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Becoming An Occupational Therapy Advocate: A Toolkit For Practitioners

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BECOMING AN OCCUPATIONAL THERAPY ADVOCATE: A TOOLKIT FOR
PRACTITIONERS

by

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Occupational Therapy Doctorate, University of North Dakota, 2023

Advisor: Nicole Harris EdD, OTR/L

A Scholarly Project

Submitted to the Graduate Faculty

of the

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for the degree of

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APPROVAL

This scholarly project, submitted by Tiana Griffith, OTDS in partial fulfillment of the requirement for the Degree of Occupational Therapy Doctorate from the University of North Dakota, has been read by the Faculty Advisor under whom the work has been done and is here by approved.

Nicole Harris, EdD, OTR/L

Faculty Advisor

4/14/2023

Date

PERMISSION

Title: Becoming an Occupational Therapy Advocate: A Toolkit for Practitioners

Department: Occupational Therapy

Degree: Occupational Therapy Doctorate

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ABSTRACT

Title: Becoming an Occupational Therapy Advocate: A Toolkit for Practitioners

Introduction: Advocacy is an important component of the occupational therapy profession.

Advocacy helps advance the profession, promote client well-being, and ensures access to services. Although practitioners are aware of the importance of advocacy, there is still a lack of involvement in advocacy efforts. There are several reasons for the lack of involvement, including insufficient knowledge and preparedness, limited discussion of advocacy, and lack of time to interact with the policy process (Dhillon et al., 2010; Marfeo, 2020; Osman et al., 2020). A toolkit was developed to address the identified barriers by providing occupational therapy practitioners in Wyoming with information and resources to facilitate involvement in advocacy, specifically at the systems-level. The toolkit is intended to be used by any occupational therapy practitioner, regardless of their advocacy experience.

Methodology: A literature review was conducted through PubMed and CINAHL databases. The search terms were related to occupational therapy, advocacy, policy, healthcare professionals, and legislation. Personal communications with experts in advocacy and professional organization processes were also used for toolkit creation. The Person-Environment-Occupation (PEO) model (Law et al., 1996) was used to develop the entirety of this scholarly project. The PEO model was utilized to analyze the advocacy process, occupational therapy practitioners, as well as their environment to optimize occupational performance or overall engagement in advocacy efforts.

Results: The toolkit is an interactive information and resource guide, including two main components: education and advocacy tools. The education section aims to provide information to

increase discussion and build practitioner's knowledge. The second section includes advocacy tools and resources to improve involvement by easing the advocacy process.

Conclusion: *Becoming an Occupational Therapy Advocate: A Toolkit for Practitioners* serves as a resource for occupational therapy practitioners in the state of Wyoming. The purpose is to educate and empower practitioners to engage in advocacy for the occupational therapy profession.

Significance: This toolkit will increase occupational therapy practitioner involvement in advocacy efforts, specifically at the systems-level in the state of Wyoming.

Chapter I

Introduction

Advocacy is an important component of the occupational therapy profession. Advocacy helps advance the profession, promote client well-being, and ensure access to services. The goal of advocacy is to educate stakeholders (clients, employers, third-party payers, elected officials, and government policymakers) on the role of occupational therapy and demonstrate the profession's distinct value (Hart, 2019). Although practitioners are aware of the importance of advocacy, there is still a lack of involvement in advocacy efforts. There are several reasons for the lack of involvement, including insufficient knowledge and preparedness, limited discussion of advocacy, and lack of time to interact with the policy process (Dhillon et al., 2010; Marfeo, 2020; Osman et al., 2020).

The purpose of this scholarly project is to address the identified barriers by educating occupational therapy practitioners and providing resources to facilitate engagement in advocacy. The product will act as a guide for occupational therapy practitioners in the state of Wyoming and will be distributed through the state association. A product titled *Becoming an Occupational Therapy Advocate: A Toolkit for Practitioners* can be found in Appendix A.

The toolkit begins with informational content to inform practitioners on the purpose of advocacy, identify key stakeholders in occupational therapy policy, and general information regarding the legislative process to increase practitioner knowledge. The toolkit then provides resources to facilitate engagement in advocacy. The aim of this scholarly project is to empower practitioners to advocate for the occupational therapy profession.

Theoretical Framework

The Person-Environment-Occupation (PEO) model (Law et al., 1996) was used to guide the creation of the toolkit. The three domains of this model include the person, their environment, and the occupation. The transactions between the domains result in occupational performance (Law et al., 1996). Each domain was analyzed and considered in the creation of the toolkit to optimize the transaction. The domains were analyzed using information from the literature review, discussions with experts in occupational therapy advocacy, state association meetings, and through statewide practitioner feedback.

Goals, Objectives, and Outcomes

The anticipated outcome of the toolkit is increased practitioner involvement in occupational therapy advocacy, specifically in the state of Wyoming. The toolkit educates practitioners while also providing resources to promote engagement in advocacy efforts. The following are the project objectives.

1. Identify specific laws, policies, or guidelines affecting occupational therapy practice in Wyoming
2. Identify and use three effective advocacy strategies
3. Attend and participate in monthly state association meetings
4. Understand the role of each board member within a state organization
5. Complete a thorough literature review on laws, policies, and guidelines affecting occupational therapy practitioners
6. Identify courses of action when advocating for laws, policies, and guidelines affecting occupational therapy practice

Overview

Chapter II includes an extensive literature review with evidence that supports the need for the advocacy toolkit. Chapter III includes the methodology of the scholarly project. Chapter IV describes the components of the product. Chapter V is a summary of the scholarly project that includes strengths, limitations, and future recommendations for the product.

Chapter II

Literature Review

Occupational therapy practitioners and individuals receiving their services often face regulatory barriers. To remove or lessen these barriers, advocacy is necessary. Advocacy is not clearly defined in occupational therapy literature, but it can best be described as, “initiatives taken by a therapist on behalf of a client, to pursue a change in the environment that will ultimately enhance occupation” (Dhillon et al., 2010, p. 242). It can be large actions at the systems-level or smaller actions at the daily-practice level. Advocacy can take many forms (American Occupational Therapy Association [AOTA], 2021). The purpose of this literature review is to explain the importance of advocacy, determine practitioner’s perspectives, identify effective strategies, and address the barriers to engaging in advocacy efforts. Occupational therapy practitioners are more familiar with advocacy at the individual level and are more likely to engage in daily practice advocacy rather than making system-level changes. However, system-level changes are needed in the profession (AOTA, 2021; Dhillon et al., 2016; Kinney et al., 2022). To address this problem, practitioners must understand how policy impacts occupational performance and further understand the actions they can take to advocate on behalf of the occupational therapy profession. Practitioners need more education regarding advocacy, the policy process, and effective strategies to implement into their practice.

Theoretical Framework

The theoretical framework used to guide this review was the Person-Environment-Occupation (PEO) Model (Law et al., 1996). The key domains of this model include person, environment, occupation, and occupational performance. The purpose of this model is to recognize the importance of each domain and determine the “fit” between the person, their

environment, and their occupations (Law et al., 1996). The transactions between these domains result in occupational performance.

In this case, the “person” is the occupational therapy practitioner. Practitioners assume many roles and engage in many occupations. Each practitioner has personal attributes and levels of experience. The “environment” is what surrounds the practitioner, including institutional laws and policies, as well as the facility they work in. The “occupations” are duties of the occupational therapy practitioner, which includes advocacy. The “occupational performance” is how well these duties are being fulfilled. In order to achieve occupational performance, there needs to be a strong transaction between each domain.

In terms of occupational therapy advocacy, it is important to analyze each domain to optimize involvement in advocacy efforts. The practitioner’s experience along with their roles, habits, and routines need to be considered. Additionally, the act of advocacy must be thoroughly analyzed and tailored to each practitioner’s habits and routines. Finally, the institutional environment must be evaluated to be effectively addressed through advocacy. All components of the PEO model are essential to meet the goal of increasing systems-level advocacy and increasing occupational performance. The PEO model was used to guide this review.

Importance of Advocacy

Advocacy is essential in the field of occupational therapy. Advocacy fulfills several of the profession’s visions, ensures high value care, and prevents the profession from being marginalized in the healthcare environment. Advocacy fulfills the American Occupational Therapy Association’s (AOTA’s) *Centennial Vision*. This vision aims to make occupational therapy a “powerful, widely recognized, science based, and evidence-driven profession” (Braveman & Metzler, 2012, p. 11). Advocacy allows for opportunities to expand occupational

therapy practice and recognition, as well as address related healthcare policies. Currently, the United States (U.S.) healthcare system delivers low-value care. Policies such as the Patient Protection and Affordable Care Act were implemented to reverse this trend by “altering the incentive structure of the health care system to reward greater value, requiring that occupational therapy researchers and practitioners promote the value of occupational therapy services” (Kinney et al., 2022, p. 1). The profession must act to promote high-value care which includes evidence-based, patient-centered, and cost-effective care, in alignment with AOTA’s Vision 2025 (Kinney et al., 2022). If the occupational therapy profession does not clearly define high-quality occupational therapy and demonstrate the profession’s contribution to patient outcomes, the profession may be marginalized in the rapidly changing healthcare environment. It is important to highlight the distinctive contribution that occupational therapy makes in healthcare as the profession is frequently overlooked in the policy process (Leland et al., 2015; Osman et al., 2020). Advocacy is important for promoting the occupational therapy profession and aligning policy with practice.

