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Evolution of Occupational Therapy Practice: Life History of Cassady Hoff

University of North Dakota

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Abstract

Objective

The purpose of this study is to gather information regarding the development of occupational therapy practice in North Dakota and Wyoming through a semi-structured interview of OT practitioners.

Method

This qualitative study utilized a life history interview approach. Student researchers conducted an interview with Cassady Hoff. Researchers then analyzed the data to determine appropriate codes, categories, patterns/themes, and one overall assertion statement.

Results

The predominant categories of the study resulted in the emphasis of client-centered care, personal and professional experiences, and professional trends. The Kawa model guided the research process and data analysis.

Conclusion

Cassady Hoff is an occupational therapist who is an authentic, motivated, open-minded individual who has acquired many achievements and skills in order to facilitate the improvement of occupational therapy practice. Her leadership has influenced client-centered practice and advocacy for others in her community.

Introduction

This life history 1 of 29 life history interviews which is part of a larger project, Life Histories of Individual Who Have Been Influential In Developing Occupational Therapy (OT) in North Dakota and Wyoming. The purpose of the project is to gather information about the history and evolution of occupational therapy (OT) practice in North Dakota and Wyoming through life
histories of individuals who have influenced the development of OT in these two states. It is anticipated that the life history process will be a powerful way to gather this information. This study is intended to provide current and future generations of occupational therapist a view of the history and how occupational therapy practice has evolved from its inception to current practice in North Dakota and Wyoming.

Therefore, the design of the study was qualitative with a semi-structured interview in order to gather the results. The semi-structured interview took place in Casper, Wyoming. Cassady Hoff currently works at Casper College as program director of the occupational therapy assistant program; the study was done at Liesinger Hall where her office is located. Cassady Hoff OTR/L, is an alumna of the University of North Dakota Occupational Therapy program. The interview focused on Cassady Hoff’s experience as an OT and the development of occupational therapy profession as a whole.

**Literature Review**

The life history qualitative research study was aimed to focus in two geographical locations in the United States, Wyoming and North Dakota. The participant that was interviewed is from Casper, Wyoming which is considered a rural geographical location. There are many problems that are illustrated in rural areas and the accessibility to the occupational therapy professions for community members. A study done by Kohler and Mayberry (1993), explores these issues in order to gain a greater understanding of factors that affect occupational therapy practice in rural areas, such as Wyoming, Colorado, New Mexico, Utah and Arizona. There is a personal shortage of occupational therapy practitioners due to factors such as inadequate continuing education opportunities, weather conditions, and large caseloads (Kohler and Mayberry, 1993).
Topics that were discussed during the interview that related to practical issues amongst rural occupational therapy practitioners were: the need for occupational therapy in Wyoming, what factors make working in Casper, Wyoming unique, what issues are run into working as an occupational therapy practitioner, and how the future of the occupational therapy profession can be improved in rural areas.

It is estimated that eighty million Americans live in the rural areas of the United States. Out of these eighty million Americans it is estimated that 11% or 8.5 million of these rural community members have some type of disability conditions, thus the need for occupational therapy practitioners in rural areas is highly needed. According to Kohler and Mayberry (1993), most people living with a disability in a rural area could benefit from occupational therapy services but are underserved. Thus this article supports background and need for the qualitative study listed above. It is important to explore the unique factors that rural occupational therapy practitioners experience, and how these factors can improve in order to facilitate client-centered practice. Exploring the experience and opinions of an individual who has a background in OT practice in a rural population gave the researchers insight to this topic.

Theory

The Kawa model was used in order to guide the research of this study. The Kawa model is relevant to the Japanese culture, and consumed a collectivism approach (Turpin & Iwama, 2011). A collectivism approach is derived from an Eastern perspective, which emphasizes the importance of belonging to a group of people, instead of focusing on the individual. “The group in which one holds membership is the agent” (Turpin & Iwama, 2011). The definition of Kawa in the Japanese culture is river, which is represented throughout the model. The model states, “Life is like a river, flowing from birth to the end of life.”
The assessment of the client first begins with discussion, in order to understand the client’s experiences, life roles, etc. The assessment and interventions focuses on an understanding of belonging, rather than goal reaching. The occupational therapist will work with the client to determine the specific occupations that support the client’s sense of belonging, which directly relates to the collectivist components.

