

Criteria for excellent standard (Centres of Excellence)

Knowledge of theory	Width	<ul style="list-style-type: none"> • Demonstrates accurate understanding of all of the key concepts of creative ability i.e. creative response participation act; components of creative ability • Has awareness of the philosophical underpinnings of the theory of creative ability
	Depth	<ul style="list-style-type: none"> • Understanding is robust for the majority of concepts • Explains the link between most concepts
Knowledge of levels of creative ability		<ul style="list-style-type: none"> • Describes and explains levels accurately, demonstrating good depth of knowledge. • Knowledge of levels is limited to the levels seen in current context of practice • Good ability to describe the clinical picture of specific levels of creative ability in occupational performance areas • Able to describe levels of creative ability without reliance on written information • Able to accurately explain the changing picture of creative ability across the phases
Knowledge of assessment (problem identification)	Assessment methods	<ul style="list-style-type: none"> • Describes and explains assessment methods correctly. • Able to justify methods used in practice according to a limited range in use. • Able to explain the potential of each method for assessing creative ability • Able to grade use of assessment methods according to level of ability with clear clinical reasoning.
	Assessment process	<ul style="list-style-type: none"> • Describes and explains the assessment process accurately. • Able to explain the relationship between assessment of action and identifying level of motivation
	Assessment findings	<ul style="list-style-type: none"> • Explains how the level of creative ability is identified from assessment findings, using the Creative Participation tool and/or Grid • In relation to selected clients, demonstrates good clinical reasoning in identification of the level of creative ability in each occupational performance area and for identifying the overall level of creative ability
Skills for goal setting	Problem formulation	<ul style="list-style-type: none"> • Demonstrates good ability to explain the cause of client strengths and limitations (problems), clearly integrating consideration of environmental factors and client factors (including components of creative ability)
	Setting goals	<ul style="list-style-type: none"> • Clearly states relevant and realistic therapy goals for the client. • Articulates measurable goals, but not consistently • Clearly relates therapy goals to identified problems and problem formulation. • Clearly explains therapy goals to the client's level of creative ability. • Good ability to justify therapy goals i.e. reasons for their selection and omission of others • Justifies client or carer inclusion or exclusion in goal setting, with reference to concepts of client centred practice, person centred and/or enablement • Relates client or carer goals to therapist goals
Intervention planning (treatment planning)	Selection of intervention	<ul style="list-style-type: none"> • Explains how materials, objects, people and situations are considered in the selection of intervention . • Good ability to demonstrate activity analysis in the selection of intervention, in order to address therapy goals. • Good ability to articulate how intervention will be graded • Clearly explains the relationship between selected intervention and the client's occupational identity • Clearly explains the relationship between selected intervention and the client's occupational future. • Selects intervention that in itself meets a good range of the activity requirements • Addresses a limited range of activity requirements through a number of interventions. • Addresses a limited range of therapy goals through intervention
Intervention (treatment)	Application of treatment principles	<ul style="list-style-type: none"> • Good ability to justify and demonstrate handling, structuring and presentation principles in relation to selected clients in practice. • Good ability to explain the grading of treatment principles in the therapy plan

Evaluation and outcome measurement		<ul style="list-style-type: none"> • Explains the difference between service and therapy evaluation and outcome measurement. • Describes processes for evaluating service and therapy provision. • Explains how their outcomes are measured using valid and reliable tools • Demonstrates good ability for evaluating outcome measurement tools in use • Provides evidence of regular outcome measurement. • Provides evidence of using outcome measurement to inform service development and CPD
Communication in clinical practice:	Of intervention	<ul style="list-style-type: none"> • Provides clear verbal and/or written guidance to others on how to carry out intervention • Intervention guidance is provided in a relevant format for others • Clearly explains reasons for intervention to others • Articulates a limited but adequate understanding of the implications for OT of enabling others to provide intervention. • Clearly articulates consideration of risk assessment in enabling others to provide intervention
	Note writing	<ul style="list-style-type: none"> • OTs and OT support workers write notes that report on creative ability. • Good consistency in note writing across the OT team re-note writing methods e.g. SOAP or electronic records • Inconsistent evaluation of note writing methods
	Report writing	<ul style="list-style-type: none"> • Reports clearly explain the assessment and/or intervention for and progress of intervention. • A consistent approach to report writing is applied across the OT team. • The VdTMoCA is explained and referenced. • Reports are readily understandable by non-OTs • Where applicable, the links between the VdTMoCA information and other models are clearly stated
	Educating the MDT	<ul style="list-style-type: none"> • In addition to regular note writing, report writing and verbal communications, a range of other strategies for educating the MDT have been employed. • Formal professional presentations have been provided • A strategy for increasing understanding of occupational therapy and its use of the VdTMoCA is being implemented
	Educating students	<ul style="list-style-type: none"> • The team have developed a good resource pack on the model for students, but is limited to the practice site • The team provides practice placements for OT students
Dissemination beyond clinical practice	Publication	<ul style="list-style-type: none"> • Information on OT and anecdotal information on the use of the VdTMoCA has been shared in local publications e.g. trust newsletter and professional publications e.g. OT News, Participation • Writing for publication in a professional journal is in progress
	Resources	<ul style="list-style-type: none"> • The team have developed a resource pack to inform other clinical sites of best practice on most of the following: examples of developing the service, assessments, treatment, reports, dissemination, education of others, identification of research priorities, research • The resource pack has been approved by the VdTMoCAF
	Research	<ul style="list-style-type: none"> • The team have discussed research priorities in their current context, and have a research strategy with a clear action plan • Research priorities have been discussed in relation to the VdTMoCAF Research Strategy
CPD		<ul style="list-style-type: none"> • The team have a CPD strategy for continual development of team members' knowledge and skills for use of the VdTMoCA, but is limited in range of activities • implementation of strategy is consistent. • At least three team members actively contribute to discussions and resources in the VdTMoCAF (UK) Forum

It is essential that the centres of excellence work to achieve certain standards in order to achieve recognition of their application of the VdTMoCA. These standards are identified below:

1. Implement and demonstrate mechanisms for continual development of skills and knowledge of team members in the use of the VdTMoCA.
2. Demonstrate robust assessment processes using recognised VdTMoCA tools.
3. Demonstrate correct use of the principles of the VdTMoCA in the planning and provision of treatment.
4. Establish processes to regularly evaluate service provision and demonstrate outcomes for service users.
5. Contribute to research activity as agreed with the VdTMoCA Foundation UK.
6. Disseminate work to occupational therapists and managers in the UK (to include provision of two open days a year and resource pack).
7. Actively contribute to discussions and resources on the members' forum.