Practitioner Perspective

Occupational therapy practitioners advocate for several different reasons. According to Dhillon et al. (2010), occupational therapists advocate for personal fulfillment and gain a sense of personal satisfaction from the act of advocacy. Practitioners also advocate because of the power and influence differential between them and their client. This power is used for the benefit the client. Practitioner’s advocate to help their clients engage in what is meaningful to them which directly translates to client-centered practice and improved quality of life. Many practitioners believe that advocacy is a service within the scope of occupational therapy and is simply part of their job, but these skills are learned on the job rather than through formal education (Dhillon et al., 2010). Practitioners feel that education on policy tends to be “really vague” (Yuen et al., 2017, p. 89) and feel they do not have sufficient knowledge and

preparedness regarding policy and how it affects the delivery of care. Occupational therapists are “less prepared to evaluate how larger policy-level interventions meet the needs of the populations they serve” (Marfeo, 2020, p. 4). Although practitioners feel unprepared, they are still able to identify several areas in the occupational therapy profession that are impacted by policy. The identified areas include documentation, productivity rates, and service delivery. (Yuen et al., 2017). Other recommendations for advocacy include furthering occupational therapy practitioners’ role, identifying emerging practice areas in which occupational therapy can improve quality of life, and increase awareness of public policy. This includes policy that may not be directly related to health but has the potential for health implications (Marfeo, 2020). Additionally, advocacy can capitalize on the profession’s distinct occupation-based and client-centered perspective and continue to explore systematic ways to promote improved quality of life for clients by reducing environmental barriers (Marfeo, 2020). There are many different avenues and reasons for advocacy.

Occupational therapy practitioners will benefit from actively engaging in advocacy to align policy with the values of the profession. There is a lack of intersection between policy and occupational therapy (Lencucha & Shikako-Thomas, 2019) and it is important for practitioners to understand this dissonance. Practitioners should understand how policy impacts services. The information regarding common practitioner perspectives should be communicated to other practitioners in hopes of increasing discussion of occupational therapy advocacy.

Advocacy Strategies

Advocacy involves a wide variety of actions. There are several strategies that can be implemented for effective advocacy, including establishing credibility, preparing for difficult conversations, utilizing strengths, championing for occupational therapy, and engaging in active leadership (AOTA, 2021). Advocacy also includes involvement in professional organizations and the policymaking process.

Involvement in professional organizations is an important component of advocacy. The functions of professional organizations include professional training, networking opportunities, conducting public advocacy, and advancing professional knowledge (Ki, 2018). Many benefits come from being a member of a professional organization. These associations represent the member's views in policy making and optimize the public image of the profession (Ki, 2018). These functions are done through conferences, workshops, and publications. Members of these associations also define the values, rights, and duties in the delivery of care.

Another component of advocacy is engaging in the policymaking process. Engaging in the policymaking process includes relationships with policymakers, educating occupational therapists on how to interact with policy, and developing position statements. Occupational therapy practitioners need to understand and be able to utilize various strategies for effective advocacy. One of these strategies is effective communication with policymakers. Policymaker's decisions seem to be driven more by emotions and values rather than analysis of evidence (Cairney & Kwiatkowski, 2017). This is because they are often given too much information and are unable to effectively process it all. Cairney and Kwiatkowski (2017) suggest using a three-step communication strategy. The strategy incorporates human psychology and political systems. The first step is understanding the audience and tailoring the response. The second step is identifying windows of opportunity. The third and final step is engaging policymaking rather than waiting for an orderly process to appear. A solution for advocates of scientific evidence is to form coalitions with allies with the same goals and work with them to combine evidence. It is beneficial to combine this evidence with stories that demonstrate emotional and ideological biases of policymakers. The evidence should be easy to understand and framed in a way that is attractive and realistic for policy change. Networking with policymakers is also important, as

policymakers will rely on persuasive stories rather than struggle through scientific papers (Cairney et al., 2016).

Occupational therapists can be important agents of social and economic change by becoming more politically active and demonstrating the effectiveness of occupational therapy (Marfeo, 2020). Occupational therapy principles should be brought into discussions with stakeholders to help focus policy development and implementation on meaningful social, environmental, and occupation-based factors.

There are many strategies that can be implemented during advocacy practices. The literature provides a wide variety of information including how practitioners can advocate daily, strategies for effective communication with stakeholders, and other suggestions for making system-level changes. These strategies can be presented to occupational therapy practitioners to showcase the many avenues of advocacy and what has been proven to be the most effective.

Value of Occupational Therapy

It is important to demonstrate the value of occupational therapy during advocacy efforts. “The professions focus on the person-environment-occupation nexus provides a unique perspective to recognize when public policies are unsuited to individual’s needs and foster or inter participation in society or daily occupations” (Osman et al., 2020). Occupational therapists have a unique skill set. They are able to analyze the person’s abilities, the environmental factors, and analyze the task (Fisher & Friesema, 2013). Occupational therapists consider the person holistically and find the best transaction between the person, their environment, and the task. Due to this skill set, occupational therapists are recognized as integral members of the primary care team. Additionally, the profession has seen increased involvement in prevention and wellness activities, inclusion of rehabilitation services, and inclusion of mental health and

substance abuse disorder services (Braveman & Metzler, 2012). It is important to understand and to be able to communicate the value of occupational therapy. There are many professionals that work in the healthcare field, occupational therapists must be able to distinguish their services and relay that to stakeholders. The value of occupational therapy is an important component to include in information presented to stakeholders.

Barriers

In the occupational therapy literature, advocacy is often mentioned with no explanation of why it is significant or meaningful for occupational therapists. Advocacy is needed in a variety of settings, but the discussion of advocacy is limited (Dhillon et al., 2010), creating a barrier. There are many barriers that practitioners face when it comes to advocacy.

Engagement in professional organizations has been identified as an advocacy action. However, there are various reasons why healthcare professionals may not renew their membership or why they would not recommend membership to other professionals. According to Ki (2018), the factors contributing to membership involvement include both personal and professional benefits which advance members' careers and help advance the profession as a whole. Other factors include members' attitude toward the association and whether or not their expectations of the association are being met. The main reason for membership drop is cost, the majority of individuals pay association dues themselves rather than the dues being paid by an employer (Ki, 2018). Promoting the benefits of professional engagement and addressing related barriers could allow for more individuals to engage in this advocacy practice.

There are many challenges that arise when interacting with the policy process. These challenges include structural barriers within the organization such as scarcity of time, money, and employees dedicated to public policy engagement. Communication among stakeholders is

also a barrier, as they are often hard to reach (Osman et al., 2020). Additionally, lack of time, support, resources and incentives for scientists to disseminate high-quality information effectively” (Cairney et al., 2016, p. 400) has been identified as a barrier to advocacy.

There are many barriers to advocacy. Many practitioners lack the understanding of how policy affects practice and do not know how to advocate because of a lack of education. Practitioners also report not having enough time, money, or employees dedicated to policy engagement.

Statement of Need

Advocacy has been identified as an important component of the occupational therapy profession. Yet, many practitioners feel they do not have sufficient knowledge regarding the intersection between policy and practice. The goal of advocacy is to optimize the transaction between occupational therapy practitioners, their duties, and the institutional environment. Practitioners need more education on how policy impacts delivery of care and a further understanding of the actions they can take to advocate for the profession. Advocacy education is needed in this profession.

Chapter III

Methodology

This scholarly project serves as a toolkit that educates Wyoming occupational therapy practitioners on the advocacy process and provides tools to increase involvement. A needs assessment was conducted to determine practitioners' current level of understanding and level of participation in advocacy for the profession through the state organization. Institutional Review Board (IRB) approval was not necessary as the information was only used for internal purposes. The purpose of the needs assessment was to create a toolkit that was tailored to the needs of Wyoming practitioners.

Initially, an extensive literature review was completed to gather information regarding current occupational therapy advocacy practices. The literature review was completed using various resources, including online databases, continuing education courses, and discussions with experts in the field. The online data bases included: PubMed and CINAHL. Key publications that provided evidence for the importance of advocacy (Braveman & Metzler, 2012; Kinney et al., 2022; Leland et al., 2015; Osman et al., 2020), practitioner perspective (Dhillon et al., 2020; Yuen et al, 2017; Marfeo, 2020; Lencucha & Shikako-Thomas, 2019), various advocacy strategies (AOTA, 2021; Ki, 2018; Cairney & Kwiatkowski, 2017; Cairney et al., 2016; Marfeo, 2020), the value of occupational therapy (Osman et al., 2020; Fisher & Friesema, 2013; Bravement & Metzler, 2012), and the barriers to advocacy engagement (Dhillon et al., 2010; Ki, 2018; Cairney et al., 2016). Key words and phrases included “occupational therapy AND advocacy”, “occupational therapy AND insurance”, “advocacy AND occupational therapy AND policy”, “Wyoming legislation”, and “healthcare professionals AND policy”. Inclusion criteria included peer reviewed journal publications, narratives from experts in the field, and

original research papers. Exclusion criteria included articles not published in English and resources that did not include occupational therapy or advocacy topics. Most publications used for the literature review were published within the last 10 years. However, due to the limited amount of literature relevant to occupational therapy advocacy, some exceptions were included in the review.

Personal communications with experts in occupational therapy advocacy were used throughout this project. Discussions with the president and the legislative chair of the Wyoming Occupational Therapy Association (WYOTA) were utilized to determine the specific need for Wyoming practitioners and provide valuable insight regarding state specific advocacy. The board members of the state association and an expert in occupational therapy advocacy provided feedback on the toolkit. The feedback was incorporated accordingly. Additionally, a survey was created and distributed to occupational therapy practitioners in the state of Wyoming through the state association. The purpose of the survey was to collect information regarding perceived barriers to advocacy and gather suggestions for improving engagement in state organization processes. Ethical considerations were taken to ensure the survey did not qualify as research and IRB approval was unnecessary. The information collected was synthesized to create this scholarly project.

