Guide to Classification of Occupational Therapy Personnel

Approved by the Representative Assembly April 1985
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The “Guide to Classification of Occupational Therapy Personnel” has been developed as a resource for the American Occupational Therapy Association and for health care administrators and others requiring the services of occupational therapy personnel. The guide to common job roles of occupational therapy describes the qualifications and performance expectations of associated roles. The job roles are referred to as classifications; the classifications addressed are a) staff occupational therapist, registered (OTR), including entry level, intermediate, and advanced; b) staff certified occupational therapy assistant (COTA), including entry level, intermediate, and advanced; c) occupational therapy supervisor; and d) occupational therapy department manager/director.

This listing represents roles found typically in departments of institutions and is not intended to address the other roles occupational therapists perform in health care and educational settings. Other roles not addressed include, but are not limited to, private practitioner, consultant, faculty member, researcher, clinical coordinator, and administrator of multiservice departments.

The document describes performance areas that assist in the definition of job roles and responsibilities of various occupational therapy personnel. The levels of personnel were chosen to reflect advancement with those who provide direct treatment services. The terms intermediate and advanced were specifically selected to reflect the degree of clinical expertise rather than longevity within the profession. The levels of management personnel (supervisor, department manager/director) also were chosen to reflect advancement in administrative roles.

Description of Personnel Classifications

Each description is organized in outline form, and includes the following components:
1. Suggested Job Title;
2. Primary Function: A brief description of the job; and
3. Qualifications: The necessary and preferred requirements for persons employed in this classification.
   a) Education: Minimum and preferred educational preparation necessary to perform the job.
   b) Certification and Licensure: Statement of professional and legal credentials required. (Exceptions to these qualifications may occur in the case of newly graduated entry-level personnel. In states that license occupational therapy personnel, temporary provisions within the state law delineate requirements.)
   c) Experience: Minimum and preferred experience necessary to perform the job adequately.
   d) Skills: Description of minimum and preferred skills required to perform the job adequately.

4. Examples of Critical Performance Areas: Statements of the duties and responsibilities typical of the job classification. This listing is not comprehensive. Examples have been provided that reflect the level of competence and degree of independence expected in the performance of various job components.
   • Indicates basic critical performance areas.
   ○ Indicates performance areas at higher levels.

5. Supervisory Support Needed: Description of both minimum and preferred supervision necessary for job performance. Clinical refers to supervision related to patient’s/client’s treatment. Management/Administrative refers to supervision related to general duties of a nontreatment nature.

Additional Resources

The American Occupational Therapy Association (AOTA) has a variety of resources to assist members, groups, and other interested individuals in the development and implementation of occupational therapy programs and services. These resources include documents related to roles and functions of occupational therapy in various areas of practice, entry-level role delineation of OTR/COTA personnel, standards of practice, and ethics. Information regarding reimbursement of services may be obtained from AOTA, state occupational therapy associations, state and federal regulatory agencies, and private insurers. To obtain AOTA resource information and listings of state occupational therapy associations, contact The American Occupational Therapy Association, Inc., 1383 Piccard Drive, Suite 300, Rockville, MD 20850, (301) 948-9626.
Occupational Therapy Personnel Classifications

Staff Occupational Therapist, Registered (OTR)—Entry Level

Primary Function
To provide occupational therapy services to patients/clients, including assessment, treatment program planning and implementation, related documentation, and communication.

Qualifications
1. Education: Graduate of an accredited occupational therapy program or completion of the AOTA career mobility program, or graduate of a World Federation of Occupational Therapy (WFOT)–approved occupational therapy program; successful completion of a minimum of six months’, Level II Fieldwork experience; successful completion of AOTA Certification Examination for Occupational Therapist, Registered.
2. Certification and Licensure: Current AOTA certification; licensed as an occupational therapist where required by state law.
3. Experience: Less than one year as an OTR.
4. Skills: Professional competency as a general practitioner of occupational therapy, as defined by AOTA through successful completion of AOTA certification or state licensure process.

