



Nova Scotia
Occupational Therapy
Regulator

Re-Entry Program Guide

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Introduction

The mandate of the Nova Scotia Occupational Therapy Regulator is to ensure the public receives safe, effective, and ethical care. One way that NSOTR ensures applicants for licensure possess current knowledge and the skills and judgement to practice safely and effectively is our **currency requirement**:

- applicants must demonstrate that they have either:
 - graduated from a recognized Canadian Occupational Therapy program in the past 18 months; or
 - have 600 currency hours in the past 3 years. Currency hours are defined as paid hours of service within the scope of practice of the profession of occupational therapy.

Applicants who do not meet this requirement may be eligible for a **Conditional** licence to participate in the Regulator's **Re-Entry Program**. The Regulator's Re-Entry Program provides a mechanism to allow applicants who do not meet the currency requirement to return to practice while protecting the public.

Once an applicant has completed the Re-Entry Program, they may be eligible for a Practicing Licence with the Regulator. Applicants must meet all other registration and licensure requirements before starting the Re-Entry Program.

As part of this document, NSOTR has included:

- Expectations for Re-Entry Program participants and supervising therapists
- Guidance on how to create and use Learning Contracts
- Templates:
 - Learning Contract
- Required Forms:
 - *Re-Entry Program Application Form*
 - *Supervision Evaluation Form* (doubles as the *Re-Entry Program Evaluation Form*)

Re-Entry Program Requirements

Successful completion of the Re-Entry Program provides the Regulator with objective evidence that the applicant has the knowledge, skills, and abilities to provide safe, ethical, and quality care. The Regulator acknowledges that Re-Entry applicants may have previously demonstrated safe and ethical practice; therefore, this is not a training program but an opportunity to refresh skills and knowledge.

Re-Entry Program requirements are personalized based on the applicant's past experience, the length of time they have been away from practice, and the position in which they want to practice, among other factors.

Re-Entry Program requirements may include:

- A determined period of supervised practice under a licensed occupational therapist;
- Completion of the National Occupational Therapy Examination (NOTCE);
- Completion of a Competence Assessment;
- Development and completion of a learning contract with the supervising therapist; and/or
- Completion of specific learning activities, at the applicant's expense, including:
 - formal academic programming;
 - position-specific training and workshops; and/or
 - a review of Regulator documents, including but not limited to, legislation, regulations, competencies, and practice standards and guidelines.

Supervised practice allows development of knowledge and skill while evaluating the applicant's performance. Acknowledging previous experience, the Regulator determines the number of hours to be completed based on the applicant's currency hours over the past 10 years.

Completion of the Regulator-approved **examinations** or a **Competence Assessment** provides objective evidence the applicant has obtained the level of skill required to re-enter professional practice.

A **review of Regulator documents** ensures that the applicant is up-to-date on current standards and aware of the Regulator's on-going requirements for the practice of occupational therapy.

Finally, developing a **learning contract** allows individuals to identify their strengths and weaknesses and provides an independent learning structure to meet individual goals.

Re-Entry Supervising Therapist Requirements

To act as a supervising therapist for a participant in the Re-Entry Program, an occupational therapist must:

- hold a practicing licence with NSOTR in good standing*
- reside in Nova Scotia**
- practice at the same physical site as the supervised OT during approximately the same hours they will be practicing there**
- be engaged in a similar scope and area of practice to the supervised OT
- have a minimum three (3) years of full-time practice experience

* **“Good standing”** means a registrant who holds a licence, is current in their continuing competence requirements, does not owe any outstanding fees or costs to the Regulator and is not subject to any licensing sanction or ongoing regulatory process that impacts their ability to act as a supervisor.

** these requirements can be waived at the discretion of the Registrar.

A supervising occupational therapist also agrees to:

- comply with any additional requirements concerning the supervision or practice arrangement of the supervised OT which are specified by the Registration and Licensing decision maker or an authorized committee;
- promptly report to NSOTR in writing concerning the performance and conduct of the supervised OT upon request;
- notify NSOTR promptly if they are concerned about the practice of the supervised OT or if any change occurs in supervision;
- remain in good standing with NSOTR for as long as they act as a supervising therapist and notify NSOTR immediately if they are no longer eligible to be a supervising therapist; and
- if necessary, enter into a written agreement with NSOTR that defines additional obligations, procedures, or conditions for them to act as a supervising therapist in the Re-Entry Program.

Re-Entry Program Application Process

1. Applicant submits a complete application for registration and licensure to the Regulator through the [online portal](#).
2. Applicant is identified (self-identified or by NSOTR staff) as not meeting the currency requirement.
3. Applicant identifies areas of practice they wish to pursue and finds supporting employer and supervising therapist. It is the applicant's responsibility to identify and arrange an appropriate site and/or placement for a period of supervised practice. NSOTR cannot assist in locating an employer or supervising therapist.
4. Applicant submits a completed **Re-Entry Program Application Form** to the Regulator, signed by the applicant, their proposed employer, and their proposed supervising therapist(s).
5. The Registrar or the Registration and Licensing Committee reviews the application and proposed supervision arrangement, and issues a Decision Letter, which may include changes to the supervision arrangement or additional terms, conditions and/or restrictions.
6. The applicant will confirm their agreement with the changes, terms, conditions, and/or restrictions in the Decision Letter.
7. If all other requirements are met, the Registrar will grant the applicant a Conditional License and notify the applicant and supervising therapist that the applicant may now begin their period of supervised practice.

