

4-25-2021

Doctoral Capstone Experience: Advocacy Culminating Project

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Hannah M. Hubbard. 2021. *Doctoral Capstone Experience: Advocacy Culminating Project*. Capstone. Nova Southeastern University. Retrieved from NSUWorks, . (23)
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Doctoral Capstone Experience: Advocacy Culminating Project

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OTD8494: Doctoral Capstone & Exit Colloquium

Dr. Christina Kane

04/25/2021

Abstract

The overarching goal of this culminating project, including the literature review, was to make policy more digestible and relatable; and to connect the role of occupational therapy (OT) to advocacy and policy. The goals of my doctoral capstone experience (DCE) included: 1) to inform the community, both OT and non-OTs, on current issues and events through various social media platforms; 2) to lecture Nova Southeastern University (NSU) OTD students on policy, leadership, and advocacy; and 3) to develop a pathway preparing for a leadership position in the OT profession and community. The three goals helped fill the gap previously identified in the literature, which revealed a need for improving education, awareness, and involvement in advocacy and policy. The goals focused on sharing knowledge in a more understandable way which promotes more involvement from OT practitioners with policy. The results included five podcast episodes, a successful lecture to OTD students, and ample new knowledge on how to be an advocate, a leader, and a participant in policy development.

Keywords: health policy, public policy, and policy combined with occupational therapy

Doctoral Capstone Experience: Advocacy Culminating Project

For my DCE it was important for me to gain a better understanding of how policies are made and implemented at a federal and organizational level. The impetus for change started when the Centers of Medicare and Medicaid Services (CMS) changed their reimbursement to a Patient Driven Payment Model (PDPM) model in October 2019 which impacted the rehabilitation services in skilled nursing facilities, where I worked as an occupational therapy assistant (OTA). The American Occupational Therapy Association (AOTA) shared OTs' stories on how the payment system negatively impacted their jobs and lives. AOTA (2019) described the practitioners concerns regarding the quality-of-care the clients were receiving as a result of decreased therapy hours and limited one-on-one client centered care. OTs also reported reduced working hours and even layoffs (AOTA, 2019). I wanted to know how and why we got to this place. I wanted to learn and understand the policy process; and strategies to become a leader in advocacy, and for my profession. I wanted to learn how to better advocate for the profession and the clients we serve. I decided leadership, advocacy, and program and policy development would be my focus areas for this DCE. Dr. Kornblau, a lifelong advocate for disability rights, an OT, a professor, and a lawyer, would be the perfect mentor and supervisor for my DCE. Dr. Kornblau, Founder and CEO of the Coalition for Disability Health Equity, are based out of Washington, DC; however, due to the pandemic, I completed my capstone experience and project remotely.

The purpose of my capstone experience was to learn about health policy and share my knowledge with OT students and professionals, so we can all be better advocates for the profession and our clients. My final capstone project was the creation of *OT on the Hill's* podcast series. The series followed and was adjusted according to current events and issues that

impacted the OT profession and the clients we served. I set three long-term goals: first, inform the community, both OT and non-OTs, on current issues and events through various social media platforms; second, lecture NSU OTD students on policy, leadership, and advocacy; and lastly develop a pathway for a leadership position in the OT profession and community.

In order to complete these goals, the first step was to perform a literature review on material explaining policy; identifying the intersection between policy and OT; and informing the reader on current issues, policies, and programs that impact the OT profession and the clients we serve.

Literature Review

A literature review has been conducted using CINAHL Complete, Google Scholar, and the American Occupational Therapy Association (AOTA) using the terms health policy, public policy, and policy combined with OT. This literature review included articles explaining policy; articles addressing the intersection of policy and OT; and articles and resources regarding current events and issues that impacted the OT profession and the clients we serve on micro and macro levels.

For the purpose of this capstone project, the focus was set on public and organizational policy. Policy in its simplest form defines and outlines ideas, values, and actions set by the government or organizations for individuals and communities to follow and observe (Lencucha & Shikako-Thomas, 2019). Cairney (2011) added that public policy is developed and applied by the government to different areas such as in education and healthcare. Organizational policy, such as hospital policy, though developed and implemented by the organization, must also follow government policies and standards (Lencucha & Shikako-Thomas, 2019). Lencucha and Shikako-Thomas (2019), found that policy occupies and bears all aspects of the OT profession,

from the profession's scope of practice to the environment where our clients live. Osman et al. (2020) concurred and reported that policy has a pervasive effect on the OT practice and the clients served. The understanding and awareness of policy is of the utmost importance as it leads to being in control of one's career, profession, and life.

