

Occupational Therapists and Diagnosing in Alberta

An Overview of ACOT's Proposed Changes

What is ACOT Proposing?

The Alberta College of Occupational Therapists (ACOT) is planning to allow occupational therapists (OTs) in Alberta to establish and communicate diagnoses within their areas of practice and competence.

This change modernizes the occupational therapy regulatory framework to better reflect the realities of Alberta's healthcare system and support the provincial government's goal of creating a seamless patient journey with the right care, when and where Albertans need it. Formally recognizing OTs' expertise and existing contributions to diagnosing, while maintaining strong public protection measures, has the potential to enhance workforce efficiency and improve Albertans' access to services, supports, and resources.

To support safe diagnostic practice, OTs who want to engage in establishing and/or communicating a diagnosis would be required to:

- Complete an ACOT Council approved Safe Diagnostic Practice Course.
- Receive authorization from ACOT.
- Adhere to a new Standard of Practice for Diagnostic Practices.
- Only undertake diagnostic activities relevant to the practice of occupational therapy, their specific area of practice (e.g., pediatrics, geriatrics, mental health, hand therapy, etc.),¹ and competence.
- Continue to collaborate with other healthcare professionals when additional expertise, testing, or assessment are needed to establish or rule out a diagnosis.

ACOT recognizes that this proposed change requires time to raise awareness of the proposal and undertake meaningful consultation before submitting the proposed education requirements and standard of practice to the Ministries of Advanced Education and Primary and Preventative Health Services. Engagement and consultation will occur between September 2026 and April 2027.

¹ For more information about the various areas OTs practice in, please see: [OT Alberta - Occupational Therapy in Alberta](#).

How did ACOT Reach this Decision?

Since 2015, when the issue was first brought to ACOT by registrants and system partners, ACOT Council and staff have engaged in a multi-year iterative analysis and consultation process to determine whether OTs should be permitted to establish and communicate diagnoses. This process included:

- Analysis of legal opinions.
- Consultation with the Government of Alberta's Health Professionals Regulation Unit (HPRU).
- Discussions with Canadian occupational therapy regulators.
- Review of legal requirements and practice trends provincially, nationally, and internationally.
- Province-wide registrant survey in 2024.
- Extensive registrant engagement through committees and discussion forums.
- Targeted literature searches to identify competencies required for safe diagnostic practice and evidence-informed approaches to managing and mitigating risks associated with establishing and communicating diagnoses.

As part of ACOT's review, legal opinions were considered and direction from the Government of Alberta's Health Professionals Regulation Unit was obtained. This confirmed that diagnosing is **not a restricted activity** under Alberta's *Health Professions Act* (HPA) and the *Health Professions Restricted Activity Regulation* (HPRAR).

While some regulated professions have “diagnose” as part of their legislated practice statements, others, including OTs, do not. However, the core consideration is not whether the word diagnose appears in a professions' practice statement, but whether activities and roles a profession is authorized to engage in include diagnostic activities not otherwise restricted and that the professional has the education, competence, and regulatory college authorization necessary to perform that activity safely. The HPRU confirmed that ACOT has the authority to establish standards and requirements governing how OT registrants engage in diagnostic practices.

Considering the insights gained from this multi-year process, in 2025, ACOT Council approved moving forward with permitting registrants to establish and communicate diagnoses, subject to safeguards including Council-approved mandatory education and specific practice performance expectations.

Why is ACOT Considering this Change?

