

Preparing Occupational Therapy Students for Alternative Leadership Roles

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ABSTRACT

The AOTA Centennial Vision (2007) identified building the profession's capacity to lead as a key objective. Preparing students and practitioners to seek out and assume alternative leadership roles is key to meeting this objective. Current curricula needs to work towards introducing students to these potential roles early on. Early introduction will help build interest and increase understanding of what occupational therapists can bring to these positions.

INTRODUCTION

AOTA's Centennial Vision (2007) identified building the profession's capacity to influence and lead as an important strategic objective. One way to achieve this objective is for OT practitioners to seek out emerging and alternative leadership roles in health care delivery systems. Preparing OT students and practitioners to consider and recognize the existence of these roles as viable leadership options is essential to meeting this objective.

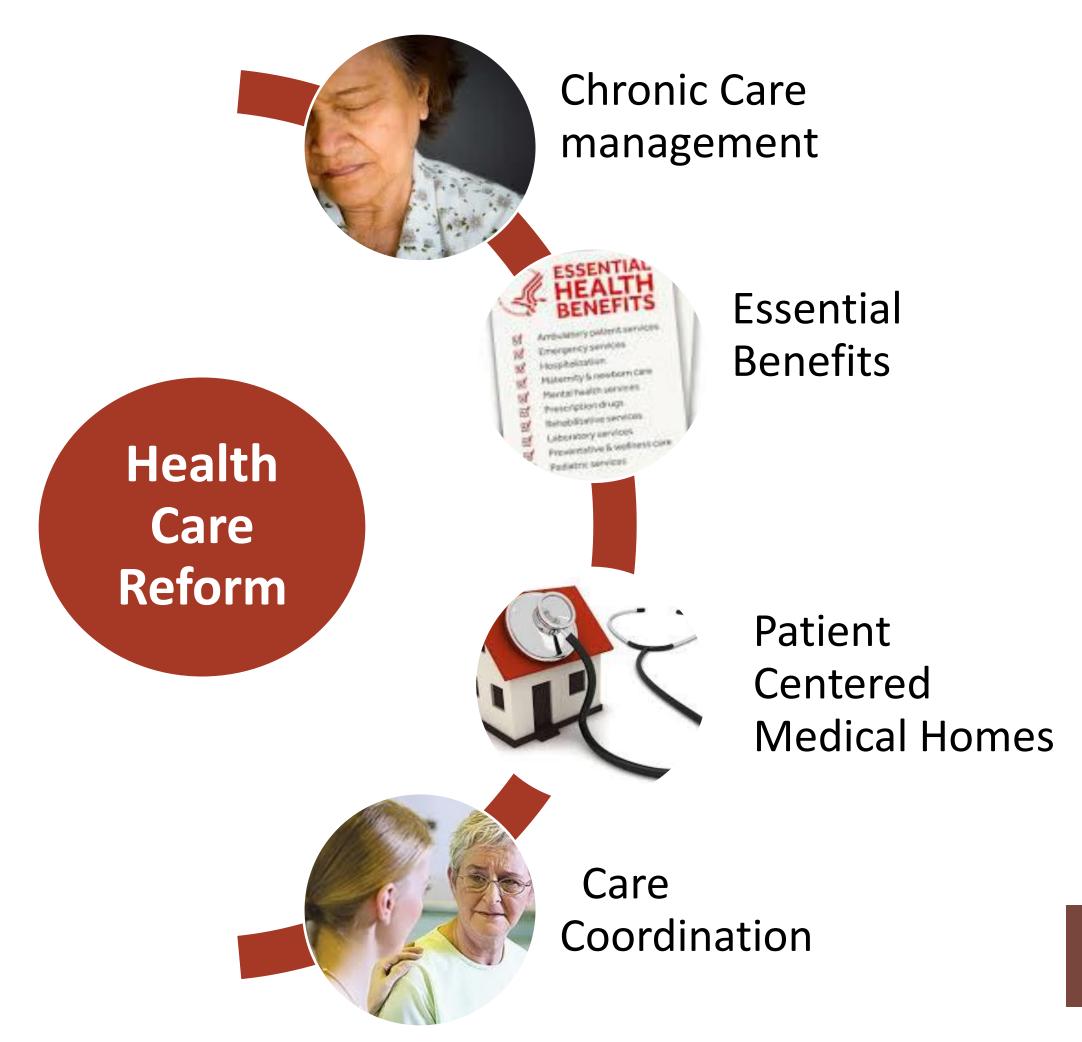
Opportunities exist in health care system delivery models for effective program leaders; many of these opportunities lie outside traditional OT practice. Some OT practitioners are already assuming these roles, but more work needs to be done. In an AMSIS survey, at least 5% of respondents supervised multiple areas within an organization or a network of large organizations (2008). This small group of respondents tended to hold high-ranking positions and directly or indirectly supervised 50 to 500 employees. More than 60% were overseeing employees from multiple professions, including outside the rehab specialties. This % can only increase as opportunities emerge.