Every aspect of the OT profession, from the practitioners to the clients we serve, are impacted by policy. As a result of the influence policy has on future planning and decision making, it in turn becomes a determinant to health and social experiences (Pitonyak et al., 2020). Because health and social policies greatly impact the OT profession, clinicians should be more involved in developing these policies. Clinicians would be so adept at transitioning into this arena as they are skilled at observing and identifying the connection between the person, environment, and occupation. They have the knowledge and training to skillfully assess and analyze routines, roles, and rituals and in turn have a unique perspective and ability to recognize when policies hinder or benefit an individual's participation in one's community or daily occupations (Osman et al., 2020). Lenucha and Shikako-Thomas (2019) expressed policy as a tool occupational therapist can utilize to support and improve our clients' environment.

Policy has implications on a micro level which include the individual, families, and communities; and on macro levels involving social inclusion, health care, and educational services (Osman et al., 2020). Osman et al. (2020) pointed out, policy and the actions or inactions it yields, may foster or hinder individual or societal engagement. Osman et al. (2020) argued that despite the obvious importance and value the OT profession could contribute to policy development and implementation, the profession is still frequently overlooked. The reader might wonder, so how do we get a seat at the policy table? Osman et al. (2020) found that OT engagement with policy involved what the researchers termed reaching in and reaching out.

Reaching in includes generating data to inform policy and consulting with other occupational therapists and healthcare providers to engage in policy. Reaching out includes building relationships, educating OT practitioners and students on policy, and developing position statements (Osman et al., 2020).

According to The American Occupational Therapy Association (AOTA) (2018), one policy, the therapy cap, set in 1997 by the Balance Budget Act had devastating effects on both occupational therapy practitioners and the clients we serve, and for over two decades, the OT profession advocated and lobbied to end this policy. With great acknowledgement and relief, AOTA's president, A. Lamb (2018) reported that because of the efforts of occupational therapists writing thousands of letters and placing thousands of phone calls to Congress, as well as the works from AOTA gathering critical data and lobbying, the therapy cap was permanently repealed and now the clients we serve will never be at risk of denial of OT services. This is a great example demonstrating the connection between advocacy, leadership and policy and how to positively impacts the profession.

Another example of how staying aware and advocating could benefit the OT profession, is a long-standing act, the Older Americans Act (OAA), that recently become a law: The Supporting Older Americans Act of 2020. This law extends OAA for an additional five years and increases funding by 7 percent in 2020 and then 6 percent each year from 2021 to 2024 (Bunis, 2020). This is an opportunity for the profession to demonstrate its value and expand the profession's scope of practice to emerging and non-traditional settings including a community-based setting. The objectives for the act emphasize the needs of older adults involved with community and home-based services by offering policy principles and financial support for these services (Marfeo, 2020). Marfeo (2020) describes the opportunity OT can play by clearly

connecting the link between OT and the OAA as leaders in promoting older adults' community engagement, social participation and healthy aging.

Yet another example of understanding policy and the intersection between policy and OT is an article discussing primary care for underserved populations with the goal of incorporating an occupational therapy position in a federally qualified health center (FQHC), (Murphy et al., 2017). This article reviewed the importance of understanding and navigating policy considerations and administrative aspects when promoting and advocating for the OT profession and how a position in primary care will benefit underserved populations. This article navigated through regulations of the Affordable Care Act (ACA), logistics of FQHCs, and solutions based on a needs assessment that was performed. Ultimately, Murphy et al. (2017) concluded that gathering evidence to promote the effectiveness occupational therapy has on underserved individuals and the primary care sector is of the utmost importance and in doing so, one must understand how to navigate policy. This is also an example of how to "reach in" with policy.