Additionally, it is important to note how change occurs for the client through intervention. Interventions are centralized to “Shaping the client’s social roles to seek ways of increasing the channel through which the water can flow” (Turpin & Iwama, 2011). Discussion with the client can explore how walls and the floor of the river could be shared to increase space, as well as where new channels can be open.

The key elements of the Kawa model are evident throughout the qualitative research project listed above. The questions that were created are directly related to the types of experiences the participant had, and how these experiences have shaped the participant into the person that he or she is today. The goal of the interview was to gain an understanding of the participant’s experiences, and how the participant is positioned in society within the group profession of occupational therapy. The interviewers gained a great idea of where the participant belongs in the profession of occupational therapy, and how he or she implements harmony with people around him or her. Cassady emphasized the importance of being involved within a group, and how it facilitates growth and change within a person. Additionally, the interviewers addressed questions that implemented the clients social roles in ways of increasing the channels, in which water can flow. According to Turpin and Iwama (2011), “Human action takes its meaning from the person’s position within society.” We implemented this idea by exploring the participants position in society, and what those individual experience mean to him or her. The
Kawa model guided this project, which focused on the individual’s experiences, and how these experiences relate to society.

**Description of the Participant**

Cassady Hoff is currently a professor and program director for the Casper College Certified Occupational Therapy Assistant (COTA) program. She graduated from the University of North Dakota, in Casper, Wyoming in 2001, and began working for Casper College immediately as a fieldwork coordinator for the COTA program. Cassady has both her Bachelor’s and Master’s of Occupational Therapy. She has practiced as an occupational therapist at Wyoming Medical Center, Shepherd of the Valley, Child Development Center, and Casper Orthopedics. On top of Cassady’s busy work schedule, she is a mom who is married with two sons, one of which requires occupational therapy services. She attempts to place her family first.

Cassady’s father assisted her in selecting occupational therapy as a career path. This was chosen, as she had several interests and hobbies, but was especially interested in anatomy, as her father was an anatomy professor at the college. Her hobbies included sports, music, woodworking, and crocheting. Cassady’s personal interest in music has also transitioned into her profession, as she has utilized music as an intervention for a number of clients. Cassady has a strong passion for advocating for her clients, and allowing OT’s and COTA’s to collaborate.

When treating patients, Cassady enjoys incorporating their interests into the therapeutic plan. Cassady displayed interest in utilizing music within treatment. She shared two different stories regarding patients she has treated using music therapy, and explained to the researchers the positive results of these patients. Other than incorporating music into treatment, Cassady did not describe any other specific treatment methods. She briefly explained how she uses any tools
within the facility to incorporate meaningful activities within each patient’s treatment. This displays she has the ability to think creatively to develop a client-centered treatment plan.

Cassady has succeeded in multiple aspects of her career, leading to her personal achievements. Throughout her position at Casper College as the fieldwork coordinator, she was able to teach students within the program, and work as a practicing occupational therapist. Additionally, Cassady started her Master’s Degree at San Jose college to receive her Master’s of Occupational Therapy. On top of all of this, Cassady was starting a family with her husband and two sons. This displays she is a hard-worker and can take on multiple tasks. Later on, Cassady accepted the program director position for the Casper College COTA program. As previously stated, Cassady was also raising a son who also required occupational therapy services. Cassady states this is one of her largest achievements, as she was able to gain a better view on the pediatric aspect of this profession. She stated there were several aspects she was unfamiliar with, and her son’s services allowed her to learn more about her own profession. These comments demonstrate Cassady accepts that she does not know everything about occupational therapy, and will constantly be learning new information.

