Occupational Therapy Australia

Position paper:

Occupational therapy in oncology



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About Occupational Therapy Australia

Occupational Therapy Australia is the professional association for occupational therapists in Australia.

Our members are qualified occupational therapists employed throughout the public and private sectors. They provide health care, vocational rehabilitation, and consultancy to clients.

Our mission is to provide member benefits through access to local professional support and resources, and through opportunities to contribute to, and shape, professional excellence.

For more information about Occupational Therapy Australia, visit www.otaus.com.au.

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Summary statement of position

Occupational therapists working in oncology possess skills and knowledge related to cancer as well as the side effects of cancer and its treatment. This knowledge is applied in a 'patient-centred, family-focused' way to provide individual, wholistic care[1]. Occupational therapists working in oncology enable individuals to achieve quality of life through goal setting and participation in personally meaningful occupations while also addressing their physical, social, emotional and spiritual needs[2]. Occupational therapists should be an integral part of palliative care teams and service provision.

Introduction: the occupational therapy profession

Occupational therapy (OT) is a person-centred health profession concerned with promoting health and wellbeing through occupation. The primary goal of occupational therapy is to enable people to participate in activities of everyday life. Occupational therapists achieve this outcome by working with people and communities to enhance their ability to engage in the occupations they want to, need to, or are expected to do, or by modifying the occupation or the environment to better support their occupational engagement[3].

Australian occupational therapists are university trained, registered health professionals. Occupational therapists work within an interdisciplinary framework in which medical and allied health professionals consider all relevant treatment options and develop collaboratively an individual treatment and care plan for each person. In a comprehensive cancer care setting, allied health clinicians are essential to the provision of tailored assessment of the person's changing status throughout all stages of the person's cancer experience[4]. Within the field of oncology occupational therapists deliver care to a wide range of age groups across a variety of care settings including (but not limited to) hospital, home, inpatient palliative care units and community based services.

Purpose of position statement

The purpose of this statement is to outline the role of occupational therapy within integrated person-centred care in oncology. This position statement will inform consumers, clinicians, academics, health service managers, professional associations and government bodies as to occupational therapy practice in oncology, and will inform service and policy development at a local and national level.

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Policy and environmental context

Cancer is now considered a chronic disease due to advances in medical treatment and improved survival rates. More people are living longer, often with the long term effects of cancer and its treatment. Cancer is primarily a disease of the aged, which brings with it the complexity of other health issues and co-morbidities[5].

The need for improved delivery of cancer services and improved outcomes for those affected by cancer has been identified as a priority at federal and state government level. The focus of current policy and service provision recognises the importance of increasing survivorship and the essential requirement for improved management of the chronic conditions associated with cancer and its treatment. For example, return to work, leisure and driving are of vital importance to survivors along with management of cognitive sequelae[6]. Occupational therapy is classified under the umbrella of supportive care services which has five inter-related domains – physical, social, spiritual, psychological and information needs[6]. The occupational therapy profession provides:

- assessment, intervention and support during, between, and after active treatment
- care at end of life.

Statement of position taken by Occupational Therapy Australia

Occupational therapy services should be an integral part of comprehensive cancer care. Access to/the presence of occupational therapy within supportive care services is a measure of excellence. Occupational therapy is of benefit to people with cancer who are experiencing difficulty engaging in valued and essential occupations[7].

Occupational therapists possess professional skills that enable them to work across a range of settings such as oncology, geriatrics, mental health, acute and community health. Occupational therapists can assess the functional and occupational issues related to cancer and its treatment, and develop individualised treatment plans across the disease trajectory.

Significance of the statement to occupational therapists

This statement supports and underpins a range of occupational therapy roles in working with people with cancer:

Assessment

- Provide expert assessment in the physical, cognitive and functional sequelae of cancer and its treatment within the context of personal, vocational, community and family functioning
- Expert knowledge of the physiological effects of cancer and its treatment means that anticipated symptoms and functional impact can be factored into assessment, care planning and intervention

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Care planning

- Negotiate individual, meaningful goals with the person and their circles of support
- Promote autonomy of decision making and participation in care planning and choices
- Include circles of support and carers as part of the treatment planning team
- Respect and consider cultural, language and spiritual needs in assessment and care plans

Intervention

- Aim to optimise independence in activities of daily living (ADL)
- Promote engagement in valued activities and occupations (e.g. vocational and leisure)
- Provide interventions including education, rehabilitation, retraining in ADL, environmental modification and prescription of equipment to support recovery and adaptation
- Educate on symptom management to improve functional status and engagement in occupation, e.g. breathlessness, comfort, pressure care, cancer related fatigue, pain, cognition impairment, sensory and neurological disturbances and upper limb dysfunction.

Recommendations

For Australians to receive optimal oncology care, Occupational Therapists must be involved in the following domains:

Person-centred care/service delivery

- Providing integrated and coordinated care in primary and tertiary settings
- Addressing issues around adaptation, rehabilitation and survivorship, particularly in regional, rural and remote areas through timely access to occupational therapy
- Contributing to improving integrated care systems, which has been identified as a key priority in health care reform such as through the development and implementation of chronic disease pathways for people with cancer and the promotion of oncology-specific rehabilitation programs

Education

- Occupational therapists with advanced oncology knowledge provide education and act as a resource and mentor to therapists new to the practice of oncology, particularly with culturally and linguistically diverse communities e.g. through communities of practice and formalised networks.

The Occupational Therapy Australia Oncology and Palliative Care Special Interest Groups provide support networks as well as opportunities for professional development and research activities for occupational therapists working in this field of practice.

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Research and quality

- Developing research strategies to ensure the delivery of high quality care relevant to the Australian context in consultation with peak educational, professional and cancer organisations.

Policy development

- Representing the profession in the planning and provision of services at state and national levels
- Planning occupational therapy services within a multidisciplinary framework
- Promoting quality of care and consistency across all health sectors to link knowledge, skills and resources.

Conclusion

Occupational therapy is of benefit to people with cancer who are experiencing difficulty engaging in valued and essential occupations. Occupational therapy is crucial to enabling occupational engagement by negotiating goal-centred care. Occupational therapy therefore plays an integral role in the delivery of interdisciplinary care to people with cancer, and this should be recognised in relevant policy and service delivery frameworks, and in workforce planning.

Glossary of terms

Cancer: A generic term for a large group of diseases that can affect any part of the body. Other terms used are malignant tumours and neoplasms. One defining feature of cancer is the rapid creation of abnormal cells that grow beyond their usual boundaries, and which can then invade adjoining parts of the body and spread to other organs. This process is referred to as metastasis. Metastases are the major cause of death from cancer. [10]

Oncology: Oncology refers to the study of cancer. [11]

Palliative care: An approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual. [12]

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