Formally recognizing and regulating this aspect of practice through clear standards, education, and accountability measures better aligns regulation with modern practice and health system needs, serves to improve access to services and supports, and maintain strong public protection. Several factors support consideration of this change:

- **Occupational therapists already contribute to diagnostic decision-making.** Educated and skilled in assessment, information gathering, analysis, and clinical reasoning, OTs routinely contribute to identifying conditions and determine how those conditions affect a person's function and participation in daily life. ACOT's 2024 registrant survey confirmed that occupational therapists are already contributing to diagnostic decision-making in a variety of physical and mental health practice areas. In fact, some Alberta public healthcare employers outline in their job descriptions an expectation for OTs to diagnose.
- **There is broad support within the profession.** The 2024 registrant survey showed strong support among Alberta occupational therapists for allowing OTs to establish and communicate diagnoses, particularly when accompanied by additional education and safeguards.
- **While not a restricted activity, diagnosing is a risky activity.** The diagnostic process is complex, and diagnostic error remains one of the leading causes of patient harm². In the landmark report, *Improving Diagnosis in Healthcare*³, the National Academies of Sciences, Engineering, and Medicine identified the need for health professional licensing organizations to ensure practitioners possess and maintain the competencies required for effective participation in the diagnostic process. Another major conclusion that continues to be supported in the literature is that standardized education and training in diagnostic reasoning and diagnostic safety are key strategies for reducing diagnostic errors and improving patient outcomes. ACOT believes it makes good regulatory sense to formally recognize this aspect of occupational therapy practice and ensure it is supported by clear standards, education, and accountability measures that protect the public.
- **Similar changes are being explored in another Canadian Jurisdiction.** The Ordre des ergothérapeutes du Québec (OEQ) is working with the Quebec government to permit OTs to

² [Patient safety](#) (World Health Organization, 2023) & [World Patient Safety Day 2024](#) (World Health Organization, 2024)

³ Committee on Diagnostic Error in Health Care; Board on Health Care Services; Institute of Medicine; The National Academies of Sciences, Engineering, and Medicine; Balogh EP, Miller BT, Ball JR, editors. *Improving Diagnosis in Health Care*. Washington (DC): National Academies Press (US); 2015 Dec 29. 9, The Path to Improve Diagnosis and Reduce Diagnostic Error. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK338589/>

diagnose physical and mental health conditions that align with OT expertise. As recently as June 2026, the Office des professions du Québec (Office) and the Ministère de la Santé et des Services Sociaux (MSSS) announced the tabling of the *Report on the Appropriateness of Recognizing the Activity of Diagnostics in Certain Professions in the Health Sector*. They emphasize that the current framework is no longer aligned with modern practice and should be updated. By excluding certain professions from diagnosing within their skills and training, it restricts timely access to services, creates unnecessary fragmentation in care and service delivery, and ultimately compromises patient health outcomes.

- **Alberta's healthcare system is facing growing pressures.** Increasing demand, workforce shortages, and longer wait times make it important to use healthcare professionals to their full scope and competence. In some cases, individuals must see another provider solely to establish or confirm a diagnosis before accessing services, funding, or equipment, even when an OT has already completed the necessary assessment or is competent to complete the diagnostic process in collaboration with other healthcare professionals.

Importantly, ACOT is **not** proposing expanding occupational therapy practice beyond existing expertise. Rather, it is about formally recognizing the diagnostic contributions OTs already make and strengthening the competencies especially associated with safe diagnostic practice through regulatory safeguards. Occupational therapists would continue to practice within their individual competence and collaborate with physicians and other healthcare professionals whenever additional expertise, testing, or specialized assessment is required.

How will Public Protection be Maintained?

Protecting the public is ACOT's fundamental responsibility. For that reason, ACOT is planning for three critical safeguards:

- **Required Authorization.** OTs who want to engage in establishing and/or communicating a diagnosis would be required to first receive authorization from ACOT. Authorization would be dependent on good standing and completion of a Council approved mandatory course on safe diagnostic practices.
- **Mandatory Education.** Only OTs who successfully complete the Council approved Safe Diagnostic Practice Course will be permitted to engage in establishing and communicating a diagnosis.
- **Standard of Practice.** Registrants remain accountable to practice in accordance with ACOT's *Standards of Practice*, *Code of Ethics*, and *Practice Guidelines*. ACOT has developed a standard of practice dedicated to diagnostic practice performance expectations. Without

duplicating performance expectations already established in the existing *Standards of Practice*, the new additional standard sets requirements related to:

- Ensuring a registrant has the necessary ACOT authorization and professional liability insurance that covers diagnostic related activities.
 - Diagnosing within their specific occupational therapy practice area of expertise.
 - Communicating and collaborating with the client and other health professionals throughout the diagnostic process.
 - Managing conflicts of interest arising from diagnosing as part of their practice.
 - Using reasonable skill and care when diagnosing.
 - Using a systematic, comprehensive, and evidence-informed diagnostic reasoning process to establish and justify a diagnosis.
 - Engaging other service providers as needed to rule out other explanations/diagnoses or come to a more precise diagnosis.
 - Facilitating appropriate next steps following completion of the diagnostic process.
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Why is Additional Education Required?

As noted, the diagnostic process is complex and risky. An incorrect, delayed, or missed diagnosis can affect treatment decisions, access to services, and patient outcomes. Therefore, having the right knowledge and training is important. Based on entry to practice education, OTs receive extensive foundational education in:

- Assessment and evaluation.
- Information gathering and analysis.
- Clinical reasoning.
- Decision-making.
- Physical, cognitive, and mental health conditions.
- Collaboration and communication.

These skills provide a strong foundation for diagnostic reasoning. However, occupational therapy entry to practice education has not traditionally focused on the full diagnostic process from a formal diagnostic safety and risk management perspective. To address this, ACOT is establishing a mandatory education requirement for OTs who wish to diagnose. The proposed Safe Diagnostic Practice Course will focus on:

- Collective understanding of diagnosis, provisional or working diagnosis, formal diagnosis, and the diagnostic process.
- Public protection, accountability, and risk management across the full diagnostic process.

- Documentation of diagnostic reasoning in a clear and defensible manner.
- Client and substitute decision-maker involvement in the diagnostic process.
- Interprofessional collaboration from the beginning of the diagnostic process, including when to consult, refer, or seek a second opinion.
- Relevant regulatory and legal considerations, including restricted activities and referral to authorized professionals when needed.

The goal is not to create an entirely new area of competence, but to build on existing OT knowledge and ensure practitioners understand the additional responsibilities and safeguards associated with diagnosing.

Who is Developing the Education?

ACOT has established a Diagnosis Course Advisory Committee that includes:

- Occupational therapists from a variety of practice settings across Alberta.
- Representatives from the University of Alberta's Department of Occupational Therapy and University of Alberta Continuing Professional Education.
- ACOT staff.

The committee is supported by subcommittees focused on:

- Competency and research.
- Risk analysis and management.
- Change management and Communications.

The outputs of these subcommittees serve to inform the Advisory Committee as well as to ensure evidence-based course content. To ensure development of a defensible and evidence-informed course, ACOT has engaged:

- A course developer who is both an occupational therapist and a resident physician.
- A psychometrician.
- A knowledge and information management consultant.

What's Next?

ACOT recognizes that this proposed change represents a significant shift for registrants, system partners, and the public. As such, time is needed to raise awareness of the proposal and undertake meaningful consultation. To support this process, ACOT will undertake a comprehensive engagement and consultation program from September 2026 through April 2027, including in-person and virtual discussion forums, surveys, and other opportunities for input. Feedback gathered through these activities will inform final revisions to the proposed plan, education requirements, and standard of practice. Following consultation and refinement, ACOT will submit the proposals to the Ministries of Advanced Education and Primary and Preventative Health Services for their respective review and consideration.

Occupational therapists authorized to diagnose in Alberta may not be able to do so if they move elsewhere in Canada due to varied legislation and regulatory requirements across the provinces. However, as Alberta leads the way and implements and evaluates this approach, other jurisdictions may look to Alberta's experience when considering similar changes in the future.