The above information was all received from direct report by Cassady Hoff. Researchers completed a general online “Google” search in attempt to gather more relevant information about Cassady. However, after the completion of an online search of Cassady Hoff, students were unable to locate additional information in which she did not share during the interview process. The online search consisted of researchers typing in “Cassady Hoff, Casper, WY” into the “Google” search box. Researchers evaluated all of the results within the first page and did not gather any additional information. This online search was used as a form of triangulation.
Methodology

Study Design

The study design was a qualitative research study using a life history approach. The life history methodology was used in order to capture holistic narrative information about Cassady Hoff and the impact this individual had on the evolution of the profession of occupational therapy. This allowed the focus to be on the participant’s involvement in the evolution of occupational therapy practice. The life history approach enables researchers to determine the impact each participant has made on today’s occupational therapy practice. The qualitative perspective with the life history approach enabled the participant to elaborate on personal experiences.

Participant Selection

Participants were selected from a participant list compiled through purposive sampling by the project directors. Participants laid the foundation for occupational therapy practice in the states of North Dakota and/or Wyoming. Participants were randomly assigned to students who conducted the interview process. Students obtained informed consent from the participant prior to the interview.

Data Collection

A face to face interview was conducted in order to collect data. The interview lasted one hour and twenty-six minutes. Before interviewing the participant, the researchers and participant participated in a brief introduction in her office. After the introductions were over, the interview was conducted in a private meeting room in Liesinger hall. No artifacts were provided by the information during the interview. There were no gatekeeper concerns throughout the study. Additionally, the interview questions were provided to the researchers from the project directors.
Some additional questions were added to the interview schedule, as well as minor edits to a small amount of the questions provided.

**Trustworthiness**

Trustworthiness was achieved by reflective journaling and the use of recording devices in order to collect valid and reliable information. The reflective journal process gave the researchers an opportunity to reflect back on the types of feelings that were brought up through the qualitative process, and how these thoughts/feelings have affected the project. Thus, giving the researchers a better understanding of what they were researching by connecting it to their own personal thoughts, feelings, and experiences.

Trustworthiness was also achieved by the audio recording that was present during the interview. The audio recording gave the researchers an opportunity to listen to the audio recording, in order to justify the data collection for this qualitative research study. Once the transcribing was finished, the researchers took the additional step to listen to the audio recording again to increase reliability.

Debriefing took place between the researchers post interview to explore ideas or additional thoughts/feelings the researchers had in order to increase reliability and validity. The researchers implemented this additional step to gain insight from one another, which would increase the awareness of what the researchers were studying.

**Data Analysis**

The interview was audio recorded to allow researchers to analyze the data. Inclusion criteria of codes was that there must be more than two quotes specifically mentioning the code in order for it to be used. The codes are represented within the visual data display in Appendix B. The researchers believed this criteria would allow for higher reliability of the data, as there
Data analysis was completed through multiple steps. First, the researchers listened to the interview and transcribed it verbatim. Researchers then started the coding process. During this process, researchers determined twenty-three codes. The researchers then evaluated the codes and began to group them based on commonalities and connections. Three categories emerged. The categories were created, and the researchers then determined an appropriate title for each category. The categories included, Client-Centered Care, Personal and Professional Experiences, and Professional Trends.

Researchers reviewed codes in each category and identified emerging themes. To conclude the data analysis process, researchers created an overarching assertion capturing the core meaning of Cassady Hoff’s life history as an occupational therapist.

