

OCCUPATIONAL THERAPIST



Details of standard

Occupation summary

Occupational therapists work across a range of settings, including health, social care, education and other private and voluntary sector organisations. They work with individuals of all ages, including those with physical and mental health conditions, injuries, learning disabilities and palliative care needs, as well as those who are displaced or marginalised from their communities. Occupational therapists also work with families, carers, employers and organisations that support the individual.

An occupational therapist's primary goal is to enable individuals to participate in occupations in a meaningful way. In a therapeutic context, the term 'occupation' refers to everyday activities that people want, need, or are expected to carry out. Using a holistic person-centred approach, informed by evidence-based practice, occupational therapists support service users to carry out everyday occupations, such as dressing, eating, catching the bus to work, or other activities that are important to them.

Occupational therapists work as autonomous, accountable practitioners, individually or within a team. Through assessment, intervention, critical reflection and applying analytical skills, they reach collaborative solutions to service users' needs. Occupational therapists are responsible for reflecting on the effectiveness of their actions and ensuring their knowledge and skills are current, with the aim of continually improving the service they provide. They demonstrate leadership and management qualities, and are required, within the professional and regulatory standards, to contribute to the development of the profession by supporting student therapists and supervising those in other roles.

Typical job titles include:

Occupational therapist

Entry requirements

Typically 3 A levels or equivalent access qualifications

Occupation duties

DUTY	KSBS	
Duty 1 Practise safely and effectively within the scope of practice and within the legal and ethical boundaries of the profession.	K1 K2 K3 K4 K5 K6 K7 K8 K9	
	S1 S2 S3 S4 S5 S6 S7 S8 S9 S10 S11 S12	
	B3 B4	
Duty 2 Look after own health and wellbeing, seeking appropriate support where necessary.	K10 K11	
	S13 S14 S16	
Duty 3 Practise as an autonomous professional, exercising professional judgement.	K12	
	S15 S17 S18 S19 S20 S21	
	B4	
Duty 4 Practise in a non-discriminatory and inclusive manner recognising the impact of culture, equality and diversity.	K13 K14 K15 K16	
	S22 S23 S24 S25	
	B1 B2	
Duty 5 Communicate effectively, maintaining confidentiality and records appropriately.	K17 K18 K19 K20 K21 K22 K23 K24	
	S26 S27 S28 S29 S30 S31 S32 S33 S34 S35 S36	
	B1 B2	
Duty 6 Work appropriately with others.	K25 K26 K27 K28 K29 K30 K31 K32 K33 K34	
	S37 S38 S39 S40 S41 S42 S43 S44 S45 S46 S47	
	B1 B2 B4	
Duty 7 Reflect on, review and assure the quality of own practice.	K35 K36 K37	
	S48 S49 S50 S51 S52 S53 S54	
	B4	
Duty 8 Draw on appropriate knowledge and skills to inform practice and apply the key concepts of the knowledge base	K38 K39 K40 K41 K42 K43 K44 K45 K46 K47 K48 K49 K50 K51 K52 K53 K54	
relevant to the profession.	S55 S56 S57 S58 S59 S60 S61 S62 S63 S64 S65 S66 S67 S68 S69 S70 S71 S72 S73 S74 S75 S76	

B1 B3

Duty 9 Establish and maintain a safe practice environment. K55 K56 K57

S77 S78 S79 S80 S81

B3

Duty 10 Promote public health and prevent ill health. K58 K59

S82 S83

B3

KSBs

Knowledge

K1: The importance of continuing professional development throughout own career.

K2: The importance of safeguarding, signs of abuse and relevant safeguarding processes.

K3: What is required of them by the Health and Care Professions Council, including but not limited to the Standards of conduct, performance and ethics.

K4: That relationships with service users, carers and others should be based on mutual respect and trust.

K5: The importance of valid consent.

K6: The importance of capacity in the context of delivering care and treatment.