The Person-Environment-Occupation (PEO) model (Law et al., 1996) was used to guide the entirety of the project. For this project, the model was used to analyze the advocacy process. First, the “person” or the occupational therapy practitioner was analyzed to determine current knowledge and barriers regarding advocacy. This scholarly project was tailored to the need of the practitioner. Then the “environment”, which includes the institutional environment of laws and policies. The environmental analysis was institutionally focused but also addressed other

environmental factors contributing to engagement in advocacy. Finally, the “occupation” or the duties of the occupational therapy practitioner were included in the analysis. This included the act of advocacy and the various strategies and avenues. The transaction between each domain determined the “occupational performance” or how well the act of advocacy was being fulfilled by Wyoming occupational therapy practitioners. This scholarly project aims to improve the proposed occupational performance by educating practitioners, encouraging advocacy discussions, and providing practitioners with resources to facilitate involvement in advocacy. The following chapter highlights the components of the toolkit as well as the considerations during its creation.

Chapter IV

Product

The purpose of this toolkit is to provide occupational therapy practitioners with information and resources to facilitate involvement in advocacy, specifically at the systems-level. The toolkit is intended to be used by all occupational therapy practitioners, regardless of their advocacy experience. The need for the toolkit was determined through the literature review, discussions with Wyoming Occupational Therapy Association (WYOTA) board members, and what was gathered from occupational therapy practitioners in the state of Wyoming. The information gathered indicated limited knowledge and a lack of involvement in systems-level advocacy. This toolkit aims to meet the identified need.

The *Becoming an Occupational Therapy Advocate: A Toolkit for Practitioners* is an interactive information and resource guide. The toolkit includes two main components: education and advocacy tools. Due to the limited knowledge, as previously indicated, the first section is intended to be educational. The informational topics include the purpose of advocating, the levels of advocacy, information about legislation including the legislative process, state advocacy, and national advocacy. The education section aims to provide information to increase discussions and build practitioner's knowledge. The second section includes advocacy tools and resources to empower practitioners to be involved in advocacy efforts. The tools and resource section includes American Occupational Therapy Association (AOTA) resources, resources for communicating with stakeholders, and is concluded with action steps on how to advocate for common issues that practitioners may face in practice. The toolkit may be utilized in its entirety or in necessary sections, depending on the practitioner's level of knowledge and experience. A flyer that highlighted key components of the toolkit was mailed to WYOTA members in order to

market the toolkit. The entire toolkit was distributed via the state association website. The WYOTA board members will continue to disseminate the toolkit to practitioners in Wyoming with potential distribution at the state conference.

The creation of the toolkit was guided by the Person-Environment-Occupation (PEO) model (Law et al., 1996). The occupational therapy practitioner (person) was considered. The toolkit was intentionally created to be interactive and easy to read to enhance practitioner engagement and build the person's skillset. The environment, specifically institutional, was also considered. The toolkit provides information and resources for navigating the institutional environment which entails effective communication with stakeholders and effectively navigating the legislative system. Finally, the act of advocacy (occupation) was analyzed. Information and resources were included in the toolkit to simplify the act of advocacy in hopes of increasing engagement. Each domain was analyzed during the creation of the toolkit to optimize the transaction between each domain to result in increased advocacy engagement (occupational performance). The *Becoming an Occupational Therapy Advocate: A Toolkit for Practitioners* can be found in Appendix A.

Chapter V

Summary

Occupational therapy practitioners do not feel prepared to advocate for the profession, specifically at the systems-level (Marfeo, 2020). The goal of this scholarly project, *Becoming an Occupational Therapy Advocate: A Toolkit for Practitioners* is to bridge the gap by educating practitioners in Wyoming and providing resources to facilitate involvement in systems-level advocacy.

Strengths and Limitations

The product has several strengths that serve occupational therapy practitioners. The product was developed to meet the needs of occupational therapy practitioners in the state of Wyoming. The product was guided by an extensive literature review and the Person-Environment-Occupation (PEO) model (Law et al., 1996). The toolkit is tailored to Wyoming practitioners to promote engagement in advocacy efforts. Additionally, another strength of this product is the readability and easy to access resources throughout the toolkit. The toolkit was made with the consideration of occupational therapy practitioner's range of experience and knowledge as well as the limited time that practitioner's face. The product is easy to access on the state association's website and is available for both members and non-members of the association.

The following are the limitations of the product. The toolkit is in the early stages of implementation. There are currently no objective measures in place to determine the effectiveness. However, there are plans in place with future recommendations for conducting a statewide practitioner survey to determine the effectiveness of the toolkit. Additionally, there is

ongoing efforts in determining the best strategy for distributing the product to practitioners across the state.

Recommendations

It is recommended that this toolkit be used as a guide on the state association website, during state conferences, and throughout state association processes. The intention is to educate practitioners and provide resources to increase occupational therapy practitioner engagement in advocacy efforts. Another recommendation is to use brief social media posts, including videos, to encourage and educate practitioners. This allows the information to be distributed in a variety of platforms. The state association would benefit from future projects from occupational therapy students to implement the toolkit and further promote involvement in advocacy efforts.

Conclusion

Becoming an Occupational Therapy Advocate: A Toolkit for Practitioners serves as a resource for occupational therapy practitioners in the state of Wyoming to educate and empower practitioners to engage in advocacy for the occupational therapy profession. It is anticipated that this product will encourage involvement at all levels of advocacy, especially systems-level.

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APPENDIX A

PRODUCT

BECOMING AN OCCUPATIONAL THERAPY ADVOCATE: A TOOLKIT FOR PRACTITIONERS

BY: TIANA GRIFFITH



PLEASE SHARE YOUR THOUGHTS ON THIS TOOLKIT BY CLICKING [HERE](#) AND
COMPLETING A BRIEF SURVEY!

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INTRODUCTION & TOOLKIT OVERVIEW

The purpose of this toolkit is to provide occupational therapy practitioners with knowledge regarding advocacy, address identified barriers to engaging in advocacy efforts, and provide practitioners with resources to facilitate engagement in the advocacy process. The toolkit is focused on systems-level advocacy. Additionally, this toolkit includes hyperlinks for efficient access to various resources. These hyperlinks are underlined in light purple font.

WHAT IS ADVOCACY?

Advocacy is promoting and protecting the profession. Advocacy is defined as, “the act of speaking up or working on behalf of the interests of another person, group, or cause” (Hart, 2019 p. 707). Advocacy helps advance the profession, promote client well-being, and ensure access to services. The goal of advocacy is to educate stakeholders (clients, employers, third-party payers, elected officials, and government policymakers) on the role of occupational therapy and demonstrate the profession’s distinct value (Hart, 2019). Occupational therapy practitioners must continually defend their role within the dynamic health, education, and social systems (Hart, 2019). This is done through advocacy! Advocacy is promoting and protecting the profession.

WHY SHOULD I ADVOCATE?

Being an active participant in advocacy efforts is important, but why?

The profession is frequently overlooked in the policy process and has low visibility when compared to other healthcare professions (Osman et al., 2020). Occupational therapy practitioners experience limited recognition and receive a perceived lack of professional status (Osman et al., 2020). Increasing the recognition of occupational therapy can be done by becoming more politically active and demonstrating the effectiveness of occupational therapy services (Marfeo, 2020). Educating patients, third-party payers, and policy makers on the benefits of occupational therapy not only promotes our profession but it also protects our job, scope of practice, and our influence within the healthcare system.

If you do not advocate and stand up for the profession of occupational therapy, then who will? You deserve a place in occupational therapy advocacy! In fact, you are likely engaging in advocacy without realizing it!

COMMON BARRIERS TO ENGAGING IN ADOVCACY

Although advocacy is important, many practitioners do not engage in advocacy efforts. There are several barriers that are commonly experienced by occupational therapy practitioners.



Common barriers include:

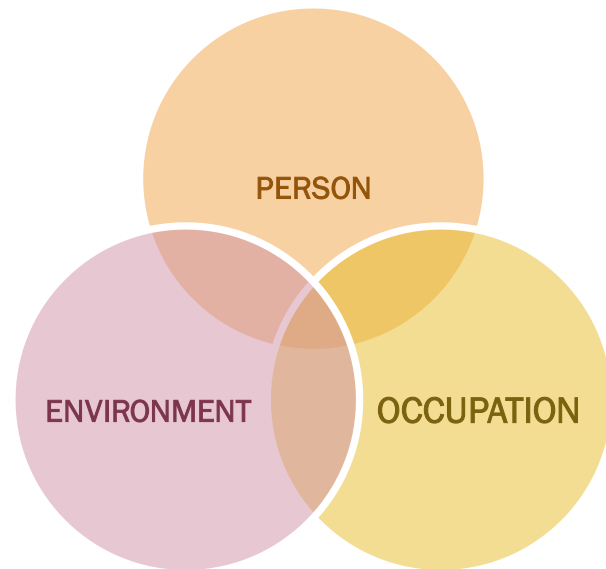
- ◆ Limited discussion of advocacy (Dhillon et al., 2010)
- ◆ Cost and poor understanding of professional organizations, therefore impacting practitioner involvement (Ki, 2018)
- ◆ Practitioners feel as though they do not have enough time to interact with the policy process (Osman et al., 2020)
- ◆ Insufficient knowledge and preparedness regarding policy and how it impacts occupational therapy (Marfeo, 2020)

Practitioners may feel that adding another task, like advocating, into our busy lives is a burden. However, participating in advocacy efforts could address some of your work frustrations. Consider the personal barriers you face! The information and resources provided in this toolkit aim to initiate discussion of advocacy and build the necessary knowledge to begin engaging in advocacy efforts. This toolkit provides resources to facilitate engagement in advocacy and empower you and other practitioners to make positive changes!

