works results-oriented and makes the results and added value of occupational therapy visible to clients, referrers, and funders,
- . shows a business-like approach and is aware of costs and funding of occupational therapy, weighs costs against results, can work with budgets,
- . organises own work efficiently, and uses resources and materials in a responsible and sustainable manner,
- . maintains records according to organisational and professional guidelines, using information technology,
- . builds and maintains (inter)professional networks and collaborative relationships inside and outside the organization.

Methodical steps