**Kawa Model**

Throughout the data analysis process, the Kawa Model and the timeline given to the researchers from the professors helped guide the flow. First, the timeline provided the researchers with a structured limit regarding the amount of time there was to focus on each step. The researchers first spent several hours transcribing the data, which was split into multiple days. They then utilized two hours to complete the coding process, followed by another two hours to complete the categorization, patterns/themes, and overall assertion statement. Researchers completed this in collaboration with one another, and with verifying the data analysis with their professor. Researchers used the Kawa model to help guide which information was relevant to the overall research question. They verified the data analysis portion included multiple aspects of the Kawa model. Specifically, researchers confirmed the data analysis results were congruent with the balance of the participant’s life, and how all of the smaller components of Kawa have lead her to her current lifestyle.
Findings/Results

Category Development

Following the completion of all codes, researchers then started to group the codes together to create categories. To begin this process, researchers first evaluated all of the codes to visualize what they were working with. The researchers quickly noticed there were several codes directly related to health care. Due to this, the researchers then selected the codes that followed health care trends. Some of the codes within this category, titled Client-Centered Care, do not look as though they would directly relate to the others. However, based on Cassady’s description of this, the researchers believed it was the right match. One example of this is when Cassady was discussing legislation, she stated “I think the patient gets lost in a lot of this stuff, and it’s really frustrating for me.” With this specific example, the researchers believed since Cassady was relating legislation to the effects it has on the patient, that it would be appropriate to place this code under the client-centered care category.

Although this category had some codes that may have been unique to it, there were also codes which matched very well. One significant code for this category was advocating. Cassady often discussed the importance of advocating for clients within the occupational therapy profession. She related advocating not only for her clients, but also for students, and her son. In regards to advocating for clients, she stated:

“I have a lot of people that are just, they’re too scared to go ask. It’s like don’t be scared. There’s absolutely no reason to be scared. And it goes back to therapeutic use of self and advocating for you and your patient.”

In this quote, Cassady was also relating advocating for clients to interprofessional health care. She had strong opinions and beliefs regarding professionals requiring the ability to speak
up for themselves and for their patients. Additionally, Cassady explained her advocacy skills within her child’s school. She stated:

“I brought in this is what happens during development, um, because for me when I’m looking at this, you know the curriculum in the school districts. It doesn’t work for all kids, and a lot of the habits I’m seeing too, school-wise, is they’re teaching them in a box and that’s not an OT thought. So development-wise, that’s not even appropriate. Nobody’s in this little square. So yeah, kind of my personal is really advocating for those, getting my knowledge out.”

Cassady then continued to explain how educating the school system on assistive technology helps her son who receives OT services. This statement from Cassady displays her passion for advocacy in a wide variety of settings. Additionally, it is an example of her not being afraid to advocate for individuals whom she does not provide services for. Overall, the category of client-centered care emphasizes Cassady’s passion and dedication for the profession.

Once the researchers concluded the first category, they then moved on to start the process over again. They completed this by evaluated the remaining codes to determine which ones would match together. Researchers noticed there were a number of codes based on the personality of the participant, and then grouped these codes together. This category was then titled, Personal and Professional Experiences. Cassady discussed her experience with Casper, WY multiple times. She related this to her family life, career, experience, and much more.

Referring to Casper, Cassady stated:

“It’s a great place for families. Cause when I look at this like for Casper College itself, is like I said, my dad taught here. So this has always been like my second home. I never thought I would be teaching here, but you know, I am. But it is, it’s a great place for umm
to ask questions, to get involved, umm to not be belittled by any means. From faculty or from staff. Umm and that was true definitely in the OT process, as well. I mean it was just, you go and everybody’s happy and you did your stuff and it was, it was it was nice.”

This quote is an appropriate summary of Cassady’s viewpoint of Casper and the impact it has had on her career. She stated previously she was unsure as to whether she would live here, but was able to explain the positive aspects about it and how it has impacted her life. Additionally, Cassady explained a large reason as to why she stayed in Casper, and what lead her to a teaching position. She stated:

“When I was in college, I was a teaching assistant for anatomy. I taught, forever like that’s part of my, so then I felt the director at the time. May it be something of interest? Maybe, but yes. So to answer that question professionally, it would be more my lifestyle is what really kinda kept me in Casper.”