THEORETICAL FRAMEWORK

This toolkit is guided by the Person-Environment-Occupation (PEO) model (Law et al., 1996). The key domains of this model include person, environment, occupation, and occupational performance. The purpose of this model is to recognize the importance of each domain and determine the “fit” between the person, their environment, and their occupations to optimize performance (Law et al., 1996).

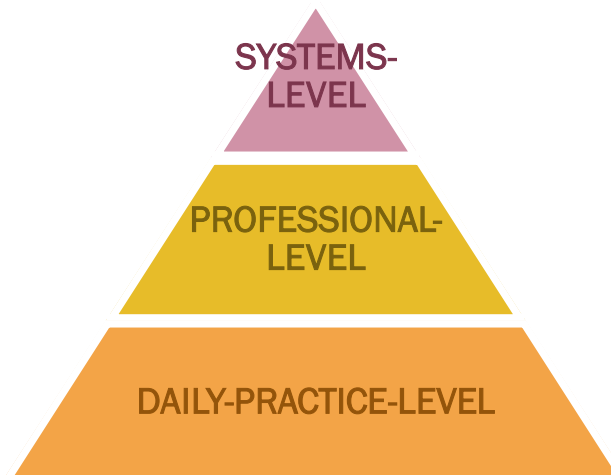
In this case, the “person” is the occupational therapy practitioner. Practitioners assume many roles and engage in many occupations. Each practitioner has personal attributes and levels of experience. The “environment” is what surrounds the practitioner, including the institutional laws and policies. The “occupation” is the duties of the occupational therapy practitioner, and the “occupational performance” is how well these duties are being fulfilled. In order to achieve optimal performance, there needs to be a strong transaction between each domain.



This toolkit aims to address the occupational therapy practitioner (person) by providing information and resources to increase their advocacy skillset. The toolkit also addresses various areas of the practitioner’s environment, including their work setting as well as the larger scale systems setting. Finally, this toolkit identifies advocacy as a duty of occupational therapy practitioners and provides resources to make engaging in advocacy easier. Addressing each component of the PEO model will allow for optimal occupational performance.

LEVELS OF ADVOCACY

Advocacy can take many forms and it doesn't always have to be a grand gesture. Different forms of advocacy are categorized into systems-level, professional-level, and daily-practice level (Hart, 2019). The following pages describe each level in detail and provide examples of what advocacy can look like along with brief explanations on how to advocate effectively at each level. The chances are, you have already been advocating for the profession without realizing it!



DAILY PRACTICE-LEVEL

The daily practice-level advocacy occurs when practitioners put occupational therapy knowledge and skills to use day-to-day (Hart, 2019). This level serves as the foundation for advocacy efforts. Practitioners must be able to demonstrate the profession's value to clients before articulating it to external stakeholders. Each interaction with a client shapes the public perception of occupational therapy (Hart, 2019).

“THE MOST POWERFUL WAY TO ADVOCATE FOR THE PROFESSION IS TO DEMONSTRATE OCCUPATIONAL THERAPY’S DISTINCT VALUE BY IMPROVING THE LIVES OF THOSE RECEIVING OUR SERVICES” (HART, 2019, P. 708)

Stakeholders and third-party payers view occupational therapy through practitioner's daily documentation. Occupational therapy practitioners must document clinical reasoning, accurately describe services, and demonstrate the efficacy of interventions (Hart, 2019).

EXAMPLES OF ADVOCACY AT THE DAILY PRACTICE-LEVEL (HART, 2019)

- ◆ Provide evidence-based & occupation-centered interventions
- ◆ Document the distinct value of occupational therapy
- ◆ Explain to clients how occupational therapy can help them achieve their goals

HOW TO ADVOCATE EFFECTIVELY AT THE DAILY PRACTICE-LEVEL

(HART, 2019)

- ◆ Treat every client encounter as an opportunity to shape public perception of the profession
- ◆ Ensure that your clients and colleagues understand and can articulate what occupational therapy is
- ◆ Use objective outcome measures to document the efficacy of occupational therapy interventions

YOU HAVE THE
OPPORTUNITY
TO ADVOCATE
EVERYDAY!

PROFESSIONAL-LEVEL

Professional-level is the link between daily practice and system-level recognition (Hart, 2019). This level of advocacy focuses on the setting and ensuring access to services while promoting best practice. At this level, occupational therapy practitioners are identifying opportunities to address unmet needs in the work setting (Hart, 2019). This includes building alliances with administrators and other disciplines to promote the distinct value of occupational therapy.

EXAMPLES OF ADVOCACY AT THE PROFESSIONAL-LEVEL (HART, 2019)

- ◆ Establish a journal club at your workplace to promote evidence-based interventions
- ◆ After receiving a denial letter from a third-party payer, appeal the denial with objective data that proves the intervention is improving the client's health and preventing higher health care costs
- ◆ Requesting a referral for a client who would benefit from occupational therapy services

HOW TO ADVOCATE EFFECTIVELY AT THE PROFESSIONAL-LEVEL

(HART, 2019)

- ◆ Treat every professional interaction as an opportunity to create an ally for occupational therapy
- ◆ Seek opportunities to use occupational therapy knowledge and skills to address an unmet need
- ◆ Contribute occupational therapy knowledge to valued individuals and groups

SYSTEMS-LEVEL

Systems-level advocacy occurs when policy, laws, and regulations are introduced. This can be at the local, state, or federal level. Many practitioners may be deterred from advocating at this level because it can be lengthy and unpredictable (Hart, 2019).

“GOVERNMENT POLICYMAKERS DEPEND ON THE EXPERTISE OF OCCUPATIONAL THERAPY PRACTITIONERS TO DEVELOP GOOD POLICY”

(HART, 2019, P. 709)

Policy determines where occupational therapy services can be provided, who provides and receives the services, as well as how they are reimbursed (Hart, 2019). If occupational therapists do not get involved, they risk losing jobs, end up limiting the profession’s scope of practice, and restrict the ability to practice in a way that best meets client’s needs (Hart, 2019).

“WHEN A [PRACTITIONER] TAKES TIME TO COMMUNICATE WITH A REPRESENTATIVE ON A PARTICULAR ISSUE, IT SENDS A POWERFUL SIGNAL TO THAT LEGISLATOR ABOUT THE IMPORTANCE OF THE ISSUE”

(HART, 2019, P. 709)

Practitioners can advocate at the systems-level by maintaining state and national association memberships to support lobbyists. Lobbyists work to influence public officials on behalf of the profession (Hart, 2019). Although lobbyists ensure that occupational therapy is represented, it is important to know that policy makers place a higher value on input from practicing therapists and their constituents (Hart, 2019).

EXAMPLES OF ADVOCACY AT THE SYSTEMS-LEVEL (HART, 2019)

- ◆ Becoming a member of American Occupational Therapy Association (AOTA) and state occupational therapy associations to support lobbying and advocacy efforts
- ◆ Writing to policymakers about an issue that is affecting the profession
- ◆ Replying to regulatory agency requests for comments about proposed rule changes
- ◆ Support the American Occupational Therapy Political Action Committee (AOTPAC) [Learn more about AOTPAC](#)

HOW TO ADVOCATE EFFECTIVELY AT THE SYSTEMS-LEVEL

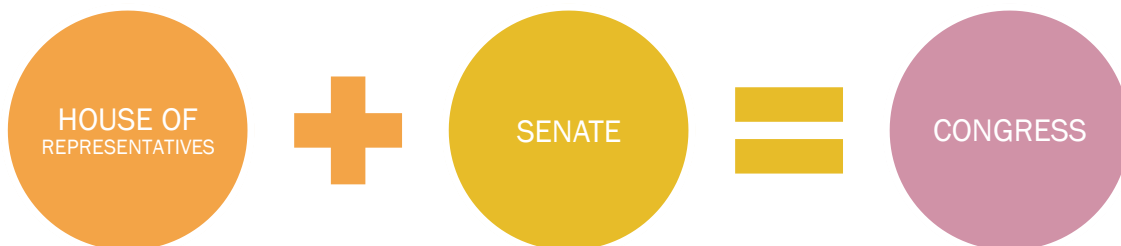
(HART, 2019)

- ◆ Maintain state association and AOTA membership
- ◆ Stay informed on legislation affecting the occupational therapy profession
- ◆ Communicate with elected representatives frequently about important issues
- ◆ Vote in every election!

YOU DO NOT NEED TO
BE A PUBLIC POLICY
EXPERT TO ADVOCATE
EFFECTIVELY AT THE
SYSTEMS-LEVEL!

ABOUT LEGISLATION

When advocating at the systems-level, it is helpful to know how legislation works and who plays a role. This section includes a brief explanation of each section of congress, the role of other stakeholders, as well as the legislative process. The information is reflective of both state and national legislation. The policies and guidelines that impact our practice start with congress.



Legislation that is introduced can only be voted on during the congress that it was introduced. If it doesn't pass in that time frame it must be re-introduced in the upcoming congress. It is important to know that bill numbers can change, and legislation can take a long time to pass.

HOUSE OF REPRESENTATIVES

The House of Representatives serves 2-year terms, meaning the entire house is re-elected every two years. The house tends to work quickly on legislation. There are a total of 435 representatives, and they are voted in by districts within the state.

