

Resources supporting evidence of digital competence for kaiwhakaora ngangahau occupational therapists

Introduction

The use of digital and technological tools, software, and devices, in healthcare is increasing. The data, information, and knowledge that these tools provide needs knowledge and careful consideration of the risks and benefits. Health providers need to be equipped and understand the role of data and digital in order to improve the health outcomes of people and their whānau.

“Digital health is the use of digital technologies and accessible data, and the associated cultural change it induces, to help New Zealanders manage their health and wellbeing and transform the nature of health care delivery.”

- Te Whatu Ora¹

In 2022, Te Poari Whakaora Ngangahau o Aotearoa Occupational Therapy Board of New Zealand (Te Poari) included performance indicators relating to digital competence in each of the five competency areas. The purpose of these resources is to provide guidance and resources for kaiwhakaora ngangahau occupational therapists, supervisors, ePortfolio auditors, assessors, and others on how competence in these areas may be evidenced, particularly in the ePortfolio.

These resources are not exclusive nor prescriptive, there will be more examples than those listed. The information is structured to provide an indication of what good practice can look like and include a range of evidence/information listed that will help to inform and knowledge and practice for each competency area. Areas that may require further development are also included.

Acknowledgements

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¹ Te Whatu Ora (n.d.). [Digital Health](#).

1. Applying whakaora ngangahau occupational therapy knowledge, skills, and values.

Specific performance indicators related to data and digital in this competency area are:

- 1.2 Use the occupational therapy process with people and a range of appropriate strategies and tools to assess, diagnose, provide interventions, evaluate, refer on, discharge, and follow up when appropriate.
- 1.6 Apply digital technologies to engage, coach and empower people and whānau where appropriate.
- 1.7 Use a range of communication and active listening strategies with people receiving services.

What does good look like? (Positive examples of good practice)	
1	Information shared about a piece of software that is used to assess/diagnose/deliver treatment/or helps to evaluate the interventions provided to the person and/or whānau – e.g., the use of a gaming programme to help with visual tracking, or a programme that helps the person provide feedback on their progress, or a programme that the practitioner uses to keep record of progress and report on it
2	Information about a digital tool or specific device that they are using for or with their person or whānau – e.g., entering information to participate in remote monitoring via a phone app, use of a tablet to use a game that supports regular movement or education for safety awareness in the home
3	Completion of a project using a digital tool to help treat or evaluate the person and/or whānau – e.g., a clinical team project to implement an evaluation tool to support service improvement
4	Information about the introduction and/or use of different digital tools to deliver their practice – i.e., increased use of remote sessions online, use of phones/texting, etc.
5	Information related to teaching, coaching, or training people/whānau to use digital devices or programmes – e.g., about the experience of phased training, or multimodal teaching to help with understanding how the device worked

Resources and Useful Information	
1	<p>Health Navigator delivers a range of online resources for NZ clinicians. It holds the NZ App Library for people and their whānau with apps that are clinically reviewed and validated.</p> <ul style="list-style-type: none"> • Overview: https://www.healthnavigator.org.nz/apps/p/people-process/ • App Library: https://www.healthnavigator.org.nz/apps/

2	OTDUDE : An online resource for occupational therapists interested in gamification and digital software
3	Royal College of Occupational Therapists has a section on digital occupational therapy that covers a number of areas of practice.
4	In the absence of an NZ-focused guide, the NHS Digital inclusion for health and social care document talks about inclusive practice for health care providers using digital tools.
5	Tech Tools : A guide to a small range of software programmes that can be used in whakaora ngangahau occupational therapy practice
6	Health Informatics New Zealand : One-stop shop for learning about digital health in NZ, with a library of talks, resources, and further study options
7	Evidence-based relevant literature: <ul style="list-style-type: none"> • Use of tech tools in OT – Mainstream Technology as an Occupational Therapy Tool: Technophobe or Technogeek? • Stroke rehab and technology – Reported use of technology in stroke rehabilitation by physical and occupational therapists • Home visits and technology – Information and communication technology use within occupational therapy home assessments: A scoping review • Rural kaiwhakaora ngangahau capability using digital – Development of a framework to promote rural health workforce capability through digital solutions: A qualitative study of user perspectives

Areas for practice development	
1	A lack of diversity in the range of strategies and tools described to deliver their practice
2	No evidence of self-education or engagement with the person/whānau to enable them, when describing the challenges of engaging with clients who are using devices/programmes
3	The expression of anti-digital practice or avoidant behaviour towards engaging with digital technologies – i.e., default use of paper-based communication, in person interaction at all costs

1. Responsiveness to te Tiriti o Waitangi

The specific performance indicator related to data and digital in this competency area is:

- 1.6 Ensure practice reflects an understanding that Māori data sovereignty is taonga and collaborate with Māori so that any data is appropriately collected, used, stored and destroyed.