Supervision Plans:

A Supervision Plan explains how and when supervision will take place and sets clear expectations and procedures for supervised practice. It is often combined with a mentorship plan.

While this Supervision Plan Template provides a guide on the structure of the supervision, it is also important to **communicate clear expectations to all parties** on how supervision will occur during the period that this Supervision Plan is in place.

For this reason, NSOTR strongly encourages that the Supervision Plan be developed in dialogue between the supervised registrant, their supervisor, and the employer and account for the fit of all parties' learning and communication styles and support needs.

A Supervision Plan should include:

- The frequency and duration of meetings between the supervisor(s) and the OT
- If there are multiple supervisors, the periods during which each person will be responsible for supervising the supervised OT
- When and if in-person or direct observations of practice will occur
- How the OT will contact their supervisor(s) in urgent or emergency situations
- How the supervisor(s) plans on monitoring practice while off-site (for example, evaluation of charting, caseload management, file review, etc.)
- Any restrictions or additional safeguards in place to ensure the safety of clients and the supervised OT (for example, not using a specific higher-risk practice approach without supervision or oversight appropriate to the situation and the supervised OT's competencies)

A Template for a Supervision Plan is included in the *Re-Entry Program Application Form*.

During the Re-Entry Program

Once the Regulator grants the Applicant a Conditional Licence, the applicant can start practicing under supervision and use the titles Occupational Therapist, OT, or OT Reg. (N.S.). While the applicant is in the Re-Entry program, they must follow the following process:

1. Before starting supervised practice, the applicant will provide written confirmation to NSOTR that they have read any required documents.
2. During the first week of supervised practice, the applicant and supervising therapist(s) will develop an individual Learning Contract and forward a copy to the Registrar for review.
3. The Registrar will review the Learning Contract and provide written feedback.
4. After half of the required supervised practice hours are completed, the supervising therapist provides the applicant and the Registrar with a midterm evaluation using the Regulator Re-Entry Program Evaluation Form.
5. Upon completing the required supervised practice hours, the supervising therapist provides the applicant and the Registrar with a final evaluation and completed learning contract.
6. If the applicant has completed their required supervised practice hours but has not yet met another requirement of their Re-Entry Program (for example, passing the NOTCE), they may continue practicing under supervision until they complete the Re-Entry Program.
7. Once the Registrar receives documentary evidence that the applicant has met all requirements of the Re-Entry Program, they will assess the applicant's eligibility for a Practicing Licence.
8. If all requirements are met, the Registrar will grant a Practicing Licence and notify the applicant.

Upon completing the Re-Entry Program, the applicant will have **18 months** to obtain sufficient currency hours to maintain licensure under the NSOTR *Registration and Licensure Policies*.

Expectations for Supervised OTs in the Re-Entry Program:

- 1 The supervised OT will inform their employer(s) and supervising therapist(s) of the requirements for Re-Entry supervised practice and any relevant deadlines.

- 2 Before starting employment, the supervised OT will ensure they have approval from the Regulator for their Re-Entry supervised practice and submit all required documents to the Regulator, including the supervision agreement(s) and a supervisory plan.

- 3 The supervised OT will ensure that they meet all supervision requirements specified by the Registration and Licensing Committee and/or the Registrar in the Decision Letter for Re-Entry to Practice.

- 4 The supervised OT will provide written evidence to NSOTR that they have read and reviewed all required NSOTR documents, practice standards, and regulations prior to starting supervised practice.

- 5 The supervised OT will create, with their supervising therapist(s), a learning contract that defines the supervised OT's learning needs and the expectations of the supervised practice period. The learning contract should allow the applicant to demonstrate they meet the *Competencies for Occupational Therapists in Canada, 2021* and will form the basis for the mid-term and final performance review by the supervising therapist.

- 6 The supervised OT will submit the completed Learning Contract to NSOTR for approval within one week of beginning supervised practice, unless an extension is granted by NSOTR.

- 7 The supervised OT will maintain a record of supervised hours which will be validated by their supervising therapist(s) and NSOTR.

- 8 The supervised OT will notify NSOTR if their employment or the availability of a supervisor change while they are enrolled in the Re-Entry Program. The supervised OT will only continue practicing once alternative supervisory arrangements are in place. Any changes to a supervision agreement or a supervisory plan are subject to approval by NSOTR.

- The supervised OT accepts responsibility to initiate communication with their supervising therapist when they require support and to meet all requirements of the supervisory plan and Learning Contract, including attending all scheduled meetings with their supervising therapist(s) and promptly providing all information or documentation requested by their supervising therapist(s) or NSOTR.

