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Evolution of Occupational Therapy Practice: Life History of Tammy Olson, COTA

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Abstract

The purpose of this qualitative study was to gather information about the history and evolution of occupational therapy (OT) practice in North Dakota and Wyoming through life histories of individuals who have been influential in developing OT in these two states. This study focused on the life history of Tammy Olson, and her involvement and experiences in the evolution of OT practice. A face-to-face semi-standardized interview which lasted approximately one hour, along with the participant's curriculum vitae (CV), was used to gather information. The interview was transcribed verbatim and analyzed to develop themes that reflected influential events, opportunities, and challenges throughout Tammy's personal and professional life. Tammy Olson has been influential in rural practice due to her commitment and passion for enhancing and promoting functional independence in the lives of others. Her experiences throughout her career have empowered her to become an educator and advocate for the certified occupational therapy assistant (COTA) profession.

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Evolution of Occupational Therapy Practice: Tammy Olson, COTA

This life history is one of 31 life history interviews which are a part of a larger project, *Life Histories of Individuals Who Have Been Influential in Developing Occupational Therapy (OT) in North Dakota and Wyoming.* The purpose of the project is to gather information about the history and evolution of occupational therapy (OT) practice in North Dakota and Wyoming through life histories of individuals who have been influential in developing OT in these two states. It is anticipated that the life history process will be a powerful way to gather this information. This study is intended to provide current and future generations of occupational therapy assistants a view of the history, and how OT practice has evolved from its inception to current practice in North Dakota and Wyoming.

A qualitative research design with a life history approach was used for this research study. The Kawa Model guided the purpose of the study to explore and examine the experiences and turning points throughout this life history (Teoh & Iwama, 2015). The study focused on the participant, Tammy Olson, and her involvement and experiences in the evolution of OT practice. The researchers conducted a face-to-face interview at the North Dakota School of the Blind, which lasted approximately one hour. Tammy has had a variety of work experiences and opportunities that shaped her practice as a COTA. Throughout her rural practice, she has been an influential practitioner, inventor, and advocator for the profession.

Literature Review

The roles and responsibilities of the COTA profession have evolved over time since beginning in the 1940s (Cottrell, 2000; Salvatori, 2001). Establishing an assistant-level career in the OT profession was initially proposed in 1949 to meet an increasing demand for services in psychiatry (Cottrell, 2000; Salvatori, 2001). The profession was officially enacted in 1957 when the American Occupational Therapy Association (AOTA) Board of Management approved a plan for an occupational therapy assistant training program (Cottrell, 2000; Salvatori, 2001). Due to the fact that there was a shortage of OT services in psychiatric practice settings during this era, education programs for COTAs took place in psychiatric facilities and lasted for 12 weeks (Cottrell, 2000; Salvatori, 2001). As large mental institutions began to close in the 1960s, the role of registered occupational therapists (OTRs) began to change (Christiansen & Haertl, 2014; Cottrell, 2000). During this time, there was an emphasis on scientific research and theory (Christiansen & Haertl, 2014). This led OTRs to provide indirect services in other practice areas than psychiatry (Cottrell, 2000). However, this also caused an increased demand for direct services. In response, COTAs experienced the first shift in their roles within the profession when the AOTA Board of Management adapted occupational therapy assistant education programs to include general practice areas as well (Cottrell, 2000).

By the 1970s, COTAs were involved in the OT profession for more than a decade (Cottrell, 2000). Following this accomplishment, the profession experienced a dramatic increase in occupational therapy assistant education programs throughout the country (Cottrell, 2000). However, the profession also became aware of concerns regarding educational requirements for graduates of these programs during this time (Cottrell, 2000) In response to these concerns, AOTA revised the standards for occupational therapy assistant education programs and required all graduates of an accredited COTA training program to pass a written certification exam (Cottrell, 2000; Salvatori, 2001). The COTA profession experienced another milestone during this time period when COTAs were granted full rights as AOTA members (Cottrell, 2000; Salvatori, 2001). Although these events marked advances in the COTA profession, they also caused controversy and created tension in the OTR/COTA relationship (Cottrell, 2000; Salvatori, 2001). After AOTA created a written certification exam for all graduates of COTA training programs, many OTRs expressed their disapproval in response to this decision (Cottrell, 2000). Following this event, COTAs became more concerned and defensive about their roles in the OT profession. Therefore, practitioners began to raise awareness regarding the lack of collaboration, respect, and supervisory skills that existed between OTRs and COTAs (Salvatori, 20001).

