# AOTA SPECIALTY CERTIFICATION IN LOW VISION

## Occupational Therapist Candidate Application

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# BACKGROUND AND INFORMATION
# AOTA Specialty Certification in Low Vision

## Purpose

Through its Specialty Certification programs, the American Occupational Therapy Association (AOTA) provides formal recognition for practitioners who have engaged in a voluntary process of ongoing professional development and who are able to translate that development into improved client outcomes.

The AOTA certification process recognizes applicants who have carefully designed and systematically completed professional development activities that facilitate achievement of the criteria delineated for a specialized practitioner in the certification area.

AOTA Specialty Certification is based on peer-review that includes (1) demonstration of relevant experience, (2) a reflective portfolio, and (3) ongoing professional development. The objectives of Specialty Certification are to

1. Create a community of practitioners who share a commitment to continuing competence and the development of the profession.
2. Facilitate and respond to the future development of best practice, education, and research in occupational therapy.
3. Assist consumers and others in the health care community in identifying practitioners with expertise in recognized areas of practice.

## Benefits of Certification

- *Clinicians*—Personal accomplishment, professional recognition, career advancement
- *Administrators*—Career laddering, The Joint Commission and other stakeholders, marketing
- *Faculty*—Models the importance of ongoing professional development and reinforces the critical examination of clinical practice, which can be extended to support learning opportunities for students.

## Authority

Low Vision Specialty Certification is awarded by AOTA and is
- A private program
- Not awarded or required by federal or state governments
- Not required as part of the minimum qualifications to work as an occupational therapist or occupational therapy assistant
- Voluntary.

Low Vision Specialty Certification is awarded to individuals who have demonstrated the capacity for meeting identified criteria that reflect specialized occupational therapy practice in the area of low vision through a peer-reviewed reflective portfolio process.

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Administration of the program is by the AOTA Board for Advanced and Specialty Certification (BASC) under the auspices of the AOTA Commission on Continuing Competence and Professional Development (CCCPD).

### *Occupational Therapy Code of Ethics and Ethics Standards*

Articulated within Principle 1 of the *Occupational Therapy Code of Ethics and Ethics Standards* is the expectation that occupational therapy practitioners shall provide services that are within their scope of practice. Principle 5 reminds that the practitioner is responsible for "maintaining high standards and continuing competence in practice, education, and research by participating in professional development and educational activities to improve and update knowledge and skills." (AOTA, 2010, p. S23)

The Specialty Certification program embodies these ethical principles by offering applicants a way to document and reflect on professional development in which they have engaged, as well as determine future learning needs and plan subsequent professional development activities that will enhance their practice.

### Reference

American Occupational Therapy Association. (2010). Occupational therapy code of ethics and ethics standards. *American Journal of Occupational Therapy*, *64*, S17–S26. http://dx.doi.org/10.5014/ajot.2010.64S17

### Eligibility

- Professional degree in occupational therapy
- Certified or licensed by and in good standing with an AOTA-recognized credentialing or regulatory body
- Minimum of 2,000 hours[1] as an occupational therapist
- Minimum of 600 hours *delivering* occupational therapy services in the certification area to clients (person, organization, or populations) in the past 5 calendar years.[1, 2, 3]
- Verification of employment.

[1] Experience and service delivery hours must be at the level for which certification is sought. For example, applicants seeking certification at the occupational therapist level must have accumulated the necessary hours as an occupational therapist, not as an occupational therapy assistant or other type of professional.

[2] One foundation of the Low Vision Specialty Certification is that *initial* certification is considered to be practice based. That does not mean that managers, researchers, and faculty cannot apply. However, it does mean that applicants need to have at least 600 actual service delivery hours in the certification area. It is important to note that, while faculty may apply for certification, students in occupational therapy academic programs are not considered clients. Teaching that does not include service delivery with actual recipients of occupational therapy services does not count toward these 600 hours.

[3] Service delivery may be paid or voluntary.

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### Submission Deadlines and Review Period

- Applications will be accepted in **June** and **December** of each year for all certifications. Upcoming deadlines will be listed at www.aota.org/certification.
- Applications are peer-reviewed and processed over a 4-month period following the application deadline. Review for June applications occurs July to October; review for December applications occurs January to April.
- Applications are confirmed as Approved, Denied, or Clarification Needed. Applications that require minimal clarification will be processed with no additional fee. Applications that require clarification significant enough that the content of the application may be altered will be charged an additional $100 processing fee.