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- If required to write the NOTCE, the supervised OT will sit the exam at the first available opportunity, except where extenuating circumstances apply, and will inform NSOTR of their examination result within one month of receiving the result.
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Expectations of Re-Entry Supervising Therapists:

- Unless otherwise approved by the Registrar, a Re-Entry Supervising Therapist must be an on-site occupational therapist licensed with NSOTR with at least three years of full-time experience, including at least one year in the province of Nova Scotia.
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- The supervising therapist will ensure they have support from their employer to supervise a supervised OT in the Re-Entry Program.
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- During the first week of supervised practice, the supervising therapist will develop a Learning Contract with the supervised OT according to their learning needs and the needs of their specific position. This Contract will be submitted to NSOTR for approval by the applicant.
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- The supervising therapist is responsible for ensuring that the Learning Contract adheres to the goals outlined by the applicant and NSOTR and addresses any learning needs that would prevent the supervised OT from providing safe, ethical, and effective care.
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- The supervising therapist will ensure that they are aware of the schedule, practice area(s) and activities, client population, and general conduct of the supervised OT, as specified in a supervision plan approved by the Regulator. Supervision will involve direct and regular observation of practice and clinical oversight, unless otherwise approved by the Registrar.
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- 6** The supervising therapist will ensure they are available to provide support and oversight to the supervised OT as specified in the supervisory plan.
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- 7** The supervising therapist must submit an evaluation of the applicant's performance to NSOTR using the NSOTR Supervision Evaluation Form at the midway point and at the conclusion of the required period of supervised practice. The supervising therapist will provide additional evaluations and/or reports upon request.
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- 8** If the supervised OT has multiple supervising therapists, the primary supervisor will seek their feedback and contribution when completing the Learning Contract, supervision plan, and midterm and final evaluations.
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- 9** The supervising therapist will immediately notify NSOTR if they have any concerns or issues regarding the supervision agreement, the supervisory plan, the Learning Contract, or the conduct or competence of the supervised therapist.
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- 10** The supervising therapist will ensure that they have sufficient knowledge and skill in the practice area(s) in which the supervised OT will be working to ensure that the supervised OT is practicing safely, ethically, and effectively and provide practice support if necessary.
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- 11** The supervising therapist will validate the supervised OT's record of completed supervised hours.
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- 12** The supervising therapist will remain in good standing with NSOTR and will continue to supervise the supervised OT for as long as they remain in the Re-Entry Program. The supervising therapist will notify the NSOTR immediately if they are no longer eligible to act as a supervising therapist for any reason.
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Using Learning Contracts¹

Identifying Strategies to Address Learning Needs

Question: What knowledge, skills and behaviours do you need to develop now to meet your identified learning needs?

A **learning need** is the gap between where you are now and where you want or need to be in regard to mastering a new set of competencies. Before you try to develop strategies to address your learning, it is helpful to clearly understand the competency you are trying to achieve.

A **competency** can be thought of as the ability to do something at some level of proficiency, and is usually composed of some combination of knowledge, judgment, understanding, skill, attitude, and values. An everyday example would be “the ability to ride a bicycle from your home to the store.” This is a competency that involves:

- some knowledge of how a bicycle operates and the route to the store;
- an understanding of some of the dangers inherent in riding a bicycle;
- skill in mounting, pedaling, steering, and stopping a bicycle;
- an attitude of desire to ride a bicycle;
- value in the exercise it will yield.

"Ability to ride a bicycle in busy city traffic" would be a higher-level competency that would require greater knowledge, understanding, skill, etc.

The [*Competencies for Occupational Therapists in Canada*](#) outlines the competencies required to practice occupational therapy and will serve as a useful resource. You may want to reflect on these statements and consider which activities in your practice apply to each.

¹ NSOTR would like to acknowledge and thank the Occupational Therapy Program, School of Rehabilitation Science, at McMaster University which provided the materials on which this guide is based.

Writing Objectives

What is it that you wish to do or demonstrate? In many cases the learning objectives will be identified for you by your supervisor, employer, or by NSOTR. However, you should ensure that the learning objectives are clearly outlined and you understand them and the steps you need to take to meet them.

A well-defined objective should be:

S – specific

M – measurable

A – achievable

R – realistic

T – time limited

The following process is recommended for the development, implementation and evaluation of the learning contract:

1. (a) The supervising therapist provides the supervised OT with an orientation to the workplace.

(b) The supervised OT provides the supervising therapist with an orientation to their learning needs based on the specific nature and requirements of the clinical setting, their past experience, and their current level of knowledge and skill.
2. The supervised OT and supervising therapist develop specific learning objectives related to the identified learning needs that are clear and measurable.
3. The supervised OT consults with the supervising therapist to identify learning strategies (e.g. observation, discussion, role modeling) and potential learning resources (e.g. books, journals, resource people, community services). The onus is on the supervised OT to identify strategies and is thus able to choose learning experiences that are best suited to their learning needs and personal learning style.
4. The supervised OT and supervising therapist agree on the evidence of accomplishments that will be used for the evaluation (e.g. behaviours, reports, direct observation and presentations).

5. The supervised OT and supervising therapist determine how the evidence will be evaluated (e.g. what is the required performance, what standards are being used to measure performance and under what conditions learning will take place?). The grading scheme for each objective must clearly specify what evidence must be provided to demonstrate if the learning objective has been met or not.
6. The supervised OT and supervising therapist have a mutual responsibility to meet and evaluate the supervised OT's performance. In preparation for evaluations, both the supervised OT and supervising therapist should reflect on the supervised OT's performance and prepare documentation to validate their evaluation.

