

STATE OF SOUTH DAKOTA CLASS SPECIFICATION

Class Title: Occupational Therapist

Class Code: 51142
Pay Grade: DA

A. Purpose:

Conducts, coordinates, guides and provides occupational therapy services to improve the function, comfort and training potential of physically and mentally handicapped, injured or disabled individuals in a state institution.

B. Distinguishing Feature:

Occupational Therapist supervises, trains, and directs therapy staff and program in the provision of occupational therapy services. The Occupational Therapist is distinguished from the occupational therapy assistant by the ability to evaluate patient performance and progress with a variety of testing methods upon order from a physician. Incumbents are distinguished from other allied health-care personnel that enhances the development of skills for optimum functioning in independent daily life, while the physical therapist's function is to restore bodily functions, relieve pain and prevent or limit permanent disability to those suffering a disability injury or disease.

C. Functions:

(These are examples only; any one position may not include all of the listed examples nor do the listed examples include all functions that may be found in positions of this class.)

1. Supervises and directs the daily operation and maintenance of the Occupational Therapy Department to improve patients' mental and physical capability or to slow patient degeneration.
 - a. Interviews and selects staff.
 - b. Provides training and work direction.
 - c. Approves leave requests.
 - d. Addresses staff problems and recommends disciplinary action.
 - e. Conducts performance appraisals and completes performance documents.
2. Evaluates individual patient neuromuscular, sensory integration, self-care memory, oral motor, and functional hand use skills by using various testing methods to develop a recommended plan for patient treatment and future review.
 - a. Evaluates need for therapeutic adaptations such as restructuring physical environment to assist in self-care, providing orthotic splints, braces and slings, providing assistance or adaptive devices, or train in prosthetics.
 - b. Prepares and implements treatment programs for groups or individuals after performing evaluation.
 - c. Manufactures, obtains, repairs, revises, and replaces splints and adaptive equipment, and directs and monitors equipment usage by staff to improve level of patient functioning.
 - d. Reviews charts of assigned patients and maintains patient records by recording occupational therapy evaluations and writing progress notes in patients' charts.
3. Teaches prevention of disability and dysfunction to the facility staff with programs such as energy conservation, joint protection and body mechanics, positioning and the coordination of daily activities to prevent patients' disability and slow degeneration process.

4. Attends and serves as consultant at interdisciplinary treatment team meetings to contribute to the comprehensive individualized treatment plan and resolve patient functional training and treatment concerns.
5. Performs other work as assigned.

D. Reporting Relationships:

Typically supervises therapy personnel.

E. Challenges and Problems:

Challenges include becoming familiar with the mental and behavioral disorders and multi-handicapped conditions of the patients found at the state institutions versus patients found in a hospital setting; developing ways to motivate severely handicapped clients who are difficult to motivate and teach because they are unreliable and inconsistent in their verbal and physical responses; keeping abreast of research and new developments for all categories of patients and implement these changes in the evaluation of institutionalized clients; motivating staff to conduct the treatment plans in spite of very slow progress results on the part of the patients; communicating to the ward staff on all shifts the importance of carrying out the long-term therapy goals rather than using the easier method of providing the immediate needs for clients; and dealing with time scheduling problems because there is only one registered Occupational Therapist at each institution.

F. Decision-making Authority:

Decisions include planning expenditures of occupational therapy funds; assignment of subordinates and their duties; determining occupational therapy policy and procedures based on hospital policy; writing staff orders for treatment based on evaluation and approval from the physician; determining the content of occupational therapy related courses and training program; and recommending changes in treatment to the physician.

Decisions referred include final approval of the budget; requests of continuing education; and behavioral problems are referred to the psychologist or treatment team.

G. Contact with Others:

Daily contact with staff in all training and treatment areas of the hospital, the patients, dietary staff and subordinates to conduct, coordinate, provide and oversee the provision of occupational therapy services to improve or maintain the physical or mental function of the patients at the facility; regular contact with pre-occupational therapy students and occupational therapy interns to supervise, train, and encourage them to consider a career helping the mentally, behaviorally, and multi-handicapped; and occasional contact with the patient's family prior to discharge to discuss ongoing home treatment.

H. Working Conditions:

Occupational therapy/classroom typesetting and must lift, move and position patients. The possibility of physical harm and verbal abuse from unpredictable or explosive patients is always present. Because of the short attention span and severity of the handicaps of the patients, the

incumbent is constantly working in a stressful situation that shows very slow progress in the patients' rehabilitation processes.

I. Knowledge, Skills and Abilities:

Knowledge of:

- the methods, techniques, and purposes of occupational therapy as they apply to a given rehabilitative setting;
- new developments in the field of occupational therapy;
- the care and operation of occupational therapy equipment.

Ability to:

- establish rapport with patients and staff;
- evaluate the condition of patients in relation to occupational therapy and to establish an appropriate treatment program;
- initiate new programming;
- maintain accurate records and reports of patient treatment and progress;
- supervise.

J. Licenses and Certification:

Must be or eligible to be registered as an Occupational Therapist and AOTA licensed.