

# REVISTA OT


Summer  
2018

ALAMO SOUTH | CAPITAL CENTEX | GREAT PLAINS WEST | GULF COAST EAST | RIO GRANDE | TRINITY NORTH



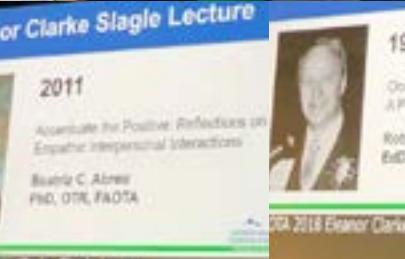
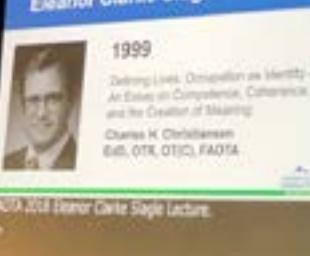
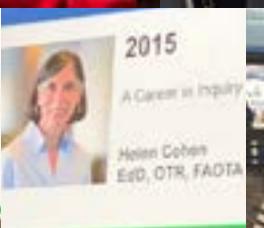
## AOTA 2018

**THANK YOU  
TOTA Members for  
attending AOTA 2018!**

**Save the date  
for AOTA 2019  
April 4-7, 2019**



AOTA 2018 Eleanor Clarke Slagle Lecture





Revista OT Summer 2018

## IMPORTANT DEADLINES:

**2018 MCC REGISTRATION OPENS SOON!**

**BOOK YOUR HOTEL ROOM FOR MCC BY OCT. 17, 2018**



### Executive Director: Summer Revista 2018

*"Occupational therapy maximizes health, well-being, and quality of life for all people, populations, and communities through effective solutions that facilitate participation in everyday living." —AOTA Vision 2025*

Vision 2025 builds on the work of the centennial vision to guide the profession beyond 2017 (AOTA 2017). When many of us attended the AOTA conference in Salt Lake City, Utah, we were asked to discuss this vision and to think about what

it means. AOTA began to work on this vision in 2014. More than 60,000 members and non-members along with industry leaders were surveyed and interviewed. According to AOTA (2017), this was done to gain insight on the profession's challenges, strengths, and potential goals. It is important as a state association of occupational therapy professionals and students that we align ourselves with Vision 2025. Through more collaboration between TOTA and AOTA we can better address the challenges our profession faces on a state and national level. In a conversation with Dr. Kitty Reed, she pointed out that occupational therapy has survived the trends of healthcare because of our unique ability to adapt to the changes (Reed, 2018).

How can we communicate and demonstrate Vision 2025 to the public? Consumers must have access to occupational therapy services that provide a means to improve quality of life, increase independence and the ability to manage themselves. It is imperative that we increase awareness of what we do to key stakeholders, consumers, and policy makers. Educating them in our role in mental health, wellbeing, and improvement of quality of life solutions is vital. The viability of the profession is based on the public's knowledge. Public knowledge is needed for reimbursement of our services and job creation. We must continue to provide public and written testimonies at legislative committee meetings when the opportunities are available. When our consumers (clients/patients) can testify how they have benefited from occupational therapy services to our state legislators, especially in the pediatric community, then change can be facilitated.

The mission of TOTA, "to be responsive to the professional development, information needs, and educational requirements of its members; to advance and improve the practice of occupational therapy for the benefit of the consumers;

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# WORLD FEDERATION OF OCCUPATIONAL THERAPISTS (WFOT)

By Vangie Moncayo, OTR Chair of International Committee

TOTA members attended the World Federation of Occupational Therapists (WFOT) Congress 2018 in Cape Town, South Africa.

From 21-25 May, people came from all over the world to be in attendance at the 2018 WFOT Congress. Occupational therapists, speakers, panelists, poster presenters, students, volunteers, friends and colleagues alike came together in unison to share in the experience of what was Connected in Diversity: Positioned for Impact. We would like to thank all those in attendance and are overjoyed in what a successful Congress and experience it truly was.

## What is the WFOT Congress?

WFOT holds an international Congress every four years, with the aim to encourage professional fellowship, exchange technical and scientific information and to promote worldwide high standards of practice.

WFOT Congresses include:

- Scientific sessions
- Social functions
- Study opportunities for members
- A WFOT Business Meeting (Plenary Session)

## What is WFOT?

The World Federation of Occupational Therapists (WFOT) is the official international organization that supports and promotes occupational therapy around the world. Currently there are 72 member countries representing 350,000 practitioners internationally. The United States was an original founding country of the WFOT and has been a member since 1952.



Kitty Reed and Vangie Moncayo



# OCCUPATIONAL THERAPY AND ADVOCACY: THE WHO, WHAT, WHERE, WHEN, AND HOW

By John S. Luna, OTR, OTD



John S. Luna,  
OTR, OTD, TOTA  
Legislative & Political  
Affairs Chair

Occupational therapy's roots in advocacy can be traced to the profession's origins in 1917, when our six founding members met in Clifton, NY, with the objective to "study and advance curative occupations" (AOTA, n.d.). In the evolving landscape of today's healthcare, the role of occupational therapy practitioners has expanded beyond evaluation and treatment to include the role of an advocate (Stover, 2016). Indeed, many therapists actively engage in advocacy as part of daily practice. However, recognizing the need for advocacy in today's health care field is different from knowing how to engage in advocacy. The purpose of this *s Revista* article is to answer some fundamental questions on advocacy and provide examples of how TOTA is advocating for the profession, patients, and members across the great State of Texas.