COMPONENTS OF A LEARNING CONTRACT

Objective	Resources and Approach/Strategy	Evidence of Accomplishments	Grading	Timelines/ Checkpoints
This column answers the question: What is the therapist required to do or demonstrate? 1. An objective should be: S - specific M - measurable A - achievable R - realistic T - time limited	This column answers the question: How will the therapist prepare to achieve the objective? 1. Resources should be specifically named and prioritized. They may include reference texts, articles, websites, other clinicians, community resources. 2. The approach/ strategy should describe the process. Examples include: - opportunity to observe skills or tasks - discussion and feedback with therapist - documenting needs, actions and time management	This column answers the question: What will the therapist say, write, or do to prove that they have the targeted knowledge, skill(s), judgement or behaviour(s)? - Identify the specific evidence that the therapist must provide – what will the supervisor be looking for? - The evidence should be prioritized. - Evidence should include quantity (e.g. general behaviours and work habits) and quality (e.g. specialized knowledge or advanced skills)	This column answers the question: What are the guidelines or criteria for determining whether each objective has been met or not?	This column answers the question: When will the therapist complete the objective? When will the supervisor review the therapist's progress? 1. Provide a timeframe for the completion of specific evidence and the overall objective.

SAMPLE LEARNING CONTRACTS

Example One: John Sample, OT

Objective #1	Resources and Approach/ Strategy	Evidence of Accomplishments	Grading	Timelines/ Checkpoints
John Sample will be able to demonstrate safe and effective cognitive rehabilitation to individuals with traumatic brain injuries and strokes by week 6. Cognitive rehabilitation will include: - assessment of attention, memory, executive functions, and behaviours and their impact on daily occupation; - attention retraining; - teaching memory and metacognitive strategies; - grading and adapting relevant daily activities; and - behavioural intervention.	- ACRM Cognitive Rehabilitation Manual - Cognitive Rehabilitation: An Integrative Neuropsychological Approach - Literature review - Direct Practice observation with Supervisor A - Participation in memory group and breakfast club - Team consultation (SLP, neuropsych) - Attend course offered by Joan Toglia - In-service Program	- List of readings completed - Evaluation of practice Supervisor A - Positive feedback from other health professionals on the team - Successful assistance with group programs - Course certificates and in-service program documents - Provide in-service program to other OTs	This objective will be met if John provides all the evidence listed under “evidence of accomplishments.” Since John is new to this practice area, Supervisor A and other colleagues will evaluate as a new practitioner of cognitive rehabilitation, but will expect his competency, knowledge, and skills to grow over the weeks If some evidence is incomplete (e.g. only some of the assigned readings are complete or colleagues note areas for improvement), this objective will be “partially met” and Supervisor A will recommend specific areas for further development.	Review in one month with practice supervisor – feedback from team leader to be provided.
Evaluation Supervisor A: John has demonstrated successful completion of this objective. Based on my observations, John is practicing safely and effectively, but I recommend further development with teaching metacognitive strategies and providing cognitive rehabilitation to clients with a stroke to improve his ability to practice independently in these areas. Positive feedback received from colleagues and the in-service John provided.				

SAMPLE LEARNING CONTRACTS

Example One: *John Sample, OT*

Objective #2	Resources and Approach/ Strategy	Evidence of Accomplishments	Grading	Timelines/ Checkpoints
John will work collaboratively with the team and facilitate a coordinated approach to care with other health care professionals, caregivers and team members.	Resource: - NSH Workshop on Interdisciplinary Collaboration - Feedback from other professionals on team - Observation by supervisor and other OTs on team Approach: - Case review meetings and discussions with OT peers prior to team meetings - Debriefing meeting with team leader following meetings	A - read charts daily before intervention and be mindful of chart information in intervention B - attends and is prepared for case conferences C - reports accurately at case conferences D - alerts team to client needs and problems E - shares and requests information of whole team F - other team members understand OT treatment G - initiates problem solving and planning in team for client H - other team members consult therapist directly about client	While John has extensive past experience as an OT, he has not worked in a hospital inpatient interdisciplinary environment. Grading will focus on effective inter-professional communication for evidence C, D, E, and F. However, based on his past experience, John is expected to show a high level of competence for evidence A, B, G. Evidence H will show that other team members feel they can rely on John as an effective team member and communicator. Objective met if (A – H) are demonstrated. Objective not met if any of (A-H) are not demonstrated.	Week 2: Complete NSH Workshop. Week 3: Interim meeting with supervisor to discuss progress. Week 5: Review evidence with practice supervisor – feedback from team leader to be provided.
Evaluation				

