Occupational therapy – the future

Strategic agenda 2009–2015

Updated at the General Council 2012
The FSA vision

Occupational therapists shall assist in giving citizens a better life and contribute in the fulfilment of the WHO goal for health as a state of complete physiological mental and social wellbeing, not only as the absence of illness and frailty.

Occupational therapists shall devote themselves to allow everyone access to individually and/or environmentally related measures directed by the individual’s needs and desires.

Consequently, we want to concentrate on the development and research of the profession to meet this demand and to contribute to a society allowing everybody equal opportunities to realize their goals in life.

Overall strategy
for the FSA strategic agenda 2009–2015

FSA shall develop the professional role of occupational therapists, their methods of work and lifetime salary through focussing on the needs and demands of patients/clients. Active members in a competent and efficient organisation with a great capacity for service will put this into effect.
The FSA agenda and strategies
2009–2015

Background

Since 2001 FSA has worked with aims and processes in view. The Association’s strategic work has set out from the map around us, reflecting the most important driving forces considered to influence occupational therapy, occupational therapists and accordingly the Association during 2001 to 2008.

Matters and participation of the members, elected representatives, the Board and the FSA office have been the prerequisites for success in the strategic work.

The Board wants to continue this method of working for the coming eight years.

The map around us and the process

The Board together with the FSA regional chairs and local representatives has updated the surrounding map together with the consultant Göran Alsterlind.

The partly renewed map is the basis of the strategies and process-oriented work for the coming years. As previously, the surrounding map identifies and documents the changes to society that we anticipate on the macro level and which constitutes the foundation for the most important external driving forces that may influence occupational therapy, occupational therapists and the FSA.

The difference from the previous agenda with ten strategic and two target areas – trade-union strength and service – is that it contains an overall strategy resulting in five strategic areas for the coming eight years.

The first three strategies are a result of the consequence analysis based on the map around us combined with the FSA opportunities and its related strengths. To attain the goals set by the Association, the two strategies concerning the FSA strength and service are required.

The FSA General Council will now be asked to make decisions based on the result of the process as presented in a vision, a map of the world around us, a strategic agenda for FSA during the period 2009 to 2015.
The map of the world around us and the future – the map of Occupational Therapy

Society and culture

- National guidelines and international agreements will to an ever-increasing extent govern health care. The Swedish political power will, relatively speaking, become reduced while cooperation within the EU will become even more important.
- Society’s financing through taxes, social security systems, etc. will decrease in favour of a basic system of security supplemented by fees.
- Users’ organisations will become more powerful.
- The conditions of health care are influenced to a greater extent by public opinion in the mass media.
- Ethical and moral issues demand a more developed humanistic comprehensive view.
- Influences from other cultures will increase multiplicity and affect social criteria and interplay to become more nuanced.
- Participation in the meaning of accessibility to social life and the physical environment will play an increasingly important role in social planning.
- Traditional membership in an organisation will diminish in favour of loose connections as in networks. This will influence trade union organisations as well as professional, political and other societal organisations.

Economy and politics

- The economy forces rationalization and new organisation forms.
- The profession must be able to prove the benefit and effect of various efforts in terms of national economy.
- Patients/clients and patient/user organisations will become more and more important actors in the distribution of health care resources.
- New producers give new conditions for competition in the health care marketplace.
- Suppliers of health care will have increased responsibility for priorities and results in production.

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Education and Research

- The implementation of R&D (Research and Development) is given increased significance in the performance of the profession.
- Demands on quality are increasingly important.
- New areas of work emerge, changing demands on the education.
- New technological achievements require increased demands on education and research in the profession.
- Increased demands on participation and accessibility influence the substance of education and research.
- An ethical attitude and good treatment become decisive factors for the esteem of the profession.
- Esthetical and cultural dimensions like design and functional adaptation will take on an increased importance.

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The future of Occupational Therapy

Patients/clients
- The patient/client demands participation, freedom of choice and accessibility but a patient/client with a low level of autonomy runs the risk of being ignored.
- The patient/client’s added knowledge of access to relevant treatment/measure puts greater demands on individual-related interventions.
- Changes of the illness spectrum imply increased needs of different care efforts and rehabilitation.
- The population becomes ever older and requires greater efforts of prevention, care and treatment.
- Openness towards alternative methods is increasing.
- The care chain around the patient is more and more often organized in networks across borders of responsibilities.
- The patient/client will have access to new technological achievements, which in turn will give opportunities for increased participation, freedom of choice and accessibility.
- Consultations between the patient/client and the occupational therapist are of greater and greater importance.
- The need for supporting close relations is increasing.