## What is Advocacy?

While advocacy is the topic of many articles in today's literature, the term is rarely defined or examined in depth (Dhillon et al., 2010). There are a number of definitions found in dictionaries or through internet searches, but not many of these apply to the profession of occupational therapy. AOTA's Framework (2014) defines advocacy as "efforts directed towards occupational justice and empowering the individual to obtain resources to fully participate in daily life occupations," the outcome of which can be either at an individual or a system level (p. S30). This broad definition implies that advocacy goes beyond the efforts of the therapist alone. The definition speaks to client-therapist collaboration and the empowerment of clients to work cooperatively with practitioners towards a shared goal. The goal or outcome can either be on an individual level (to create changes for a single client) or on a systemic level (creating change in policy, procedure, or funding) to benefit an entire group of consumers or service recipients. A balance between advocacy on individual and systemic levels holds the potential to overcome barriers impacting the occupational success for our clients (Kirsh, 2015). This, of course, begs the question, Why do we advocate?

## Why do we Advocate?

When looking to answer the question, Why do we advocate?, it is essential to look beyond the outcomes of advocacy and examine the factors that motivate therapists to engage in advocacy. Therapists' reasons for advocacy include gaining a sense of fulfillment, upholding the rights of the client, improving the client's quality of life, promoting a client-centered practice, and facilitating engagement in occupation (Dhillon et al., 2010). These factors could potentially apply to advocacy on both individual and systemic levels to benefit the client, therapist, and the profession alike. To enhance therapists' motivation to engage in a dynamic process such as advocacy on both an individual and systematic levels, we must recognize the alignment of benefits to the profession, patient, and practitioner when advocating is successful in creating a positive change.

## Who, Where, and When do we Advocate?

This Spring, TOTA has been consolidating the narratives of therapists from across

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*Revista OT* is posted online four times a year by the Texas Occupational Therapy Association, Inc., 1106 Clayton Lane, Suite 516W, Austin, TX 78723.

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the state to advocate on a systemic level for client, therapists, and the profession in the State of Texas. Using information collected from complaint forms, TOTA testified at hearings held by the House Appropriations Committee in Austin. Testimony included discussion on oversight of the implementation of therapy rate, access to care and network adequacy of managed care organizations, Medicaid participant/provider satisfaction within managed care programs, and future delivery of services under a managed care model. Testimony supported the restoration of therapy rates and illuminated the impact that current MCO policies are having on both access and quality of care. We are grateful for the efforts of both clients and practitioners across the state who have become partners in advocacy through providing public testimony and supporting the association's efforts through providing content for testimony and donations to the PAC. We thank you all! We are looking for partners in advocacy as we gear up for the 2019 legislative session.

## **How Can I Advocate?**

**Five ways you can get involved now:**  
Even if you missed this last set of House Appropriation Committee hearings, you do not have to wait for the next session to become active in the legislative process. Here are five ways you can get involved today.

### **1. Keep your TOTA membership active.**

Your membership as part of the 2nd largest state association in the country gives you access to a wealth of information from continuing education offered at many district meeting to information on the latest legislative happenings. Encourage others around you to join TOTA. Additionally, as a member of TOTA, you join the voices of occupational therapists from across

the state to increase the power of your message.

### **2. Be an agent of change.**

Every occupational therapist possesses inherent leadership abilities. Take the time to time to explore your leadership daily. Every interaction is an opportunity to create a positive change in someone's life. Share your knowledge with those around you. Empower both colleagues and clients alike to become active in advocating at both the policy and the payer levels.

### **3. Donate to PAC.**

Did you know that TOTA has a PAC? TOTA -PAC has been instrumental in supporting Texas legislators who have acted to preserve and promote occupational therapy services. However, we need your help. A donation of \$1.00 a day (a venti drip coffee from Starbucks is \$2.65) can make a world of difference during the upcoming Texas elections.

### **4. Let your voice be heard.**

The first step in solving a problem is acknowledging that there is one. We want your feedback. Email TOTA if you are experiencing an obstacle that is impacting occupational therapy services. Encourage your clients to use the portal on the TOTA website when they encounter obstacles that are impacting their access to occupational therapy services. Collectively this information provides the basis for future testimony and advocacy efforts to benefit client across the state of Texas.

### **5. Let your practice be an expression of professional identity.**

Every treatment or evaluation holds the opportunity to show clients, medical colleagues, and the community at large the distinct value of occupational therapy. With every

positive outcome, you not only change the lives of clients and their families but you advocate for the profession through the embodiment of the distinct value of occupational therapy.