SAMPLE LEARNING CONTRACTS

Example Two: *Stacy Fakenname, OT*

Objectives	Resources and Approach/ Strategy	Evidence of Accomplishments	Grading	Timelines/ Checkpoints
Stacy will develop & demonstrate her ability to safely and effectively assess clients using the occupational performance model (CMOP-E)	Readings: occupational performance booklet, OSOT perceptual evaluation assessment, articles on problem identification, program planning, and treatment. Supervised clinical experience: gradual introduction to independent clinical practice through observation, then directly supervised practice, then independent client assessments	a) identify client's strengths & weaknesses through discussion using the occupational performance model (b) discuss goals & objectives for client during session (c) identify problems, goals, objectives & treatment measures in a written summary for a minimum of three clients	Supervisor will look for evidence that the occupational therapist is effectively using verbal & written communication skills, problem identification, and program planning and implementation. To be successful, Stacy is expected to: - effectively discuss goals & objectives for client during session.	Week 1-3: Readings and observations Week 4-5: Supervised practice
Stacy will be able to safely and effectively administer the OSOT perceptual assessment.	Written Summaries: will summarize and explain problems, goals, objectives, and treatment measures for clients, directly explaining rationale for each clinical choice and relating it to readings/clinical experience/past education	(a) demonstrate knowledge of administration of the OSOT perceptual assessment with one client & critically appraise the findings, the overall assessment and/or subsequent treatment. (b) give self-appraisal of each session, ask for supervisor evaluation, and problem solve on how to improve	- identify any necessary assessments (i.e. OSOT perceptual evaluation, Fostig, Bruunstrom, etc.) to be utilized - independently administer an assessment or treatment session - discuss future goals and objectives for treatment with client	Week 3: Readings on OSOT perceptual assessment Week 4: Supervised session followed by self-assessment and evaluation by supervisor
Stacy will develop & demonstrate clinical reasoning and in particular her skills in interpreting assessment results and findings.	Direct observation of sessions by supervisor and self-appraisals.	(a) prepare a written summary of assessment or treatment findings, strengths, weaknesses and observations for a minimum of three clients		Week 6: submit written summaries for review by supervisor

Learning Contract for Supervised Practice (Template #1)

Name of Supervised Registrant:

Objective	Resources and Approach/ Strategy	Evidence of Accomplishments	Grading	Timelines/ Checkpoints
Evaluation				

We have reviewed and agree to the above Learning Plan:

Signature:

Supervised Therapist

Primary Supervisor

Secondary Supervisors (if applicabl

Learning Contract for Supervised Practice (Template #2)

Name of Supervised Registrant:

Objectives	Resources and Approach/ Strategy	Evidence of Accomplishments	Grading	Timelines/ Checkpoints

Learning Contract for Supervised Practice (Template #2)

Name of Supervised Registrant:

Objectives	Resources and Approach/ Strategy	Evidence of Accomplishments	Grading	Timelines/ Checkpoints
Evaluation				

We have reviewed and agree to the above Learning Plan:

Signature:

Supervised Therapist

Primary Supervisor

Secondary Supervisors (if applicable)

Competencies for Occupational Therapists in Canada

SUPERVISION EVALUATION FORM

Usage: *This form is used to assess the competence and performance of conditional registrants under supervised practice, including those registrants completing supervised practice requirements as part of a Re-Entry Program.*

Indicate whether the supervised registrant meets the level of knowledge and skill expected of an entry-level OT (a new graduate of a Canadian Occupational Therapy Program) in each competency area. If a competency was not assessed or is not relevant, you may mark it as N/A.

Date Form Completed: _____

Registrant Name: _____

Supervising OT(s): _____

Facility or Site(s): _____

Dates of Supervised Practice: _____

Total # of Hours (to date): _____

Description of Scope and Activities of Supervised Practice:

Domain	Competency	Competent At Entry Level (Y/N)	Examples / Comments
A	Occupational Therapy Expertise		
A1	Establishes trusted professional relationships with clients		
A1.1	Co-creates with clients a shared understanding of scope of services, expectations, and priorities		
A1.2	Uses a mutually respectful approach to determine the nature of the services to be delivered.		
A1.3	Responds to requests for service promptly and clearly.		
A1.4	Supports clients to make informed decisions, discussing risks, benefits, and consequences.		
A2	Uses occupational analysis throughout practice		
A2.1	Keeps clients’ occupations at the centre of practice.		
A2.2	Facilitates clients’ use of their strengths and resources to sustain occupational participation.		
A2.3	Addresses the strengths and barriers in systems such as health care that could affect occupational participation.		
A2.4	Applies knowledge, evidence, and critical thinking from social, behavioural, biological, and occupational sciences to analyze occupational participation.		
A2.5	Shares rationale for decisions.		
A3	Determines clients’ needs and goals for occupational therapy services		
A3.1	Responds to the context that influences the client’s request for occupational therapy service.		
A3.2	Develops a shared understanding of the client’s occupational challenges and goals.		
A3.3	Decides whether occupational therapy services are appropriate at this time.		
A3.4	Evaluates risks with the client and others.		
A3.5	Periodically reviews the client’s expectations with them.		

A4	Assesses occupational participation		
A4.1	Agrees on the assessment approach with client.		
A4.2	Selects assessment tools and methods that fit the agreed approach.		
A4.3	Takes into account the impact of the client's context on the assessment process and outcome.		
A4.4	Incorporates the client's perspectives and opportunities throughout the assessment process.		
A5	Develops plans with clients to facilitate occupational participation		
A5.1	Agrees on the service delivery approach with client.		
A5.2	Determines intervention, timelines, outcomes, resources, contingency plans and responsibilities.		
A5.3	Anticipates and addresses implementation difficulties.		
A6	Implements the occupational therapy plan		
A6.1	Supports clients in accessing and using the resources to implement their plans.		
A6.2	Confirms shared understandings and progress of the plan.		
A6.3	Evaluates the results with the client and others involved in the plan.		
A6.4	Adjusts occupational therapy services based on the evaluation.		
A6.5	Plans for concluding services, ongoing services, or a transition to other services.		
A7	Manages the assignment of services to assistants and others		
A7.1	Identifies practice situations where clients may benefit from services assigned to assistants or others.		
A7.2	Assigns services only to assistants and others who are competent to deliver the services.		
A7.3	Monitors the safety and effectiveness of assignments through supervision, mentoring, teaching, and coaching.		
A7.4	Follows the regulatory guidance for assigning and supervising services.		