### Application Fee

Specialty Certification: $375.00 (nonrefundable)

Applicants must be AOTA members at the time of application and at the time certification is granted. Membership is not required to maintain certification once granted, except at the time of renewal.

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# LOW VISION APPLICATION
## Part A. Applicant Information

Please complete the following information.

### APPLICANT INFORMATION

AOTA Member ID _____

Name (*Last*, *First*, *MI*) _____

Credentials _____

Primary E-mail _____

Home Address _____

City _____ State _____ ZIP _____

Home Phone _____ Work Phone _____

**ACADEMIC BACKGROUND** List up to 4 degrees.

| University/College Name | Year Graduated | Degree Received |
|---|---|---|
| | | Select One |
| | | Select One |
| | | Select One |
| | | Select One |

Year of *initial* certification by NBCOT _____

**CURRENT LICENSURE** If not required by state, please mark "n/a."

| State(s) Licensed | License Number(s) | Expiration Date |
|---|---|---|
| | | |
| | | |
| | | |
| | | |

If more than 4, please list additional here. _____

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**OTHER CERTIFICATIONS**

| Certifying Agency | Credential Awarded, If Any | Date of Initial Certification | Certification Expiration Date |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

If more than 4, please list additional here.

**PROFESSIONAL MEMBERSHIPS**

| Organization Name | Organization's Focus/Mission | Dates of Membership |
|---|---|---|
| | | |
| | | |
| | | |
| | | |

If more than 4, please list additional here.

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**EMPLOYMENT—CURRENT** Primary

| Employer Name | | | | | |
|---|---|---|---|---|---|
| Dates with Employer | | | | | |
| Current Position or Title | | | | | |
| Employer Address | | | | | |
| City | | State | | ZIP | |

***Type of Setting***

- ☐ Academic Institution
- ☐ Community-Based Setting
- ☐ Government—Federal
- ☐ Government—Local, State
- ☐ Home Health Agency
- ☐ Long-term Care Facility/SNF
- ☐ Hospital Setting
- ☐ Military
- ☐ Non-profit Agency
- ☐ Private Industry
- ☐ Private Practice
- ☐ Rehab Facility
- ☐ School System
- ☐ Other (please specify): _____

***Clients Served***

Please identify the populations served at this setting on which this application is based.

| |
|---|
| |

**EMPLOYMENT – CURRENT** Secondary, if applicable

| Employer Name | | | | | |
|---|---|---|---|---|---|
| Dates With Employer | | | | | |
| Current Position or Title | | | | | |
| Employer Address | | | | | |
| City | | State | | ZIP | |

***Type of Setting***

- ☐ Academic Institution
- ☐ Community-Based Setting
- ☐ Government—Federal
- ☐ Government—Local, State
- ☐ Home Health Agency
- ☐ Long-term Care Facility/SNF
- ☐ Hospital Setting
- ☐ Military
- ☐ Non-profit Agency
- ☐ Private Industry
- ☐ Private Practice
- ☐ Rehab Facility
- ☐ School System
- ☐ Other (please specify): _____

***Clients Served***

Please identify the populations served at this setting on which this application is based.

| |
|---|
| |

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**EMPLOYMENT—PAST**
If there are employers in the past 5 years other than those listed above, please identify below.

| Previous Employer Name | State | Dates With Previous Employer |
|---|---|---|
| | | |
| | | |
| | | |
| | | |

**VERIFICATION OF EMPLOYMENT/VOLUNTEER SERVICE**

An employment/volunteer verification form is required to provide third-party verification of the required hours (see next page). Applicants may submit as many forms as needed to verify the required hours, and duplication of the form is acceptable if needed for more than one employer.

> **Instructions for submitting Verification Form**: Print the form and have employers(s) complete. Include the form as a scanned document as the first page(s) of either the application or evidence file.

**Tracking Hours—**It is up to applicants how to track the specifics of their service delivery. We ask only for the employment verification form(s) to be submitted, so be sure that whoever is verifying the information feels comfortable and ethical with whatever tracking system is used.

**Self-Employed—**Because private practice takes on many different forms, applicants have varying ways in which to handle employment verification. Examples of who might verify the form include

- Administrator for a company/organization that contracted with the private practitioner for services
- Referral source
- Business partner or co-owner
- Accountant for the practice.

