

Guiding Excellence: Crafting the Standards of Practice through an Evidence-Informed Process

#### Lauren C. Cripps, PhD, CTRS

"Reverence connects us to what has been, what is, and all that will be."

- 1. Two-Eyed Seeing (Etuaptmumk or Etuaptmumk)
- 2. Community-Based Participatory Research (CBPR)
- 3. Circles of Learning and Decision Making
- 4. Oral Tradition and Storytelling
- 5. Cultural Assessment Tools
- 6. Elders' Wisdom and Traditional Knowledge
- 7. Land-Based and Place-Based Approaches
- 8. Respect for Indigenous Values and Protocols

"Evidence-informed" and "evidence-based" are related concepts in research, healthcare, and decision-making

#### **Evidence-Informed**:

Evidence-informed refers to a decisionmaking or practice approach that takes into consideration a wide range of evidence, including scientific research, but also includes:

- clinical expertise
- patient preferences,
- and the context in which the decision or practice is being applied.

#### **Evidence-Based**:

Evidence-based refers to a decision-making or practice approach that primarily relies on high-quality scientific evidence, typically derived from welldesigned research studies, such as randomized controlled trials and systematic reviews.

but they have distinct meanings!

Evidence-informed decision making provides a structured and systematic approach to decision-making that leads to more informed, effective, efficient, and accountable outcomes

#### Key Advantages of Evidence-Informed Decisions

- **1. Improved Decision Quality**
- 2. Increased Effectiveness
- 3. Enhanced Efficiency
- 4. Accountability and Transparency
- 5. Maximizes Resources (Cost Savings)

- 6. Continuous Improvement
- 7. Enhanced Credibility
- 8. Better Risk Management
- 9. Tailored Solutions
- **10. Ethical Considerations**

#### Barriers...

- 1. Lack of Access to Timely and Relevant Evidence
- 2. Information Overload
- **3. Resource Constraints**
- 4. Resistance to Change
- 5. Lack of Awareness and Training
- 6. Time Constraints
- 7. Complexity of Evidence
- 8. Influence of Stakeholders and Interests

- 9. Hierarchy and Organizational Culture10. Lack of Local Relevance
- 11. Limited Data Quality
- **12. Information Bias**
- **13. Decision-Making Politics**
- **14. Institutional Inertia**
- 15. Fear of Accountability

Overcoming barriers to requires a combination of strategies, including improving access to evidence, providing training and education, fostering a culture of openness and learning, and addressing political and organizational dynamics.

Successful evidence-informed initiatives involve collaborative efforts from multiple shareholders to navigate and mitigate these challenges.

#### How I use EIP...

#### Individual level

 Changes in day to day approach to client care that is informed by new knowledge

#### **Organizational level**

- Policy
- Departmental changes such as new approaches to programming, changes to scope of practice within professional guidelines, adopting of new model of care etc.
- Research-based partnership with academic institutions that inform new and/or improved client care

# Let's Explore the Standards...



The focus of this phase is to obtain and analyze data representative of all share holders in order to better understand the current state and needs of population served The focus of this phase is to translate the phase one findings into an action-based plan for change. This phase is intended to create meaningful balance between current state and future state. Phase one data (well used) builds in risk management features, by supporting wellinformed decision making.

This focus of this phase is to pilot and evaluate the response plan generated in phase two, informed by phase one. A key feature of this phase is the ongoing evaluation data being collected to provide summative and formative information for continuous quality improvement.





# The CTRA Standards of Practice are essential to ensure quality care is provided to all recipients of Recreation Therapy services...

Are they doing what they need to, based on current needs?

Standards of Practice was an identified priority for the CTRA Education Director Portfolio...



Previous colleagues developed a working draft of standards over a series of years – these standards were presented at the CTRA conference in 2018 (June 13-14 Halifax).

• Session 210 - "Growing Therapeutic Recreation: Standards of Practice and Growth Competencies"





Working draft from previous Board Members and Collaborators

Standards of practice for allied health professions American Therapeutic Recreation Association (ATRA) Standards of Practice and Recreational Therapy and Self-Assessment Guide

National Council on Therapeutic Recreation Certification (NCTRC<sup>®</sup>) Job Task Analysis;

The Committee on Accreditation of Recreational Therapy Education (CARTE) Standards and Entry to Practice guidelines

Provincial Association competencies for recreation therapy 1996 & 2006 CTRA Standards of Practice documents Working draft from previous Board Members and Collaborators





### **Peer Reviewed Process...**



# Key highlights that arose from collaborating...

#### **1. Expanded Audience**

The document is a key resource for practice leaders and frontline staff.

Also used by other shareholders:

- Professional associations
- Education programs
- Researchers
- Employers
- Unions
- Governments/Health Authorities
- Other health professions
- Clients, Families and the General Public

This led to the need for purposeful language...

# Key highlights that arose from collaborating...

#### 2. Language

Addresses ongoing confusion and major discrepancies both within the field and to other shareholders



## Therapeutic Recreation & Recreation Therapy

An important feature of the 2023 standards of practice is the purposeful use of therapeutic recreation and recreation therapy.

Therapeutic Recreation - an umbrella term that refers to the field. This term is typically associated with the theoretical underpinnings of the profession and is best suited when describing educational frameworks.

Recreation Therapy - the practice of a client-centered, strength-based, evidence-informed approach to supporting individuals with disability, illness, or other limitations to engage in meaningful leisure opportunities to increase health and well-being in clinical and community-based service delivery settings.

Recreation Therapists = "RecT"

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Recreation Therapy Assistants = "RecTA"

#### **2023 CTRA Standards of Practice**



#### **2006 CTRA Standards of Practice**





## **Conscious Themes of the 2023 SoP**

- Promotes equity, diversity, inclusion, decolonization and indigeneity
- Promotes strengths-based service delivery and person-centered care approaches
- Consistent and appropriate use of language-modelled
- Emphasis on the importance of inter-professional collaboration
- Recognition of virtual services and the use of technology in the facilitation of such services

the 2023 CTRA Standards of Practice are aligned with the CTRA Code of Ethics









- The SOPs are essential for Recreation Therapy practice in Canada, providing the foundation for the pursuit of regulation.
- As an unregulated profession, the CTRA Standards of Practice are the benchmark for safe Recreation Therapy practice and provide clear role delineation for Recreation Therapists and Recreation Therapy Assistants.
- Throughout the development process, we aimed to ensure the standards were clearly articulated and easily understood by Recreation Therapy staff, employers and the public.
- Our hope is the 2023 Standards of Practice foster a strong collective professional identity, provide a tool for standardization, and promote excellence in Recreation Therapy.





Implementation of the new SOP

#### Shareholder Engagement Supports

**Education Sector** 

Knowledge translation resources to support CTRA members in the adoption process

(to name a few)





#### Alternate Contact Info

#### Lauren C. Cripps, PhD, CTRS info@Canadian-TR.org