Working life
- Local salary formation is of increased importance while the influence of politics decreases.
- Central, detailed guidance of working conditions diminishes in favour of local alternatives.
- Work organisation and the working environment focussed on the individual will be high on the priority list.
- Forms of employment will become more flexible.
- Equality and multiplicity will increase in significance.
- Leadership will get more and more importance.
- Demography requires different types of organisation.
- Competence, rather than a certain professional title, will be sought after.

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The FSA strategic agenda contains an overall strategy as expressed in five strategic areas for the 2009–2015 period.

### Strategy area 1 – requirements and demand

FSA shall contribute to steadily improving concepts with better and better quality in order to meet requirements and demand on the individual, group and society levels. FSA shall accordingly, in a systematic and sustainable way, analyse the patient/client’s changing needs of occupational therapist competence; thus attaining increased participation and freedom of choice in the community.

**This implies** that the occupational therapy efforts must undergo continuous development in order to meet the new demands. Attitudes of the surrounding world must be influenced so that the most efficient competence is always requested, whether it occurs on the individual, group and/or community levels. This requires innovative and futuristic work, clearly client-oriented and of high quality. The efforts must be constantly evaluated and reassessed from the point of view of the patient/client.

### Strategy area 2 – professional services

FSA shall actively and continuously develop professional services in occupational therapy. To a greater extent this is a matter of deepening, widening and updating the nucleus of competence but also to introduce new knowledge from other areas, which is required, as society becomes more and more complex and boundless.

FSA shall work accordingly with matters of education and research so that occupational therapists will be able to meet future changes. New working areas will be developed and continuous competence development will be required, as will new knowledge and changes of practice.

**This implies** that the occupational therapist must have the opportunity to develop competence continually and also to be aware of own responsibility in this process. Nowadays many patients/clients put new demands on the occupational therapist. Consequently, education and research in occupational therapy must reflect both the new, conscious patient/client and the patient with reduced autonomy.

**To a greater extent** the technological development will create new opportunities for both patients/clients and occupational therapists.

**The occupational therapist’s** unique treatment based on the everyday situation of the patient/client will have greater significance, as the freedom of choice becomes more common.
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Strategy area 3
– increased work satisfaction

FSA shall further develop the system of organisation and delivery for the occupational therapy profession in order to create better quality, increased efficiency, higher salaries and terms of employment, thereby creating greater satisfaction at work.

FSA shall put greater emphasis accordingly on how patients/clients can benefit from the professional services and on how occupational therapy resources of quality and efficiency can be strengthened.

This is to say that the current organisation and delivery systems have been developed based on old traditions. We see great opportunities to liberate and redistribute resources giving increased motivation and efficiency to occupational therapists. This may also lead to a greater feeling of responsibility with professionals having direct patient contact. Furthermore, this gives the opportunity to influence directly the conditions of work and working environment.

Strategy area 4
– the strength of FSA

FSA’s strength lies in the fact that virtually all qualified occupational therapists and occupational therapy students are members of the Association. The FSA strength is also founded on the members’ feeling of solidarity, active engagement and participation in the activities of the Association. FSA shall be known as a competent and efficient representative and salaried employees’ association.

FSA shall, in accordance with this maintain its high degree of membership and be seen as a powerful union. Furthermore, FSA shall inspire and motivate members to take active part in the association’s work. Members should be made to feel that they can contribute to the continued development of the association, both in matters of working life and professional issues. It falls on FSA representatives to be seen as competent and committed.

This means that membership in FSA shall be a matter of course to an occupational therapist and an occupational therapist student. Membership shall be an obvious part of the occupational therapist profession.

Henceforth, the local organisation shall be at the centre of the FSA activities. Supported by the Board, central councils, committees, groups and the FSA office staff, active local work by competent, devoted members and representatives will prove to be of great advantage to occupational therapists. This will require effective information and communication.