Advocacy is a complex and dynamic process. The benefits of advocacy can accrue to therapists, clients, and the profession of occupational therapy itself. However, it is imperative that every occupational therapist and occupational therapy assistant participate in the process of advocacy and empower clients to advocate on their behalf. Kirsh (2015) may have said it best, "... we need to embrace a sense of self-confident idealism reflected in a strong belief that advocacy will make the world a better place" (p. 220). Let's start here with the patients, practitioners, and profession of occupational therapy in Texas.

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# THE USE OF TITLES AND REPORTING OF CREDENTIALS

By Timothy A Reistetter, OTR PhD FAOTA



Timothy A. Reistetter,  
OTR, PhD, FAOTA

OTA and TBOTE often receive questions regarding the use of occupational therapy titles and credentials. These questions

generally come from three groups. Those entering the occupational therapy profession inquire because of confusion related to differing licensing practices across state. An example is the state of Florida where OTR/L is the approved approach. A follow-up question to the realization that states differ, is "why does the state of Texas allow two methods for each practitioner type: OT and OTR, OTA and COTA?" These distinctions are related to the National Board for the Certification of Occupational Therapy (NBCOT) which is discussed later. The second group inquiring on the use of titles in Texas is practitioners moving to Texas from other states. Not only have these individuals also seen multiple versions of denoting titles they most likely have practiced someplace where titles were conveyed differently. The final group that questions our titling and credentialing convention is other healthcare workers or stakeholder. For example in the past two weeks I have been asked by a social worker and a physician "why do some occupational therapists list OT first while others list PhD?" To respond to these questions it is important to understand the background of these issues for Texas.

The use of titles for occupational therapist and occupational therapy assistance in Texas is addressed in both the OT Rules and the Practice Act:

- Sec. 454.007. USE OF TITLE OF DOCTOR. An occupational therapist or occupational therapy assistant may not use the abbreviation "Dr." the word "Doctor," or any suffix or affix indicating or implying that the person is a physician.
- §369.3. Use of Titles. (a) A licensed occupational therapist shall use the title occupational therapist or the initials OT. OTR® is an alternate term for OT if an individual who is licensed by this board takes the responsibility for ensuring that he or she is qualified to use it by maintaining certification through NBCOT. (b) A licensed occupational therapy assistant shall use the title occupational therapy assistant or the initials OTA. COTA® is an alternate term for OTA if an individual who is licensed by this board takes the responsibility for ensuring that he or she is qualified to use it by maintaining certification through NBCOT. (c) No other titles or initials are conferred for a license from this board. (d) Except when practicing as an occupational therapy practitioner in a higher education setting or when signing as an author for a publication, and that publication requires a recognized publication format, any letters designating other titles, academic degrees, or certifications must follow the initials OT or OTA (example John Doe, OT, CHT or Jane Doe, OTR, PhD). (e) Limitations. A person who does not hold a license to practice occupational therapy in Texas may not use any of the following terms in conjunction with their business, work, or services: (1) "occupational therapist," "licensed occupational therapist," "occupational therapist, registered;" (2) "occupational therapy assistant," "licensed occupational therapy assistant,"

"certified occupational therapy assistant;" (3) "OT," "OTR," "LOT," "OTR/L;" (4) "OTA," "LOTA," "COTA," "COTA/L;" or (5) any other words, letters, abbreviations, or insignia indicating or implying that he or she is an occupational therapist or an occupational therapy assistant.

The Practice Act addresses the use of the title Doctor and clearly forbids occupational therapists from using the term doctor, Dr. or any suffix implying a physician. This section is written for consumer protection. The section is designed to limit confusion within healthcare setting for those receiving occupational therapy. Even though there are occupational therapy doctoral programs in Texas, the Practice Act limits the use of the term "Doctor" for occupational therapists. In accord with the Practice Act, a doctoral trained occupational therapy practitioner should denote their doctoral credentials after their name consistent with the academic degree they have been awarded. This issue is directly related to the OT Rules section 369.3 which address the use of titles by OT practitioners.

The Rules further clarify the Practice Act voted on and approved by the legislature. The primary goal of the use of titles section in the rules is to clarify which naming conventions are allowable in the state of Texas and by whom. Historically, there have been other terms used in occupational therapy like LOT and LOTA to reflect licensed practitioners. The current approved rules limit practitioner titles and designations to occupational therapist, occupational therapy assistant, OT, OTA, OTR, and COTA, with the latter two credentials being reserved for practitioners who maintain certification from NBCOT. In Texas practitioners are not required

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# SUMMARY OF WORKERS COMPENSATION ACTIVITY SINCE JANUARY:

By Bubba Klostermann OT, CEAS II



Bubba Klostermann  
OT, CEAS II

In January 2018, TOTA was asked to comment on an informal posting regarding amendments to the Return to Work Rehabilitation Program, Preauthorization, Concurrent Utilization Review, and Voluntary Certification of Health Care (Rule 134.230 and 134.600). We responded that we were in support of removing the exemption status for CARF (Commission on Accreditation of Rehab Facilities) accredited facilities. We also expressed support of setting one fee schedule for work conditioning and work hardening programs regardless of CARF accreditation status by removing the increased payment to CARF accredited facilities. This accreditation process is very costly and is very difficult for providers to afford this with all the reimbursement and network discounts in place now. We also expressed our concern that the current fee and proposed fee schedule is extremely low for WC and WH. Work conditioning is currently paid at \$36/hour and DWC is proposing to reduce the fee to \$28.80/hour and Work Hardening in currently \$64/hr. and the proposed fee would be \$51.20. Our concerns are that it is very difficult for providers to be able to provide these programs due to the cost of therapist's salaries in many instances being equal to those rates. TOTA also requested clarification regarding using one on one versus group charges with work conditioning and work hardening programs. Currently, there is no language that addresses one on one or group charges.