If none of the options listed above fit an applicant's situation, and the applicant has an alternative source for verification to use, the applicant may forward that information for review and approval to prodev@aota.org prior to submitting an application.

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# AOTA SPECIALTY CERTIFICATION
## Employment/Volunteer Verification Form

***Employer:***

- You are being asked to verify employment or delivery of occupational therapy services for someone who is applying for Specialty Certification by the American Occupational Therapy Association (AOTA).
- Please complete all sections of this form and **return it to the applicant** so that it can be included in his or her application portfolio.
- If you have questions, please contact AOTA at prodev@aota.org or (301) 652-6611, ext. 2838. Thank you for your assistance!

***Applicant:***

- Submit only as many forms as needed to verify the required hours of occupational therapy experience. Duplication of the form is acceptable if more than one employer is completing the form.
- The form must be submitted as the first page(s) of the electronic portfolio of scanned evidence (e.g., portable document format [PDF]) that is submitted in support of the application. The application will not be accepted if materials are submitted separately.

Applicant Name

**Certification Sought**

☐ Driving & Community Mobility
☐ Environmental Modification
☐ Feeding, Eating, Swallowing
☐ Low Vision
☐ School Systems

Name of Facility/Company/Organization

City

State

Applicant Start Date

Applicant End Date

Employment Type:
☐ Full-time
☐ Part-time
☐ Contract/PRN
☐ Volunteer

**PART A**

*Experience as an occupational therapist or occupational therapy assistant. May include direct intervention, supervision, teaching, consultation, administration, case or care management, community programming, or research.*

This employment/volunteer service represents _____ hours within the past 5 calendar years toward the **2,000 hours** required as an occupational therapist or occupational therapy assistant.

**PART B**

*Experience delivering occupational therapy services to clients (persons, populations, or groups) that are specific to the certification area. Students in OT or OTA academic programs are not considered clients.*

This employment/volunteer service represents _____ hours within the past 5 calendar years toward the **600 hours** requirement for delivering occupational therapy services to clients in the certification area.

Name of Person Completing Form (*please print)*

Signature

Job Title

Phone Number

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# LOW VISION APPLICATION
# PART B. Reflective Portfolio

Occupational therapy practitioners applying for SCLV certification must practice in low vision rehabilitation. The National Eye Institute defines low vision as a condition that limits the person's ability to complete everyday activities and cannot be corrected by lenses, medical intervention, or surgery. While this definition includes blindness, most persons with low vision have some useable vision and are able to complete daily activities with the help of magnifiers and assistive technology.

Low vision is characterized by impairments in acuity and/or visual field and include:

- Age-related eye diseases including macular degeneration, diabetic retinopathy and glaucoma are the leading causes of low vision in the United States.
- Impairments in acuity and visual field caused by brain injuries are also considered to be low vision conditions when they result in long-term conditions. These visual impairments include hemianopsia and other visual field deficits, nystagmus, visual vestibular disorders that reduce gaze stability, optic nerve damage, focusing impairments from cranial nerve injuries, brainstem injury or damage to eye structures, and light sensitivity and reduced dark-light adaptation.

Low vision does not include:

- Cognitive disorders that result from brain injury–including neglect and other attention disorders–and dyslexia and other reading disorders are not included in the definition of low vision.
- Perceptual and reading disorders that are treated through the use of vision therapy.

Practitioners applying for Specialty Certification in Low Vision should

- Have experience in working with adults, ages 18 years or older, who have deficiencies in acuity and visual field as a result of eye disease/conditions or brain injury.
- Have experience and expertise in the use of optical devices and assistive technology to enhance vision.
- Have a history of collaborating with optometrists, ophthalmologists and other vision rehabilitation professionals.
- Demonstrate breadth in their experience so that it is not limited to working only with clients with a single condition (e.g., visual-vestibular dysfunction or focusing deficiencies).

AOTA certification programs focus on *continuing competence*, or the building of capacity to meet identified criteria. Continuing competence is a component of ongoing professional development or lifelong learning. Applicants are expected to engage in a process of *self-appraisal* relative to the identified criteria. This involves the deliberate selection of the best supporting evidence that demonstrates applicant's potential for meeting identified criteria and answers the question, What evidence would best indicate that I meet the criteria for specialized practice?

