

Standardised referral form: restricting community occupational therapists' client-centred practice?

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Introduction: To increase homecare efficiency, the Ministry of Health and Social Services in Québec, Canada, encourages standardisation of practices, including those of community occupational therapists. The impact of standardisation is not known and might reduce client-centredness.

Objectives: This study aimed to explore the content and use of an electronic referral form to standardise community occupational therapists' practice.

Methods: An institutional ethnography inquiry was conducted through observations of work and semi-structured interviews with ten community occupational therapists working in three homecare programs (one urban and two rural). Data were analysed using institutional ethnography procedures. Specifically, sequences of activities involving the electronic referral form were mapped. Individuals whose work is coordinated within the sequence of activities (e.g., colleagues, clinical supervisors; n = 12) were interviewed and documents, such as the referral form and assessment report template, were also collected.

Results: The electronic referral form, completed by the community occupational therapists' colleagues, includes categories primarily related to safety or autonomy in personal care and mobility. The form organises community occupational therapists' work, including information collection and interactions with clients and caregivers. Seen as consultants, community occupational therapists assess needs and make recommendations to keep clients at home safely for as long as possible, an important element of the homecare discourse.

Conclusion: The impact upon community occupational therapists' potential to be truly client-centred revealed by these findings merit serious consideration by all health professionals. Concerted efforts by professionals to question and act upon contextual barriers to client-centredness are needed.