What does good look like? (Positive examples of good practice)	
1	Experience and learning that talks about informing the person and/or whānau about the information and data being collected, where it is going to be stored, who will have access to it, and how it will be looked after
2	Information about engaging with Māori on the topic of data sovereignty/stewardship and ownership – the challenges involved in knowing how data is collected, stored, and managed and what the impact is of sharing it (knowingly or unknowingly) with third parties – i.e., for research
3	Participating/contributing or developing an approach (policy/system or procedure) to effective management of data sovereignty for the service/s being provided
4	Information about document/record management for their practice – insights and experience expressed on the transfer from paper to digital records and its impact on data protection
5	Clear evidence and reflection on the inclusion and diversity of data collected, used, managed and presented
6	Evidence of the support and use of digital tools developed by Māori, for Māori

Resources and Useful Information	
1	The Māori Data Sovereignty Network works to advocate for Māori rights and interests in data, so that they will be protected as the world moves into an increasingly open data environment
2	Te Mana Raraunga - Principles of Māori Data Sovereignty Te Mana Raraunga (TMR) Brief provides a general overview of key Māori Data Sovereignty terms and principles
3	Māori Data Audit Tool helps organisations assess their readiness
4	Workshop PowerPoint: Māori Data Sovereignty, Global Indigenous Data Alliance & the CARE Principles - 17 November 2019

5	<p>The Health Information Privacy Code NZ applies to the health information about identifiable individuals and applies to:</p> <ul style="list-style-type: none"> • all agencies providing personal or public health or disability services such as primary health organisations, rest homes, supported accommodation, doctors, nurses, dentists, pharmacists and optometrists; and • some agencies that do not provide health services to individuals, but which are part of the health sector such as ACC, the Ministry of Health, the Health Research Council, health insurers, and professional disciplinary bodies.
6	<p>Article: Implementing Indigenous Data Sovereignty: Insights from Legislative Reform in Aotearoa New Zealand</p>

Areas for practice development	
1	Describing the practice of sharing identifiable data without consideration of data sovereignty or engagement with Tangata Whenua
2	Lack of evidence to demonstrate inclusion and diversity when considering the use and management of data or information for services
3	Conclusions drawn from Tangata Whenua data without reference to, or consideration of Te Ao Māori perspectives

2. Developing and sustaining partnerships

The specific performance indicator related to data and digital in this competency area is:

3.7 Use devices, apps and other digital tools to benefit your networks, teams, practice and people receiving your service.

What does good look like? (Positive examples of good practice)	
1	Practice description which involves mention of software programmes, devices and their creative use to communicate with and deliver services to people and their whānau the way they prefer
2	Experience and insights shared about the challenges, benefit and impact of introducing technology into the team/networks or practice environment
3	Clinical practice examples and evaluation shared about a service project or programme delivered using a device or programme
4	The description of behaviour that is seeking to increase efficiencies in their service with digital tools and reduce the administrative burden on their colleagues
5	Practice descriptions that identify aspects of service delivery that need technology and the challenges/obstacles that prevent that from happening
6	Participation in webinars/training or network meetings online that are regional/national or international
7	Practice description which involves mention of use of digital platforms for professional networking, teaming, and communication

Resources and Useful Information	
1	Tools for teamwork: <ul style="list-style-type: none"> • Scheduling meetings – https://doodle.com/ • Brainstorming – https://miro.com/ • Whiteboards are available in Zoom/Google Meet and Microsoft Teams
2	Tips for collaborating with your team using Outlook
3	System Improvement Process: Process Improvement Tools
4	The Plan Do Study Act (PDSA) Cycle: A process to support change and quality improvement.

5	<p>Evidence-based relevant literature:</p> <ul style="list-style-type: none"> • Use of tech tools in OT – Mainstream Technology as an Occupational Therapy Tool: Technophobe or Technogeek? • Deploying digital health tools within large, complex health systems: key considerations for adoption and implementation • Reducing healthcare inequities for Māori using telehealth during COVID-19 • Old-fashioned technology in the era of “bling”: is there a future for text messaging in health care?
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Areas for practice development	
1	Practice descriptions that provide detail only about the preferences of the practitioner and not their teams, clients, or network
2	Behaviour that indicates localised connections only and/or a lack of network connections that broaden their knowledge pool
3	Descriptions of practice that detail the challenges of process/system and paper-based procedures without engaging with or reflecting on alternative solutions

3. Practising in a safe, legal, ethical, sustainable and culturally competent way

Specific performance indicators related to data and digital in this competency area are:

4.2 Ensure people receiving your services are fully informed and are making informed choices.

4.10 Evaluate when digital technologies are legal, ethically and culturally appropriate and use them to facilitate equitable and sustainable health outcomes.