This is an important aspect of the beginning of Cassady’s career. She also described her father was an anatomy professor at Casper College and assisted in the process of opening the UND OT program in Casper. This is also an aspect that lead Cassady to becoming involved with Casper College.

The code of teaching, correlates with a number of other codes within this category. Cassady discussed her approach of using her own personal experiences to teach her students to share real-life scenarios with them. When asked what challenging experiences she has had in practice, she stated “working with a PT who did not understand OT”. She stated she overcame that challenge by, “Just got creative. But then there was also strength because I feel like I’m very creative and it helped me become more creative going in.” Cassady’s statement of utilizing
creativity displays she is determined to provide the treatment to her patients needs, while incorporating her own personal skills and hobbies.

Along with providing patients with what they need, Cassady often discussed her personal quality of open-mindedness. A sufficient summary of Cassady explaining her portrayal of being open-minded in practice is:

“I am very open-minded, yeah I look at each person as them and then listen and see whatever is going on, I am very solution oriented. I hate problems, I like solutions, um so I always kind of that creatively in my brain tries to go with that.”

This statement discusses several personal qualities that Cassady contains, which all lead to her being a well-rounded practicing occupational therapist, professor, and program director. She also explained the positive impact open-mindedness has when treating patients with limited resources.

Finally, at the completion of the development of the first two categories, researchers then evaluated the remaining codes and determined whether they could all be grouped together into one category. The researchers made slight adjustments, and titled the category with the remaining codes Professional Trends. A common discussion throughout the interview involved the Casper College COTA program. Cassady stated a current development of this program is, “We’re turning more, we’re keeping what we have but we’re turning some of our classes, last year was the first time I shifted a couple to hybrid and then a couple to online.” Cassady believes this will lead to a higher quality educational experience for her students. She then shifted into discussing the level of degree, as she stated, “I met with students coming out of high school, none of them are ready to go right to Doctorate level.” This statement portrays Cassady’s willingness to assist students within her program, and also demonstrates her belief that COTA
programs are necessary for the profession. Relating to the transitioning of the OT profession, Cassady stated she is unsure as to what will occur, and will act on whatever happens when the time comes. She also discussed her opinions on the transition of the COTA degree to a Bachelor’s degree. In summary, she stated “This new shift that was coming in was gonna kind of throw a little problem in with that because community colleges do not offer Bachelor’s levels.” Although Cassady believes COTA programs complete the work equivalent to a Bachelor’s degree, she is unsure how the programs will continue due to the majority of COTA programs existing at community colleges.

**Pattern/Theme Development**

Researchers developed themes following the completion of categorizing the codes. As previously stated, each category has two themes related to the category and the participant. Researchers first determined which codes were most frequently discussed throughout the interview. They then developed the themes based on incorporating multiple codes that relate to one another. Researchers created the first theme by evaluating which code would directly impact another, leading to the result of a third code. Once this was determined, researchers connected the three codes by incorporating filler words within the theme. They continued this for all six themes created.

**Theme One:** Cassady believes advocating for patient access results in adequate patient care. This theme was developed based on Cassady’s frequent explanation about advocating for patients. She described in order for patients to receive more access to care, occupational therapists will need to advocate for their patients. Cassady stated, “And it’s more about the patients again, not necessarily about us. But how can we get that best patient care and advocating with our services and so forth.” This quote is a sufficient summary displaying her belief that
advocating, patient care, and patient access all correlate amongst one another. Advocating for OT services would allow for greater patient access, therefore leading to respectable patient care.

**Theme two:** Cassady believes increased technology will lead to more research, resulting in an enhanced profession. Cassady often discussed how research will progress once the OT degree fully transitions to a Doctorate degree. She also described technology is resulting in greater access to patients. Cassady stated, “I think definitely the research that advanced knowledge of umm validating so doing research but also reading the research and making sense and providing protocols.” Additionally, she stated, “Also, when we are shifting to telehealth I think it is going to be great.” These two statements from Cassady summarize her belief that technology and research will lead to improvements within the occupational therapy profession. Although these quotes do not directly relate technology and research, it is believed that an increase in technology availability can lead to more research opportunities. As she described, increased research leads to a greater meaning of the treatments OT’s provide.