In March 2018 TOTA was asked to comment on the proposed new 28 Texas Administrative Code

133.30 Telemedicine Services. TOTA expressed support for the expansion of Telehealth Services being performed regardless of the geographic location or place of service. TOTA also reported that TBOTE had adopted rules to address the use of telehealth by Occupational Therapists- Title 40 Part 12, Section 362.1, 372.1, 373.1.

In April 2018, TOTA was asked for input on the development of an Opioids Plan-Based Audit. We were excited to be able to submit a combined response with TPTA and TOTA. We stated that even though Occupational Therapists and Physical Therapists do not prescribe opioids, our role in pain alleviation and pain management is well-documented and we encouraged prescribers of OT and PT services to support OT and PT treatment plans to avoid or minimize the need for prescribing opioids.

In May 2018, DWC asked for our input again on the Proposed Rule 134.230 and 134.600 concerning the same rule that was in the informal stage in January 2018 regarding Return to Work Rehab Programs and Preauthorization, Concurrent Utilization Review, and Voluntary Certification of Health Care, and Single Reimbursement Rate for Work Hardening and Work Conditioning Rate. Once again TOTA and TPTA provided a combined letter response. We stated we were in support of removing the exemption status for CARF and were in support of setting one fee schedule for work conditioning and work hardening. We also reported that CARF no longer uses the terms "work conditioning" and "work hardening" but now uses General Occupational Rehab Program and Comprehensive Occupational Rehab Program. We requested that DWC adopt this more current terminology for these type programs. We again stated that the fees were not adequate and needed to be

increased to allow providers to be able to afford to provide these services. We recommended that DWC consider using the Physician Fee Schedule like therapeutic activities 97530 and Therapeutic Exercises 97110 rates to establish more realistic rates for Work Rehab Programs (work conditioning/work hardening-General and Comprehensive Occupational Rehab Programs). We also requested that DWC clarify the one on one versus group code use with these programs. 

## EXECUTIVE DIRECTOR'S REPORT, continued from page 2

and to anticipate and respond to organizational, political, economic, and social features of the healthcare delivery system at the local, state, and national levels," remains relevant and is already in alignment with AOTA's Vision 2025.

I invite you to read the legislative updates, attend district and state board meetings, send us your comments and suggestions on what TOTA can do for you; and finally, I invite every licensed practitioner and student in the state of Texas to become a member and be committed to membership and being involved through 2025 and beyond. If the "right to practice" was a constitutional amendment and it was being threatened, what would you do to defend it? TOTA and AOTA fight for the sustainability of this great profession. What are you doing to support your professional associations?

Citation: [American Occupational Therapy Association. \(2017\). Vision 2025. American Journal of Occupational Therapy, 71, 7103420010. https://doi.org/10.5014/ajot.2017.713002](#)

# STUDENT ZONE

## SURVIVING STUDYING

By Nikita Gandhi, OTA Student Rep.



First, congratulations to all new graduates and to all students for finishing another semester. For those of us who have graduated, we have one more obstacle to conquer before we head out to the workforce...the NBCOT exam. For me, getting started was the hardest part. I felt so overwhelmed. There are so many study tools, different suggestions and varied techniques out there. All in all, I think it comes down to you! Each one of us has a different technique and style and it's important to stay true to that. I started off by joining the AOTA Exam Prep group on Facebook where I read through post after post, jotting down the most commonly used tools. After letting it all settle in, I chose to purchase the AOTA pdfs, using the TherapyEd book as a supplement and the purple book for practice tests. At first, I thought I was way over my head the all the study material but, as I mapped it all out I realized it was going to work out fine. I've been studying 6-7 days a week using one day to take a practice test to help build my stamina (which I desperately

## OTA STUDENTS ATTEND AOTA CONFERENCE IN SALT LAKE CITY

Stephanie Johnston, OTR, OTD, MA, FAOTA

18 OTA students from Lone Star College-Tomball attended the AOTA conference in Salt Lake City, UT April 19-22, 2018. The students volunteered in numerous capacities including room monitors, poster monitors and exhibit hall monitors. They participated in a variety of educational and poster sessions, heard outstanding speakers, and spent hours in the Expo Hall exploring potential job opportunities and cutting-edge OT products. One student, Maria Aguirre, won her spin at the NBCOT booth, taking home a free exam and a free study guide. The trip wasn't all work, the students also had the opportunity to explore the beautiful city of Salt Lake, hike and eat plenty of great food.



SOTA Officers: Laura Winston, Meagan Thomas, Maria Aguirre, Jennifer Landaverde, Brittney Lorenz, Jenae Roetzler, Dawn Martin, and Larry Lichey



SOTA Officers: Maria Aguirre, Jennifer Landaverde, Brittney Lorenz, Meagan Thomas, Jenae Roetzler, Dawn Martin, Laura Winston and Larry Lichey.