K7: The scope of a professional duty of care.

K8: Legislation, policies and guidance relevant to own profession and scope of practice.

K9: The effect of legislation on the delivery of care.

K10: The importance of own mental and physical health and wellbeing strategies in maintaining fitness to practise.

K11: How to take appropriate action if own health may affect own ability to practise safely and effectively, including seeking help and support when necessary..

K12: The need for active participation in training, supervision and mentoring in supporting high standards of practice, and personal and professional conduct, and the importance of demonstrating this in practice.

K13: Equality legislation and how to apply it to own practice.

K14: The duty to make reasonable adjustments in practice.

K15: The characteristics and consequences of barriers to inclusion, including for socially isolated groups.

K16: That regard to equality, diversity and inclusion needs to be embedded in the application of all HCPC standards and across all areas of practice.

- **K17**: When disclosure of confidential information may be required.
- **K18**: The principles of information and data governance and the safe and effective use of health, social care and other relevant information.
- **K19**: The need to ensure confidentiality is maintained in all situations in which service users rely on additional communication support, such as interpreters or translators.
- **K20**: The concepts of confidentiality and informed consent extend to all mediums, including illustrative clinical records such as photography, video and audio recordings and digital platforms.
- **K21**: The characteristics and consequences of verbal and non-verbal communication and recognise how these can be affected by difference of any kind including, but not limited to, protected characteristics, intersectional experiences and cultural differences.
- **K22**: The need to support the communication needs of service users and carers, such as through the use of an appropriate interpreter.
- **K23**: The need to provide service users or people acting on own behalf with the information necessary in accessible formats to enable them to make informed decisions.
- **K24**: The values, beliefs, culture, behaviours and interests of service users and carers, through interview and personal discussion.
- **K25**: The principles and practices of other health and care professionals and systems and how they interact with own profession.
- **K26**: The need to build and sustain professional relationships as both an autonomous practitioner and collaboratively as a member of a team.
- **K27**: The qualities, behaviours and benefits of leadership.
- **K28**: That leadership is a skill all professionals can demonstrate.
- **K29**: The need to engage service users and carers in planning and evaluating diagnostics, and therapeutic interventions to meet own needs and goals.
- **K30**: The need to work with those who provide services in and across different sectors, in order to best meet service user's needs.
- **K31**: The need to adopt an approach which centres on the service user and establish appropriate professional relationships in order to motivate and involve the service user in meaningful occupation.
- **K32**: The value of enabling and empowering service users, with the aim of enhancing their access to all services and opportunities available to them.
- **K33**: Group dynamics and roles.
- **K34**: The need to capitalise, where appropriate, on the dynamics within groups and communities in order to harness the motivation and active involvement of participants.
- **K35**: The value of reflective practice and the need to record the outcome of such reflection to support continuous improvement.