Examples of Critical Performance Areas
- Responds to requests for service and initiates referrals where appropriate.
- Screens individuals to determine need for intervention.
- Evaluates patients/clients to obtain and interpret data necessary for treatment planning and implementation.
- Interprets evaluation findings to patients/clients, family, significant others, and care team.
- Develops treatment plans, including goals and methods to achieve identified goals.
- Coordinates treatment plan with patients/clients, family, significant others, and care team.
- Implements treatment directly or supervises treatment by a certified occupational therapy assistant.
- Monitors patient’s/client’s response to intervention and modifies treatment as indicated to attain goals.
- Develops appropriate home or community programming to maintain and enhance the performance of the patients/clients in their own environments.
- Terminates services when maximum benefit has been achieved.

Staff Occupational Therapist, Registered (OTR)—Intermediate

Primary Function
To provide occupational therapy services to patients/clients, including assessment, treatment program planning and implementation, related documentation, and communication.

Qualifications
1. Education: Graduate of an accredited occupational therapy program or completion of the AOTA...
career mobility program, or graduate of a WFOT-approved occupational therapy program; successful completion of a minimum of six months', Level II Fieldwork experience; successful completion of AOTA Certification Examination for Occupational Therapist, Registered.

2. Certification and Licensure: Current AOTA certification; licensed as an occupational therapist where required by state law.

3. Experience: One or more years of practice as an OTR.

4. Skills: Professional competency as a general practitioner of occupational therapy as defined by AOTA through successful completion of the AOTA certification or state licensure process; demonstrated independence in the use of varied treatment approaches; may be developing advanced level competencies in one or more aspects of occupational therapy.

Examples of Critical Performance Areas

- Indicates basic critical performance areas.
- Indicates performance areas at higher levels.
- Responds to requests for service and initiates referrals when appropriate.
- Screens individuals to determine need for intervention.
- Evaluates patients/clients to obtain and interpret data necessary for treatment planning and implementation.
- Interprets evaluation findings to patients/clients, family, significant others, and care team.
- Develops treatment plans, including goals and methods to achieve identified goals.
- Coordinates treatment plan with patients/clients, family, significant others, and care team.
- Implements treatment directly or supervises treatment by a certified occupational therapy assistant.
- Monitors patient’s/client’s response to intervention and modifies treatment as indicated to attain goals.
- Develops appropriate home or community programming to maintain and enhance the performance of the patients/clients in their own environment.
- Terminates services when benefit has been achieved.
- Documents results of patient’s/client’s evaluation, treatment, follow-up, and termination of services.
- Identifies own continuing education and consultation needs.
- Follows billing and reimbursement procedures.
- Complies with established agency standards and evaluates compliance.
- Maintains service-related records and assists in development of records.
- Develops and provides inservice education to members of the patient’s/client’s care team and to the community.
- Reviews the quality and appropriateness of the total services delivered and of individual occupational therapy programs for effectiveness and efficiency, using predetermined criteria.
- Develops treatment protocols and procedures for patient’s/client’s programs within scope of own experience.
- Supervises COTAs, occupational therapy aides, and volunteers.
- Supervises occupational therapy and occupational therapy assistant Level I and II Fieldwork students.
- Participates in the development of service operations, policies, and procedures.

Supervisory Support Needed

1. Clinical: General supervision (i.e., less than daily) by a more experienced intermediate or advanced level OTR is preferred for therapists with less than two years’ experience. Frequency and manner of contact is determined by the supervising OTR, with on-site contact occurring at least monthly. Therapists may require consultation by an advanced level OTR in special areas in which they have minimal experience.

2. Management/Administrative: Administrative supervision is required for implementation of policies, quality assurance, and materiel management. In addition, supervision or consultation, or both, by an OTR with administrative experience is required in the development of service operations, policies, and procedures related to billing, reimbursement, and adherence to state and federal regulatory requirements.

Staff Occupational Therapist, Registered (OTR)—Advanced

An advanced-level occupational therapist may function as a staff therapist, but at a level higher than an intermediate therapist. Because of the variety of ways an individual may obtain advanced-level skills and the variety of jobs that an individual may perform, specific qualifications and critical performance areas cannot be delineated. An advanced-level therapist should be able to meet all the expectations in the personnel classification of “Staff Occupational Therapist—Intermediate Level,” and should demonstrate the following education, experience, and skills.