Submit only 1 activity for each criterion. Complete the required professional development activity form for each activity being submitted.

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### Items to Submit

In addition to submitting this fillable application form, applicants must create a single separate file (e.g., PDF) of the

1. Employment/Volunteer verification form
2. 12 activity forms – 1 for each criterion
3. Any additional evidence as required on the activity forms.

***Guidelines**:*

- For each of the 12 criteria below, choose only 1 of the available options to submit as part of the application.
- Activities must have occurred within the 5 years prior to submitting the application.
- An activity may not be used to meet more than 1 criterion. For example, a formal learning activity engaged in for Criterion 1 may not also be used for Criterion 3.

The following page outlines the professional development criteria required for low vision certification. The criteria are based on the 5 *AOTA Standards for Continuing Competence:* Knowledge, Critical Reasoning, Interpersonal Skills, Performance Skills, and Ethical Practice (AOTA, 2010).

### Reference

American Occupational Therapy Association. (2010). Standards for continuing competence. *American Journal of Occupational Therapy*, *64*, S103–S105. http://dx.doi.org/10.5014/ajot.2010.64S103

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## Reflective Portfolio—Professional Development Activities

### CRITERION 1

**Knowledge:** Diagnostic Considerations—*Demonstrates knowledge of primary and secondary conditions that impact occupational engagement related to low vision.*

Select One

### CRITERION 2

**Knowledge:** Evaluation—*Demonstrates knowledge of relevant evidence specific to evaluation in low vision.*

Select One

### CRITERION 3

**Knowledge:** Intervention—*Demonstrates knowledge of relevant evidence specific to intervention in low vision.*

Select One

### CRITERION 4

**Knowledge:** Regulation and Payers—*Demonstrates knowledge of laws and regulations relevant to low vision, including payer sources.*

Select One

### CRITERION 5

**Evaluation: Performance Skills—***Administers standardized assessments specific to low vision, consistently integrating clinical observations throughout the evaluation process.*

Select One

### CRITERION 6

**Evaluation: Critical Reasoning—***Synthesizes and interprets assessment data and clinical observations related to the client, context, and performance in low vision.*

Select One

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**CRITERION 7**

**Intervention: Performance Skills—***Performs interventions that are unique to low vision while integrating impact of varying client factors and contexts.*

Select One

**CRITERION 8**

**Intervention: Critical Reasoning—***Selects, plans, and modifies interventions in low vision based on evidence and evaluation data.*

Select One

**CRITERION 9**

**Psychosocial Critical Reasoning—***Recognizes immediate and long-term implications of psychosocial issues related to conditions found in clients with low vision and modifies therapeutic approach and occupational therapy service delivery accordingly.*

Select One

**CRITERION 10—**This criterion is addressed directly in this application in 3 parts over the next 6 pages.

**Ethical Practice—***Identifies ethical implications associated with the delivery of services in low vision and articulates a process for navigating through identified issues.*

**CRITERION 11**

**Establishes Networks—***Establishes and collaborates with referral sources and stakeholders to help the client and relevant others achieve outcomes that support health and participation in the area of low vision.*

Select One

**CRITERION 12**

**Advocating for Change—***Influences services for clients (person, organization, or population) in low vision through independent or collaborative education or advocacy activities.*

Select One

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## **ETHICAL PRACTICE SCENARIO** (Part 1 of 3)—Client Based

**Criterion 10**—Ethical Practice: **Client-Based**

**Identifies ethical implications associated with the delivery of services in low vision and articulates a process for navigating through identified issues.**

**Guidelines**

- The applicant identifies ethical implications associated with the delivery of services and articulates a process for navigating through the identified issues.
- The applicant shall review the AOTA Code of Ethics and Ethics Standards and align the dilemma with the ethical principle(s) that is/are challenged.

**Ethical Scenarios**

**Scenario #1**

A client with a homonymous hemianopsia learns about a computerized program that promises to restore some vision to the blind field. The technology is new and its efficacy has not been independently evaluated. The program costs $6,000 and requires 8 weeks of daily practice. It is not covered by medical insurance and full payment is required up front. The client has limited income and must borrow the money for the program. The client plans to stop therapy and focus exclusively on the program. He asks for the OT's opinion.

