

Summary of ALC Feedback on: Entry-level competencies in value based reimbursement models

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Background

At the Spring 2019 ALC meeting AOTA staff presented on the transition of occupational therapy and the health systems from volume based incentives to value based incentives. As a part of this presentation, 4 challenges were identified. At the conclusion, attendees were asked to complete a worksheet to draft competencies and teaching/learning strategies for each of the challenges in small groups. Groups were also encouraged to submit additional challenges that may need to be addressed for entry level practitioners. This document provides a summary of the groups' responses. For a limited time, the slide deck can be downloaded at <http://bit.ly/2XGkyPO>.

Challenges

Challenges Presented by AOTA Staff

1. Articulating the distinct value of occupational therapy to the interprofessional team.
2. Occupational therapy practitioners identifying and using quality measures in their health system.
3. Connecting the evaluations, interventions, and outcomes of individual clients with the population or organization level measures. Being able to use quality measure scores to inform practice and being able to discuss how practice relates back to quality measures.
4. Completing consistent and comprehensive evaluations and interventions.

Additional challenges identified by participants

Groups that completed the worksheet identified 170 additional challenges faced by entry level practitioners. Several themes emerged and are identified are below. The number in parentheses is the number submissions that map to the theme.

1. Knowledge translation including evidence based practice and translating knowledge gained in the classroom to clinical practice (22)
2. Dissonance between new graduates' current knowledge and experienced occupational therapy practitioners' practices (16)
3. Understanding and preparing for new payment systems and reimbursement shifts (13)
4. Documenting the value of occupational therapy including electronic health record compatibility with the needs of occupational therapy documentation (12)
5. Inter-professional practice (11)
6. Issues related to the scope of occupational therapy and potential or real encroachment by other disciplines (10)
7. The relationship and collaboration between occupational therapist and occupational therapy assistant (7)

Challenge #1: Articulating the Distinct Value of OT in Interprofessional Practice

Competency Drafts for Both OT & OTA

1. The student (or practitioner) will demonstrate the ability to articulate and advocate the distinct value of occupational therapy in collaborative environments by understanding the unique domain of occupational therapy, how it differs from other disciplines, and having the skills to effectively communicate in order to describe the unique role of OT both interprofessionally and intraprofessionally within a specific work setting including:
 - a. clarity of inclusion of evidence-informed assessments and interventions
 - b. client-centered and occupation-based interventions
 - c. utilization of occupation based evaluations and assessment
 - d. the clinical reasoning behind occupation-based interventions (“the why”)
 - e. expected outcomes of occupational therapy
 - f. value-based documentation, in order to support optimal patient outcomes informed by systems level quality measures.
2. The student (or practitioner) will demonstrate the distinct value of occupational therapy in documentation
 - a. by providing evidence based clinically relevant rationale for performance of high value / low value occupations
 - b. by describing the impact of disease and disability on the client's occupational performance
 - c. by documenting outcomes that result in increased participation in occupation and improved quality of life.
 - d. by differentiating the roles between different services/describing what is unique about OT (e.g. functional cognition).
3. The student will demonstrate the ability to articulate the distinct value of occupational therapy to an interprofessional team in a confident, competent professional manner that asserts OTs place at the table and to build the foundation for a team approach to health with people, communities and populations
 - a. by sharing the roles and contributions of OT
 - b. by comparing and contrasting the role of OT with the roles and contributions of other team members
 - c. by articulating how OT complements other professions
 - d. by identifying the areas of occupation and providing examples that are appropriate for different settings
 - e. by articulating how OT intervention can support achievement of goals identified as important by clients and the treatment team

4. The student (or practitioner) will demonstrate the ability to articulate the distinct value of occupational therapy to payers (and other reviewers)
 - a. by using language consistent with the Framework
 - b. by always connecting therapy activities to functional outcomes, health, and occupational performance in documentation
 - c. by consistently identifying oneself as an OT practitioner
 - d. by reviewing goals and purpose of each session
 - e. by actively and confidently articulating the core values of occupational therapy to various stakeholders
5. The student (or practitioner) will demonstrate the ability to articulate the distinct value of occupational therapy to an interprofessional team
 - a. by defining the purpose and value of OT across settings and lifespans
 - b. by ensuring that, throughout didactic coursework and fieldwork experiences, students are meeting the ACOTE advocacy standard of educating various agencies & populations of the distinct value of OT
 - c. by ensuring students and practitioners are able to ethically problem-solve appropriate provision of skilled services to ensure high-quality care within the OT scope and domain of practice
6. OT: When developing intervention plans, the student (or practitioner) will include a justification for why OT is uniquely qualified to provide this service.
 OTA: When identifying interventions the student (or practitioner) will include a justification for why OT is uniquely qualified to provide this service.