**Theme three:** Cassady’s personal experience within her family life has lead her to a passion for OT resulting in a diversity of roles within the profession. Cassady often discussed her experience with her own son, and how she uses that in practice within the profession. She stated her biggest personal accomplishment is, “Probably for that one, actually it’s being a mom with a kid that requires services.” Additionally, Cassady stated, “So I pulled those personal experiences and I think that had made me a better OT, being a mom with those things.” These two statements are examples of Cassady utilizing her own personal experiences and applying them to her professional role. Cassady explained the significance of having a son requiring OT services while practicing as an OT. This demonstrates her ability to incorporate all aspects of her life to allow her to become a well-rounded individual.
**Theme four:** Cassady’s personal experiences and personal qualities have influenced her style of teaching as a professor, and work ethic as a COTA program director. It was evident throughout the interview that Cassady’s personality impacts her career. Cassady states:

Um I personally have a kiddo who required OT services, um so it’s been nice as a parent knowing the profession. What tools are available, what questions to ask, how to be an advocate. Um so then that carries over to my job here at the college, being able to make sure I teach my students, you will advocate. You will stick up, you will be those voices for those people and then help them to have voices so they can ask relevant questions umm for their lives.

This is a relevant summary describing the ways in which Cassady’s personal experiences and beliefs play into her role as a professor. She uses her personal experience of being a mom of who has a son requiring services, and other tools within school to alter her teaching style. Additionally, due to her strong opinions in advocacy, she is able to explain the need and demand of the program she is a director of.

**Theme five:** The transition of the profession of OT and OTA is altering the level of degree required leading to a conflict and confusion of both professional roles. Cassady seemed confused herself about the transitioning of degrees, and did not feel it was necessary for the OTA degree to transition into a Bachelor’s degree. Cassady stated:

Umm because that I think Bachelor’s and Master’s level there's not a huge difference really Bachelor’s and OTA yes I people are gonna say there is, I know there is. There is, there’s a capstone project.

This statement explains Cassady’s believes t it is appropriate that the OT degree is
transitioning to the Doctorate level. However, she does not believe it would be appropriate for the COTA degree to transition to a Bachelor’s level without OT transitioning to Doctorate. Additionally, this explains her belief that the movement of the OT degree from Bachelor’s to Master’s was a sufficient transition.

**Theme six:** The collaboration and understanding of the roles of each profession is lacking between UND’s OT and the Casper College COTA program. Not only did Cassady discuss role confusion within practice, but also discussed it occurs within schooling programs. Cassady stated:

“And I don't see too much arguing between OTA and OTR it’s just lack of knowledge it’s like can you do, what’s your roles? You know. So I think that it’s hopefully that it’s gonna get better but umm I think here that it's definitely starting to turn last couple of years we're getting more on that. I think the hardest part with us is what you guys are taught in the semesters are opposite of ours.”

Here, Cassady is discussing the misconnect between the OT and COTA roles, both in practice, and within the programs. She stated she hopes to work with the OT program to determine a way in which the two programs can work together more frequently. Additionally, this demonstrates the impact of exposing the two roles to one another early on in their career.

In conclusion, Cassady Hoff is a practicing occupational therapist and program director of the COTA program at Casper College, who emphasizes advocating for others, collaborating amongst multiple professions, views exposure to the community as a large learning experience, and places her children first in her life.
**Discussion/Conclusions**