SENATE

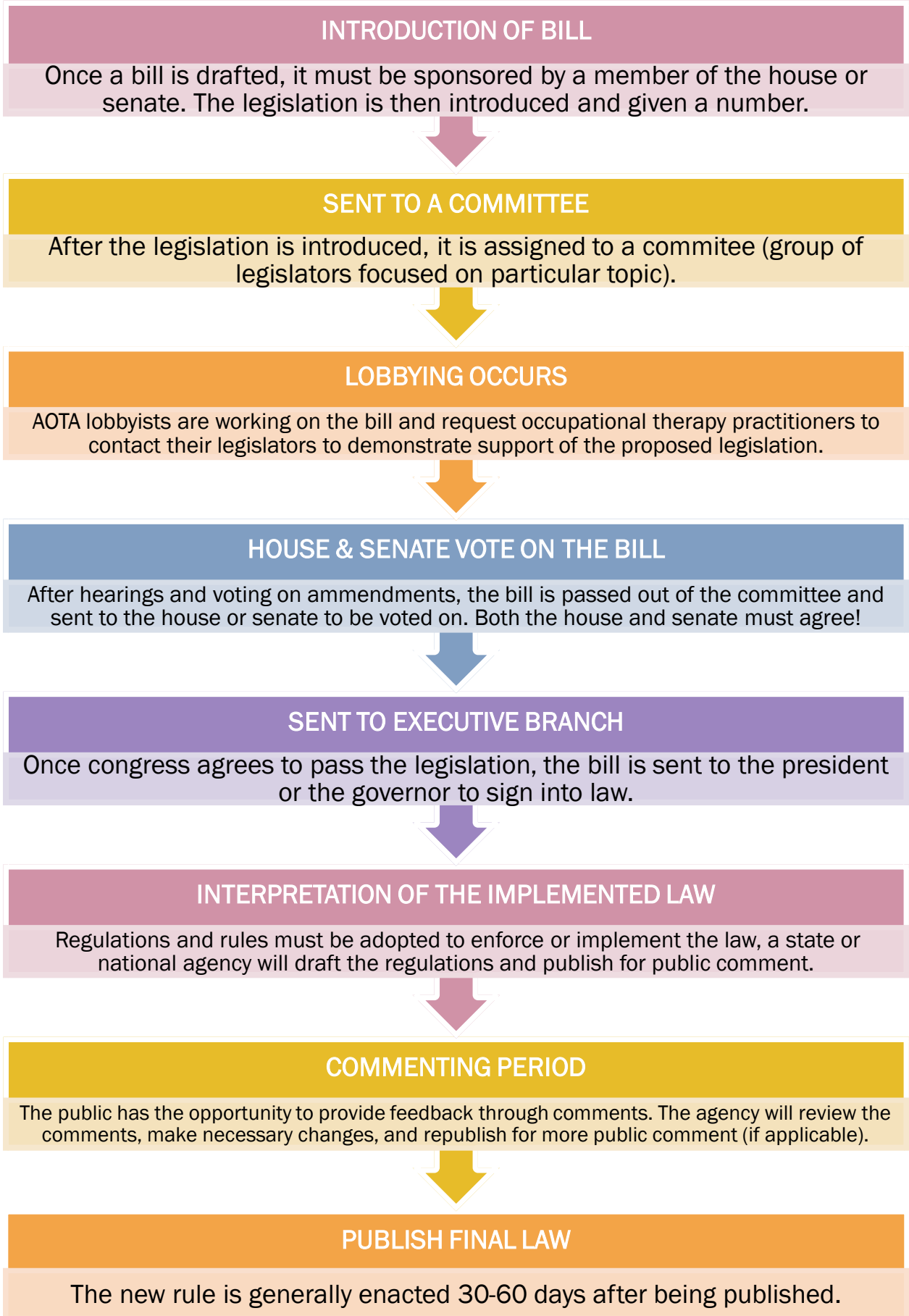
Senators serve 6-year terms, meaning 1/3 of the senate is elected each year. There is much less turnover in the senate as compared to the house of representatives. The senate has more time to work together and usually works slower than the house. Two senators per state are voted in throughout an entire state, meaning the senate is made up of 100 members.

COMMITTEES

Committees are groups of legislators that review bills on a common topic. There are specific committees at the state and national level that typically deal with the legislation that impacts occupational therapy (Grote, 2022). The specific committees can be found in the state advocacy section and the national advocacy section of this toolkit.

LOBBYISTS

A lobbyist is a professional advocate that works to influence political decisions on behalf of an organization, like AOTA or a state organization like the Wyoming Occupational Therapy Association (WYOTA). Lobbyists can be expensive and are often funded by membership dues. Currently, in 2023, Wyoming does not have a lobbyist.



HOW CAN I ADVOCATE THROUGHOUT THE PROCESS?

Legislation can be complex and may take years of advocating – luckily we have members of AOTA doing advocacy work for us! AOTA works hard to advocate for our profession throughout each of these steps, but it is important for practitioners to be involved to assist with the advocacy process. These actions include:

- ◆ Stay up to date on advocacy issues
- ◆ Contact legislators through phone calls, e-mail, or in person visits
- ◆ Provide feedback, typically through comments opened by the regulatory body

Direct resources for each of these advocacy acts can be found in the Advocacy Tools section, located later in the toolkit.

STATE ADVOCACY

STATE ASSOCIATION MEMBERSHIP

There are many acts of advocacy, it is likely you have been engaging in advocacy efforts without realizing it! Advocacy does not have to be daunting. In fact, membership in a professional organization is a form of advocacy. WYOTA is Wyoming's official membership organization for occupational therapy practitioners. WYOTA aims to promote and enhance the profession of occupational therapy (Wyoming Occupational Therapy Association, n.d.). WYOTA is a small association in comparison to other states. But with your participation, WYOTA can make BIG impacts. An association is only as strong as the members who join and participate!

BENEFITS OF WYOTA MEMBERSHIP

The first step to being involved is simply by maintaining membership! Membership fees help support ongoing advocacy work with local and national policymakers, your funding assists the advocacy experts in making positive changes that impact you and your clients every day!

Other benefits of state organization membership include:

- ◆ Networking and professional growth opportunities
- ◆ Financial benefit for continuing education courses

- ◆ Stay up to date on current issues impacting occupational therapy services
- ◆ Provide a forum to discuss opinions and concerns

[WYOTA Membership Application](#)

The WYOTA board consists entirely of volunteers. The board members work hard to advance the occupational therapy profession and meet the needs of Wyoming occupational therapy practitioners. Use the following links to contact board members and find more information regarding WYOTA!

Send an email to wytainfo@gmail.com

Fill out the form or learn more about WYOTA on the [WYOTA Website](#)
Follow the [WYOTA Facebook](#) page for quick updates and other information!

WYOMING STAKEHOLDERS & STATE LEGISLATION

State laws and regulations impact occupational therapy practitioners. Although a large portion of legislation is created at the federal level, there are many laws and regulations that are determined at the state level. These include:

- ◆ Coverage and reimbursement for occupational therapy services
- ◆ Funding for higher education
- ◆ Licensing procedures
- ◆ Scope of practice
- ◆ Supervision requirements for occupational therapy assistants
- ◆ Requirements to perform certain interventions (telehealth, physical agent modalities, etc.)
- ◆ Medicaid reimbursement

STATE PRACTICE ACT

Practice acts are laws passed by state legislators that regulate health care professions, like occupational therapy. The purpose of the state practice act is to:

- ◆ Protect public health, safety, and general well-being
- ◆ Ensure professional conduct of practitioners
- ◆ Protect the public against those who are incompetent, unethical, or unauthorized

- ◆ ensure availability of high-quality services for those in need of the services

The components of a practice act typically include requirements for licensure, supervision, referrals, scope of practice, disciplinary actions, and more (Neville & Willmarth, 2019).

SCOPE OF PRACTICE

All state practice acts include a definition of occupational therapy. The scope of practice definition legally declares the domain of occupational therapy practice. It provides guidance for the appropriate use of occupational therapy practitioners and their services.

Sometimes the scope of practices from other disciplines can overlap with occupational therapy. However, it is essential to identify the profession's distinct value and perspectives (Neville & Willmarth, 2019)

LICENSURE

Licensure requirements typically include demonstration of successfully completing academic and fieldwork requirements of an educational program accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) and passing the National Board for Certification in Occupational Therapy (NBCOT) entry-level exam (Neville & Willmarth, 2019).

Specifically, in Wyoming, the licensure requirements are (Wyoming Board of Occupational Therapy, n.d.b):

- ◆ The two requirements stated above
- ◆ A good reputation for honesty, trustworthiness, and competence relevant to the occupational therapy profession
- ◆ The applicant must submit: completed application and fee, verification of passing scores of the certification exam, verification of all licenses held, and verification of lawful presence in the United States

States also require renewal of license at specific intervals. In Wyoming, an occupational therapist's license is required to be renewed every year, all licenses expire on July 31st annually. This includes a fee, a completion of renewal application, and also a specific amount of continuing competency hours. In Wyoming continuing education (CE) must be verified in even years. The proposed rule states that practitioners are required to have 12 contact

hours every year (or 24 hours every two years) of continuing education to maintain license (Wyoming Board of Occupational Therapy, n.d.b).

Reach out to the state licensing board if you have questions about renewing your license!

INTERVENTION & SETTING REQUIREMENTS

Many states require additional education or requirements for certain interventions or to work in specific settings. States may implement requirements that are beyond occupational therapist and occupational therapy assistant licensure requirements (Neville & Willmarth, 2019).

For example, in Wyoming, occupational therapists and occupational therapy assistants may use physical agent modalities (PAMS) after completing 6 hours of post professional education and after completing 5 supervised direct patient treatments of each modality, the practitioner must receive documentation that they completed the required direct patient treatments (Wyoming Board of Occupational Therapy, n.d.b).

There are also state regulations for telehealth and requirements for practicing in certain settings! It is important to stay up to date on the regulations that impact your practice.

PROFESSION RE-ENTRY

Professional re-entry for practitioners who leave the profession for a period of time is determined at the state level. Each state has a different description defining a re-entering professional.

In Wyoming, re-entering occupational therapy practitioners must complete 16 hours of continuing education for every year the therapist has been out of practice, up to a maximum of 48 hours. At least one of the continuing education courses must be an occupational therapy review course. The board may also require supervision and establish guidelines on the length of time for the requirements (Wyoming Board of Occupational Therapy, n.d.b).