Moving forward in the 1980s, role confusion and the OTR/COTA supervisory relationship were addressed by an increase in education and advocacy (Brooks, 1982). In particular, COTAs strived to increase their involvement in the OT profession by publicly advocating for their roles and responsibilities (Salvatori, 20001). As the competency and experience of COTAs were highlighted throughout this time period, more OTRs began to respect the roles of assist-level practitioners in the profession (Cottrell, 2000). In addition, the positive shift in the OTR/COTA relationship was locally demonstrated in the state of North Dakota, when the North Dakota State Board of Occupational Therapy Practice (NDBOTP) was officially established in 1983 (Archives-State Agencies-Board of Occupational Therapy Practice, n.d.). This historical event was influential for the COTA profession because it allowed both COTAs and OTRs to become licensed in the state of North Dakota (Archives-State Agencies-Board of Occupational Therapy Practice, n.d.). Following this time period, the role of an assistant-level practitioner, along with supervision guidelines within the profession, began to evolve in the 1990s. (Cottrell, 2000; Salvatori, 2001). Supervision guidelines and role delineation within the OT profession were later defined through prominent documents, such as Occupational Therapy Roles (American Occupational Therapy Association, 1993) and The Guide for Supervision of Occupational Therapy Personnel (American Occupational Therapy Association, 1994). In addition, occupational therapy assistant programs continued to increase. By the end of this time

period, 158 accredited associate degree programs for COTAs were documented throughout the country (Salvatori, 20001). This included the Occupational Therapy Assistant Program at the Northland Community and Technical College, which was established in 1992 (Haymond & Linquist, n.d.).

Throughout history, COTAs have had to adapt and change their roles and responsibilities to facilitate a strong relationship with OTRs. This includes supervision, which continues to be a prominent concern in the profession today (Cottrell, 2000; Youngstrom, 2014). In 2014, The NDBOTP revised supervision guidelines for COTAs and OTRs, which further defined the roles of these two positions within the state (North Dakota State Board of Occupational Therapy Practice, 2017). Although the supervisory relationship between OTRs/COTAs was not always positive, practitioners have adapted to new guidelines within the profession to enhance collaboration and teamwork (Youngstrom, 2014). Today, there continues to be an emphasis on supervision to ultimately enhance the role of COTAs within the profession and provide effective OT services (Youngstrom, 2014).

Theory

This study used the Kawa Model to guide the research process. The purpose of the Kawa Model is to examine the dynamic interaction between the individual and surrounding contexts that influence the individual's daily life (Iwama, Thompson, & Macdonald, 2009; Tupe, 2014). By using an interdependent worldview, this model focuses on the belief that life circumstances depend on a variety of internal and external factors (Iwama et al., 2009; Tupe, 2014). To embrace the complex relationship between self and context, this model uses a metaphor of a river to represent the individual's life journey throughout time, from birth to end of life (Iwama et al., 2009; Teoh & Iwama, 2015; Tupe, 2014). Like a river, an individual's life journey may flow up

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and down. A river with a strong current that flows freely represents well-being and a healthy state of mind. In comparison, other conditions or barriers may cause a river flow to weaken (Iwama et al., 2009; Teoh & Iwama, 2015; Tupe, 2014). In the Kawa Model, barriers such as river side walls, rocks, and driftwood represent the context, environment, challenges, and personal attributes that may influence an individual's life circumstances (Iwama et al., 2009; Teoh & Iwama, 2015).