Qualifications

1. Education: A graduate degree in occupational therapy or in a related area; and/or certification by an organization or group that has continuing educa-
tion, examination, and/or practice requirements; and/or extensive continuing education in special area of practice.

2. Experience: Three or more years of experience in special area of practice.

3. Skills: An advanced-level therapist has skills that reflect a range of experience and depth of knowledge in occupational therapy theory and practice. Integration of clinical theory and practice at the advanced level results in evaluation and treatment that is innovative, complex, and efficient. The advanced-level therapist could be expected to share knowledge through staff and student education, publications, clinical studies, and research.

Examples of Critical Performance Areas

- Indicates basic critical performance areas.
- Because of the variety of ways an individual may obtain advanced-level skills and the variety of jobs that an individual may perform, critical performance areas at higher levels cannot be delineated.

- Responds to requests for service and initiates referrals when appropriate.
- Screens individuals to determine need for intervention.
- Evaluates patients/clients to obtain and interpret data necessary for treatment planning and implementation.
- Interprets evaluation findings to patients/clients, family, significant others, and care team.
- Develops treatment plans, including goals and methods to achieve identified goals.
- Coordinates treatment plan with patients/clients, family, significant others, and care team.
- Implements treatment directly or supervises treatment by a certified occupational therapy assistant.
- Monitors patient's/client's response to intervention and modifies treatment as indicated to attain goals.
- Develops appropriate home or community programming to maintain and enhance the performance of the patients/clients in their own environment.
- Terminates services when benefit has been achieved.
- Documents results of patient's/client's evaluation, treatment, follow-up, and termination of services.
- Identifies own continuing education and consultation needs.
- Follows billing and reimbursement procedures.
- Maintains service-related records and assists in development of records.
- Develops and provides inservice education to members of the patient's/client's care team and to the community.
- Reviews the quality and appropriateness of the total services delivered and of individual occupational therapy programs for effectiveness and efficiency, using predetermined criteria.
- Develops treatment protocols and procedures for patient's/client's programs within scope of own experience.
- Supervises COTAs, occupational therapy aides, and volunteers.
- Supervises occupational therapy and occupational therapy assistant Level I and II Fieldwork students.
- Participates in the development of service operations, policies, and procedures.

Supervisory Support Needed

1. Clinical: General supervision as required. Supervision is not required when treating within an area of special practice. Occasional supervision and consultation may be needed in other areas.

2. Management/Administrative: Administrative supervision is recommended for implementation of policies, quality assurance, and materiel management. In addition, supervision or consultation, or both, by an OTR with administrative experience is recommended in the development of service operations, policies, and procedures related to billing, reimbursement, and adherence to state and federal regulatory requirements.

Staff Certified Occupational Therapy Assistant (COTA)—Entry Level

Primary Function

To implement occupational therapy services for patients and clients under the supervision of an occupational therapist (OTR). These services include structured assessments, treatment, and documentation.

Qualifications

1. Education: Graduate of an AOTA-approved occupational therapy assistant education program; successful completion of a minimum of two months' supervised Level II Fieldwork experience; successful completion of the certification process for Occupational Therapy Assistant.

2. Certification and Licensure: Current AOTA certification; licensed as an occupational therapy assistant where required by state law.

3. Experience: Less than one year of practice experience as a COTA.

4. Skills: Competent in the delivery of occupational therapy treatment, under the direction of an OTR as delineated in the AOTA Entry-Role Delineation for OTRs and COTAs.
Examples of Critical Performance Areas

- Indicates basic critical performance areas.
- Indicates performance areas at higher levels.
- Responds to requests for service by relaying information and referral to an OTR.
- Determines patient’s/client’s need for services in collaboration with an OTR.
- Contributes to the assessment process under supervision of an OTR.
- Assists OTR in developing treatment plans and techniques to implement plans.
- Monitors patient’s/client’s response to treatment and modifies treatment during sessions as indicated in collaboration with an OTR.
- Reports observations of patient’s/client’s performance and responses to services to the OTR.
- Recommends termination of patient/client services to the supervisor.
- Documents and maintains service-related records, as directed by supervising OTR.
- Assists in providing inservice education.
- Identifies own continuing education needs in consultation with OTR.
- Assists in the development of treatment protocols.
- Assists in the development of service records and procedures.
- Provides administrative supervision and clinical direction to entry-level COTAs.
- Supervises OT aides and volunteers.
- Provides administrative and clinical direction to OT Assistant Levels I and II Fieldwork students.
- Assists OTR in the implementation of quality assurance program.
- Complies with established agency and service standards.