REFERRAL REQUIREMENTS

In several states, the occupational therapy practice act includes referral requirements. For occupational therapy practitioners to evaluate or treat a

client, they must receive a referral from another health professional. The law may include exemptions from the referral requirements for services that are provided in a nonmedical setting or for education, prevention, or wellness (Neville & Willmarth, 2019).

In Wyoming, there are currently no referral requirements (Wyoming Board of Occupational Therapy, n.d.b)

SUPERVISION AND ROLE DELINIATION OF OCCUPATIONAL THERAPY ASSISTANTS AND AIDES

Each state addresses supervision and role delineation of occupational therapy assistants and aides in different ways. It is important to be familiar with the requirements of the state you are practicing in, as occupational therapists are legally responsible for the patient care delivered by occupational therapy assistants and aides under their supervision (Neville & Willmarth, 2019).

In Wyoming, the supervising occupational therapist determines level of supervision for the occupational therapy assistant, based on competency (Wyoming Board of Occupational Therapy, n.d.).

- ◆ An entry-level occupational therapy assistant will receive close supervision.
- ◆ An intermediate-level occupational therapy assistant will receive routine supervision.
- ◆ An advanced-Level occupational therapy assistant will receive general supervision.

Each occupational therapist should document supervision using the form provided by the board.

DISCIPLINARY ACTION

State boards provide consumer information, monitor practitioners, and investigate complaints in order to protect the public. They have the power to discipline practitioners through various means (Neville & Willmarth, 2019).

Learn more about [state specific laws and regulations on the AOTA website!](#)

WYOMING STAKEHOLDERS

Building positive relationships with Wyoming stakeholders can help ensure that policy accurately reflects the values of the occupational therapy profession (Neville & Willmarth, 2019). This section provides brief descriptions of the individuals and groups who play a role in policy making decisions in the state of Wyoming.

As previously mentioned, most policies are first introduced in congress, which consists of both the house of representatives and the senate. Use the links below to find Wyoming's current representatives. Simply click on the e-mail icon to begin constructing an e-mail or call the phone number listed to contact that senator or representative.

[Wyoming Representative List](#)
[Wyoming Senator List](#)

The Wyoming congress only meet occasionally throughout the year, meaning legislation may move fast. It is important to be early to the conversation!

COMMITTEES

A great amount of legislative work is accomplished through the efforts of legislative committees. Each legislator serves on several different committees. There are various types of committees. Anyone can attend committee meetings, either in person or virtually. [View the list of the committees!](#) Not all committees are relevant to the occupational therapy profession. In Wyoming, The Labor, Health, and Social Services Committee deals with most legislation that is relevant to the occupational therapy profession.

OTHER STAKEHOLDERS

American Occupational Therapy Political Action Committee (AOTPAC):

- ◆ Volunteers serve on the Board of Directors, each director represents a different region. The regional directors help recruit ambassadors for AOTPAC, which is a great way to get involved! These individuals serve as a resource for advocacy training and updates on the federal level. The AOTPAC ambassadors give presentations to schools and state associations. Additionally, AOTPAC will provide campaign contributions to AOTA members running for office as the law allows.
- ◆ [Current Board AOTPAC of Directors](#)

Wyoming Board of Occupational Therapy

- ◆ The Wyoming Board of Occupational Therapy develops and enforces standards to be met by individuals in order to receive a license as an occupational therapist or occupational therapy assistant. The board ensures public protection by receiving, investigating, and taking appropriate action with respect to complaints as well as promulgation of rules and regulations (Wyoming Board of Occupational Therapy, n.d.a). The Wyoming Board of Occupational Therapy sets regulations that impact how occupational therapy services are delivered as well as the requirements for obtaining and maintaining licensure. Visit the [Wyoming Board of Occupational Therapy website](#) for more information. Learn more about being involved in the meetings and providing feedback to proposed changes in the advocacy tools section below.

Wyoming Department of Insurance:

- ◆ The Wyoming Department of Insurance is responsible for regulating the business of insurance in Wyoming (Wyoming Department of Insurance, n.d.). Although this department only oversees a small amount of the insured in the state, they are still a helpful contact when advocating for reimbursement of occupational therapy services.

Wyoming Department of Health

- ◆ The Wyoming Department of Health is split into several divisions. These divisions include: aging, behavioral health, healthcare financing, and public health. The department aims to promote, protect, and enhance the health of Wyoming citizens (Wyoming Department of Health, n.d.). This department is in charge of regulating Medicaid and the Kid Care Children's Health Insurance Program (CHIP) program. Visit [the Wyoming Department of Health website](#) to learn more!

AOTA State Affairs Team:

- ◆ The State Affairs team deals with state issues (Medicaid reimbursement, licensure, scope of practice, occupational therapy assistant supervision). This team coordinates with state associations and collaborates with state association presidents. The team currently consists of four members. The members of this team monitor regulation and legislation

at the state level. Often times legislation is introduced in several states at a time. The State Affairs team are aware of what is going on in each state and they know what has worked well in each state (Grote, 2023). The members of this team also write articles to help occupational therapy practitioners stay up to date!

NATIONAL ADVOCACY

NATIONAL ASSOCIATION MEMBERSHIP

The American Occupational Therapy Association (AOTA) is the national professional organization dedicated to occupational therapy practitioners. AOTA aims to advance occupational therapy practice, education, and research through standard setting and advocacy on behalf of its members, the profession, and the public.

It can be easy to dismiss an AOTA membership because of the cost. It may feel like an unnecessary expense. However, AOTA offers many resources and other benefits that you may have never considered.

BENEFITS OF AOTA MEMBERSHIP (GROTE, 2021)

- ◆ Access to resources and evidence-based information to guide your practice
- ◆ Discounts on continuing education and conferences
- ◆ Funding for advocacy efforts – your membership fees fund the AOTA advocacy experts!
- ◆ Provides a community to discuss occupational therapy practice
- ◆ Your membership is an investment in the future of the occupational therapy!

[Become a member today!](#)

View AOTA's current board of directors [here!](#) You can also contact the board members by simply clicking on their name using the link provided.

NATIONAL STAKEHOLDERS & NATIONAL LEGISLATION

Many policies and regulations that impact occupational therapy practice are determined at the national, or federal level. This includes:

- ◆ Medicare reimbursement
- ◆ Higher education
- ◆ Federal student loans
- ◆ Health insurance regulations
- ◆ Funding for various settings/programs
- ◆ Influence state legislation

AOTA heavily focuses on reimbursement because it impacts occupational therapy practitioner's scope of practice, job availability, patient access to services, and practitioner's pay. Reimbursement specific information can be found in the advocacy tools section.

NATIONAL STAKEHOLDERS

This section provides brief descriptions of the individuals and groups who play a role in policy making decisions related to occupational therapy in the United States.

CONGRESS

Use the links below to find the current United States representatives. Simply click on the representative's name to view their website. Each website provides a plethora of information about the individual and various avenues to contact them. Determine who serves on the relevant committee to know who to contact!

[United States Senators](#)
[United States House of Representatives](#)

COMMITTEES

Committees are an important part of the legislative process. Most members of congress are assigned to one or more committees, each committee oversees a different function of the federal government.

[Learn more about key senate and house committees that impact occupational therapy!](#)

AOTA TEAMS

Federal Affairs Team:

- ◆ The Federal Affairs Team is responsible for lobbying or influencing legislative action in congress and other government bodies on behalf of occupational therapy. The team consists of five members, three of which are lobbyists. This team has an individual dedicated to issues regarding education/pediatrics, an individual dedicated to Medicare issues, and another in charge of mental health issues. Another member is responsible for AOTPAC which is an advocacy arm that works with AOTA by contributing to political campaigns. The final member of the team is responsible for grassroots advocacy (Grote, 2023). This team keeps practitioners informed on current bills, monitors legislation, and builds relationships with legislators (Grote, 2021). Their job is to advocate!
- ◆ Your membership fees help fund these advocacy experts. Practitioners do not have the time to sort through hundreds of bills, the Federal Affairs Team does this for us! They interpret the legislative information and disseminate relevant information to practitioners which makes it easier for practitioners to be effective advocates.

American Occupational Therapy Political Action Committee (AOTPAC):

- ◆ AOTPAC gives occupational therapy practitioners a voice in the political realm. This political action committee is focused solely on advancing the interests of occupational therapy on Capitol Hill by influencing the outcome of federal elections. They help the occupational therapy profession gain the high profile necessary in competing in the political arena. Since AOTA cannot legally contribute any amount of money to a candidate, AOTPAC can solicit monetary contributions to provide assistance to candidates (AOTA, n.d.c). With that being said, donations to AOTPAC are important! AOTA membership fees cannot legally support candidates like AOTPAC can.

Quality Team:

- ◆ The Quality Team is dedicated to providing resources for occupational therapy practitioners to assist with navigating quality reporting, regulatory and outcomes, and link these changes to clinical practice. The members on this team stay up to date on policy, quality reporting, and

payment changes. They focus on evidence-based practice along with quality care and outcomes (AOTA, n.d.f). Learn more about [AOTA Quality Team!](#)

Regulatory Affairs Team:

- ◆ AOTA's regulatory team is dedicated entirely to regulation. The team is comprised of four members. These experts interpret payment reforms, regulations, and provide agency guidance. They also advocate for fair coverage and payment policies for public and private payers (Grote, 2021). They provide support to the Federal Affairs Team and together they create strategies for addressing legislation and advocating effectively for occupational therapy (Grote, 2021)

ADVOCACY TOOLS

This section provides tools to ease advocacy efforts and address the previously identified barriers to engaging in advocacy. This section provides resources to help you in becoming an occupational therapy advocate!