Learning Strategies

Classroom Activities

- Recognizing that quality measures may help to bring us back to our roots of occupation as a means and ends, challenge students to translate the definition and role of OT at the client level. Actively engage in a curriculum that develops the skills necessary to articulate the theory and framework that promotes the power of occupation to influence health and wellness.
- Students must be able to verbally advocate for their stated positions on the value of OT in class or lab to practice having a professional dialogue and making the case for the value of OT. (May include challenges on duplications of services, efficiency, less skilled practitioners, etc.)
- Compare and contrast roles of other disciplines in each of those settings including the unique role of OT and how and when OT is the optimal agent of change. Compare and contrast scope of practices in each of those settings.
- Create portfolios that includes: interviews with clients/caregivers/families to learn their priorities. Include evidence informed practice, client centered care, occupation based practice, theories/frames of reference, advocacy for future of OT, what distinguishes OT from other members of team.
- Experiences can be incorporated into rubrics for small assignments and fieldwork assignments. Explain the distinct value of OT at the start of OT sessions and for intervention case studies. (As

opposed to immediately beginning the evaluation/assessment.) This can be a time to educate clients on the distinct value (possibly while completing the occupational profile). Current high priority opportunities include: school systems (beyond handwriting); qualified mental health professional status.

- Student reflection on experience of occupations as intervention to grade them as high value versus low value - experience and share what they would change to advance low value interventions to high value interventions. Find literature that support alternative strategies.
- The student will demonstrate capacity to deliver targeted information during formal presentations to faculty educators and IPE peer group. The student will explore roles and advocate for professional presence in varied settings across populations.
- Complete a written appeal letter to justify occupational therapy services. Simulation lab experiences. Identify documentation skills and professional language that reflect value added. Assignments should be ongoing throughout didactic coursework.
- Learning to communicate via programs such as Team Steps (AHRQ), courses/topics that can be taught across disciplines (e.g. specific health problems)
- Develop an "elevator speech" 5 minutes in length for interprofessional team members including case managers, program directors, other professionals (e.g., social work, nursing, physicians) and also for clients.
- Include frequent opportunities for students to document in an electronic health record (EHR). Provide opportunity for critiquing an EHR and looking for where OT can inform development to better reflect value of OT or where OT can put in occupational performance into the EHR system. Practice documentation with timely feedback & repeated experiences to refine/reinforce skill.

Interprofessional Education (IPE)

- Interprofessional grand rounds clinical simulation and case study activities with an embedded interprofessional component.
- IPE activity comparing observations/ documentation of same client experience with all professions documenting in their voice. Ask students/practitioners to recognize their unique contributions and to reflect if they did not identify unique OT value.
- IPE documentation quiz: read actual documentation and ask which profession wrote that?
- IPE simulation where students (@each level of education) must demonstrate the ability to meet this standard.

Simulation / Case Studies

- Teach didactic information about all the diverse roles on a team. Assess simulated client - first determine who will do what and then actually do the assessment of a simulated client where students have to articulate what OT is and how this is distinct from other professionals.
- Case studies advance in difficulty throughout the program.
- Role play emerging project or placement where the students are in the community and can express the distinct value to an entity that does not have OT and advocate to another

professional type why OT is needed on this team for a client. For example, going to the MD, Nurse, PA to discuss what can OT bring to the patients care (e.g. how our teaching of performance patterns can be important in the initial education of medical complications)

- List of several clients and goals, student needs to prioritize who is seen, how much within course of week and support the recommendations (with the understanding that limited peer reviewed dose information is available). Include Profile Template in all case studies and documentation activities