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# ARE YOU READY TO GRADUATE?

By Shannon Levandowski, OTR, OTD, MS, BCP, SCSS



Shannon  
Levandowski, OTR,  
OTD, MS, BCP, SCSS  
Texas Woman's  
University  
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AFWC

FAST! You have likely mastered the skills needed to be a good student; that is, you know how "to do school" and are feeling pretty confident as you transition into the next steps of your education. You may have a pretty good sense of where you want to practice, where you want to live and maybe even have a 5 year plan all drafted out.

But... Have you taken time to reflect on what it takes to be a therapist versus a therapy student? Academic programs teach you how to complete assessments, plan treatments and spit out basic information, often with simulated or non-disabled clients. Fieldwork experiences can often be trial by fire, particularly when you are exposed to real time situations that cannot be simulated in academic programs.

As you begin thinking ahead to your long-term plans as a student, allow me to provide you with a few hints that may help bridge the islands between "student" and "clinician." Some of this may not be rocket science; however, you would be surprised how easy it can be to overlook basic things as you swim in the deep waters of student transition!

## Check Yourself

Before you go out on the town, you check yourself in the mirror. Does your hair look nice? Is your outfit on point? Is there anything in your teeth? This routine is good to emulate in your clinical transition. That is, as you transition out of being student,

**S**o, you are ready to graduate and begin your work as an occupational therapist or occupational therapy assistant. You can see the light at the end of the tunnel and you want to run towards it....

consider this: how do I look? Am I pleased with what the professional world will see of me? How can I better polish myself for a professional role? Here are few things to consider:

- Does your personal appearance reflect professional attire or is it reflective of your desired place of work? When I was in studying to be a teacher at Clemson University, I was given the best advice regarding professional appearance: "Dress for the job you WANT, not the job you HAVE". I do this every day.
- Have you checked your social media for pictures from Spring Break a year ago... the REALLY fun trip? Do you have your settings changed to prevent your friends from tagging you in an embarrassing moment? You might consider making a new social media account that represents the professional you, not the personal one. For your personal one, consider changing your name so that only personal contacts might find you. Also, I suggest adjusting your privacy settings for your personal account as well. We all have personal lives, but the world (particularly a potential employer) does not need a window into yours.

## Find a Yoda to your Luke Skywalker

Whether you have started your level two rotations or have just finished them up, it is always good to self reflect on your comfort levels within practice. What areas of practice are you most comfortable? What challenges you the most? If given the opportunity, what areas would you like more experience or knowledge in? Where could you seek out this knowledge? Coursework? Textbooks? In fact, one of the best ways to enhance your skills is to seek out a relationship with a mentor. Here is the good news about being in a mentoring relationship; you and your mentor receive continuing education credit under NBCOT (PDUs). You'd be surprised how easy it is to find your Yoda, ready to "always pass on what you learned" (Episode VI: Return of the Jedi, 1983). Before you seek out your mentor, check out the forms on NBCOT

so you have good understanding what is expected of both you while in this relationship; I have listed the link below. Mentorships are more than just hanging out talking shop; you must develop professional goals and expectations for yourself and your mentor. I have been in several mentoring relationships and found it to be extremely rewarding. As a matter of fact, I still maintain professional contact with one of my mentors eleven years after we connected.

NBCOT Mentorship Information:  
[www.nbcot.org/-/media/NBCOT/PDFs/Mentoring-Guidelines-Log.ashx?la=en](http://www.nbcot.org/-/media/NBCOT/PDFs/Mentoring-Guidelines-Log.ashx?la=en)

## This is NOT for a Grade

For most of your life, you have probably focused your attention on your academic work – some of you since preschool! One of the biggest transitions that will occur as you move out of student into clinician is this: what you do in the clinic is not for a grade; it's for real. It's someone's life. For years, you have worried "will this be on the test?" and, do you know what the answer is as a clinician? It is ALL for the test. Here's the thing, what you learn in school is your foundation. You need to know all of it because, as you begin clinical work, you will find out quickly that if you do not have a foundation, your tower will fall. So, if you are presently still in school, keep your eye on the prize: it is ALL for the test. The test of life... the test of your career. You've got this, know it so you can build upon it. If you are out of school and on the job hunt, I suggest going back to your basic concepts and ensure you know them. Everything you learn in school is simply the foundation for your tower in the sky; school is not the ending... just the beginning. Enjoy the climb!

As you transition from a student to clinician, some of these may help keep you in step. It's a big step, and although you feel like you are taking it yourself, you aren't. You have lots of supporters all around you, they are lifting you up. Climb up the ladder, but remember to keep your safety harness on. Best of luck!

# SCHOLARSHIP RECIPIENTS



Gabriella Santos

My name is Gabriella Santos and I am one of the TOTA scholarship recipients from 2017. I moved from Florida to attend the University of Texas Medical Branch (UTMB) in 2015 where I earned a masters in occupational therapy. Throughout school, I was very involved in various community service organizations in addition to my term as Vice President on the Student Occupational Therapy Association (SOTA). I graduated from UTMB in August and started my career as an Occupational Therapist (OT) in September 2017. I am currently a full-time therapist at an outpatient pediatric clinic working with children of all ages with varying diagnoses including ASD, dysgraphia, ODD, cerebellar dysfunction, SPD, and ADHD. My favorite part of being a pediatric occupational therapist is that I get to enhance the quality of life of children of all ages to be successful in their participation at school, home, and within the community.