The Kawa Model was chosen to guide the research process because it allowed the focus of the study to be on the participant's life history throughout her career in the OT profession. This model is evident throughout the project by being incorporated in the interview questions, which emphasized the participant's journey from the beginning of her career to her practice today. The Kawa Model served as an effective guide to determine the opportunities and challenges that influenced the participant's professional and personal life (Iwama et al., 2009; Teoh & Iwama, 2015; Tupe, 2014).

Description of the Participant

Tammy Olson is an experienced COTA who has been practicing rurally throughout North Dakota and Minnesota for over 20 years. She was one of the first students to graduate from the Occupational Therapy Assistant Program at Northland Community and Technical College in East Grand Forks, Minnesota in 1994. At the time of graduation, Tammy was married and pregnant with her second child. Tammy and her husband were living in Alvarado and her husband was commuting each day to Grand Forks for work. Tammy decided to take a year off and focus on her family and pregnancy. A year later in 1995, she started working at Altru Health System in the acute, psychiatry, and rehab center. After four years, Tammy felt like she had not found her fit and was ready for a change. Tammy transitioned into the school district and began working part-time at Warren Alvarado Oslo Public Schools. There, she provided pediatric and consulting OT services for preschool through high school for 13 years. While working in the school system, Tammy invented a modified shoe-tying technique for children and young adults who struggled to tie their shoes. This was a major professional accomplishment that has impacted her past and present career.

Currently, Tammy works flex time at Northwood Deaconess, Health Center (NDHC) in the hospital, nursing home, and outpatient pediatrics department. She also does on-call work for Health Dimensions Rehabilitation, Inc. During her rural practice, Tammy was nominated by her coworkers for the North Dakota Occupational Therapy Assistant of the Year in 2014. This award was well deserved as Tammy strives to provide direct client-centered services in the communities around her with a focus to help individuals of all ages achieve function and independence. The information for this section was obtained through the interview and the participant's CV.

Methodology

This was a qualitative study that used a life history approach. This approach involves the use of oral histories, or first-person accounts, to document and record the stories of living individuals who are influential in the surrounding environment (Lune & Berg, 2017). Oral histories are a powerful way to develop a strong understanding of the events and situations that have occurred throughout history (Lune & Berg, 2017). Therefore, by using a life history approach, the researchers were able to accurately capture the participant's personal experiences that occurred throughout a wide time frame and how they impacted the evolution of OT practice (Lune & Berg, 2017).

This study is a part of a larger project conducted by the project directors. The study was approved by the University of North Dakota's (UND) Institutional Review Board (IRB). Due to the study design, the formal IRB process was waived. Initial contact and recruitment of the participants were done by the project directors. After recruitment, purposive sampling was used to compile a list and assign participants. The participant, Tammy Olson, was assigned to the researchers of this study. Data was collected through the interview, along with written information from the participant's CV. A copy of Tammy's CV was provided to both researchers at the time of the interview. Informed consent was obtained prior to conducting the interview.

The interview was completed face-to-face in a small conference room in the North Dakota School of the Blind. No gatekeeper issues were identified. The conference room was quiet with a conference table and chairs as well as a TV. The door to the conference room was shut for the entire interview. The interview lasted approximately one hour. A semi-structured interview format was used to guide the interview process. The questions were provided in an interview schedule that was prepared by the project directors. The questions were designed to be used with all participants interviewed as part of the larger project. The researchers were allowed to modify or change questions based on their participant. Therefore, the researchers added two questions which were inspired by the Kawa Model to address key turning points in the participant's life and professional practice (Iwama et al., 2009). During the interview, the researchers deviated from the interview schedule as needed to ask additional follow-up and probing questions. The entire interview was audio recorded and transcribed verbatim.

Trustworthiness was established through a variety of different strategies. The interview was audio-recorded by using two separate devices and was transcribed verbatim. This process was used to eliminate any biases from the researchers. Each researcher also analyzed the

interview transcription separately before discussing it together. Multiple sources of data were also used to increase validity and reliability. Information was gathered through the interview transcription and written materials, including the participant's CV and personal photos. This allowed researchers to cross-check the information provided between sources. Lastly, researchers tracked their experiences and subjective impressions of the study through the use of a reflexive journal. This process helped ensure that any preconceived or developing biases would not interfere with the data analysis process. Collaboration between researchers and project directors also occurred throughout the study to increase overall trustworthiness.

