

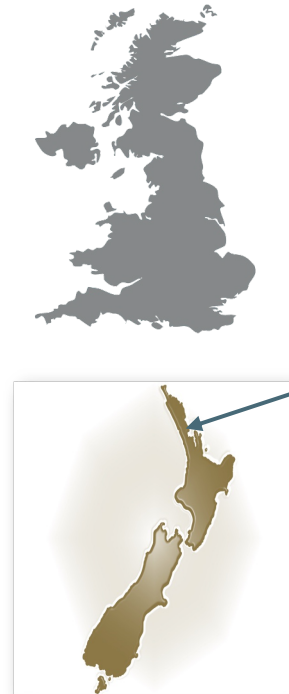
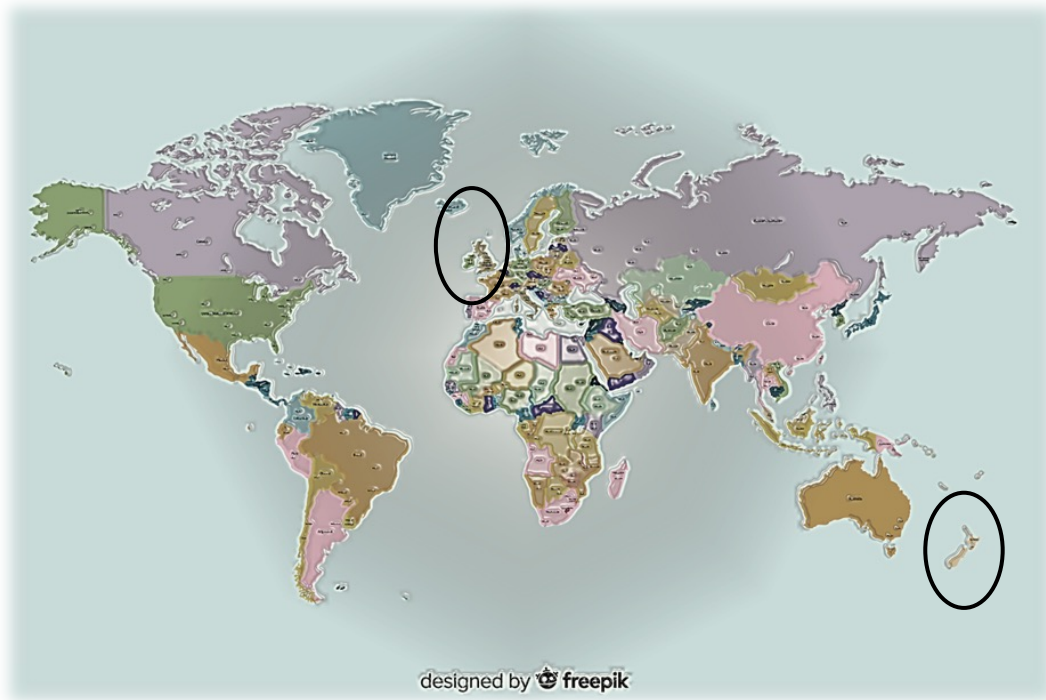
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Exploring collaborative, dynamic, occupation-focused clinical reasoning: A missing link for translating an occupation-based assessment the Perceive, Recall, Plan and Perform Assessment (PRPP-A) to practice

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TĒNĀ KŌUTOU, TĒNĀ KOUTOU, TĒNĀ KOUTOU KATOĀ

Ko wai au- Who am I ?



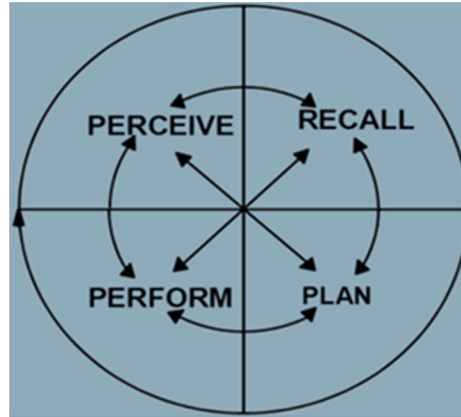
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Auckland University of Technology

PERCEIVE, RECALL, PLAN AND PERFORM ASSESSMENT (PRPP-A)

- Developers: Drs Christine Chapparo and Judy Ranka
- Standardised assessment involving observing clients performing relevant real-world occupations of their choice
- Uses structured criteria to evaluate clients' occupational performance and ability to apply cognitive strategies for successful task performance (Chapparo & Ranka, 2024)



My initial research found:-

- PRPP-A is a valuable, flexible occupation-based assessment
- Resonates with therapists' practice across varying contexts
- Culturally relevant – dependent on therapists' cultural competence
- Rewarding & challenging to translate to practice
- Changes therapists' thinking & decision-making

(Burrows, Hocking & Chapparo, 2022)

Pragmatic Constructivist Study

Qualitative Interpretive Description Methodology (Thorne, 2025)

Cultural Advisor: Partnered with Iris Pahau to design:

- open research questions
- culturally safe and appropriate process for Māori participants

Study Design

Methods: Written reflective logs completed before and after a PRPP-A; Interview focused on thinking and decision-making related to doing the PRPP-A

Data analysis: Braun & Clarke's (2006) six-stage approach to thematic analysis

Participants ($n=8$)

Gender	All identified as female
Cultural identity	New Zealand European ($n=6$) Māori/New Zealand European ($n=1$) Fijian Indian ($n=1$)
Work Context	Private practice ($n=4$) <ul style="list-style-type: none">• with children ($n=3$), adults ($n=1$) Government mental health adult services ($n=3$) Special school ($n=1$)
Location	New Zealand cities