- **K36**: The value of multi-disciplinary reviews, case conferences and other methods of review.
- **K37**: The value of gathering and using data for quality assurance and improvement programmes.
- **K38**: The structure and function of the human body, together with knowledge of physical and mental health, disease, disorder and dysfunction relevant to their profession.
- **K39**: The role(s) of other professions in health and social care and how they may relate to the role of occupational therapist.
- **K40**: The structure and function of health and social care systems and services in the UK.
- **K41**: The occupational nature of human beings and how they function in everyday activities such as self-care, productivity and leisure and their changing needs during the lifecycle.
- **K42**: The inter-relationship between the person, their environment and their chosen occupation, barriers and enablers in this system and how to change each component as part of rehabilitation.
- **K43**: The effect of occupational alienation, dysfunction deprivation and injustice, and the importance of restoring and facilitating opportunities to achieve occupational wellness.
- **K44**: Activity and occupation and their relation to and effect on, health, wellbeing and function as part of occupational formulation, diagnosis and therapeutic use of occupation.
- **K45**: The theoretical basis of, and the variety of approaches to, assessment, planning, intervention and evaluation that focus on occupational outcomes.
- **K46**: The need to identify and assess diverse occupational, physical, psychological, cognitive, cultural and environmental needs and problems of service users and carers.
- **K47**: The use of the current philosophical models for occupational therapy that focuses on service users and holistic person-centred care, and a person's ability to participate in occupations, taking into account physical, biological, psychological and social factors and the environmental context.
- **K48**: The concept of teaching and learning including teaching self-management strategies to service users and carers.
- **K49**: A range of research methodologies relevant to own role.
- **K50**: The value of research to the critical evaluation of practice.
- **K51**: The need to consider the assessment of the health, social care, employment and learning needs of service users including the need for risk assessment and positive risk taking.
- **K52**: The need to agree the goals and priorities of intervention in relation to occupational needs in partnership with service users, basing such decisions on assessment results.
- **K53**: The scientific theories, concepts, principles and professional frameworks underpinning occupational therapy practice.
- **K54**: The need to meet the emotional, social, psychological, cognitive and physical health-based occupational needs of service users across a range of practice areas and how this can vary across a range of practice areas.

- **K55**: The need to maintain the safety of themselves and others, including service users, carers and colleagues.
- **K56**: Relevant health and safety legislation and local operational procedures and policies.
- **K57**: Appropriate moving and handling techniques.
- **K58**: The role of the profession in health promotion, health education and preventing ill health.
- **K59**: How social, economic and environmental factors, wider determinants of health, can influence a person's health and well-being.

Skills

- **\$1**: Identify the limits of own practice and when to seek advice or refer to another professional or service.
- **S2**: Recognise the need to manage own workload and resources safely and effectively, including managing the emotional burden that comes with working in a pressured environment.
- **S3**: Keep own skills and knowledge up to date.
- **S4**: Maintain high standards of personal and professional conduct.
- **S5**: Engage in safeguarding processes where necessary.
- **S6**: Promote and protect the service user's interests at all times.
- **S7**: Respect and uphold the rights, dignity, values, and autonomy of service users, including own role in the assessment, diagnostic, treatment and/or therapeutic process.
- **S8**: Maintain high standards of care in all circumstances.
- **S9**: Exercise a duty of care.
- **\$10**: Obtain valid consent, which is voluntary and informed, has due regard to capacity, is proportionate to the circumstances and is appropriately documented.
- **\$11**: Apply legislation, policies and guidance relevant to own profession and scope of practice.
- **\$12**: Recognise the power imbalance which comes with being a health care professional, and ensure it is not abused for personal gain.
- **\$13**: Identify own anxiety and stress and recognise the potential impact on own practice.
- **\$14**: Develop and adopt clear strategies for physical and mental self-care and self-awareness, to maintain a high standard of professional effectiveness and a safe working environment.
- **\$15**: Recognise that they are personally responsible for, and must be able to, justify their decisions and actions.
- **\$16**: Use own skills, knowledge and experience, and the information available, to make informed decisions and / or take action where necessary.
- **\$17**: Make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately.