OT Curricula needs to actively work towards making connections between alternative leadership opportunities and OT. This can be achieved in simple but deliberate ways. These connections will help students to:

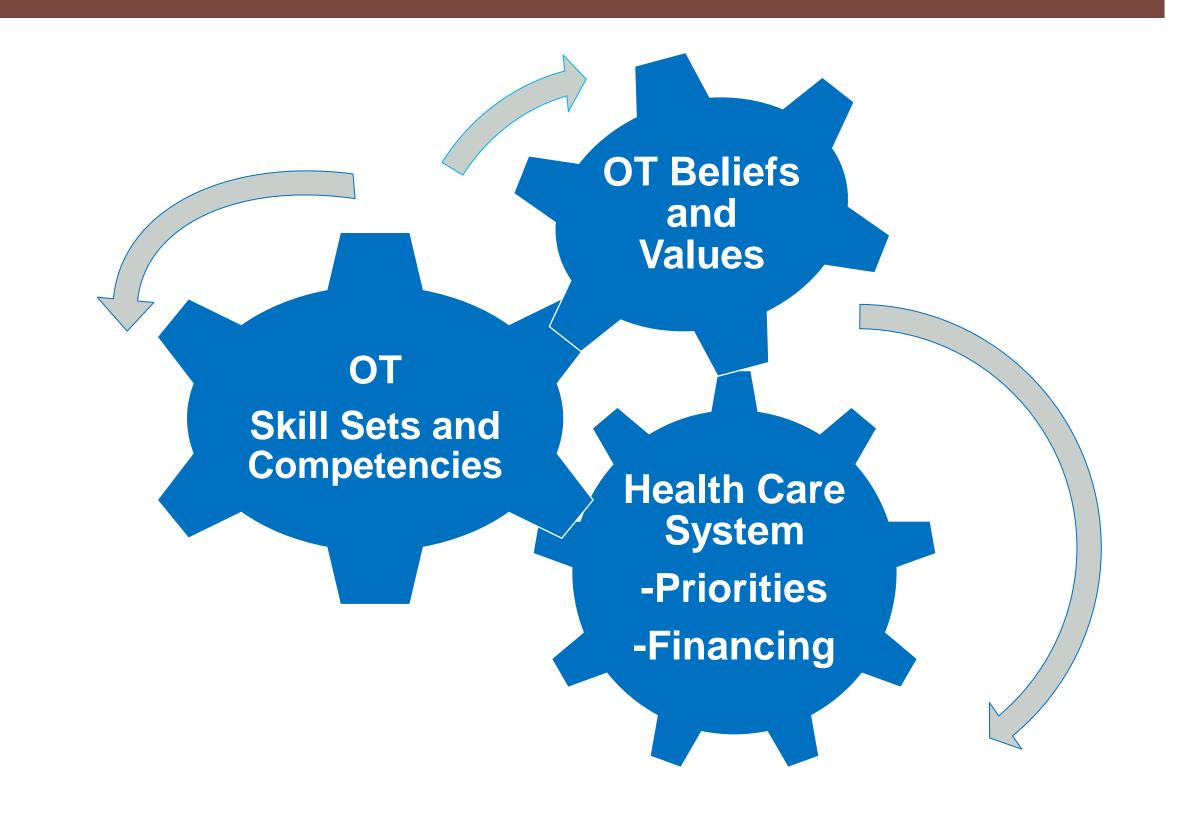
- Understand the larger health care and social service systems they will enter
- Articulate leadership priorities within these systems and link them to OT philosophy and scope of practice
- Conceptualize and operationalize why OTs are suited to take on these roles
- Access leadership resources, including those available thru AOTA
- Interact with leadership role models and mentors

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EMERGING OPPORTUNITIES



MAKING CONNECTIONS



THROUGHOUT THE CURRICULUM

- Highlight Opportunities Where OT Can Assume Alternative Leadership Roles
- Incorporate Assignments Related to OT Leadership That Will Promote
 - Discussion of Reasons Why OT Is A Good Fit To Lead
 - Identification of Leadership Skill Sets & Competencies
 - Performance of Leadership Strategic and Program Planning
 - Participation in Multi -Disciplinary Team Building Activities

SAMPLE LEADERSHIP AREAS

- Physical Disabilities / Mental Health
 - Trauma Injury Prevention Coordination
 - Departmental Administrator / Performance Improvement
 - Care Coordination and Care Transition for Clients with Chronic Diseases
 - Designing Client-Centered Clinical Pathways
- Gerontology
 - Preventing Re-Hospitalizations in Elders
 - Fall Prevention
 - Health Literacy Coordination
- Administration
 - Understanding/Developing Macro-View of Health Care Delivery to Assume Roles Outside of Traditional Rehab (e.g. CHHA, Dept. of Surgery)

SAMPLE CASE STUDY

An OT works for a large health care organization that recently was selected to be a Community-based Care Transitions Program (CCTP) with funding from the Health Care Reform Act. The acute care hospital has created a HIT Team (Home Intervention Transition team) with the goal to decrease rehospitalization in clients with chronic disabilities such as cardiac, pulmonary, arthritis and neurological conditions. The OT has been selected to lead the multidisciplinary HIT Teams to transition client to home or another care setting by reducing barriers, improving quality of care, and showing measurable savings to the Medicare program.

(written in conjunction with K. Golisz, OTD)

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