Researchers finalized the assertion statement through evaluating the most frequently addressed topics throughout the interview. Following this, they determined whether there were topics from each of the three categories. Once this was satisfied, the researchers then connected the topics in a manner allowing adequate flow. Researchers then finalized the assertion, ensuring it was directly related to Cassady’s experience. The assertion fits with Cassady’s life history, as the concepts within are all ones in are of high importance to her. Cassady often addressed the importance of advocating for the profession, clients, and others that may simply just need someone to speak for them. Additionally, she discussed the impact of collaborating with other professions has on occupational therapy and occupational therapy assistant practice. Doing so, allows individuals to experience exposure to the community, as they are familiarizing themselves with other professions. Cassady also discussed the importance of physically experiencing scenarios within practice, compared to learning about these experiences in the classroom. Above all, Cassady often related her role as an occupational therapist to her role as a mother, and the influence these two roles have had on one another. She discussed the importance of providing time and commitment to her sons, as they will always remember her involvement in their lives.

The finding results are linked to historical information of the OT profession by exploring the experience of an occupational therapy practitioner in a rural setting, which has been a topic of interest the past decade. Additionally, our results are directly related with the changes in roles of the occupational therapy assistant and the occupational therapist. The study explored the types of changes that are happening amongst these two roles, and how the education of these two professions are changing in both urban and rural settings. During the time the participant was practicing, there were changes such as technology changes, which had influence the profession
of occupational therapy in an urban setting. These changes directly correlate with our literature review, and influence our findings and data analysis.

The Kawa model guided the findings and final assertions by implementing a collectivist view on the research findings (Turpin & Iwama, 2010). The Kawa model gave the researchers a template which guided the types of questions asked, and how they were evaluated after the interview had taken place.

The findings of the study add to the occupational therapy profession by elaborating and representing core aspects of the profession such as advocating for others, collaborating with other health professions, and representing a holistic health profession in order to increase independence. She is currently contributing to the progression of occupational therapy practice through teaching her incoming and current student about the importance of advocating for patients and the profession. Additionally, she is providing her students with the opportunity to collaborate with other students in the medical field on campus, providing early exposure to collaboration in the field. Both of these allow future students to share their experience and impact advocating and collaborating has on the profession. This can then grow into a cyclical effect, as other individuals experience the positivity of these concepts. In conclusion, this qualitative research study has the potential to add to the occupational therapy profession and the of body knowledge to the profession.
References


Appendix A
Life History Interview Schedule

Introduction:
Thank you for being willing to participate in the interview today; please remember that you are not required to answer any question that you are uncomfortable with. The purpose of this project is to gather information about the history and evolution of occupational therapy (OT) practice in North Dakota and Wyoming through life histories of individuals who have been influential in developing OT in these two states and/or at the national level. Do you have any questions before we begin?

Demographics: (ask for this information at the beginning of the interview or you may want to get this information when you make the phone call to set up the interview time).
- Year graduated.
- Any degrees past their initial certification.
- Work settings – positions (you might ask for a copy of the resume or CV if available).
- Involvement in professional organizations – volunteer positions/leadership positions in state, national OT organizations.

1. We want to start with a big picture question – What has being an OT meant to you?

2. When did you decide to be an OT?
   - How did you find out about the profession?
   - What factors influenced your decision to become an OT practitioner?

3. How do you see the profession evolving over the time of your practice? Describe the profession as you see it now.

4. We want to look at the context of practice when you graduated – What was happening in world? Social, political, economic, education, family.

5. How did the context shift across the time of your practice?
   - What were the key aspects that influenced the shifts you saw in the context? Legislation, political, war, economic, etc.

6. Think back to your career - reflect on your personal growth and professional development?
   - What do you see as your personal accomplishments that impacted OT practice?
   - Was there something you would have liked to do that you weren’t able to accomplish?

7. What is one of your best memories of being an OT?
   - Describe in detail what was going on then.
   - What was the impact or outcome of that situation?
8. Now describe one of the most challenging experiences you had as an OT.
   ● What was going on, what issues were involved in this challenge?
   ● How did you make sense of the challenges?
   ● Where you able to resolve the challenge? Tell me more about the process of how you did this.

9. We want to get an understanding of what your educational experiences were like – describe your education. Class size, theoretical models, faculty,
   ● What stands out to you about what you were learning?