B	Communication and Collaboration		
B1	Communicates in a respectful and effective manner		
B1.1	Organizes thoughts, prepare content, and present professional views clearly.		
B1.2	Fosters the exchange of information to develop mutual understanding.		
B1.3	Employs communication approaches and technologies suited to the context and client needs.		
B1.4	Adjusts to power imbalances that affect relationships and communication.		
B2	Maintains professional documentation		
B2.1	Maintains clear, accurate, and timely records.		
B2.2	Maintains confidentiality, security, and data integrity in the sharing, transmission, storage, and management of information.		
B2.3	Uses electronic and digital technologies responsibly.		
B3	Collaborates with clients, other professionals, and stakeholders		
B3.1	Partners with clients in decision-making. Advocate for them when appropriate.		
B3.2	Shares information about the occupational therapist’s role and knowledge.		
B3.3	Identifies practice situations that would benefit from collaborative care.		
B3.4	Negotiates shared and overlapping roles and responsibilities.		
B3.5	Maintains mutually supportive working relationships.		
B3.6	Participates actively and respectfully in collaborative decision-making.		
B3.7	Participates in team evaluation and improvement initiatives.		
B3.8	Supports evidence-informed team decision making.		
B3.9	Recognizes and address real or potential conflict in a fair, respectful, supportive, and timely manner.		

C	Culture, Equity, and Justice		
C1	Promotes <i>equity</i> in practice		
C1.1	Identifies the ongoing effects of colonization and settlement on occupational opportunities and services for Indigenous Peoples.		
C1.2	Analyses the effects of systemic and historical factors on people, groups, and their occupational possibilities.		
C1.3	Challenges biases and social structures that privilege or marginalize people and communities.		
C1.4	Responds to the social, structural, political, and ecological determinants of health, wellbeing, and occupational opportunities.		
C1.5	Works to reduce the effects of the unequal distribution of power and resources on the delivery of occupational therapy services.		
C1.6	Supports the factors that promote health, well-being, and occupations.		
C2	Promotes anti-oppressive behavior and culturally safer, inclusive relationships		
C2.1	Contributes to a practice environment that is culturally safer, anti-racist, anti-ableist, and inclusive.		
C2.2	Practises self-awareness to minimize personal bias and inequitable behaviour based on social position and power.		
C2.3	Demonstrates respect and humility when engaging with clients and integrate their understanding of health, well-being, healing, and occupation into the service plan.		
C2.4	Seeks out resources to help develop culturally safer and inclusive approaches.		
C2.5	Collaborates with local partners, such as interpreters and leaders.		

C3	Contributes to equitable access to occupational participation and occupational therapy		
C3.1	Raises clients’ awareness of the role of and the right to occupation.		
C3.2	Facilitates clients’ participation in occupations supporting health and well-being.		
C3.3	Assists with access to support networks and resources.		
C3.4	Navigates systemic barriers to support clients and self.		
C3.5	Engages in critical dialogue with other stakeholders on social injustices and inequitable opportunities for occupations.		
C3.6	Advocates for environments and policies that support sustainable occupational participation.		
C3.7	Raises awareness of limitations and bias in data, information, and systems.		
D	Excellence in Practice		
D1	Engages in ongoing learning and professional development		
D1.1	Develops professional development plans.		
D1.2	Engages in professional development activities to improve practice and ensure continuing competence.		
D1.3	Enhances knowledge, skills, behaviour, and attitudes.		
D1.4	Ensures that skills are adequate to meet practice needs.		
D2	Improves practice through self-assessment and reflection		
D2.1	Self-evaluates using performance and quality indicators.		
D2.2	Learns from varied sources of information and feedback.		
D2.3	Provides useful feedback to others.		
D2.4	Manages work resources and demands effectively.		
D2.5	Is mindful of occupational balance and well-being.		

D3	Monitors developments in practice		
D3.1	Stays aware of political, social, economic, environmental, and technological effects on occupational therapy practice.		
D3.2	Keeps up to date with research, guidelines, protocols, and practices.		
D3.3	Appraises evidence related to knowledge and skills for practice.		
D3.4	Integrates relevant evidence into practice.		
D3.5	Considers the social, economic, and ecological costs of care.		
F	Engagement with the Profession		
F1	Contributes to the learning of occupational therapists and others		
F1.1	Contributes to entry-to-practice education, such as fieldwork placements.	N/A	
F1.2	Facilitates continuing professional development activities.	N/A	
F1.3	Acts as a mentor or coach.	N/A	
F2	Shows leadership in the workplace		
F2.1	Supports assistants, students, support staff, volunteers, and other team members.		
F2.2	Influences colleagues to progress towards workplace values, vision, and goals.		
F2.3	Supports improvement initiatives at work.		
F2.4	Serves as a role model.		
F2.5	Acts responsibly when there are environmental or social impacts to their own behaviour or advice, or that of the team.		
F3	Contributes to the development of occupational therapy		
F3.1	Helps build the occupational therapy body of knowledge.		
F3.2	Contributes to research in occupational therapy and occupational science, innovative practices, and emerging roles. Participates in quality improvement initiatives, as well as data collection and analysis.		
F3.3	Collaborates in research with individuals, communities, and people from other disciplines.		