Data Analysis

The interview was audio-recorded, transcribed verbatim, and coded into 23 initial codes. The Kawa Model served as a guide to developing a rich understanding of Tammy's personal and professional life. This model also allowed the researchers to focus on external factors during data analysis, such as opportunities and challenges, which influenced the participant's life journey (Iwama et al., 2009). The researchers analyzed the interview transcription separately while recording reflective notes and impressions on the participant and her experiences as a COTA. After the initial analysis, the researchers analyzed the interview transcription together to combine similar thoughts that emerged throughout the interview.

From this analysis, the researchers categorized information from the interview transcription into codes (See Appendix for initial codes). When selecting the codes, inclusion criteria involved the use of quotes and phrases from the participant, which demonstrated important aspects of her career as a COTA (Iwama et al., 2009). These aspects included experiences related to OT, as well as circumstances in Tammy's personal life which influenced her practice in the profession (Iwama et al., 2009). Exclusion criteria for the codes were any single-words or comments provided by the researchers during the interview. These criteria were established to ensure that the codes reflected meaning and accurately represented the participant's life experiences.

After selecting and examining 23 initial codes, the researchers identified three main categories. The categories were developed by grouping codes with similar relationships and findings together. The categories that were established were rural practice, interventions, and COTA practice. From this analysis, themes from each category emerged. The categories and themes reflected influential events, opportunities, and challenges throughout Tammy's personal and professional life in OT, which were discovered from the interview transcription (Teoh & Iwama, 2015).

Findings/Results

Tammy's life experiences, as described during the interview, shaped her as an influential practitioner, inventor, and advocator of the OT profession. From this information, themes and 3 main categories were discovered. The themes outlined and described below represent the categories and initial codes that were selected during the data analysis.

Category One: Rural Practice

Rural practice has provided Tammy with a variety of different work experiences in the community.

Following graduation, Tammy began practicing as a COTA in 1995. She was not interested in working full-time and started her practice with two part-time jobs. Throughout her career, Tammy has continued to work part-time as a COTA in several different roles. She feels that although she was unsure where she may be working from one week to the next, she always took advantage of the opportunities that were offered in rural practice. Because of this dynamic, she served many different populations and practices, including acute care, school systems, skilled nursing facilities, home care, and outpatient pediatrics. Tammy valued the community approach that working in rural practice has provided her. As she gained more experience as a practitioner, people in the community asked Tammy to serve in other roles, such as a community educator, and a guest lecturer for occupational therapy assistant students. Although it was challenging at times to find consistent work in a rural area, she believes that rural practice has allowed her to do everything she wanted to accomplish as a COTA since graduation. "I've been able to kind of pick up here and there, and do odds and ends, and have a lot of variety in my life. I haven't needed certain things so it's worked out for me."

Working part-time has presented opportunities and challenges in maintaining a schedule and workload, this has impacted her professional and family life.

While working part-time, Tammy's workload ebbed and flowed. At times, this dynamic impacted her family life. Some days, she did not know when her day was going to end. However, Tammy enjoyed working in the school system as she worked three and a half days each week and was able to be home when her children returned from school. After her children transitioned into high school, Tammy experienced a shift in her career when she began working part-time at a health center that was located outside of her hometown. This also presented challenges in Tammy's professional and family life, as she had to drive an hour to and from work each day. She believes that the travel and distance involved in her part-time position as a COTA has been one of the most difficult experiences throughout her career. Tammy feels that she continues to travel for work because she enjoys the people she works with and cannot imagine herself doing anything else. She explained, "It's not very common that you find people that are going to do

like what I do and drive 60 miles to go to work, but I, I found the fit there and it's just continued to work for me."