REASONING A PRPP-A PLAN

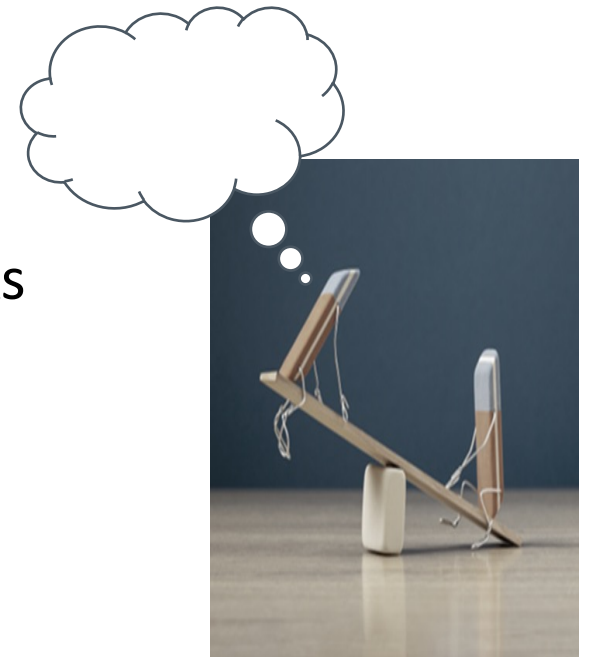
Having no set assessment tasks means therapists need to reason **a unique bespoke assessment plan** for each client

“Build it [assessment] around the person” (Phoebe)

Thinking associated with traditional modes of reasoning (Schell & Schell, 2025) was evident in PRPP-A assessment planning

Therapists needed to think about how to:-

- Be collaborative – to tailor an assessment with a client
- Change power dynamics – for clients to choose assessment tasks
- Enact culturally safe practice:
 - avoid assumptions
 - be aware of own biases and contextual influences, particularly ‘hidden’ dominant Western preservatives



Therapists need to think about how to...

- Be sensitive, actively listen: *“I just needed to listen... rather than putting on my big expert hat”* (Nadia)
 - Ask open questions *“to understand how mum is doing things now and what’s happening now for them [the family] ... means that I can match that a bit more [with an assessment task] ... what are the things that they are actually doing ... and what are the things that they might be finding a bit more challenging”* (Nadia)
- Explain the need to find assessment tasks and balance information with *“maintaining rapport”* (Awhina), encouraging *“buy-in from the client”* (Jenny) and communicating for a client to understand. Likened to *“a bit of a dance”* (Pheobe)
- Generate a range of potential assessment tasks
 - Involves creative, lateral thinking



REASONING JUST RIGHT ASSESSMENT TASK

Weighting task suitability



Balancing multiple aspects



- Demands of task:
 - Not too easy or too hard
 - Just right level
- Does it fit for the client and is the client ready to do the task?
- How likely will findings from the task match required assessment outcomes?
- Are there safety risks?
- Is it practical to do the task?

“Quite simple, not too complex” (Awhina)

“I wanted him to be comfortable with it [the task] because of that sense of failure that he’s experienced” (Jenny)

“Shows the issues & the strengths” (Olivia)

“Might have some really high risks around going out or... using a kitchen where there are knives in the cupboard” (Pheobe)

“Something that’s within an hour timeframe... just because of timing on the ward” (Awhina)

Available in “the clinic rooms” and “what would be similar to the infant’s home setting?” (Nadia)

INFLUENCES OF THERAPIST'S INTENTION ON REASONING PRPP-A

Intention: How therapists envisioned a particular assessment should be, to achieve specific outcomes

- Based on therapist's own knowledge, beliefs and attitudes. Varied for different assessments
- Shaped actions they took when setting up, positioning themselves, using cues and prompts, note-taking

Three different intentions to do a:

- **Pure assessment** - Have no disturbance - assess as though *"no-one there"* (Jenny)
- **Fair Assessment** - Avoid *"stress"* (Pheobe) for client, be *"meaningful"* (Awhina), a *"positive experience"* (Olivia)
- **Dynamic Assessment** - Switch between assessment and intervention, *"to flow into each other"* (Nadia)



PRPP LENS, SKILLS AND STRATEGIES

Therapists viewed, analysed and understood occupational performance through a **PRPP lens**, providing a secure occupation-focus to practice

They constructed their own unique lens combining theory underpinning PRPP-A with their existing knowledge of occupational therapy models and theories, and their practice experiences

Having a **PRPP lens** provided a clinical reasoning *“framework that I always refer to, when I’m thinking about interventions or observing someone” (Pheobe)*



Therapists developed specific:-

Skills = knowledge and ability

Strategies = methods (ways of doing)

Led to quick thinking and decision-making skills and efficient ways of applying the PRPP-A

The identified skills and strategies will assist:

- Initial learning and translation of the PRPP-A
- Development of expertise

KEY MESSAGES

- **Bespoke** PRPP-A plans require skilled collaborative, occupation-focused, culturally relevant and safe clinical reasoning
- **Partnering** with clients requires open, flexible thinking and addressing power dynamics
- **Therapist's intentions**, values, and beliefs influence the use of PRPP-A
- Study findings will assist therapists in **translating** the PRPP-A into practice
- **Clinical reasoning** for using occupation-based assessments is complex: We need further studies!



Ngā mihi nui – Many thanks

Pātai- Questions



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- PowerPoint images**
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