

DIVISION SCOPE OF SERVICE

Division: NORTH CAROLINA
Classification: CERTIFIED-LICENSED OCCUPATIONAL THERAPIST
Applicant Name:

<p>Certified-Licensed Occupational Therapist: The Certified-Licensed Occupational Therapist must have equivalent qualifications, competence and function in the same role as employed individuals performing the same or similar services at the facility.</p>
<p>Definition of Care or Service: The Certified-Licensed Occupational Therapist evaluates and treats patients recovering from injury or disease. Scope of Service may include:</p> <ul style="list-style-type: none"> • Restores function, improve mobility, relieve pain, and prevent or limit permanent physical disabilities • Examines patient's medical history • Test and measures patient's strength, range of motion, balance, coordination, posture, muscle performance and motor function • Demonstrates Clinical and Service excellence behaviors to include code of HCA Healthcare conduct core fundamentals in daily interactions with patients, families, co-workers and physicians.
<p>Setting(s):</p> <ul style="list-style-type: none"> • Healthcare facilities including but not limited to hospitals, outpatient treatment facilities, imaging centers and physician practices • Patient care areas, all settings
<p>Supervision:</p> <ul style="list-style-type: none"> • Direct supervision by department director, site manager or designee <ul style="list-style-type: none"> ○ Indirect supervision by licensed occupational therapist and the National Board of Certified Occupational Therapist (NBCOT) <p>Evaluator: Physical Therapy department director or designee</p> <p>Tier Level: 2</p> <p>eSAF Access Required: YES</p>
<p>Qualifications:</p> <ul style="list-style-type: none"> • Bachelor's Degree or higher • Occupational Therapist Licensed • American Heart Association or Red Cross health care provider BLS Certification <p>Preferred Qualifications:</p> <ul style="list-style-type: none"> • Certified as a Occupational Therapist <p>NOTE: Where education may not be defined in qualifications area of the Scope, HCA Healthcare requires the highest level of education completed (not training or courses) confirmed on your background check.</p>
<p>State Requirements:</p> <ul style="list-style-type: none"> • Active Occupational Therapy License in the state of North Carolina
<p>Experience: Minimum of 1 year as a certified Occupational Therapist</p>
<p>Competencies: The Certified-Licensed Occupational Therapist will demonstrate:</p>

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- Safe and effective operation of therapy equipment
 - Consistently obtains quality outcomes
 - Maintains equipment in good working order
 - Demonstrates effective infection control practices related to equipment operation
- Accurate patient information review and evaluation
 - Uses at least two ways to identify patients before treating or performing a procedure
 - Verifies that the requested procedure correlates with the patient's clinical history, presentation and physician order
- Appropriate Evaluation and Treatment Results
 - Performs occupational therapy evaluation and develops treatment plan to comply with applicable protocols and treatment guidelines
 - Utilizes outcome measures to assess the results of interventions administered to patients
 - Notifies the appropriate health provider when immediate treatment is necessary, based on procedural findings and patient condition
 - Communicates appropriate discharge planning needs to the provider and healthcare team
 - Documents in a timely manner as per facility policy and notifies the provider of recommendations.
- Infection Prevention
 - Practices consistent hand hygiene
 - Uses personal protective equipment (PPE)
 - Required immunizations per Division requirements
 - Complies with Isolation precautions

References:

N.Carolina Board of Occupational Therapy http://www.ncbot.org/otpages/Application_Process.html
Pathway to becoming an Occupational Therapist <http://www.wrksolutions.com/for-individuals/career-exploration/occupational-therapists>
Occupational Therapist Verification http://www.ncbot.org/otpages/License_Verification.html
NBCOT <https://www.nbcot.org/>

Your signature confirms you will be able to comply with the Qualifications and Competencies listed within this Scope of Service and that you will confirm education via your background check.

Applicant Printed Name: _____

Signature: _____

Date: _____