What does good look like? (Positive examples of good practice)	
1	Reflections shared about the use of software/devices and programmes with critical thinking demonstrated about their ethical appropriateness – e.g., the use of apps with adverts in them, the use of devices/software with those that can access it versus those that can't/don't have the finances to access, and inequity of services
2	Reflections shared about the use of software/devices and programmes with critical thinking demonstrated about their legal appropriateness – e.g., is there governance over their use, organisational permission to download or implement them with consumers, data sharing beyond what was initially agreed with the consumer or data provider
3	Reflections shared about the use of software/devices and programmes with critical thinking demonstrated about their cultural appropriateness – e.g., awareness and understanding shared about how the programme(s) used are culturally inappropriate or appropriate for language, images, expectations, format etc., and the impact of this on the person's involvement over time
4	Learnings shared about the interactions with the person and whānau on the use, storage and security of their information; the use of software; and the use of devices
5	Learnings shared about how the person and/or whānau can interact or use a device or digital programme to communicate, share information, receive intervention, or provide feedback

Resources and Useful Information	
1	Health Information Privacy Code NZ
2	Digital Inclusion Action Plan 2020-2021 (across government)

3	In the absence of an NZ-focused guide, the NHS Digital inclusion for health and social care document talks about inclusive practice for health care providers using digital tools.
4	Health Navigator delivers a range of online resources for NZ clinicians. It holds the NZ App Library for people and their whānau with apps that are clinically reviewed and validated. <ul style="list-style-type: none"> App Library: https://www.healthnavigator.org.nz/apps/
5	Te Mana Raraunga - Principles of Māori Data Sovereignty (TMR) brief provides a general overview of key Māori Data Sovereignty terms and principles.
6	Report: Digital inclusion stocktake: What digital inclusion looks like across government
7	Digital Equity Coalition Aotearoa (DECA) (across all sectors)

Areas for practice development

1	Information shared that talks to the use of software or devices that the practitioner themselves use without organisational/team or critical review – e.g., practitioner references app that they think will work for the person without providing clinical reasoning as to why
2	Descriptions of practitioner sharing data and information beyond the initial purpose for collection – i.e., they might discuss a research project that they have contributed but do not mention consent or how privacy/security of data will be considered
3	Descriptions of service delivery where the practitioner promotes inequity by working with some clients with devices and providing others with paper-based or manual programmes because they do not have them. – e.g., not actively seeking to ensure all clients are able to access digital devices where it would be of value and benefit
4	Information that suggests digital tools are being used in a way that crosses ethical boundaries – e.g., inappropriate online relationship with a person

4. Practising responsively and upholding the occupational therapy profession

Specific performance indicators related to data and digital in this competency area are:

5.1 Critically appraise professional literature, research and/or Mātauranga Māori to update your knowledge of current theories, techniques and technologies and integrate appropriate current developments into practice.

5.6 Engage in ongoing professional development related to or using digital technologies.

What does good look like? (Positive examples of good practice)	
1	Learnings and reflections shared as a result of attending webinars/forums/conferences on digital health
2	Critical reflection on the development of clinical informatics as a career pathway for clinicians and of clinical leaders in digital health, and how these impact on the system and frontline staff for NZ
3	Becoming a member and critical reflecting on membership of a digital health forum/organisation
4	Critical reflections on professional literature or research, or system developments that demonstrate consideration of how digital developments will help or hinder the person/whānau and/or clinical staff
5	Critical reflections on the process of selection, implementation, and integration of new digital technology (a programme or device) into the clinical workflow and/or person's health journey – i.e., can be at an organisational level, team change or practice choice for the person receiving it
6	Undertaking, completing, and reflecting on post graduate digital health learning

Resources and Useful Information	
1	Health Informatics New Zealand (HINZ) is a NZ-focused organisation with news, webinars, presentations, resources, and memberships available
2	Australasian Institute of Digital Health (AIDH) also has news, webinars, presentations, resources, and memberships available
3	National Allied Health, Scientific and Technical Informatics Group (via HINZ) is for national kaiwhakaora ngangahau to link with a community of practice who are passionate about digital health and use of technology
4	Clinical Informatics Position Statement

5	Digital Health University Courses in NZ (via HINZ)
6	Certification of Health Informatics Australasia (CHIA)
7	eHealthNews

Areas for further development	
1	Record of attendance to events without critical reflection or review on the content/delivery or contribution made
2	Record of engagement with professional literature without critical review and/or with acceptance of content without justification
3	Record of use of recent technology without critical review across the process or stages of engagement
4	Reflections and record of critique of digital technology in health without justification or demonstrating a balance in view – i.e., negative reflections of recent technology without considering all perspectives