AOTA WEBSITE (AOTA.ORG)

The AOTA website provides many advocacy resources. Although some of the resources are available to non-members, the majority of resources are only available to members (a perk of being an AOTA member!)

Once you sign in you will find a list of categories at the top of the screen. After you click on the main category, there will be subcategories, again at the top of the screen. Although each of these



categories are useful, this toolkit will highlight a few of the categories that are most beneficial for advocacy practice.

PRACTICE (American Occupational Therapy Association [AOTA], n.d.d)

This tab provides resources to increase knowledge and elevate your occupational therapy practice by enhancing your skills and create the best outcomes for your clients, a form of advocacy! This section includes the following categories:

- ◆ **Mental health and well-being** to promote mental health in a variety of practice areas and settings
- ◆ **Community-based services** focuses on community-based care as a setting for occupational therapy and a focus of intervention
- ◆ **Evidence-based practice and knowledge translation** includes resources on translating research, applying it to practice, and advocating for evidence-based treatment
- ◆ **Coding and billing** provides easy to understand resources to help you code and bill correctly
- ◆ **Diversity, Equity, and Inclusion Toolkit** – learn how to make your practice more diverse, equitable, and inclusive
- ◆ **Quality and value-based care** – integrate quality into your practice and navigate quality reporting, regulations, and outcomes
- ◆ **Payment policy** – education about fair coverage and payment policies
- ◆ **Ethics** – resources for the profession’s ethical standards, as well as links regarding disciplinary action and complaint forms
- ◆ **AOTA Podcast** - Each episode focuses on an important occupational therapy topic, the information can help you stay up to date and you can listen to them on the go!
- ◆ **Documentation** – this section provides resources regarding best practices for documentation to improve services, increase reimbursement, decrease denied claims, and clearly communicate the distinct value of occupational therapy

Once you scroll past the previous categories you will find links to explore various practice resources under the topics of domain and process, clinical topics, practice essentials, client groups, and practice settings.

PUBLICATIONS (AOTA, n.d.e)

The publications section includes various journals, magazines, and other avenues of gaining information related to occupational therapy practice. These resources can be used to ensure you are providing evidence-based care, a form of advocacy!

- ◆ **American Journal of Occupational Therapy (AJOT)** is a peer-reviewed journal for occupational therapy research
- ◆ **OT Practice Magazine** includes articles on hands-on techniques, policy updates, career advice, and job opportunities – advocacy updates are typically 3-4 pages in!
- ◆ **SIS Quarterly Magazine** provides articles that provide guidance on high-priority and emerging areas of practice selected by AOTA’s Special Interest Sections (SISs)
- ◆ **External Journals** includes various journals that provide peer-reviewed resources to assist you in your research and practice
- ◆ **Podcast** - another way to access the AOTA podcast and find other podcasts that provide insight on a variety of issues related to occupational therapy,

ADVOCACY (AOTA, n.d.a)

- ◆ **Issues** – current advocacy issues in focus, click on the issue to learn more about it!
- ◆ **Advocacy News** provides many articles on advocacy issues and advocacy efforts, use the “filters” to find the specific topic you are looking for, this is updated frequently and it is the best place to look for the most recent information!
- ◆ **Hill Day** is an opportunity to take action as a grassroots advocate in Washington, DC, but can also be done virtually! This tab provides information regarding Hill Day (typically every September)
- ◆ **Political Action Committee** – The American Occupational Therapy Political Action Committee (AOTPAC) is an advocacy arm that works with AOTA by contributing to political campaigns, this tab provides information on the

importance of AOTPAC as well as an option to donate! Your donation supports advocacy efforts!

- ◆ **Everyday Advocacy** – learn how to advocate everyday as a part of being an occupational therapy practitioner, everyday advocacy builds trust and advances your role with your clients, team, and system
- ◆ **Contact Policy Makers** – This section of the advocacy category provides link to AOTA’s legislative action center, this allows you to build relationships with legislators and contact them about important issues.

The [AOTA LEGISLATIVE TAKE ACTION CENTER](#) is a great resource! It is available to both members and non-members. Once you arrive on the website, you will have the option to:

- ◆ Learn about current legislation and contact your representative regarding that piece of legislation
- ◆ Sign up for quarterly alerts regarding what AOTA is lobbying for
- ◆ View key legislation impacting the occupational therapy profession
- ◆ Find local officials

How to contact policymakers through the website:

Simply click on the piece of legislation to find a brief description along with a place to enter your information. The purpose of entering your information is to determine your local representatives.

Once your information is entered, a message will be drafted. Feel free to edit the text or add your own personal story that is relevant to the proposed legislation. Remember – policymakers LOVE to hear from practitioners. This is such an easy way to contact your representatives about issues that are important to the occupational therapy practice while also building a relationship to assist with future advocacy efforts.

How to view legislation impacting the occupational therapy profession:

On the right-hand side of the website, click on the “View Key Legislation” link to view current legislation that is impacting occupational therapy practitioners. By clicking on the underlined legislation, you can find a brief description along with the sponsors of that bill. Find a piece of legislation that is meaningful to you and contact the representative by clicking on their name and finding ways to contact them (phone call, website, e-mail).

As always, tell your story of how the proposed legislation impacts you as a practitioner!

LOCATING STATE-RELATED LEGISLATION

The legislative action center also provides state-related issues. Simply use the key legislation page and click on the drop box and find the state you are looking for!

Current advocacy efforts and other state related legislation can also be located by:

- ◆ Contacting WYOTA, specifically the legislative chair
- ◆ Monitor [Wyoming Board of Occupational Therapy website](#) and attend board meetings to stay up to date on state specific regulations
- ◆ [View Wyoming's proposed and current administrative rules](#)
- ◆ AOTA sends out monthly regulatory updates via email which includes relevant occupational therapy regulations across the nation
- ◆ www.congress.gov is also a great resource for locating legislation, simply search “occupational therapy” or related other related terms to view relevant bills

Occupational therapy practitioners need to monitor the boards that are responsible for regulating occupational therapy and ensure there is ongoing discussion on professional issues (Neville & Willmarth, 2019).

COMMUNICATING WITH STAKEHOLDERS

Policymakers value the input of practitioners! Policymakers do not have the ability to consider all evidence that is relevant to policy problems, they cannot process all the possible information to make decisions. Here are some tips for communicating effectively with policymakers and stakeholders:

- Create relationships with policy makers
- Ask for feedback
- Avoid overly complicated presentations of evidence
- Frame your message in a way that is attractive to policy makers
- Present material more than once
- Tell simple stories and give specific examples
- Combine facts with emotional appeals













(Cairney & Kwiatkowski, 2017; Cairney et al., 2016)

E-MAIL COMMUNICATION

Sending an e-mail is an efficient way of communicating with policy makers. Here is a brief outline of what to include in your e-mail along with a sample e-mail.

1. Introduce yourself
2. State if you would like to support or not support the proposed legislation
3. Provide name of legislation and be clear about what you are requesting
4. Provide names of individuals who are sponsoring the bill
5. Brief explanation of the bill
6. Short story or specific examples of how the proposed legislation impacts occupational therapy or individuals who receive occupational therapy services

Subject: Act Now to Support the Lymphedema Treatment Act Priority ▾

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Dear Senator/Representative **[NAME OF LOCAL LEGISLATOR]**:

As a constituent and occupational therapy practitioner, I am writing to urge you to support the Lymphedema Treatment Act – a piece of legislation from senator Maria Cantwell (D-WA). The Lymphedema Treatment Act provides Medicare coverage of lymphedema compression treatment items. Specifically, the bill provides coverage of (1) standard and custom fitted gradient compression garments that are prescribed by a physician or other specified healthcare professional to treat lymphedema, and (2) other devices determined to be effective in the prevention or treatment of lymphedema.

In treating lymphedema, compression garments are essential for improving healing time, improving circulation, and decreasing swelling. When patients have access to compression garments they experience these benefits which increase their mobility, independence, and therefore improving their quality of life. Compression garments are expensive, ranging anywhere from \$70-\$500 for a singular garment. Often times patients do not buy the necessary garments due to the extensive cost. Medicare should cover the cost of garments to reduce medical costs by decreasing the patient’s swelling, infections, and wounds. It would also decrease the number of required treatments.

I urge you to support the Lymphedema Treatment Act which will benefit so many individuals by improving their quality of life while also reducing medical costs.

I would love to answer any questions or provide further information if necessary. Thank you for your consideration!

Sincerely,
[NAME, TITLE]

Legislators are more likely to read the e-mail if it is not a mass e-mail. With that being said, send your e-mail to each legislator individually rather than one e-mail with the multiple recipients.

Additionally, it is helpful to do some research on the legislator and learn more about their background. This allows you to tailor your message to make it more meaningful to them.

PHONE CALL COMMUNICATION

A phone call is another great way to contact local legislators. Often it is an assistant that answers phone calls, rather than the legislator themselves. When speaking with these individuals, always be respectful!

The phone call will have the same contents as the email. Here is a sample phone call script:

"Hello, my name is [YOUR NAME] and I am an occupational therapy practitioner in your district. I am calling today to ask Congressman/Congresswoman/Senator [LOCAL SENATOR'S NAME] to support the Lymphedema Treatment Act. This act provides Medicare coverage of lymphedema compression treatment items. Specifically, the bill provides coverage of (1) standard and custom fitted gradient compression garments that are prescribed by a physician or other specified healthcare professional to treat lymphedema, and (2) other devices determined to be effective in the prevention or treatment of lymphedema.