For my fellow OT students about to embark on fieldwork, there are going to be good days and there are going to be bad days, but my savior was having a support system. There is a high possibility that wherever you go, there will be other students of various disciplines- be their friend. From experience, I can honestly say this is how I got through one of my more challenging rotations. For those who are graduating and sitting for the board exam- you can do it. Write "you can do it" everywhere with Post-its- on your mirror, in your car,

above your bed, and wherever else you will see it every day. Positive affirmations are the best, but most of all, believe in yourself. After you pass the exam and are looking for a job- remember this one thing: know your worth. You are entering one of the best and most desired jobs. Choose a job that you genuinely love, and you will never work a day in your life.



Rebecca Hopkins

My name is Rebecca Hopkins and I graduated from the University of Texas Medical Branch in August of 2017 with my master's in occupational therapy. After graduation, I started working for Synergy Care, Inc. at a skilled nursing facility in Tomball, Texas, where I provide inpatient and outpatient occupational therapy services to patients' post-hospital stay. I have been a member of TOTA since the summer of 2015 and presented a poster presentation at the 2016 Mountain Central Conference. I also plan to attend the 2018 Mountain Central Conference in Sugarland this year.

Advice for new practitioners: Don't be afraid to try something new and step out of your comfort zone. Don't be afraid to ask for what you want, and make sure to find a balance between work and a social life.

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**SURVIVING STUDYING**  
continued from page 8

need to work on). Study time, for me, varies each day. Some days my stamina is great, others, not so much and I've learned that it's totally okay to take breaks.

I think the best advice that I got and saw, was taking the time to read the rationale when taking practice quizzes or tests. So far, I feel that it has helped me the most. Understanding why the right answer is right, and why the wrong answers are wrong, has changed the way I approach questions all together. Another piece of advice I got, was that a big part of the test was being able to break down the question and really understand what is being asked. The more practice questions I take, the more I see how true this is. I know it's a stressful time but I'm confident that we are all going to knock it out of the park! I would love to hear what tools or techniques y'all are using! It may work for someone else so please share here: NBCOT Exam Suggestions. After you've answered, check out what other people are doing to attack the exam. Good luck to everyone!!!!

## SUBMIT YOUR NOMINATION HERE

TOTA is pleased to recognize therapists, educators, students and friends of Occupational Therapy for their excellent work for their patients and their profession.

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**GET DISCOUNTED ADMISSION at Mountain Central Conference when you volunteer to work a minimum of 4 hours for two days at MCC 2018.**

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# TOTA MEMBERSHIP

[CLICK HERE TO JOIN OR RENEW NOW!](#)

Many issues that affect the practice of occupational therapy and affect your practice are determined at the state and local levels. It is important for you to become a member of your state organization to stay informed and advocate for your profession. Membership is a great investment in your career.

**TOTA offers 12, 24, or 36 month rolling memberships which start when dues are paid and is available for renewal 30 days prior to the expiration date.** TOTA provides an opportunity for members to pay for multi-year memberships at a discount. Your membership renewal can be found under your profile when you log in to the website.

## SUSTAINING MEMBER

An individual who supports the activities of TOTA by paying dues in one and one-half times the membership fee.

## PRESIDENTS CLUB MEMBER

An individual who supports and sustains the activities of TOTA by paying dues in the amount of twice the membership fee.

## HONORARY LIFE MEMBER

An OT or OTA who has been recognized by a vote of the Board of Directors, also known as the Board, as having performed distinguished services in or for occupational therapy may be granted honorary membership for life.

## SCHOLARSHIP RECIPIENTS

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Macayla Lausell Carrillo

After graduating in August of 2017 and passing my boards I was given a wonderful opportunity to be an Activities Director. I work full time at West Oaks Rehabilitation Healthcare Center and

absolutely love what I do!

My advice for COTA students is do not limit yourself to a specific setting or population. You learn the most and become a stronger practitioner when you open your mind to learning and new experiences. Don't be afraid to challenge yourself, learn from your experiences, learn from your mistakes and grow.



## SUBMIT A NOMINATION TODAY!

**2018 Award Nominations Now Open!**  
**Recognize fellow practitioners and students for their contributions to the practice of occupational therapy.**

[CLICK HERE TO SUBMIT A NOMINATION >](#)

OTR and COTA of the Year

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Award for Clinical Excellence

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COTA/OTR Collaboration Award

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## HAVE YOU VISITED TOTA'S VIRTUAL EXHIBIT HALL?

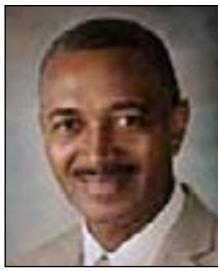
Tota's Virtual Exhibit Hall gives members a look at businesses within our industry. check it out today!

