

### Introduction

- Dr. Scott's interview and contribution towards this study is one of 30 life history interviews which are part of a larger project, *Histories of Individuals Who Have Been Influential in Developing Occupational Therapy (OT) at the National Level and Beyond*. The purpose of study is to provide current and future generations of occupational therapists a view of the history and how occupational therapy practice has evolved from its inception to current practice through the life history stories of occupational therapists who have held leadership roles at the national level and beyond. It is anticipated that the life history process will be a powerful way to gather this information.

### Description of Participant

#### Education:

- Dr. Scott's education in occupational therapy began with a Bachelors degree (1975), then she continued her education and obtained her masters in public health (1983) and doctorate degree in public administration (1997).

#### Membership Within Professor Organizations:

- Dr. Scott's participation in organizations includes the American Society for Transplantation from 2011-present, participation in multiple state occupational therapy associations over the last 30 years, and participation in the American Occupational Therapy Association from 1976-present.

#### Work Experience:

- Dr. Scott's work experience is extensive and remarkable in occupational therapy. Her experience has occurred within many contexts including Florida, Oklahoma, Canada, and Indiana. Her work experience includes associate professor and chair positions, assistant professor, research associate, board member and patient education coordinator in transplantation foundation, program director and VA director in psychiatric hospitals, and therapy experience in the prison system and Cerebral Palsy training center. Currently Dr. Scott resides in Indiana where she recently retired from roles including research facilitation lab director and both university director and chair member at Indiana University.
- Although Dr. Scott is retired, she continues to work with her modified versions of the Role Checklist including the most recent version which is now available on the Model of Human Occupation Clearinghouse website.
- Dr. Scott is also continuing to work on the Role Checklist with international colleagues from Sweden, Norway, Japan, Saudi Arabia, Morocco, Iceland, and China.



### Literature Review

- As occupational therapy became more complex as a profession, the need for increased education occurred. The profession was being impacted by advancements in technology and medicine which required a need for more research to better prepare OTs in specialty areas (Reed, 2007). As the profession once required a baccalaureate degree, higher educational standards emerged. By 1964, the first master's level entry program was submitted and discussed in the council (Reed, 2007). Along with this shift, there was a lack of certified occupational therapists in which a new need emerged and resulted in the development of certified occupational therapy assistant (COTA) programs (Reed, 2007). Dr. Scott has experienced these educational shifts in practice and has continued her education to continue practicing
- Dr. Scott strongly advocates for mental health and has had years of experience in this context of the profession. The majority of occupational therapists worked in a mental health setting prior to WWII. After the war ended there was a decline in the number of OTs working in this area of practice. Due to this decline, students and practitioners who had an interest in mental health were encouraged to work in this setting (Paul, 1996).
- The first liver transplant was done in 1963 and remained experimental for many years. The advent of this procedure was significant because it prolonged the lives of those whose livers were no longer functioning properly (Starzl, Putnam, & Koep, 1977). With an interest in the quality of life for individuals who had received an organ transplant, Dr. Scott developed versions of the Role Interest Checklist to help identify individuals' roles after transplant.

### Methods

- The qualitative study designed used was a life history approach. A one-hour interview with Dr. Scott to capture her thoughts and perceptions about occupational therapy practice, shifts within legislation, and shifts in education.
- The participant was selected from a participant list compiled through purposive sampling by the project directors. Informed consent was obtained prior to the interview and the project was approved by the UND Institutional Review Board and because of the study design the formal IRB process was waived.
- The semi-structured interview was used to guide the interview. The interview was approximately 2 hours. It was conducted via teleconferencing between the two students in a study room located in the School of Medicine and Health Sciences on the University of North Dakota campus, and Dr. Scott at her home in Indiana.
- The interview was transcribed verbatim. Data analysis occurred through a coding process. Key phrases, sentences, and statements from the interview were organized into 17 codes. The codes were then distributed into 3 categories which emerged into 11 themes. Lastly, one assertion statement was formulated from the themes.
- Trustworthiness was established through member checking, comparing information provided found online, and with reflexive journals to track assumptions and minimize bias.

### Data Analysis

- **OT Practice Journey**
  - Dr. Scott has a vast majority of practice experience.
  - Throughout her early years of practice, Dr. Scott was able to understand the true meaning and value of OT.
  - Dr. Scott has personal experience with health issues which have impacted her practice journey.
  - Advocating for her clients and for the profession was a common theme with Dr. Scott.
- **Educational Journey**
  - Dr. Scott greatly values working with her students as a professor.
  - Dr. Scott believes Models and Frames of Reference are an important part of practice and should be taught within OT programs.
  - Dr. Scott has valued her experiences as a student and the impact that it has had on her practice as an OT.
  - Dr. Scott has experienced the shift in OT programs from bachelorette to masters, and now to doctorate.
- **Personal and Career Accomplishments**
  - Dr. Scott has extensive work and experience as a leadership member in AOTA.
  - Dr. Scott has been recognized as a Fellow (FAOTA) by the AOTA in 2002 for "Excellence in Teaching and Innovation in Practice"
  - Dr. Scott has used her clinical experience to improve the Role Checklist.
  - Dr. Scott practiced under Gary Kielhofner and incorporated MOHO into her practice which lead her to the Role Checklist.

### Conclusions

#### Final Assertion

Dr. Scott has been a main contributor to occupational therapy practice through her extensive practice journey, including her role as a professor, her knowledge and experience in the mental health setting, her numerous career achievements, including her work with the Role Checklist, and her involvement in AOTA.

#### Conclusion

Occupational therapy is a growing profession that includes providing client centered care to all individuals. There have been numerous shifts within the profession which include the transition of programs from the bachelors, to masters, and now to doctorate degrees which are required to work in the field. There have been many impacts to the profession including policy changes, changes in legislation, and political influences, still the profession has maintained their core focus, the power of occupation. Dr. Scott has work experience in numerous contexts and has experienced many of these shifts in practice, education, and legislation. She has also numerous professional and personal achievements including chair positions, her work as a Professor, and her extensive work with the Role Checklist.

### Acknowledgements

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