Strengthening Intraprofessional Partnerships: Supporting and Empowering the OT and the OTA

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Upon completion of the session participants will be able to:

1. Discuss the historical context of OTA within the profession
2. Clearly articulate OT/OTA role delineation.
3. Describe the significance and value of Intraprofessional collaboration to the profession and occupational therapy consumers.
4. Identify several practical strategies that can immediately be implemented to advocate for and strengthen relationships between the OT and OTA.
Background: How did we get here?

- Occupational Therapy Practitioners
- Occupational Therapist
- Occupational Therapy Assistant
Purpose of Occupational Therapy Assistants

• Post WWII rush to meet demands of medical/rehabilitation settings
• Shortage of skilled therapists in psychiatric hospitals leaving aides and technicians to fill the need
  • Experienced but without formal training and in need of supervision
• Recognition for need of supportive personnel or ‘assistants’ with training

(Carr, 2004; Cottrell, 2000)
Education of Occupational Therapy Assistants

1958
• 12 week formal curriculum carried out in psychiatric facilities
• ‘Grandfathering’ process to become a COTA

1960
• 12 week formal program to prepare for general practice

1966
• AOTA mandate for OTA educational programs to address both psychiatry and general training

(Cottrell, 2000)
Initial Educational Settings

• Initially in psychiatric facilities
• Institution-based programs (hospitals)
• Academic institutions

• Inconsistencies in education programs until 1975
  • Approved Educational Program for the Occupational Therapy Assistant
  • Graduates of AOTA-approved OTA program must pass written certification exam

(Cottrell, 2000)
Early Supporters of Creating a Place for OTAs

**Col. Ruth A. Robinson**
- AOTA President
- WMSC Chief
- Advocate for supportive personnel
- Felt OTA was coveted position within OT

**Marion W. Crampton**
- Chair of Committee on OTAs
- MA Dept of Mental Health
- Aware of shortages of OTRs in mental health

**Mildred Schwagmeyer**
- Worked for AOTA in educational divisions
- Responsible for OTA education and liaison to Committee on OTAs

**Ruth Brunyate Weimer**
- AOTA President
- Challenges during time of reorganization
- Strong advocate for OTAs

(Carr, 2004)
Growth Brings Changes Within the Profession

“Resistance is a natural part of any professionalization movement”
(Salvatori, 2001, p.225)

Sheila Carr, 2004; Cottrell, 2000
Occupational Therapy’s Scope of Practice View on Supervision

• Supervision ensures the effective delivery of OT services
• Fosters professional competence and development
• Is a cooperative process
• Requires mutual understanding
• Promotes effective utilization of resources
Occupational Therapist

- Autonomous Practitioners
- Responsible for all aspects of OT service delivery
- Accountable for safety and effectiveness of OT services

Occupational Therapy Assistant

- Able to deliver OT services under the supervision of and in partnership with the OT
- Responsible for collaborating with OT to develop a plan for supervision
- Responsible to seek and obtain appropriate supervision.

Occupational Therapists and Occupational Therapy Assistants are equally responsible for developing a collaborative plan for supervision

AOTA 2014
Myth vs. Reality: What can the OTA do?
Significance of Intraprofessional collaboration
Practical strategies for strengthening relationships between the OT and OTA.
References


References


References


• Dillon, T. H., (2002) Practitioner Perspectives: Effective Intraprofessional Relationships in Occupational Therapy, Occupational Therapy In Health Care, 14:3-4, 1-15, DOI: 10.1080/J003v14n03_01