Fieldwork / Clinic / Community

- Discussed how to incorporate distinct value into fieldwork assignments (presenting to a small group). Also discussed the integration of distinct value of OT into IPE experiences. Student competitions could be utilized to address these challenges.
- Add an item to the fieldwork data form asking the FW educator to summarize the distinct value of OT at the site. Add an item to the SEFWE asking if the student received this information.
- Increase discussion between programs and sites in what we consider our distinct value - bridge the disconnect of what we teach and what is done in practice.
- Reflective case studies of interventions on FW (focusing on role of OT to promote health, function, etc.); follow this with facilitated discussion/ reflection through "what if" questions to generalize concepts to other clients
- Assign students to interview practitioners to write and analyze the practitioner experience of value and compare the classroom education to the practitioners' experiences
- Students interact with a client, explain our distinct value - then have the client express to another individual what they did and why they did it - hear from the client what they learned and why it was important - did the student instill that in the client.
- Faculty-led experiences to practice client interactions with faculty support (in community settings)---- this allows faculty to intentionally craft the 'message' students see during foundational learning (we discussed the challenge of Level 1s with OTs who don't do the ideal and how that can impact students).
- Identify external opportunities to promote the OT-OTA collaboration with a focus on defining value of the collaboration. (e.g., practicing OTAs mentor/supervise OT students, collaborative fieldwork models, instruct OT and OTA students in the same group) Each practitioner should identify the other's value to the client and system.
- Advocacy assignment to advocate to another profession/student the value of OT and what OT contributes to the team (practice advocacy in classroom/school before get to clinic)

Challenge #2: Identifying and Using Quality Measures

Competency Drafts for Both OT & OTA

1. The student (or practitioner) will differentiate between assessment instruments (e.g., standardized tools used to assess changes or outcomes for individual clients), and process

measures (measures that identify if a particular action or practice occurs), and outcome measures (measures that calculate the rate of people who achieve a benchmark).

- a. By selecting, identifying, and administering the appropriate standardized tool for the individual client (pre and post treatment) specific to the functional deficits related to the diagnostic map.
 - b. By describing how a specific quality measure is calculated and interpreting the result.
 - c. By successfully administering the Section GG data elements required for CMS to calculate the self-care and mobility outcome measures.
2. The occupational therapy student (or practitioner) will be able to describe the use of quality measures in a specific setting and discuss how the quality measure can inform occupational therapy service delivery.
3. The occupational therapy student/ practitioner will be able to describe the relationship between quality measures and occupational performance by linking individual outcomes to quality measures across the OT process.
4. The occupational therapy student/ practitioner will be able to effectively integrate quality measures into evaluation and intervention planning.
 - a. By identifying quality measure performance of specific organizations (e.g. Medicare's Nursing Home Compare, Hospital Compare)
5. Students will identify the needs of their setting in terms of quality improvement initiatives, and describe how occupational therapy is essential as a member of the interprofessional team developing and implementing quality improvement projects.

Learning Strategies

- Early and consistent exposure to program development throughout program curricula.
- Application of quality measures during lab and practical experiences including on fieldwork education. Consider student's use of quality measures on FWPE rating area for Management of Occupational Therapy Services. This may require the education of clinical educators as well).
- Students will identify the quality measures/benchmarks for the setting, and then students will select and apply tools that show improvement that link to the quality measures/benchmarks to help the setting achieve higher quality benchmarks.
- Experience with the measure, such as assignments to train in the use of the data elements that make up the measure.
- Standardized patient simulation; clinical simulation lab activity and competency exam
- As a group, create a schematic/table/list of all disciplines in a setting and their contributions to a specific challenge presented (e.g., how can each discipline contribute to reducing the "New or worsening pressure ulcer" measure in a setting).
- Progressive learning strategies that transition student participation from group learning to individual application.
- Quality "mapping" for goal writing with linking patient goals to organizational quality outcomes that must be reported.
- Add the use of quality measures into treatment planning activities/ intervention plan assignment.

- Didactic information on how outcome measures are determined; case examples of impact of outcome measures; and written assignments.
- Simulated patients or case study process for application of evaluation tools. 2. Fieldwork opportunities to apply tool/instrument knowledge. 3. Exposure and use of to a variety of tools/instruments that are currently being used in therapy settings

Note: The vast majority of responses were in the “Both OT & OTA” category. Learning Strategies in OT only or OTA only were consistent with responses for “both”. Therefore, all learning strategies are presented under “Competency Drafts for Both OT and OTA”.

Challenge #3: Connecting the evaluation, intervention, and outcomes of individual clients to population outcomes

Competency Drafts for Both OT & OTA

1. The student (practitioner) will demonstrate the ability to connect individual clients and population outcomes by utilizing population outcome data (e.g., facility level quality measures, public health outcomes) to inform the screen, assessment, plan, and intervention across the continuum of care (e.g., student with autism engaging in classroom and playground activities).
 - a. by identifying at least one specific way that the evaluation, intervention, and outcome for an individual client is related to populations (e.g., quality measures such as readmission rates, public health measures)
 - b. by identifying at least one specific way that the student (or practitioner) used population level information or measures to inform a client’s evaluation, intervention, or outcomes (e.g., increased incidence of new or worsening pressure ulcers drives occupational therapy to be more sensitive to potentially at-risk clients).