In treating lymphedema, compression garments are essential for improving healing time, improving circulation, and decreasing swelling. When patients have access to compression garments, they experience these benefits which increase their mobility, independence, and therefore improving their quality of life. Compression garments are expensive, ranging anywhere from \$70-\$500 for a singular garment. Often times patients do not buy the necessary garments due to the extensive cost. Medicare should cover the cost of garments to reduce medical costs by decreasing the patient's swelling,

infections, and wounds. It would also decrease the number of required treatments.

I would appreciate if [NAME OF LOCAL LEGISLATOR] would get back to me on this important issue. I can be contacted on my cell phone at [PHONE NUMBER] or can be contacted through email at [E-MAIL ADDRESS]. If [LOCAL LEGISLATOR] has any questions, please do not hesitate to reach out to me.

Thank you for your time!"

IN-PERSON VISIT



Perhaps the most effective way to communicate with legislators is an in-person visit. Although it can be difficult to arrange due to the busy schedules of practitioners and legislators. Members of congress can either visit your facility or you can schedule a meeting to visit with them at the capitol. Simply contact them to schedule a time to meet! Members of congress are receptive

to touring hospitals or other facilities in their district or state. It allows them to learn about their constituents concerns firsthand. This is such a valuable opportunity! Learn more about how you can have a [successful site visit by a member of Congress](#).

It is also beneficial to schedule a meeting with your local legislators at the capitol. If you are unable to meet with the legislator themselves, it can also be very beneficial to meet with their staff. Learn [how to conduct a Congressional meeting](#).

Another great opportunity for in-person visits is Hill Day which occurs once a year at the nation's capital, typically in September. There is also a virtual option for Hill Day for those who cannot make it. Anyone can participate in this event. This event is an opportunity to take action as a grassroots advocate through

meetings with legislators and staff. Once you register, AOTA will arrange Congressional meetings for you and provide fact sheets that are relevant to the legislation that is being addressed. Meetings typically last 20-30 minutes. The most important goal of these meetings is for members of congress and their staff to understand what occupational therapy is and how it benefits constituents, communities, and society as a whole (AOTA, n.d.b).

[Learn more about Hill Day!](#)

FEEDBACK THROUGH COMMENTS FOR REGULATORY AGENCIES

As seen in the legislative process, once regulatory agencies propose a new rule, they open comment sections to the public. The purpose of the comment section is to receive feedback from individuals regarding the importance of the rule and provide suggestion for edits. Practitioners can be notified of new rules by being involved in advocacy groups and staying in touch with the state association.

AOTA and **state associations** will send out e-mails to update practitioners on issues and ask for commentary feedback through the regulatory agencies. It is important to monitor these e-mails and stay updated!

[The Federal Register](#) is a resource to find proposed rules across the government.

The **Centers for Medicare and Medicaid Services (CMS)** website is also a great place to [learn more about the CMS rule-making process and find further resources](#). When commenting on a proposed rule, the contents of your comment can include: published articles, individual practitioner experiences, or narratives of patient experiences. It is helpful to show how the proposed rule would be advantageous for Medicare beneficiaries.

The **Wyoming Board of Occupational Therapy** has public comment periods for proposed changes relating to state issues (licensure, scope of practice, etc.). You can stay up to date by monitoring the [Wyoming Board of Occupational Therapy website](#) and attending board meetings. The board posts all meeting notices and agendas on the website. Additionally, most meetings occur virtually and are open to the public. The board normally has a public comment period during each meeting. If the board is proposing rule changes, the board discusses those in a meeting and then notifies all licensees on the notice list via e-mail. There is a comment period of at least 45 days that you can provide

written feedback to the board regarding those changes. You cannot request additional changes to something that wasn't addressed. Your comment has to be relevant to the proposed change and cannot suggest a change for something that is not being addressed (G. Searls, personal communication, March 22, 2023).

You can do the following to be involved and stay updated on issues withing the board:

- ◆ Request to be notified of meetings (time, date, information, in-person vs. virtually, and how to connect) along with proposed rule changes by sending an e-mail request to the board office
- ◆ All Wyoming licensees will receive an e-mail notice regarding rule changes
- ◆ E-mail the board ahead of a meeting and request a topic be placed on the agenda for discussion or provide a written letter for consideration

ADVOCACY ACTION STEPS

You are running into a problem in your practice, what steps do you take? It is your responsibility to report any problems or address the concerns that you are experiencing at work. This section includes action steps for advocating. If you are noticing an area that needs improved or a policy that needs adjusted in your workplace, Here are the steps to take for making those changes!

1

Research the Policy or Ask Your Manager to See the Policy: You may often hear, “insurance doesn’t cover this” or “that is against our policy”. The best way to start advocating is to simply research the policy or ask your manager to see it! Policies are often interpreted by many different people, it can be beneficial to see what is written. It is also important to know if it is a federal policy or a facility policy.

2

Advocate for Change Within the Facility: For facility policies, have conversations with the leaders at your workplace and initiate change, it is beneficial to have evidence for what you are advocating towards. If you need additional support in your advocacy efforts or you are facing a federal policy, proceed to the next action step.

3

Contact WYOTA: Pose your question or concern to the state association. There is a possibility that other practitioners are having the same problem. The state association includes individuals who are experienced in advocating for the profession. They can help guide the process.

4

Contact AOTA: If the state is unable to assist with the issue or additional support is necessary, reach out to AOTA. As a practitioner, you likely do not have 40 hours a week to focus on an issue. Let AOTA help you! AOTA is full of advocacy experts to help address your concerns.

5

Contact Stakeholders: Knowing who to contact is a large part of advocating, especially at the systems level. First consider the issue you are dealing with and consider which departments or groups play a role, then contact them to pose your question/concern if this has not already been done via the state association or AOTA.

It is important to remember that systems-level advocacy is often a long process. However, it is crucial to address issues that you are facing in your practice. If you are continually finding ways to work around the problem rather than addressing it, the problem will continue to occur. It won't always be easy but advocating for the profession is always worth it!

BILLING AND CODING INFORMATION

It can be helpful to have a conversation with the billers at your workplace and learn what issues they commonly encounter. This conversation will assist you in understanding how your facility works and how to approach your advocacy efforts.

Billing is an important component of our practice; it allows us to be reimbursed and allows for data collection. The codes you use are used as a tracking tool by CMS. This means the codes you use can influence payment models in the future because the codes provide information on how occupational therapy is practiced (C. Grote, personal communication, February 16, 2023).

Current Procedural Terminology (CPT®) codes are owned by the American Medical Association [AMA] (C. Grote, personal communication, February 16, 2023). The codes provide a streamline form of communication for payers and includes a number, name, and description. There are codes that are specific to occupational therapy along with codes that are shared across disciplines (C. Grote, personal communication, February 16, 2023).

International Classification of Diseases, Tenth Revision (ICD-10) codes should reflect the need for therapy. The plan of care and interventions should be geared towards addressing the indicated diagnosis. Using 1 code for all therapy cases (ex. “General Weakness”) is not recommended by AOTA or by CMS. Practitioners should use the most specific code possible, it helps agencies understand what occupational therapists are doing (C. Grote, personal communication, February 16, 2023).

The following are resources for further learning regarding CPT codes and ICD-10 codes:

- ◆ To ensure accurate use of CPT® codes, view [frequently used CPT codes for occupational therapy](#) which also includes descriptions of each code
- ◆ [CPT and ICD10 Basics Training](#) – a seven minute video that provides a great overview of CPT® codes and ICD-10 codes

CONCLUSION & FURTHER RESOURCES

Advocacy can seem overwhelming, but it does not have to be! Start by choosing one area that you are passionate about or start with the small advocacy steps by dedicating small portions of your day to becoming an effective occupational therapy advocate.

FURTHER RESOURCES

There are endless resources for learning more about advocacy and how you can be involved. Here is a short list of resources to further your learning!

AMPLIFY OT

Amplify OT's mission is to provide you with the information you need on health policy and advocacy because you deserve a seat at the table (Grote, n.d.).

Website: amplifyot.com

Instagram: [amplify_ot](https://www.instagram.com/amplify_ot)

Facebook: Amplify OT – Occupational Therapy & Medicare Policy, Quality, and Advocacy

- ◆ **Informative blog** that contains topics on advocacy, federal legislation, Medicare, reimbursement, and value-based care
- ◆ **Free newsletter** to stay up to date on health policy and current advocacy efforts
- ◆ **Podcast** that discusses all things policy and legislation in an easy to understand fashion
- ◆ **Membership** to help you stay informed about reimbursement and advocacy, access to resources and an opportunity to be a part of a community by connecting with other occupational therapy practitioners

WFOT ADVOCACY TOOLKIT

The World Federation of Occupational Therapists has created a brief advocacy toolkit that can be used as a further guide. This toolkit includes two sample letters along with an advocacy presentation.

[View the WFOT Toolkit](#)

The Medicare Learning Network

This website provides free educational materials for healthcare providers on CMS programs, policies, and initiatives. There are many helpful resources!

[Medicare Learning Network](#)

ADVOCACY PODCAST EPISODES

There are many relevant podcast episodes that may help you further understand advocacy. The following are titles of relevant podcast episodes that you can listen to through most podcast platforms.

AOTA Podcast

- ◆ [AOTA Advocacy Discussion with Jill Tighe](#)

The Amplify OT Podcast

- ◆ [Advocacy Initiatives for 2022 with Heather Parsons, VP of Federal Affairs at AOTA](#)
- ◆ [Conversations with AOTA's President, Alyson Stover, on Advocacy, Leadership, and Membership](#)
- ◆ [2022 Year - End Advocacy Wins and Losses for OT](#)
- ◆ [Is AOTA advocating for you? Meet the Team!](#)

ADVOCACY FACEBOOK GROUPS

There are often Facebook groups that focus on particular advocacy efforts. By joining a group that is meaningful to you, you may learn more on how you can be involved and stay updated on issues.

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