[www.tota.org/year-round-virtual-exhibit-hall](http://www.tota.org/year-round-virtual-exhibit-hall)



# ALAMO SOUTH DISTRICT UPDATE

By Ricky Joseph, OTR, PhD; Chair, Alamo South District



Ricky Joseph, PhD, MA-HRM, OTR, Alamo South District Chair

Greetings from the Alamo South District of the Texas Occupational Therapy Association; I would, first of all, like to acquaint you, our members, with the leaders who serve as part of the Alamo South District Board. This will allow you to contact specific board members, when you have questions or issues related to their area of responsibility.

**Chair: Ricky Joseph**

**Vice Chair: Monica Clark**

**Secretary: Alyssa Laurel**

**Treasurer: Marta Perez Dixon**

**Standards & Practice Chair:  
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**Membership Chair:  
Mary E. Deffenbaugh**

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Theresa Prudencio**

**Legislative & Political Affairs Chair:  
Laura Novak**

**Laredo Cluster Chair: Terri Gonzalez**

**McAllen Cluster Chair:  
Darnell Miller**

**Fredericksburg Cluster Chair:  
Jean Polichino**

**Corpus Christi Cluster Chair:  
Thelma Montemayor**

**OT Student Representatives:  
Felicia Garcia & Aleera Barrera**

If you would like to be a guest at our board meetings to get acquainted with the leadership or discuss an issue that you would like

to personally bring to the board, please feel free to contact me (w: 210-567-8891). I will include you on the agenda and look forward to welcoming you as an honored guest. I also encourage you to seek the opportunity to become a part of our board or enroll in a leadership-mentoring relationship with the board member who currently holds a position that you are interested in serving in the future. The board meetings for the remainder of this year will take place from 5:00 – 6:00 PM on July 10th, September 11th, and November 13th.

You may have already received the email from TOTA asking you to participate in the election for specific State and District leadership positions. You may go to the TOTA website between June 1st and 30th to cast your votes ([www.tota.org](http://www.tota.org)). You will need to be an active member of TOTA to vote; so if you have to renew your membership prior to voting, please do so as early as possible.

I also urge each of you to prepare now to attend the TOTA Annual Mountain Central Conference (MCC) to be held from November 2 – 4, 2018 at the Marriott Hotel in Sugar Land, Texas. This is always a great opportunity to network and complete your annual CE requirements. Of special note in the coming conference, is the training for the administration and scoring of the Performance Assessment of Self-care Skills which is the initial step TOTA is taking to equip our Texas OTs with the ability to administer evidence-based functional assessments. Stay tuned to the TOTA website and email announcement for the opening of registration for this year's MCC. Thank you for your active support of TOTA and the Alamo South District.

# CAPITAL CENTEX DISTRICT UPDATE

By Leslie Smart, OTR, DSc; Chair, Capital Centex District



Leslie Smart, OTR, DSc, Capital Centex District Chair

The Capital Centex district celebrated OT month with a full house for our district TOTA Membership Drive meeting! Our speaker,

Mary Beth Korducki, COTA, LBSW, shared her experiences in her presentation, "The Use of Yoga as a Modality for Oncology Clients." She led us through a series of poses and stretches and taught us mindfulness techniques that we can use with clients. We met at a local restaurant and had a delicious meal thanks to sponsor: Remedy Therapy Staffing PLLC. RiverKids Pediatric Home Health - Austin CREW and Sanctuary Yoga provided door prizes. It was a great way to celebrate OT month.

Capital Centex was well-represented at the 2018 AOTA Annual Conference in Salt Lake City, Utah. Carie Barnes participated with an AOTA Community of Practice group focusing on literacy and occupational therapy in presenting, "Beyond Handwriting: Advocating for the Role of Occupational Therapy in Supporting Literacy Development." Christene Maas was a member of the group presenting, "Case Studies from Occupational Adaptation Practice Models That Cross Lifespan and Contexts: Best Practice Driven by Theory." Katelyn Halby, district treasurer reported that she was particularly inspired by the Eleanor Clark Slagle Lecture by Gordon Muir Giles, PhD, OTR/L, FAOTA. He spoke about

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# FROM YOUR AOTA RA TEXAS REP

By Judy Skarbek, OTR, AOTA RA Texas Rep



Judy Skarbek, AOTA  
RA Texas Rep

I hope everyone's summer is kicking off to a great start. I want to introduce myself again. My name is Judy Skarbek and I am your AOTA RA Rep for Texas. I attended the AOTA conference in Salt Lake City back in April. The RA did not have a formal meeting at conference this Spring, but we did hold an online meeting in March. In response to the current opioid crisis, a motion to develop a fact sheet and continuing education related to the Role of Occupational Therapy in Addressing Opioid Use and Abuse was approved. Also, we discussed the occupational therapist as a case manager and having that role well defined within AOTA's practice model.

Should you want more information about the practice of the RA within AOTA, open up the AOTA website and click on "About AOTA," click on "Volunteer Leadership" and then click on "Representative Assembly" in the drop-down section on the left. If you want to write a motion, the RA accepts submissions all year long. Click on the "RA Toolkit" box and you will have access to the forms and information on how to write a motion. Also, I am available to assist as your RA Rep. Please visit the AOTA website for AOTA's "Vision 2025." [www.aota.org](http://www.aota.org).

