

# Guidelines for Reentry Into the Field of Occupational Therapy

**T**hese guidelines are designed to assist occupational therapists and occupational therapy assistants who have left the field of occupational therapy for 24 months or more and have chosen to return to the profession and deliver occupational therapy services. The guidelines represent minimum recommendations only and are designed to support practitioners in meeting their ethical obligation to maintain high standards of competence and to provide guidance to regulatory bodies.

## Purpose of the Guidelines

It is expected that practitioners will identify and meet requirements outlined in applicable state and federal regulations, relevant workplace policies, the *Occupational Therapy Code of Ethics (2015)* (American Occupational Therapy Association [AOTA], 2015a), and continuing competence and professional development guidelines prior to reentering the field.

## Clarification of Terms

### Reentry

For the purpose of this document, reentering occupational therapists and occupational therapy assistants are individuals who

- Have previously practiced in the field of occupational therapy;
- Have not engaged in the practice of occupational therapy (e.g., direct service delivery to clients, supervision, education, consultation, administration, case or care management, community programming, research) for a minimum of 24 months; and
- Desire to return to the practice of occupational therapy.

### Formal Learning

*Formal learning* refers to any learning that has established goals and objectives that are measurable and support evidence-informed occupational therapy practice. It may include activities such as

- Attending workshops, seminars, lectures, and professional conferences
- Auditing or participating in formal academic coursework
- Participating in external self-study series (e.g., AOTA Self-Paced Clinical Courses)
- Participating in independent distance learning, either synchronous or asynchronous (e.g., continuing education article, video, audio, or online courses) with established goals and objectives that are measurable
- Participating in an AOTA-approved fellowship program.

### Supervised Service Delivery

In this document, *supervised service delivery* refers to provision of occupational therapy services under the supervision of a qualified occupational therapy practitioner. The *Guidelines for Supervision, Roles, and Responsibilities During the Delivery of Occupational Therapy Services* (AOTA, 2020c) state that

within the scope of occupational therapy practice, supervision is a process aimed at ensuring the safe and effective delivery of occupational therapy services and fostering professional competence and professional development. . . . *Supervision* is viewed as a cooperative process in which two or more people participate in a joint effort to establish, maintain, and/or elevate competence and performance.

## Guidelines for Reentry

Practitioners who are seeking reentry must abide by state licensure and practice regulations and any requirements established by the workplace. In addition, the following suggested guidelines are recommended:

1. Engage in a formalized process of self-assessment and complete a professional development plan that addresses the *Standards for Continuing Competence* (AOTA, 2015b).
2. Attend a minimum of 12 hours of formal learning related to occupational therapy service delivery for each year (12 consecutive months) out of practice. At least 24 hours of the formal learning must occur within the 24 months directly preceding anticipated reentry. A minimum of 3 hours of formal learning must relate to ethics, and 3 hours of formal learning must relate to laws and regulations to support evidence-informed occupational therapy practice.
3. Attain relevant updates to core knowledge of the occupational therapy profession and the responsibilities of occupational therapy practitioners consistent with material found in AOTA official documents such as the *Occupational Therapy Practice Framework: Domain and Process* (4th ed.; AOTA, 2020d), the *Occupational Therapy Code of Ethics (2015)* (AOTA, 2015a), *Standards for Continuing Competence* (AOTA, 2015b), *Standards of Practice for Occupational Therapy* (AOTA, 2015c), and *Guidelines for Supervision, Roles, and Responsibilities During the Delivery of Occupational Therapy Services* (AOTA, 2020c).
4. For practitioners who have been out of practice for 3 or more years, complete a minimum of 10 hours of documented supervised service delivery in occupational therapy for each year out of practice, to a maximum of 80 hours.
  - a. The supervised service delivery should be completed between 12 months prior to anticipated reentry and the first 30 days of employment.
  - b. The reentering practitioner, in conjunction with the supervising occupational therapy practitioner(s), should establish specific goals and objectives for the supervised hours. Goals, objectives, and related assessments of performance may be developed or adapted from a variety of sources, including competency and performance review resources existing within the setting and AOTA resources such as the *Fieldwork Performance Evaluation* forms (AOTA, 2020a, 2020b).
  - c. Supervised service delivery should occur with an occupational therapist supervising an occupational therapist or occupational therapy assistant, and an occupational therapy assistant supervising an occupational therapy assistant.
  - d. Supervision should be direct face-to-face contact, which may include observation, modeling, cotreatment, discussion, teaching, and instruction (AOTA, 2020c), and may be augmented by indirect methods such as electronic communications.

## Ongoing Continuing Competence

After practitioners have successfully returned to the delivery of occupational therapy services, they are encouraged to engage in activities that support their ongoing continuing competence, such as

- Seeking mentoring, consultation, or supervision, especially during the first year of return to practice
- Building a professional network and facilitating opportunities for practice guidance through relevant AOTA Special Interest Section forums, communities of practice, and AOTA-sponsored online communication platforms
- Exploring relevant AOTA Board and Specialty Certifications and using the identified criteria as a blueprint for ongoing professional development
- Exploring postprofessional fellowship programs

- Engaging in scholarly activities such as research, evidence-based practice projects, and quality initiatives
- Joining and becoming active in both AOTA and their state occupational therapy association to stay abreast of practice trends and increase opportunities for networking.

## References

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