Rural practice has allowed Tammy to develop innovative interventions and teach others in the community.

Tammy believes her experiences in rural practice has allowed her to develop innovative interventions because she is able to provide client-centered care and tailor each intervention to a client's personal needs and skill level. This included developing a technique to help children and adults with disabilities learn how to tie their shoes. Tammy continued to share this intervention with other teachers throughout the community. Apart from developing unique interventions with her clients, Tammy served as an influential educator in the OT profession by teaching students on media interventions, including ceramics, weaving, and leather work, at the Northland Community Technical College. By providing the opportunity for Tammy to develop innovative interventions and adopt different positions as a practitioner and educator in the community, rural practice allowed her to remain focused on her career and daily goals as a COTA. "I've mainly just focused on my day to day job and who I'm working with and what I enjoy, what they need. And that's just been my focus."

Category Two: Interventions

Tammy is passionate about helping people achieve function and independence.

Tammy's passion for enhancing the lives of others drove her in the decision to become a COTA. She first discovered the OT profession when she helped an OTR at the North Dakota School of the Blind complete a morning dress routine. Tammy explained, "But then I just kind of had an idea that I'd check it out and really it has been a perfect fit because it's all to me about function and independence." Her interest and mission in helping people achieve function in their

everyday activities have translated into incorporating the use of activities of daily living (ADLs) and adaptive equipment in therapy. Tammy feels that in order to help clients return home and meet their goals, the key in therapy is to focus on what the client needs to do in the environment. She remained dedicated to the core of the profession and stayed true to her passion for function and independence throughout her career. Tammy states that she enjoys helping her clients "find the little things that make life better."

She emphasized the importance of being client-centered when helping clients achieve their goals.

One of the most prominent challenges Tammy experienced in her career when working with clients, was accepting the fact that the client's goals may be different than what she prioritized during therapy. Although Tammy admitted that she continues to struggle with understanding why her client's goals may be different than her own, she has coped with this challenge by realizing that her goals will never be as important as the client's. Tammy credits her ability in helping clients achieve their goals by focusing on their values and priorities in life. "I gotta remind myself that it is not my life, it's not, you know, this is what works, what we need to work....What can I do to help make what they want successful for them?"

She developed a technique to teach shoe tying to individuals of all ages.

When the researchers asked Tammy to describe personal accomplishments that have influenced her life, she described her love of shoe tying. Tammy stated, "I could teach shoe tying all day, every day." She discovered she had a passion for helping children and young adults learn how to tie shoes when she worked in the public school system. After attempting to help a boy in the fifth grade learn how to tie his shoes without success, Tammy was about to give up altogether. However, she knew that he was able to do the last and first steps of the activity, so she strived to develop a technique that allowed the client to merge all the steps together. As a result, she modified the client's shoelaces to represent a dot-to-dot activity. After instructing the client to match the dots on the separate laces together, Tammy stated that the boy finally learned how to tie his shoes. Throughout her career, she continued to adapt and grade this intervention for children who were autistic, along with individuals who were blind and visually impaired. Since discovering this intervention, Tammy has had 100% success with all of the clients whom she has worked with. Tammy is proud of this accomplishment and the benefits it has facilitated for her clients throughout her career. "I can go yep, I taught them how to tie shoes….And I'll meet people in the store and they'll remember you, and just knowing an impact that I've had on some people's lives."

Category Three: COTA Practice

Communication among health care professionals is imperative to ensure timeliness of documentation is met.

As a COTA, Tammy has certain guidelines she must follow and keep track of when providing care to her clients. Tammy describes these guidelines when she stated, "In Minnesota for home care, every sixth visit has to be done by an OTR. So we have to keep track of that and then we know they have to go in and do that." Tammy reported an occasion in which documentation was not met in a timely manner and she felt as if her licensure was on the line. She states she has learned from these experiences that open communication between coworkers is imperative to ensure guidelines regarding the number of visits and documentation is met.

Interpreting supervision between OTR/COTA as teamwork was important to her in current and past work settings.