Supervisory Support Needed

1. **Clinical:** Close supervision (i.e., daily direct contact on site) is required from an OTR or intermediate- or advanced-level COTA.
2. **Management/Administrative:** General supervision by an experienced OTR or an experienced COTA is required for implementation of policies and procedures related to delivery of occupational therapy services.

Staff Certified Occupational Therapy Assistant (COTA)—Intermediate

**Primary Function**

To implement occupational therapy services for patients/clients under the supervision of an occupational therapist (OTR). These services include structured evaluations, treatment, and documentation.

**Qualifications**

1. **Education:** Graduate of an AOTA-approved occupational therapy assistant education program; successful completion of a minimum of two months’ supervised Level II Fieldwork experience; successful completion of the certification process for Occupational Therapy Assistant.
2. **Certification and Licensure:** Current AOTA certification; licensed as an Occupational Therapy Assistant where required by state law.

3. **Experience:** One or more years of practice as a COTA.
4. **Skills:** Competent in delivery of occupational therapy treatment under the direction of an OTR as delineated in the AOTA Entry-Level Role Delineation document; skill in implementation of a variety of independent living skills and activities that can be used in treatment; may be developing advanced-level skills in areas of special interest.

Examples of Critical Performance Areas

- Indicates basic critical performance areas.
- Indicates performance areas at higher levels.
- Responds to requests for service by relaying information and referral to an OTR.
- Determines patient’s/client’s need for services in collaboration with an OTR.
- Contributes to the patient’s/client’s assessment under supervision of an OTR. Independently performs parts of assessments, using structured evaluations.
- Assists OTR in developing treatment plans and techniques to implement plans.
- Implements and modifies treatment plans, under OTR supervision.
- Monitors patient’s/client’s response to treatment and modifies treatment during sessions, as indicated, in collaboration with OTR.
- Reports observations and patient’s/client’s responses to service to OTR and to other team members when so directed by OTR.
- Recommends to supervisor the termination of services.
- Documents and maintains service-related records, as directed by supervising OTR.
- Assists in the development of service protocols.
- Assists in the development of service records and procedures.
- Identifies own continuing education needs.
- Provides inservice education and community education within scope of knowledge base.
- Provides administrative supervision and clinical direction to entry-level COTAs.
- Supervises OT aides and volunteers.
- Provides administration and clinical direction to OT Assistant Levels I and II Fieldwork students.
- Assists OTR in the implementation of quality assurance program.
- Complies with established agency and service standards.
ence, close supervision (i.e., daily direct contact on site) is preferred. The nature and frequency of supervision varies with patient/client populations. COTAs working with acutely ill patients/clients and with individuals who are making rapid changes will require more OTR supervision, due to the need for frequent evaluation and re-evaluation and the resulting modification of overall treatment plan. COTAs treating patients/clients whose conditions are less complex and more stable, and therefore require revisions less frequently, may be directed by the OTR to function more independently. Frequency and manner of contact is determined by the supervising OTR with on-site contact occurring at least monthly.

2. Management/Administrative: General supervision by an OTR experienced in administration or an advanced level COTA is required for implementation of policies and procedures related to the delivery of occupational therapy services.

Staff Certified Occupational Therapy Assistant (COTA)—Advanced

An advanced-level certified occupational therapy assistant (COTA) functioning as a staff member, but at a higher level than an intermediate COTA. Because of the variety of ways an individual may obtain advanced-level skills and the variety of jobs that an individual may perform, specific qualifications and critical performance areas cannot be delineated. An advanced-level COTA should be able to meet all the expectations of a "Staff Certified Occupational Therapy Assistant—Intermediate Level," and the following education, experience, and skills.

Qualifications

1. Education: Academic course work related to area of expertise from an accredited college or university; and/or certification related to a special area of practice by an organization or group that has continuing education, examination, and/or practice requirements; and/or extensive continuing education in special area of practice.