- **\$18**: Make and receive appropriate referrals, where necessary.
- **\$19**: Exercise personal initiative.
- **\$20**: Demonstrate a logical and systematic approach to problem solving.
- **S21**: Use research, reasoning and problem solving skills when determining appropriate actions.
- **\$22**: Respond appropriately to the needs of all different groups and individuals in practice, recognising this can be affected by difference of any kind including, but not limited to, protected characteristics, intersectional experiences and cultural differences.
- **\$23**: Recognise the potential impact of own values, beliefs and personal biases, which may be unconscious, on practice and take personal action to ensure all service users and carers are treated appropriately with respect and dignity.
- **S24**: Make and support reasonable adjustments in owns and others' practice.
- **S25**: Actively challenge barriers to inclusion, supporting the implementation of change wherever possible.
- **S26**: Adhere to the professional duty of confidentiality.
- **S27**: Respond in a timely manner to situations where it is necessary to share information to safeguard service users, carers and/or the wider public and recognise situations where it is necessary to share information to safeguard service users, carers and/or the wider public.
- **\$28**: Use effective and appropriate verbal and non-verbal skills to communicate with service users, carers, colleagues and others.
- **S29**: Communicate in English to the required standard for the profession.
- **\$30**: Work with service users and/or own carers to facilitate the service user's preferred role in decision-making, and provide service users and carers with the information they may need where appropriate.
- **S31**: Modify own means of communication to address the individual communication needs and preferences of service users and carers, and remove any barriers to communication where possible.
- **S32**: Use information, communication and digital technologies appropriate to own practice.
- **S33**: Actively listen to a service user's occupational narrative and analyse the content in order to plan for the future.
- **\$34**: Keep full, clear and accurate records in accordance with applicable legislation, protocols and guidelines.
- **S35**: Manage records and all other information in accordance with applicable legislation, protocols and guidelines.
- **\$36**: Use digital record keeping tools, where required.
- **\$37**: Work in partnership with service users, carers, colleagues and others.
- **S38**: Contribute effectively to work undertaken as part of a multi-disciplinary team.

- **S39**: Identify anxiety and stress in service users, carers and colleagues, adapting own practice and providing support where appropriate.
- **\$40**: Identify own leadership qualities, behaviours and approaches, taking into account the importance of equality, diversity and inclusion.
- **S41**: Demonstrate leadership behaviours appropriate to own practice.
- **S42**: Act as a role model for others.
- **S43**: Promote and engage in the learning of others.
- **S44**: Ensure intervention reviews are informed by changes in service user's circumstances.
- **S45**: Recognise the involvement of public, private and voluntary sector providers in the delivery of health, care and other services which affect occupational performance.
- **\$46**: Facilitate group work in order to maximise support, learning and change within groups and communities.
- **\$47**: Work in appropriate partnership with service users in order to evaluate the effectiveness of occupational therapy intervention.
- **S48**: Recognise and evaluate the potential of occupational therapy in new and emerging areas of practice.
- **S49**: Engage in evidence-based practice.
- **\$50**: Gather and use feedback and information, including qualitative and quantitative data, to evaluate the responses of service users to own care.
- **\$51**: Monitor and systematically evaluate the quality of practice, and maintain an effective quality management and quality assurance process working towards continual improvement.
- **\$52**: Participate in quality management, including quality control, quality assurance, clinical governance and the use of appropriate outcome measures.
- **\$53**: Evaluate care plans or intervention plans using recognised and appropriate outcome measures, in conjunction with the service user where possible, and revise the plans as necessary.
- **\$54**: Demonstrate awareness of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process.
- **\$55**: Apply the theoretical concepts underpinning occupational therapy, including concepts of:- anatomy-physiology- pathology- human development- ergonomics- biomechanics- psychology- sociology-occupational science.
- **\$56**: Apply the theoretical concepts underpinning occupational therapy to inform the understanding of physical, emotional and mental health.
- **\$57**: Analyse activity and occupation and their relation to and effect on, health, wellbeing and function as part of occupational formulation, diagnosis and therapeutic use of occupation.
- **\$58**: Demonstrate awareness of physical, attitudinal, social, economic, educational, environmental and work-related policies and services and their effect on people within a diverse society.