DECLARATIONS:

Supervising Therapist(s):

I confirm that I have shared and discussed this evaluation form with the supervised registrant and any other supervising OTs. I confirm that it accurately reflects, to the best of my knowledge, the competence of the supervised registrant at the time of evaluation.

_____ Please print name	_____ Signature	_____ Date
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_____ Please print name	_____ Signature	_____ Date
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_____ Please print name	_____ Signature	_____ Date
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Supervised Registrant:

I have reviewed the content of this evaluation and

☐ I agree with the above assessment of the supervising OT(s) of my competence.

☐ I do not agree with the above assessment of the supervising OT(s) of my competence.

[If so, attach a letter explaining the reasons why you disagree with the result of this assessment.]

_____ Please print name	_____ Signature	_____ Date
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RE-ENTRY PROGRAM APPLICATION FORM

This form must be signed by the applicant, the supervising therapist, and the employer, and returned to NSOTR for approval.

This template includes all information which NSOTR typically requires in order to approve an application for the Re-Entry Program. However, NSOTR may request additional information before approving the supervision arrangement if necessary.

Completion of this form does not authorize an individual to engage in supervised practice or Re-Entry or imply that they are licensed with NSOTR.

SECTION A: Supervision Plan

Name of the Re-Entry Applicant:

Name of Employer(s):

Address of Practice Location(s):

Name of the Proposed Primary Supervisor:

Licence #:

Name of any Proposed Secondary Supervisor(s):

Licence #:

Reason(s) why multiple supervisors are required (if relevant):

Work and Supervision Schedule:

Instructions:

Provide information on:

- when and where the Re-Entry applicant will be working
- who will be the responsible supervisor (in the case of multiple supervisors)
- how the applicant will be supervised

You may use the template supervision schedule below. If necessary, attach multiple copies of this page. An example completed schedule is below.

If the work or supervision schedule of the Re-Entry applicant will change from week to week, provide:

- a complete schedule for at least the first two weeks
- a description of how the employer, supervisor, and Re-Entry applicant will ensure appropriate supervision

If the Re-Entry applicant will be treating clients in their homes, schools, or workplaces, indicate this:

- “Client Homes in X Area”, “Multiple Schools in X Area”, “Working From Home treating clients in X Area virtually”

Supervision Type Definitions:

On-site: A supervisor will be physically present at the same location as the supervised registrant during **all** the hours they are practicing.

Remote/Virtual: A supervisor will be working and available via phone, video, or e-mail during the hours the supervised registrant is practicing but will not be physically present at the same location.

Example Completed Schedule:

Day:	Hours:	Work Location(s):	Responsible Supervisor:	Supervisor’s Location:	Supervision Type:
Monday Wednesday Friday	9am-5pm	Client Home Visits in Annapolis Valley	Stacy Fakename, OT	Client Home Visits/Valley Regional Hospital	In-person for first two weeks, then remote
Tuesday	9am-12pm	Valley Regional Hospital	Joe Sample, OT	Digby General Hospital	Remote
Tuesday	12pm-5pm	Valley Regional Hospital	Joe Sample, OT	Valley Regional Hospital	On-Site
Thursday	9am-5pm	Valley Regional Hospital, treating clients in the Annapolis Valley virtually	Testy McTesterson, OT	Valley Regional Hospital	On-Site

Proposed Work and Supervision Schedule:

Name of Re-Entry Applicant: _____ **Full-time Equivalency (FTE):** _____

Day:	Hours:	Work Location(s):	Responsible Supervisor:	Supervisor's Location:	Supervision Type:

Practice Areas and Work Responsibilities:

List the practice area(s) in which the Re-Entry applicant will offer OT services:

Will the Re-Entry applicant use any higher-risk practice approaches?¹

☐ No ☐ Yes (details): _____

Describe the Re-Entry applicant's proposed work responsibilities and role. If possible, please attach a copy of the formal job description to this form.

What percentage of your work (approximately) will be clinical OT practice (i.e. direct patient contact or related activities) versus non-clinical practice (research, administration, etc.):

Describe the context (physical location, facilities, etc.) in which the Re-Entry applicant will provide services to clients:

¹ Higher-risk practice approaches include, but are not limited to: psychotherapy, swallowing, manual & power wheelchair assessments, cost of future care assessments, driving assessments, electrical modalities, and adult decision-making/capacity assessments, splinting, or virtual care services.

Describe the demographics of the client population which the Re-Entry applicant will serve:

Supervision Activities:

How and when will the Re-Entry applicant receive feedback or guidance on their performance?

How will the supervisor confirm that the Re-Entry applicant is practicing safely and competently?
(e.g. observations (remote and/or in-person), evaluation of charting, caseload management, etc.):

What resources and supports will be provided to the supervised registrant?

Communication in Urgent Situations

Who will the Re-Entry applicant contact if they require urgent clinical support?

Name		Reg #:	
Phone #:			
E-mail:			
Name		Reg #:	
Phone #:			
E-mail:			

Declaration:

In addition to the declarations contained in sections C and E of this form, I confirm that:

- I agree with and will abide by the details of the Supervision Plan described above.
- I will report any changes to the details or information in this Supervision Plan or to on the *Supervision Application Form* to NSOTR immediately, and if possible before those changes occur.