2. Experience: Three years’ or more experience in special area of practice.

3. Skills: A COTA in this category has advanced-level competencies in particular acquired skills that relate to the practice of occupational therapy. These skills may be in clinically specific areas or may be more administrative or educational in nature. The advanced level COTA could be expected to share knowledge through staff and student education, publications, and clinical studies.

Examples of Critical Performance Areas

- Indicates basic critical performance areas.
- Because of the variety of ways an individual may obtain advanced level skills and the variety of jobs an individual may perform, critical performance areas at higher levels cannot be delineated.
  - Responds to requests for service by relaying information and referral to an OTR.
  - Determines patient’s/client’s need for services in collaboration with an OTR.
  - Contributes to the patient’s/client’s assessment under supervision of an OTR. Independently performs parts of assessments, using structured evaluations.
  - Assists OTR in developing treatment plans and techniques to implement plans.
  - Implements and modifies treatment plans, under OTR supervision.
  - Monitors patient’s/client’s response to treatment and modifies treatment during sessions, as indicated, in collaboration with OTR.
  - Reports observations and patient’s/client’s responses to service to OTR and to other team members when so directed by OTR.
  - Recommends to supervisor the termination of services.
  - Documents and maintains service-related records, as directed by supervising OTR.
  - Assists in the development of treatment protocols.
  - Assists in the development of service records and procedures.
  - Identifies own continuing education needs.
  - Provides inservice education, and community education within scope of knowledge base.
  - Provides administrative supervision and clinical direction to entry-level COTAs.
  - Supervises OT aides and volunteers.
  - Provides administration and clinical direction to OT Assistant Levels I and II Fieldwork students.
  - Assists OTR in the implementation of quality assurance program.
  - Complies with established agency and service standards.

Supervisory Support Needed

1. Clinical: General supervision (i.e., less than daily) from an intermediate- or advanced-level OTR is required. The nature and frequency of supervision varies with patient’s/client’s population. COTAs working with acutely ill patients and with individuals who are making rapid changes will require more OTR supervision, because of the need for frequent evaluation and re-evaluation and resulting modification of overall treatment plan. COTAs treating patients whose conditions are less complex and more stable, and who therefore require program revisions less frequently, may be directed by the OTR to function more independently.
2. Management/Administrative: General supervision by an administratively experienced OTR is required for implementation of service policies and procedures.

Occupational Therapy Supervisor

Primary Function

To supervise OTRs, COTAs, students, volunteers, and aides. Supervision includes orientation, development, and evaluation of personnel and monitoring of quality provision of services. Patient/client care responsibilities will vary depending on volume of personnel to be supervised. May serve as fieldwork coordinator.

Qualifications

1. Education: Graduate of an accredited occupational therapy program or completion of the AOTA career mobility program, or graduate of a WFOT-approved occupational therapy program; successful completion of a minimum of six months' Level II Fieldwork experience; successful completion of AOTA Certification Examination for Occupational Therapist, Registered. Continuing education relevant to the supervisory function is recommended.

2. Certification and Licensure: Current AOTA certification; licensed as an occupational therapist where required by state law.

3. Experience: Three or more years of clinical experience that is related to the departmental scope of services provided.

4. Skills: Thorough understanding of personnel and departmental policies and procedures; demonstrated leadership potential and ability to communicate effectively with peers, subordinates, and management; demonstrated ability to organize use of time, materiel, and personnel effectively; intermediate or advanced clinical skills.

Examples of Critical Performance Areas

- Indicates basic critical performance areas.
- Indicates performance areas at higher levels.
- Assists in the selection and orientation of staff, students, and volunteers.
- Evaluates and monitors job performance of assigned staff.
- Coordinates and facilitates inservice education and professional development of assigned staff.
- Coordinates scheduling of work assignments.
- Implements departmental policies and procedures, identifies need for changes, and assists in development and revision.
- Develops, implements, and maintains quality assurance activities within assigned areas.
- Assists in identification and development of department goals and objectives.
- Develops and implements strategies to meet department goals and objectives under supervision of department manager.
- Coordinates student fieldwork education.
- Is knowledgeable of and monitors staff compliance with AOTA professional guidelines, standards, and ethics.
- Assists department manager in ensuring department compliance with relevant accreditation, certification, and government standards.
- Performs assigned patient/client care responsibilities.

