NOTE: This slide deck has been prepared for guidance and convenience of reference for OTs registered to practice in Alberta. The official Acts and Regulations referred to in this slide deck should be consulted for all purposes of interpreting and applying the law.

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ALBERTA COLLEGE OF OCCUPATIONAL THERAPISTS

REGULATING COMPETENT AND ETHICAL OCCUPATIONAL THERAPISTS

(amended Nov 2022 to re

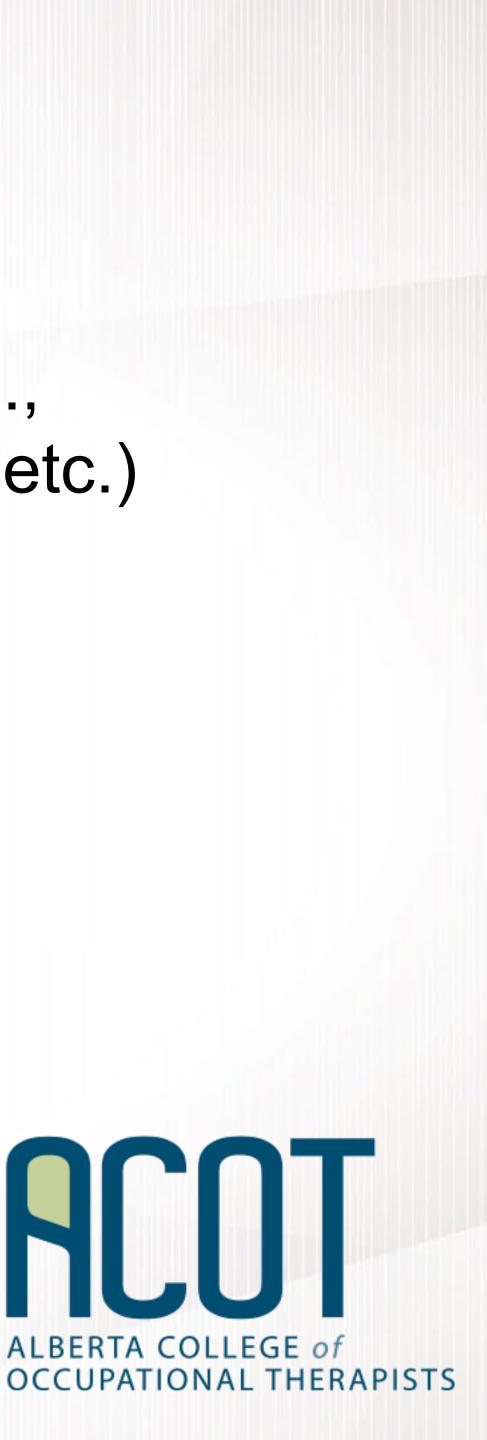
OT Participation in Feeding, Eating and Swallowing in the Alberta Context

Prepared April 2021 flect changes to applicable legislation effective January 1, 2023)



Questions commonly fielded by ACOT

- What aspects of feeding, eating and swallowing activities (e.g., assessment, interventions, therapeutic diet orders, follow-up, etc.) are within the "OT Scope"?
- What competence is required to perform these activities?
- Whose responsibility is it to ensure an OT (and the support personnel they supervise) acquire and maintain the required competence?



OT Scope – what does the legislation say?

Legislation Name/Type	What it says
ACOT Position Statement	In Alberta, occupational therapy's scope and is compliant with all regulations of t
<u>Health Professions Act</u> – Schedule 15	 Section 3 describes what is considered of In their practice, occupational therapists (a) in collaboration with their clients, development of the leisure and productivity, (b) assess, analyze, modify and adapt the functional independence, (c) interact with individuals and groups a and (d) provide restricted activities authorize
<u>Government</u> <u>Organization Act</u> - Schedule 7.1*	Outlines what health services are considered of the services of daily living (an activity that is health and well-being) are not restricted.
Occupational Therapists Profession Regulation – Section 17**	 Outlines which of the restricted activitie perform if competent to do so. Insert or remove instruments, devices into an artificial opening into the body Administer diagnostic imaging contrast

e of practice includes management of feeding, eating and swallowing the provincial Health Professions Act.

OT practice.

- s do one or more of the following:
- velop and implement programs to meet everyday needs in self care,
- e activities in which their clients engage to optimize health and
- as clinicians, consultants, researchers, educators and administrators,
- ed by the regulations.

idered "restricted activities."

- individuals normally perform on their own behalf to maintain their d activities
- ies OTs (and the support personnel they supervise) are permitted to
- s or fingers beyond the pharynx, where the nasal passages narrow or y st agents



OT Scope – continued

Legislation Name/Type	What it says
<u>Operation of Approved</u> <u>Hospitals Regulation</u>	Section 14(1) All health practitioners' orders for patier health practitioner
<u>Nursing Homes</u> Operations Regulation	Section 15(8) Therapeutic diets for a resident shall be
<section-header></section-header>	Indicator 1.4 – The occupational therapie demonstrate accountability for services p Indicator 2.2 - The occupational therapie practice, are consistent with the code of his/her/their skill level or competence.
ACOT <u>Code of Ethics</u> (CoE)	Indicator 3.2 – Occupational therapists s to competence is indicated by providing



nts shall be in writing and shall be dated and signed by the attending

ordered in writing by a regulated member.

ist shall be responsible for the OT services provided by oneself and provided by other personnel who are under the therapist's supervision. oist shall determine if requests for OT services fall within the scope of OT f ethics, and more specifically, determine if requests fall withing

shall strive to achieve high standards of competence. This commitment services only in areas of competence



OT Scope – in summary

- Feeding, eating and swallowing are considered activities of daily living.
- associated with VFSS or FEES are restricted activities (insertion or removal of narrow; and the administration of diagnostic imaging contrast agents).
- It is appropriate and in alignment with OT practice for OTs to participate in the client experiences – as long as the OT is competent to do so.

Clinical (bedside) swallowing evaluation is not a restricted activity; some activities instruments, devices or fingers beyond the pharynx or where the nasal passages

• OTs are permitted to write orders for therapeutic diets (although, they also need to follow/consider employer policies and procedures for order writing where applicable)

assessment of and intervention for the feeding, eating and swallowing issues that a

Acquiring and Maintaining Competence

- In Section 1(1)(f) of the Health Professions Act, competence is defined as the combined knowledge, skills, attitudes and judgment required to provide professional services.
- Each OT is responsible to determine whether they are competent to perform any clinical practice skill whether it is a restricted activity or not
- Competence should be acquired/maintained through participation in a combination of (but not limited to):
 - Review of materials (textbooks, journal articles, etc.) •
 - Participation in learning sessions
 - Seeking out shadowing or mentorship opportunities to acquire clinical experience
 - Ongoing networking and consultation with colleagues



Links to References

- ACOT Standards of Practice
- Code of Ethics
- Position Statement on OTs' Role in Feeding Eating and Swallowing
- Government Organization Act (GOA) Open Government (alberta.ca)*
- Health Professions Act (HPA) Open Government (alberta.ca)
- Nursing Homes Operation Regulation Open Government (alberta.ca)
- Occupational Therapists Profession Regulation (OTPR) Open Government
 - (alberta.ca)**
 - **Operation of Approved Hospitals Regulation** Open Government (alberta.ca)

Effective January 1, 2023:

* The full list of Restricted Activities will be moving from the GOA to Part 0.1 of the HPA ** The list of Restricted Activities OTs can perform will be moving from the OTPR to the Health Professions Restricted Activity Regulation (HPRAR)

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