**Scenario #2**

A client can't achieve his reading goals using a lens magnifier. The OT practitioner feels that a CCTV would enable him to meet the goal but the client has limited income and would probably not be able to purchase the device. The practitioner discusses showing the client a CCTV with the referring optometrist. The optometrist is opposed, stating there is no point showing the client something he cannot afford.

**Scenario #3**

A client has severe vision impairment from AMD. The client has many limitations in basic and I-ADLS because of her vision loss. The Medicare HMO will cover 3 therapy sessions. The client's daughter wants the practitioner to focus only on teaching her to view eccentrically and use a magnifier to read books. The client expresses significant frustration with her ADL limitations but defers to her daughter because she knows best.

1. To which scenario are you responding?

   Select One

2. From the AOTA Code of Ethics and Ethics Standards, which ethical principle(s) has/have been challenged in this scenario? *Select the top ethical principle(s) that apply, up to a maximum of 3.*

   ☐ 1. Beneficence
   ☐ 2. Non-maleficence
   ☐ 3. Autonomy, Confidentiality
   ☐ 4. Social Justice
   ☐ 5. Procedural Justice
   ☐ 6. Veracity
   ☐ 7. Fidelity

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3. Describe how you would apply the ethical principles identified above to guide you toward a resolution for the concern noted. *(average word guideline—500)*

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## **ETHICAL PRACTICE SCENARIO** (Part 2 of 3)—Fiscal & Regulatory

**Criterion 10**—Ethical Practice: **Fiscal & Regulatory**

**Identifies ethical implications associated with the delivery of services in low vision and articulates a process for navigating through identified issues.**

**Guidelines**

- The applicant identifies ethical implications associated with the delivery of services and articulates a process for navigating through the identified issues.
- The applicant shall review the AOTA Code of Ethics and Ethics Standards and align the dilemma with the ethical principle(s) that is/are challenged.

**Ethical Scenarios**

**Scenario #4**

An OT works in an outpatient program. A client reports that she has a CCTV but is unable to operate it to read her medication bottles. The program does not have a CCTV so the OT scheduled a home visit to instruct the client on using the CCTV. After the session was scheduled the OT was informed that the program didn't have liability coverage for home visits. The client asked the OT to come anyway and she would pay for the session.

**Scenario #5**

A client receiving home health (HH) is referred to an OT who has a private low vision practice. Medicare will not pay for OT services outside the HH agency as long as the client is receiving HH. The OT learns that the primary hurdle to discharging the client from HH is her inability to safely complete wound care and medication management because of her vision impairment. The HH agency OT does not know how to address the client's low vision.

**Scenario #6**

An OT works in a university-affiliated program that completes clinical research. A professor developed a reading intervention that was radically different from the current evidence based standard of care. The professor wants to collect pilot data on the intervention to use for a grant application. The OT is instructed to use this intervention only with all clients and to bill the client's medical insurance.

4. To which scenario are you responding?

Select One

5. From the AOTA Code of Ethics and Ethics Standards, which ethical principle(s) has/have been challenged in this scenario? *Select the top ethical principle(s) that apply, up to a maximum of 3.*

- ☐ 1. Beneficence
- ☐ 2. Non-maleficence
- ☐ 3. Autonomy, Confidentiality
- ☐ 4. Social Justice
- ☐ 5. Procedural Justice
- ☐ 6. Veracity
- ☐ 7. Fidelity

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6. Describe how you would apply the ethical principles identified above to guide you toward a resolution for the concern noted. *(average word guideline—500)*

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## **ETHICAL PRACTICE SCENARIO** (Part 3 of 3)—Scope of Practice

**Criterion 10**—Ethical Practice: **Scope of Practice**

**Identifies ethical implications associated with the delivery of services in low vision and articulates a process for navigating through identified issues.**

**Guidelines**

- The applicant identifies ethical implications associated with the delivery of services and articulates a process for navigating through the identified issues.
- The applicant shall review the AOTA Code of Ethics and Ethics Standards and align the dilemma with the ethical principle(s) that is/are challenged.