Supervisory Support Needed

1. Clinical: General supervision by occupational therapy department or service manager/director is required. Consultation from advanced-level OTR is recommended for special areas of practice in which therapist has had minimal experience.

2. Management/Administrative: General supervision by occupational therapy department manager/director is required for assigned supervisory duties.

Occupational Therapy Department Manager/Director

Primary Function

To manage an occupational therapy department or service. Management includes planning, organizing, directing, controlling, and coordinating all aspects of the department or service.

Qualifications

1. Education: Graduate of an accredited occupational therapy program or completion of the AOTA career mobility program, or graduate of a WFOT-approved occupational therapy program; successful completion of a minimum of six months' Level II Fieldwork experience; successful completion of AOTA Certification Examination for Occupational Therapist, Registered. Continuing education relevant to the management/administrative function is recommended.

2. Certification and Licensure: Current AOTA certification; licensed as an occupational therapist where required by state law.

3. Experience: Varies with size and scope of department. Graduate degree in administration and management may substitute for supervisory experience.
   a) Small department (less than six employees): Three years or more clinical experience as an occupational therapist, with a minimum of one year of supervisory experience.
   b) Large departments (more than six employees): Four or more years of clinical experience, with at least two years of supervisory and management experience.
4. Skills: Intermediate- or advanced-level clinical skills. Must have a thorough knowledge of occupational therapy and management principles and practices; demonstrate understanding of department objectives and functions; and conceptualize, interpret, and integrate occupational therapy services into the relevant organizational context.

Examples of Critical Performance Areas

- Indicates basic critical performance areas.
- Indicates performance areas at higher levels.
- Selects, evaluates, and maintains competent staff.
- Develops, implements, and monitors policies and procedures within department.
- Participates in interdepartmental development of systems, policies, and procedures. Identifies system dysfunctions and reports to appropriate administrative personnel.
- Participates in development of organizational goals and plans, and supports organizational objectives.
- Establishes, coordinates, and maintains effective relationships with other departments, the administration, and the community.
- Supports financial management of the organization through budget preparation and implementation, and reviews and develops related reports.
- Identifies departmental program changes, and develops and implements strategies to provide relevant cost-effective services.
- Develops and implements quality assurance and program evaluation systems within department.
- Collaborates with other departments and administration in the development and implementation of interdepartmental evaluation systems.
- Is knowledgeable of and ensures compliance with accreditation, certification, and government standards that are relevant to the department.
- Is knowledgeable of and ensures compliance with AOTA professional guidelines, standards, and ethics.

Evaluation

- Evaluation refers to the process of obtaining and interpreting data necessary for treatment. This includes planning for and documenting the evaluation process and results. These data may be gathered through record review, specific observation, interview, and the administration of data collection procedures. Such procedures include, but are not limited to, the use of standardized tests, performance checklists, and activities and tasks designed to evaluate specific performance abilities. The following categories of occupational therapy evaluation include independent living/daily living skills and performance, and their components:
  a) Independent Living/Daily Living Skills and Performance;
  b) Sensorimotor Skill and Performance Components;
  c) Cognitive Skill and Performance Components;
  d) Psychosocial Skill and Performance Components;
  e) Therapeutic Adaptations; and
  f) Specialized Evaluations.

Specialized evaluations refer to evaluations or tests requiring specialized training and/or advanced education to administer and interpret them. Examples of specialized evaluations are employment preparation, prevocational testing, sensory integration, prosthetic, and driver training.

- Supervision—Supervision refers to activities to enhance the performance of departmental employees through appraisal of their effectiveness, evaluation of their conformance to departmental standards, and/or evaluation of their adherence to specific institutional policies.
  a) Close—requires daily, direct contact on site.
  b) General—frequency of contact is less than daily. Frequency and manner of contact is determined by the supervising OTR, with on-site contact occurring at least monthly. Interim supervision should occur in some manner (e.g., via telephone, written report, or group conference).

Supervisory Support Needed

General supervision by administrative personnel within the organization is required.

GLOSSARY OF TERMS

- Assessment—Occupational therapy assessment refers to the process of determining the need for, nature of, and estimated time of treatment; determining the needed coordination with other persons involved; and documenting these activities.

REFERENCES