Throughout practice, Tammy has always thought of the relationships between herself and supervisors as a form of teamwork. When the researchers asked Tammy about her experiences regarding supervision she stated, "It's hard for me to even think of the word supervision because where I've worked and who I've worked with, it's always felt more like a team." She feels that she has always been looked to as another coworker, and has consistently found equal trust among herself and supervisors. Tammy feels that she could not stay at her current position if she did not have a strong, open relationship between herself, supervisors, and other coworkers.

She emphasized that education and promotion on the role of a COTA should be a priority for the profession.

When discussing roles specific to a COTA, Tammy expressed many concerns regarding the lack of promotion and acknowledgment of what this profession entails and is able to do. She feels that there are many misperceptions regarding the roles of COTAs, due to the word assistant being in the title. Tammy expresses her views of her title when she states, "I hate the word assistant. I just, I don't think it is fitting. And I don't think it ever did. And I still don't think it does." She has also worked with new graduates who enter practice and do not fully understand the role of a COTA and what they can do. Currently, Tammy believes that there has been a shift within OT education, and more OTRs are being educated on the role of a COTA. With the overlap between OT and physical therapy (PT), as well as speech-language pathology (SLP) and OT, Tammy wishes there was more promotion of her profession between other health care disciplines.

Final Assertion

Tammy Olson has been influential in rural practice due to her commitment and passion for enhancing and promoting functional independence in the lives of others. Her experiences throughout her career have empowered her to become an educator and advocate for the COTA profession.

Discussion and Conclusion

Through hearing Tammy share stories about her professional and personal life a rich understanding of the opportunities and challenges she experienced as a COTA in rural practice emerged. Using the Kawa Model as a theoretical guide for this study highlighted the life circumstances, people, and events that shaped her career and life journey within the OT profession (Iwama et al., 2009). The literature captured the elements that have impacted Tammy's practice as a COTA. This included the role of an assistant-level practitioner and the relationship between OTRs and COTAs in the evolution of OT. Since the beginning of her practice, Tammy valued teamwork and collaboration in the OTR/COTA supervisory relationship. Tammy has also stayed grounded and true to the core of OT by remaining clientcentered. She ultimately represents the future that many COTAs envisioned before her when the profession began. Today, Tammy's contributions to communities in rural practice, along with her passion for promoting function and independence, has shaped her as a role model for future COTAs and all practitioners in the OT profession. As other generations of occupational therapists examine this life history, they will develop insight into the evolution of OT practice in North Dakota and Wyoming through the perspective of an assistant-level practitioner. Overall, Tammy's life story will advocate for the OT profession and promote a strong relationship between COTAs and OTRs throughout history.

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Appendix

Evolution of Occupational Therapy Practice: Life History of Tammy Olson, COTA By: Noelle Rivard, MOTS & Kelsey Wehe, MOTS
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Innovative intervention
Rural practice
Family
Driving and transportation
Professional accomplishments
Continuing education
Personal education
Part-time

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Client-centered Shoe-tying ADLs Functional Independence Sensory Integration Technology Adaptive Equipment Activity Analysis Arts and Crafts

Billing and reimbursement Direct Service Differences between PT and OT Misperceptions of being a COTA Collaboration Teamwork Communication Accreditation Issues Teamwork

Rural Practice

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- Rural practice has provided Tammy with a variety of different work experiences in the community.
 Working part-time has
- Working part-time has presented opportunities and challenges in maintaining a schedule and work load, this has impacted her professional and family life.

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 Rural practice has allowed Tammy to develop innovative interventions and teach others in the community.

Interventions

- Tammy is passionate about helping people achieve function and independence.
- She emphasized the importance of being client centered when helping clients achieve their goals.
- She developed a technique to teach shoe tying to individuals of all ages.

COTA Practice

- Communication among health care professionals is imperative to ensure timeless of documentation is met.
 - Interpreting supervision between OTR/COTA as teamwork was important to her in current and past work settings
- She emphasized that education and promotion on the role of a COTA should be a priority for the profession.

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