Signatures:

Re-Entry Applicant

Date

Secondary Supervisor

Date

Primary Supervisor

Date

Secondary Supervisor

Da

SECTION B: Applicant Questions

To be completed by applicant

Your application for Re-Entry will be considered by the Registration and Licensing Committee. To aid the Committee in their decision, please answer the following questions about your experience and future plans. If necessary, you may attach a separate letter.

Do you intend to continue practicing occupational therapy in the practice area(s) you identified on page 4 of this form long-term?

In which additional practice areas of occupational therapy, if any, do you anticipate or hope to practice in the future?

Describe any activities not included on your resume in which you have engaged since you last practiced as an OT which support knowledge or skills related to the practice of occupational therapy:

Please include any further information which you would like the Committee to consider in their decision:

SECTION C: Applicant Acknowledgement

To be completed by the Re-Entry applicant

I, _____ [name of applicant/registrant] understand that:

- I will be required to complete all requirements of the NSOTR Re-entry Program as a condition of my Conditional licence. These requirements may include:
 - A specified number of hours of supervised practice;
 - Review of Regulator documents, including but not limited to, legislation, regulations, competencies, and practice standards and guidelines;
 - Development and completion of a Learning Contract and supervision plan with my supervising therapist(s);
 - Completion of Regulator-approved examinations;
 - Any other requirements specified in the Decision Letter of the Registration and Licensing Committee as a condition of my participation in the Re-Entry Program.
- I must practice under Level 2 supervision until I have completed all requirements of the NSOTR Re-Entry Program, subject to the expectations in the *Re-Entry Guide*.
- I am only authorized to practice under supervision in an approved employment setting and may not practice elsewhere without written approval from NSOTR.
- I am responsible for ensuring NSOTR receives all required documentation from myself and my supervising therapist(s) related to my Re-Entry Program.
- I am responsible for notifying my supervising therapist(s) and employer(s) of any NSOTR requirements, conditions, restrictions, or deadlines related to my participation in the Re-Entry Program.
- I must notify NSOTR of any change to my approved supervision arrangement (including but not limited to my regular work schedule, practice location, or supervising therapist(s)) and receive written approval before continuing practice.
- Failure to meet NSOTR's expectations may result in the revocation of my conditional licence or approval of my Re-Entry supervision arrangement.

Signature		Date	
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Important Reminder: You may **not** begin working (including participating in orientation or training at the workplace) as an OT until you are licensed with NSOTR and have received written confirmation that they may begin supervised practice.

SECTION D: Employer Acknowledgement

To be completed by a representative of the organization which will be employing the supervised OT who has authority over employment decisions, such as the hiring manager, executive director, human resources manager, or department head:

I support _____ [name of Re-Entry applicant] engaging in Level 2 supervised practice as an employee of the below-named organization for the purpose of completing the requirements of the NSOTR Re-Entry Program, subject to any practice conditions, restrictions, or limitations imposed by NSOTR.

Name			
Employing Organization			
Job Title			
Phone #		E-mail	
Signature			Date

Desired start date of employment or supervised practice: _____

Please note that NSOTR cannot guarantee that the applicant will be licensed and approved for supervised practice by a specific date.

Important Reminder: *The applicant may **not** begin working (including participating in orientation or training at the workplace) as an OT until they are licensed with NSOTR and have received written confirmation that they may begin supervised practice and a licence number.*

SECTION E: Supervising Therapist Acknowledgement

To be completed by the supervising therapist. If there are multiple supervisors, each supervisor must complete a separate copy of this section.

I confirm that I will provide Re-Entry supervision for _____ (name of Re-Entry Applicant) so that they can complete the NSOTR Re-Entry Program. I further confirm that:

- I have support from my employer to act as a supervising therapist to a participant in the NSOTR Re-Entry Program **OR** I will directly employ the Re-Entry applicant.
- I understand that the Re-Entry Program requires **Level 2 Supervision** to support the Re-Entry applicant and protect the public. I agree to actively supervise and monitor all practice components of the Re-Entry applicant, including through regular, direct observation of practice, until they complete the Re-Entry Program.

I agree to:

- notify NSOTR immediately if there are any changes that impact my ability to supervise the Re-Entry Program applicant to the level required by the *Re-Entry Guide* and/or the Registration and Licensing Committee;
- adhere to the expectations of a supervising therapist per the NSOTR *Re-Entry Guide*.
- validate the Re-Entry applicant's record of completed supervised hours.
- promptly report to NSOTR in writing concerning the performance and conduct of the Re-Entry applicant upon request.
- provide the Re-Entry applicant and NSOTR with a midterm evaluation and final evaluation using the *NSOTR Supervision Evaluation Form*, in collaboration with any additional supervising therapist(s)
- if necessary, enter into a written agreement with NSOTR that defines additional obligations, procedures, or conditions for me to act as a supervising therapist.

Name			Licence #	
Employer				
Job Title				
I confirm that I will be practicing at the same physical location as the supervised registrant during the hours they will be practicing:				☐ Yes ☐ No*
Phone #		E-mail		
Signature			Date	

*If no, approval from the Registrar is required. Contact registration@nsotr.ca or 902-455-0556 for information.