

Definition of the practice of occupational therapy

The OTBNZ, after consulting on the scope of practice for occupational therapy, developed a more detailed description of practice to assist interpretation for persons in non-traditional roles. This forms the basis of the OTBNZ definition of the 'practice of occupational therapy'.

- 1) Using process/es of enabling occupation to promote health and well-being by working with individuals, groups, organisations, communities and society to optimise activity and participation across the lifespan and in all life domains.
- 2) Establishing relationships with clients/ tangata whāiora and people associated with clients, based on an understanding of their occupational history, participation preferences, and the personal, spiritual, family, whānau, social, and cultural meanings of what they do.
- 3) Using interactive, observational and interpretive methods of enquiry to explore and understand the subjective meanings of occupation.
- 4) Assessing aspects of people, occupations and places relevant to the things people want, need and are expected to do, including:
 - a) Personal factors, body structures and functions, activity limitations and occupational performance skills relative to the requirements for participation and developmental stage.
 - b) Past and present participation in occupation including the effectiveness of and satisfaction with that participation.
 - c) Routines and patterns of participation, and their consequences for health and well-being.
 - d) The components of occupation, and the capacities, skills and resources required to participate in them.
 - e) Contexts of participation in occupation, including facilitators and barriers to participation, and culturally defined roles and meanings.
- 5) Working collaboratively with clients to:
 - a) Identify and prioritise activity and participation goals at an occupational performance level, in current and/or future environments.
 - b) Develop, preserve and restore capacity for participation, including body structures and functions, and personal factors as these relate to skilful, effective and satisfying occupational performance.
 - c) Prevent or decrease retard predictable deformity of body structures and/or disruption of body functions that might affect participation, through educational approaches and by recommending and educating people in the use and care of assistive devices, garments and technologies and strategies.
 - d) Review participation choices, in relation to enabling occupational performance.
 - e) Modify how, when, where and with whom activities and occupations are performed.
 - f) Modify physical, social and attitudinal environments to remove barriers to participation in occupation and strengthen facilitators of participation in occupation.
 - g) Develop a group, organisation, or community's purpose, resources, structure, functioning and/or skills to enable participation in occupation.
- 6) Engaging in processes to ensure continued competence in the above



Occupational Therapy Board of New Zealand

TE POARI WHAKAORA NGANGAHAU O AOTEAROA

FOSTERING FAITH AND CONFIDENCE IN THE PROFESSION

- 7) "Practice" goes wider than direct clinical care and intervention to include teaching/tutoring, professional and/or team leadership or health management where the person influences the practice of occupational therapy, in hospitals, clinics, private practices and community and institutional contexts, whether paid or voluntary.

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