**Ethical Scenarios**

| **Scenario #7** |
|---|
| An OT is asked to develop a vision therapy program to improve binocular function in adults with brain injury. The OT has no experience or training in treating oculomotor deficiencies. The OT also knows that vision therapy is within the scope of practice of optometry and that medical insurance does not cover vision therapy. |
| **Scenario #8** |
| An OT practitioner provides services in a region with limited low vision rehabilitation resources. An optometrist who refers to the practitioner routinely wants the practitioner to provide long cane training to several of his patients. |
| **Scenario #9** |
| A client with moderate visual impairment manages a business located in an area with several restaurants within walking distance. The client's goal is to safely navigate the streets to meet friends for lunch. She reports knowing the vicinity "like the back of her hand" but fears falling or stepping out in front of a car. There are no orientation and mobility services available in her part of the state. |

7. To which scenario are you responding?

   Select One

8. From the AOTA Code of Ethics and Ethics Standards, which ethical principle(s) has/have been challenged in this scenario? *Select the top ethical principle(s) that apply, up to a maximum of 3.*

   - ☐ 1. Beneficence
   - ☐ 2. Non-maleficence
   - ☐ 3. Autonomy, Confidentiality
   - ☐ 4. Social Justice
   - ☐ 5. Procedural Justice
   - ☐ 6. Veracity
   - ☐ 7. Fidelity

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9. Describe how you would apply the ethical principles identified above to guide you toward a resolution for the concern noted. *(average word guideline—500)*

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# LOW VISION APPLICATION
## Part C. Self-Assessment

Self-assessment is a formative and dynamic process through which occupational therapy practitioners identify goals for professional development and monitor progress toward goals (Moyers, 2010). Self-assessment answers the question, "What can I do to prepare or increase my capacity for the competency demands of the future?" In the Specialty Certification process applicants will use self-assessment to consider all that they have learned thus far in their achievement of the certification criteria. This self-understanding combined with ideas about the way practice is changing will help applicants determine what they should learn next.

**Reference**

Moyers, P. A. (2010). Competence and professional development. In K. Sladyk, K. Jacobs, & N. MacRae (Eds.), *Occupational therapy essentials for clinical competence* (pp. 475-484). Thorofare, NJ: Slack.

Guidelines

- Develop the self-assessment by answering the questions below in a single narrative as they relate to the certification criteria collectively. Use examples to support the answers.
- The average answer is 1,350–3,000 words.

Self-Assessment Questions:

- *Describe your current practice in relation to this certification and how you envision your practice area changing in the future.*
- *Having gone through the certification process, what have you discovered that you want to learn more about in relation to the competencies required for this certification area?*

***Applicant's Self-Assessment***

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# LOW VISION APPLICATION
## Part D. Professional Development Plan

Professional development planning in the AOTA certification process requires that applicants develop a plan for learning for the next 5 years related to the certification criteria.

Depending on personal style or the specific criterion selected, goals might emphasize *outcome*, *performance*, or *process*; but it is possible for a goal to include a combination of these elements:

- Outcome—what are you trying to achieve?
- Performance—what task will you complete?
- Process—what specific actions will you take?

### Guidelines

Each goal must include the following qualities:

- It must be **relevant** to the identified criterion. For example, an applicant's goal to "learn a new assessment tool" would not be relevant to a criterion that deals with "advancing access to OT services."
- It must be **measureable.** There must be an objective way for the applicant to demonstrate a change toward meeting the goal in the next 5 years.
- It must be **controllable** by the applicant. The applicant should be able to meet the goal regardless of the external environment. For example, a goal to "Discharge all patients safely to home" is not something than can be realistically controlled by the applicant.

### Parameters

- Establish 3 professional development goals.
- Do not develop more than 1 goal for a single criterion; 3 different criteria must be represented in the application.
- For each goal, include: its **application to practice**, **success criteria**, **strategies**, and **target date** for completion.
- Write goals that are unique and not simply a reiteration of the criterion.
- Goals should be relevant to your practice.
- Develop goals that represent your own professional development, not the development of others (e.g., students, other staff).
- Goals should be met within the coming 5 years prior to certification renewal.

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## PROFESSIONAL DEVELOPMENT GOAL—EXAMPLE 1

Criterion: ***Knowledge:*** *Evaluation—Demonstrates knowledge of relevant evidence specific to evaluation in low vision.*

***Applicant's Goal:***

I will improve the quality of my evaluations—and subsequently my interventions—by adding one new evidence-based assessment to my repertoire for use with clients with neurological impairment. I will perform a literature review of evidence-based assessments, investigate cost, explore training opportunities, and seek a mentor to ensure I am able to implement the assessment appropriately. Target date: June 20XX.