The RA will have another online meeting this coming October.

Your commitment to the profession of occupational therapy is greatly appreciated by your lasting support of your national and state associations.

Have a great summer!

CAPITAL CENTEX, continued from page 12

neurocognitive rehabilitation skills and strategies.

Upcoming events for our district include a panel presentation on OT and COTA Partnerships (June 19), and our annual 4-hour CE on July 19. This year we are fortunate to host Giuli Krug, PhD, OTR, CLA, and Susan Jeantete, OTD, OTR, teaching a course titled Neurorehabilitation Refresher: Application to Everyday Practice. Come join us! 

Visit  
[www.tota.org](http://www.tota.org)  
for the latest  
news and  
district events

## USE OF TITLES AND CREDENTIALS, continued from page 6

to maintain certification to practice. They only have to maintain an OT license from Texas. Because of this, the titles of OT and OTA are permissible. The OT Rules have removed all other designations, words, lettering, abbreviations, or insignia which imply an occupational therapist or occupational therapy assistant.

Another clarification within the rules, that confuses people, is the order of titles. The general convention is to place the occupational therapy designation first among ones list of credentials. The examples for this in the Rules are OT, CHT and OTR, PhD.

The 2010 TBOTE News provides some insight into this distinction which is consistent with other healthcare professionals: "Whether you are a clinician or an educator, if occupational therapy is the reason for your license, this is the credential listed first." This convention was later modified for practitioners in higher education. The exception for academia is in part related to authorship and publisher requirement which are often based on ones highest academic degree and not necessarily ones clinical credentials. For this reason you may see many different combinations of credentials.

In conclusion, the use of titles and reporting of credentials is defined in the Occupational Therapy Practice Act and Occupational Therapy Rules. Hopefully this short essay has helped to clarify the issues surrounding the use of titles. Additionally, if you come across a colleague or practitioner who is using titles and credentials incorrectly, please correct them. Finally when you meet a member from one of the groups mentioned above, please take the time to educate them with the rationale behind the use of titles by occupational therapy practitioners in Texas. 

# FROM YOUR OTA REPRESENTATIVE

**Kelly Parmet, COTA, TOTA OTA Representative**



*Kelly Parmet,  
COTA, TOTA OTA  
Representative*

There is a lot currently happening in the occupational therapy world that has significant impacts on therapy assistants.

On a national level, there are Medicare changes occurring that affect therapy assistants. Recent legislation changes have occurred to Medicare Part B effecting reimbursement rates for occupational therapy assistants. It was included as a last minute addition to the Bipartisan Budget Act 2018 passed in February. In 2020, all Medicare Part B providers must report modifiers that indicate whether an OT or an OTA provided the services. Starting in 2022, the services provided by an OTA will be reimbursed at 85% of the typical payment rate. This change is for Medicare Part B only and does not affect acute care, Part A skilled nursing facility stays, home health, hospice, inpatient rehabilitation hospitals, or other providers covered under Part A of Medicare. Medicare still recognizes occupational therapy assistants, and this payment change to Part B does not change the Centers for Medicare and Medicaid Services (CMS) policy that firmly supports the role of occupational therapy assistants in the delivery of covered Medicare occupational therapy services. The biggest area affected will be outpatient services, as Part B covers outpatient occupational therapy services. AOTA reports that despite all of the changes occurring, the OTA Job market remains steady. If you hear of any changes in the

job market for OTAs please contact AOTA at [FAD@aota.org](mailto:FAD@aota.org).

In state affairs, there have been Medicaid reimbursement rate cuts that are affecting occupational therapy assistants. As of December 1, 2017, the rates for a therapy assistant were reduced to 85% of the rate paid to a licensed therapist. Starting September 1, 2018 the rates for a therapy assistant will be reduced to 70% of the rate paid to a licensed therapist. TOTA has been working very hard to support our clinicians and testified on numerous occasions before the House, the Senate, and HHSC on the issues related to the Medicaid rate reductions. If you, a client, or someone you know has been affected by these changes please share your story at [www.tota.org/medicaid-complaints](http://www.tota.org/medicaid-complaints).

The rate changes to Medicaid and Medicare are particularly alarming as these services often guide reimbursement rates of private insurers. So... how can YOU help? Ways to get involved: Be a member of TOTA, make sure your peers maintain active TOTA memberships, contribute financially to TOTAPAC, talk to your patients about occupational therapy issues, volunteer to work on a state candidate's campaign, urge your friends and patients to vote for candidates that support occupational therapy, form a personal relationship with your state elected officials, and attend Day at the Capitol.

Another way to get involved and have your voice be heard will be at this year's Mountain Central Conference. This year's conference will be host to an OTA forum, which will allow for any concerns to be aired as well as foster

as educational environment. With all the changes including the ACOTE requirement of OTA programs to go to Bachelor's degrees, now is the perfect time for an OTA forum where ideas and views can be exchanged.

Please help me by sharing all this information as it is going to take every licensed practitioner in this state to join together and fight for our profession and the clients we serve. 

MCC 2018 **SAVE THE DATE** November 2-4  
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