

MOTION 2

Early Intervention Pre-professional Training

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MOTION: I move that the Representative Assembly charge the Commission on Practice (COP) and the Commission on Education (COE) to jointly report on the early intervention (birth to 3 years) content in educational programs for occupational therapy, making recommendations for nationwide identification and recognition of common training elements, and using gathered information to develop strategies to address barriers to entry for occupational therapy practice in Early Intervention programs. Report to Spring 2008 Representative Assembly.

RATIONALE: Though Early Intervention services are federally mandated, wide flexibility is given to states for actual program development. This has given rise, in some areas, to a restriction of occupational therapy practice for licensed professionals.

For example, the State of Illinois has enacted the following training requirements:

30 clock hours:	Infant Development: Typical and Atypical
30 clock hours:	Working with Families of Infants with Special Needs
30 clock hours:	Intervention Approaches for Infants with Special Needs
30 clock hours:	Infant Assessment
240 clock hours:	Supervised professional experience in Early Intervention

Pre-professional training in these targeted areas is often denied credit by state credentials reviewers who are not occupational therapy professionals. In some cases, course work has been denied because the title of the course included the word “children” instead of “infants.” In other cases, terminology on course outlines has changed from one year to the next, such that graduates of one class may be given credit for pre-service instruction that may be denied graduates of another class, even though similar course content is required to meet accreditation standards.

In October 2005, the AOTA Ad Hoc Workgroup on Families and Caregivers Across the Lifespan identified the “potential for an increase in emphasis on occupational therapy pre-professional and clinical education programs on expanding knowledge and intervention approaches to more effectively meet the growing needs of families and caregivers.” Thus the need exists to carefully identify and articulate the training and expertise of occupational therapy professionals for functioning in community-based programs for infants and their families. Such information is also needed to encourage further development of pre-professional training activities to meet society’s health, wellness, and quality of life needs in emerging areas of practice.

FISCAL IMPLICATIONS:

- Telephone—3 conference calls (90 minutes): \$500
- Duplicating and Postage: \$15

Estimated total: \$650

RELATIONSHIP TO THE STRATEGIC PLAN:

Goal 1. Building the profession's capacity to fulfill its potential and mission

a. Prepare occupational therapists and occupational therapy assistants for the 21st century

Goal 2. Demonstrating and articulating our value to individuals, organizations, and communities

a. Increase public understanding of the profession and its value in meeting diverse health and participation needs