Identifying New Roles for Occupational Therapy Professionals in Primary Care

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The health care delivery system is expected to undergo dramatic changes in the coming years as a result of the need to control public and private expenditures on health care services. There is also increased recognition that patient outcomes and experiences can and should be improved. These goals have been coined the “Triple Aim” by the Institute for Healthcare Improvement. A key strategy to achieve the Triple Aim involves transforming and enhancing primary care service delivery, so that interprofessional teams of providers work together with patients to coordinate all their care. AOTA believes occupational therapy professionals can make a valuable contribution to these emerging primary care teams.

To identify the best opportunities for occupational therapy professionals in primary care, AOTA held a Forum on Interprofessional Team-Based Care over 2 days in June. More than 30 experts from around the country were brought together representing a wide range of health care professions and organizations. Through small group discussions, participants at the Forum—including physicians, nurse practitioners, physician assistants, health care executives, government agency representatives, and occupational therapy clinicians and academicians—identified key factors driving primary care teams, and the barriers OT faces in playing a key role in interprofessional, coordinated, patient-centered primary care.

Factors discussed at the Forum included: an aging population; the rapid rise in chronic conditions such as diabetes; technology for delivering services through telehealth; and the need to aid patients in understanding their health status and engaging in self-management activities; competition among health professions for space on primary care teams; and a growing demand for research related to the efficacy of different providers on interprofessional teams.

Among the identified barriers that occupational therapy may have to overcome to assert its role on primary care teams: the need for academic training that prepares practitioners for a potentially more generalist as opposed to specialist role; the need for research that demonstrates outcomes supporting the value of OT in primary care; complex, changing regulatory and reimbursement systems; and the difficulties in promoting the value of OT to physicians and other stakeholders who are leading and developing primary care teams, as well as to consumers.

As one health care executive noted, “You have to come up with a valid reason for why you should be in the room instead of someone else. At the end of the day, people respond to data. You need to show them a rational reason for why you should be on the team.”

A presentation to the Forum’s participants about a family medicine clinic at the University of Southern California that places occupational therapy students and professionals on primary care teams showcased the benefits OT can provide when working with other professionals to provide primary care. Forum participants agreed that developing and promoting other such examples is essential to demonstrating the value of the profession’s participation on primary care teams.

“We see this as a step in an ongoing process as to how occupational therapy can best contribute to our consumers,” AOTA Executive Director Fred Somers noted. “One of our central goals with this Forum was to utilize a diverse group of thought leaders, and we hope this is the start of an ongoing collaboration among all the professions here.”

AOTA is currently engaged in a process to identify the key findings from the Forum that will guide its next steps in leading the profession into the future.

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