Learning Strategies

- Identify purposeful activities that directed at client centered occupations that relate to improved population outcomes
- Collect data points during fieldwork experiences and link them to population outcomes. Discuss outcome measures based on reimbursement measures and engage in departmental data collection and analysis. Analyze data based on quality measurements.
- Program development through course and lab assignments
- Projects and course work with a specific policy focus including: advocating for occupational therapy; finding and interpreting policy.
- Experiential learning: practice writing legislators to share the occupational therapy lens and to advocate for clients; explain to another professional the value of OT.
- Case-based application in active learning groups, social stories, or social skills group training.

Competency Drafts for OTA

The OTA specific submissions were not meaningfully different than those for both "OT and OTA" and have been incorporated above.

Competency Drafts for OT

1. The student (or practitioner) will be able to articulate and describe how quality measures relate to population health challenges by
 - a. Identifying outcome measures that are used to measure population health challenges
 - b. Analyzing quality measure scores and apply the information to individual intervention plans
 - c. Tracking and analyzing individual outcomes on key quality measures within a designated population

Challenge #4: Evaluations & Interventions

Competency Drafts for Both OT & OTA

1. The student (or practitioner) will demonstrate the ability to competently utilize and implement an occupational profile with individuals across the lifespan and practice settings by completing a minimum of one AOTA Occupational Profile Template by the end of a face-to-face encounter with one client.
2. The student will demonstrate the ability to complete a comprehensive evaluation addressing the client's performance patterns (roles, routines and habits), ADLs, IADLs, functional cognition, vision/perception, safety, and fear of falling. The student (or practitioner) will use the evaluation to identify evidence-informed, client-driven, and occupation-based interventions by
 - a. By identifying the need for assessment
 - b. By choosing a valid & reliable, client appropriate instrument
 - c. By designing evidence-informed, occupation-based interventions for the client

Learning Strategies

- Teach collaboration between OTs and OTAs to gather data and evaluate the client holistically
- Simulation assessments, fieldwork assignments, case-studies, treatment session development, role-playing, standardized patients
- Provide students with templates and feedback for occupation-based, evidence based, client centered care.
- Case study (basic) providing the results of assessments and students are asked to employ clinical reasoning to explain what ones are appropriate and why. Scaffold the cases progressively to have students read or view a client's functional performance, then select the appropriate assessment, explain why, and administer the assessment.
 - From this, identify and describe what occupation based interventions, backed by evidence, would be appropriate
- Role play ways for students to communicate in a "professionally appropriate manner"

- Offer refresher course for FW educators in evidence-informed, client-centered, occupation based intervention and links to new payment systems.

Competency Drafts for OTA

1. Students will articulate what a comprehensive evaluation entails.
2. Students will describe how the comprehensive evaluation relates to value based payment system and outcomes for clients.
3. Students will describe the distinct value of OTAs in contributing to a comprehensive evaluation including:
 - a. Recognizing assessment measures used across various disciplines
 - b. Selecting appropriate occupation based outcome measures
 - c. Advocating for use of occupation based outcome tools for comprehensive evaluations

Learning Strategies

- Identifying the importance of meaningful and purposeful interventions to promote the client's ability to engage in occupations.
- Lab sessions that include identifying patient deficits and relating them to specific GG data elements and quality measures (process and outcome).

Competency Drafts for OT

1. Describe the uniqueness (e.g., perspective, assessment areas, intervention strategies) and value of OT evaluations, including the occupational profile and focus on occupation-based, evidence-informed, and client centered interventions and outcomes
2. The entry level practitioner will discern and appraise which standardized assessments best meet client's functional performance areas including ADLs, IADLs, functional cognition, fall prevention, psychosocial participation and vision and be able to administer and interpret the results and create a meaningful treatment plan.

Learning Strategies

- Students use an Electronic Health Record (EHR) students to practice documentation
- Inter-professional Education (IPE) applications of case based learning to emphasize team approach in care in a wide variety of settings focusing on each discipline's value to the consumer/client.
- Inter-professional pro-bono clinic developing occupation based interventions in simulated environments
- Simulated evaluation experiences that require the student to read, interpret and document the data and results.