10. Educational demands have shifted across time – What do you see as the impact of these?
    ● Development of OTA programs
    ● Movement to the master’s degree
    ● Development of OT models and frames of reference
    ● Emphasis on OT/OTA collaboration.
    ● Importance of interprofessional education.

11. ACOTE – has indicated that by 2027, entry level practice will be at the doctoral level for the OT and the Bachelor’s degree for the OTA. As you think about your practice, what do you see as the positives about this move?
    ● Now reflect on the drawbacks of this move

12. Card Sort question: For this class, we reviewed a series of articles that looked at the values and beliefs across time. Some of the key things articulated in the articles were:
    1. Licensure
    2. Legislation – passage of Medicare/Medicaid, rehab act, public law 94-142, ADA
    3. Arts and Crafts
    4. Occupation
    5. Technology
    6. Specialty certification
    7. Continuing education
    8. Activity Analysis
    9. Adaptive equipment
    10. Health care team

How would you prioritize these in terms of enhancing your professional practice and development?
Let’s walk through each item in terms of what you were thinking about as you prioritized the cards.
Note: If you are doing the interview in person, come with each item written on a 3x5 card. If you are doing the interview over the phone or by video, send the list to them ahead of time and ask them to print it out. You will have to jot down how the prioritize as well as track their responses.

13. Wyoming is considered to be a rural state, how did this influence your practice decisions?
   - How does it influence (or not) impact the care you were able to provide.
   - Your involvement in professional organizations, continuing education opportunities, etc.

14. Imagine that I am a family member who is considering pursuing a degree in occupational therapy. What advice would you give me?
   - Why?
   - What are the positives about this degree?
   - What are the drawbacks?

15. What areas of OT have you practiced in?
   - What drew you to practice in this area?

16. What personal traits have influenced your success as an occupational therapist?

17. What was a fear you had when first starting your career as an occupational therapist and how did you overcome it?

18. During your time as an OT, were there any experiences you wish you could have approached differently? Why?

19. What supports (such as social supports) have influenced your ability to reach your professional goals?

20. How has the profession of occupational therapy changed throughout your career?

21. Tell us about an OT related topic that you do not agree with.

22. As a new graduate from your OT school, what were some obstacles you faced when finding a job?

23. In what way did your experiences differ between your varying college degrees?
   - Can you tell us about your educational experiences leading up to today?

24. Where do you see yourself in 10 years?
25. After a difficult day of work, tell us about how you relieve some of your stress.

26. Can you describe to us how today differs from a day of practice within your first year of OT?
Appendix B
Visual Data Display of Cassady Hoff, OTR/L

Client-Centered Care
- Patient Care
- Advocating
- Patient Access
- Qualities of OT
- Research
- Technology
- Components to enhance Profession
- Legislation

Personal and Professional Experiences
- Teaching
- Family life (past and current)
- Program Director
- Humor
- Personal Experiences
- Demographics
- Context
- Interviewee Personal Experiences

Professional Trends
- UND vs. CC
- COTA Program
- Transitioning
- OTA vs. OTR
- Economic Influences
- Level of Degree

Themes
- Cassady believes advocating for patient access results in adequate patient care.
- Cassady believes increased technology will lead to more research, resulting in an enhanced profession.
- Cassady’s personal experience within her family life has lead her to a passion for OT resulting in a diversity of roles within the profession.
- Cassady’s personal experiences and personal qualities have influenced her style of teaching as a professor, and work ethic as a COTA program director.
- The transition of the profession of OT and OTA is altering the level of degree required leading to a conflict and confusion of both professional roles.
- The collaboration and understanding of the roles each profession is lacking between UND’s OT and Casper College OTA program.

Assertion
Cassady Hoff is a practicing occupational therapist and program director of the OTA program at Casper College, who emphasizes advocating for others, collaborating amongst multiple professions, views exposure to the community as a large learning experience, and places her children first in her life.