- **\$59**: Recognise the value of the diversity and complexity of human behaviour through the exploration of different physical, psychological, cognitive, environmental, social, emotional and spiritual perspectives.
- **\$60**: Demonstrate awareness of the origins and development of occupational therapy, including the evolution of the profession towards the current emphasis on autonomy and empowerment of individuals, groups and communities.
- **S61**: Support others with the facilitation of teaching and learning including teaching self-management strategies to service users and carers.
- **\$62**: Change own practice as needed to take account of new developments, technologies and changing contexts.
- **S63**: Gather appropriate information.
- **S64**: Analyse and critically evaluate the information collected.
- **S65**: Select and use appropriate assessment techniques and equipment.
- **S66**: Undertake and record a thorough, sensitive, and detailed assessment.
- **S67**: Undertake or arrange investigations as appropriate.
- **\$68**: Conduct appropriate assessment or monitoring procedures, treatment, therapy or other actions safely and effectively.
- **S69**: Critically evaluate research and other evidence to inform own practice.
- **\$70**: Engage service users in research as appropriate.
- **\$71**: Select and use relevant standardised and non-standardised assessment techniques and observation to gather information about the service user's functional and occupational abilities, occupational performance and participation, taking account of the cultural and environmental context.
- **\$72**: Formulate specific and appropriate care or case management plans including the setting of timescales.
- **\$73**: Select as appropriate, the specific occupations and activities for use as therapeutic media, taking into account the particular needs of service users.
- **\$74**: Use the scientific theories, concepts, principles and professional frameworks underpinning occupational therapy practice.
- **\$75**: Demonstrate awareness of the broad range of occupations and activities that can be used in intervention and how these should reflect the individual's occupational needs and preferences.
- **\$76**: Select or develop therapeutic media and environments, and adapt these as appropriate to meet service user's needs, build on their abilities and enhance their occupational performance and participation.
- **\$77**: Demonstrate awareness of relevant health and safety legislation and comply with all local operational procedures and policies.

- **\$78**: Work safely, including being able to select appropriate hazard control and risk management, reduction or elimination techniques in a safe manner and in accordance with health and safety legislation.
- **\$79**: Select appropriate personal protective equipment and use it correctly.
- **\$80**: Establish safe environments for practice, which appropriately manages risk.
- **\$81**: Apply appropriate moving and handling techniques.
- **\$82**: Empower and enable individuals, including service users and colleagues, to play a part in managing own health.
- **\$83**: Engage in occupational health, including being aware of immunisation requirements.

Behaviours

- **B1**: Use a personalised approach to care enabling the people you work with to bring about change in order to achieve their chosen occupational goals.
- **B2**: Enable occupational justice and be an agent for change through actively anti-discriminatory practice with a diverse range of individuals, groups, and communities.
- **B3**: Practice improving the economic, social and environmental sustainability of health and care services recognising the interdependence and ensuring belonging for the people we work with.
- **B4**: Be professionally curious and evidence-informed to enable lifelong professional and personal development, including exhibiting leadership behaviours.

Qualifications

English and Maths

Apprentices without level 2 English and maths will need to achieve this level prior to taking the End-Point Assessment. For those with an education, health and care plan or a legacy statement, the apprenticeship's English and maths minimum requirement is Entry Level 3. A British Sign Language (BSL) qualification is an alternative to the English qualification for those whose primary language is BSL.

Other mandatory qualifications

BSc (Hons) degree in Occupational Therapy or Level 7 qualification approved by the Health and Care Professions Council (HCPC) where the apprentice already holds a Level 6 degree

Level: 6 (integrated degree)

Additional details

Regulated standard

This is a regulated occupation.

Regulator body:

Health and Care Professions Council

Training Provider must be approved by regulator body

EPAO must be approved by regulator body

Occupational Level:

6

Duration (months):

48

Review

Example progression routes

Advanced clinical practitioner (integrated degree)

Enhanced clinical practitioner

Version log

VERSION	CHANGE DETAIL	EARLIEST START DATE	LATEST START DATE	LATEST END DATE
1.2	Standard, end- point assessment plan and funding band revised but funding remained the same.	01/09/2023	Not set	Not set
1.1	Funding band revised but remains £24000. End-point assessment plan revised.	10/11/2021	31/08/2023	Not set
1.0	Retired	07/12/2018	09/11/2021	Not set

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