Necessary components included in above goal:

- **Application to Practice:** I will improve the quality of my evaluations—and subsequently my interventions—
- **Success Criteria:** by adding one new evidence-based assessment to my repertoire for use with clients with neurological impairment.
- **Strategies:** I will perform a literature review of evidence-based assessments, investigate cost, explore training opportunities, and seek a mentor to ensure I am able to implement the assessment appropriately.
- **Target Date:** June 20XX

## PROFESSIONAL DEVELOPMENT GOAL—EXAMPLE 2

Criterion: ***Establishes Networks****—Establishes and collaborates with referral sources and stakeholders to help the client and relevant others achieve outcomes that support health and participation in the area of low vision.*

***Applicant's Goal:***

I will increase my networking with other low vision occupational therapy practitioners and expand relevant connections for my practice by hosting monthly roundtable discussions. To facilitate this, I will use the AOTA Evidence Exchange to guide identification of relevant discussion topics or questions to be answered. I will advertise to local practitioners, provide a venue, facilitate the roundtable discussions, and collect participant feedback for the purposes of shaping future discussions. Target dates: Monthly from September 20XX through May 20XX.

Necessary components included in above goal:

- **Application to Practice:** I will increase my networking with other low vision occupational therapy practitioners and expand relevant connections for my practice
- **Success Criteria:** by hosting monthly roundtable discussions.
- **Strategies:** I will use the AOTA Evidence Exchange to guide identification of relevant discussion topics or questions to be answered. I will advertise to local practitioners, provide a venue, facilitate the roundtable discussions, and collect participant feedback for the purposes of shaping future discussions.
- **Target Date:** Monthly from September 20XX through May 20XX

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**Professional Development Goal 1**
*To which criterion does this goal apply?*

Select One

***Applicant's Goal 1:***

**Professional Development Goal 2**
*To which criterion does this goal apply?*

Select One

***Applicant's Goal 2:***

**Professional Development Goal 3**
*To which criterion does this goal apply?*

Select One

***Applicant's Goal 3:***

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# LOW VISION APPLICATION

Checklist and Attestation

## Checklist of Application Items

- ☐ Applicant Information
- ☐ Employment/Volunteer Verification Form(s)
- ☐ Reflective Portfolio—Criterion 1
- ☐ Reflective Portfolio—Criterion 2
- ☐ Reflective Portfolio—Criterion 3
- ☐ Reflective Portfolio—Criterion 4
- ☐ Reflective Portfolio—Criterion 5
- ☐ Reflective Portfolio—Criterion 6
- ☐ Reflective Portfolio—Criterion 7
- ☐ Reflective Portfolio—Criterion 8
- ☐ Reflective Portfolio—Criterion 9
- ☐ Reflective Portfolio—Criterion 10
- ☐ Reflective Portfolio—Criterion 11
- ☐ Reflective Portfolio—Criterion 12
- ☐ Self-Assessment
- ☐ Professional Development Goal 1
- ☐ Professional Development Goal 2
- ☐ Professional Development Goal 3

## Item(s) to Submit

**1.** The following should be uploaded by the application deadline to the following URL: https://www.filesdirect.com/AOTACertification:

**A.** Certification Application (this document)

**B.** Single combined file (e.g., .pdf file) that includes

- Employment/Volunteer Verification Form
- All professional activity development forms
- Any additional evidence as required by a particular activity (e.g., CE certificates)

**2.** Application fee of $375 (submitted separately from application):

- **Credit card**: Call (800) SAY-AOTA (800-729-2882) extension 1708
  Monday- Friday between 9:00-5:00 Eastern to pay by phone
- **Check**: Mail check on or before the application deadline to
  AOTA—Attn: Certification
  4720 Montgomery Lane
  Bethesda, MD 20814-3449

## Applicant Attestation

I hereby attest that the information provided in this application is my own and that I have complied with all *Occupational Therapy Code of Ethics and Ethics Standards*, including Beneficence; Nonmaleficence; Autonomy, Confidentiality; Social Justice; Procedural Justice; Veracity; and Fidelity. If granted certification, I will not use my credential to represent myself to others beyond the level for which I am qualified.

_____

Signature *(electronic signature acceptable)*

_____

Date

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# APPENDIX

## AOTA Specialty Certification in LOW VISION

### References to Support Criteria

**KNOWLEDGE**


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**SERVICE DELIVERY** (broader field of how LVR is provided in the United States, OT role, etc.)

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