Thus far, resources have discussed policy and OT on a micro level. In an article produced by the American Journal of Occupational Therapy (AJOT), the authors suggest an opportunity for the profession to become involved with policy on a macro level through a framework called the Life Course Health Development (LCHD). The authors proposed, through the use of the LCHD Framework, practitioners can advocate on a larger scale for policy, population health outcomes, and occupational injustices (Pitonyak et al., 2020). Pitonyak et al. (2020), based this framework on the epidemiologic study of social determinants of health and health disparities. The LCHD framework was developed on the foundation that social and biological factors impact critical periods of health development. The authors reasoned that by using the LCHD framework, OT practitioners can become an agent of change and promote

equity-oriented practice and social responsiveness by gaining a deeper understanding of the limits policy can place on daily occupations, roles, routines, and overall health and wellbeing (Pitonyak et al., 2020). The research article conducted by Lencucha and Shikako-Thomas (2019), provided an opportunity to apply the framework as it displayed how policy shapes the environment and occupational opportunities. OT can focus on policy on a macro level by supporting occupational opportunities for homelessness or those at risk and employment opportunities for those transitioning from institutions, such as the prison system or health care, back into the community (Lencucha & Shikako-Thomas, 2019).

This portion of the literature review focuses on current issues, events and policies that, as a result of understanding and engaging in policy and advocacy, the OT profession and the clients we serve, have recently experienced positive outcomes. Current issues and new policies seen thus far are numerous, but major successes include the Home Health Flexibility Act, reduced cuts to Medicare Part B, and the Expanded Telehealth Access Act.

In April 2020, the Centers for Medicare & Medicaid Services (CMS) temporarily allowed occupational therapists to open home health therapy cases as part of an emergency health rule (Bopp, 2020a). This rule was to expire when the Public Health Emergency ends; however, on December 21, 2020 Congress passed their final bill of the year and revealed language from the Medicare Home Health Flexibility Act (H.R.3127/S.1725) allowing occupational therapists to continue to open cases after the emergency ends (Bopp, 2020a). This is a major win for the OT profession, but there is still advocacy work to be done as CMS must still issue a rule to make this provision effective.

According to AOTA (2020), occupational therapists and other healthcare providers nearly faced a 9% cut to Medicare Part B payment rates, due to large increases to primary care

evaluation and management (E&M); however, as a result of advocacy from the profession and other allies, Congress passed an end-of-the-year \$900 billion COVID-19 relief bill, which included a reduction of the 9% cut to 3% (AOTA, 2020). The bill included an additional \$3 million for the Medicare physician fee schedule to aid the practitioners during the public health emergency (PHE) and prevented the Centers for Medicare and Medicaid Services (CMS) from implementing a new add-on code which amounted to roughly 6% of the original cuts (AOTA, 2020).

Lastly, A. Bopp (2020b) reported that Representatives Mikie Sherrill and David McKinley, two congressional champions for the profession, introduced the Expanded Telehealth Access Act (H.R. 8755) on November 16, 2020. The congressional representatives argued that continuing telehealth therapy after the Public Health Emergency (PHE) ends, will benefit individuals living in rural areas and those exposed to other barriers hindering their ability to access a therapy clinic (Bopp, 2020b). The Centers for Medicare & Medicaid Services (CMS) has noted that it alone, does not have the power to extend the current PHE telehealth therapy provisions without Congressional action, so passing this bill is crucial (Bopp, 2020b).

The provided evidence-based research articles and additional articles and resources portrayed the importance of understanding policy and the intersection between policy and OT. Policy impacts every aspect of our career so why not be in the know and be in control of our future career and profession. It was the overarching goal of this literature review and culminating project to make policy more digestible and relatable and connect the role of leadership, OT and policy. After reviewing the material and completing the lecture for the Leadership course, it was gathered that there is still grave need for improving education, awareness, and involvement on advocacy, policy development, and leadership.

Needs Assessment

Through the literature review, discussions with Dr. Kornblau, and attending webinars on current events and issues, it was clear that there is need for advocating for the OT profession to have a seat at the table when policy is involved. OTs are skillfully trained and well versed in rehabilitation interventions, cognition, human anatomy, community resources, and so much more. They understand how each may hinder or foster the client's participation in meaningful relationships, roles, routines, and occupations. This training and knowledge set us up to be a key resource to society and specifically the clients we serve in many circumstances; however, Osman et al. (2020) outlined that despite the obvious importance and value the OT profession could contribute to policy development and implementation, the profession is frequently overlooked due to low visibility compared to other healthcare fields. Despite being overlooked, we must continue advocating for the profession and the skills we bring to any situation.

In order to do so, OT clinicians must understand policy and stay up to date with current events; hence, the creation of *OT on the Hill*. The primary goal of *OT on the Hill* is to spread knowledge and encourage more involvement with policy and OT in a more digestible and understandable way. A trending way to share information and gain understanding and awareness is through podcast series. In 2021, it was reported that approximately 155 million people in the United States listened to a podcast (Winn, 2021). This overwhelming statistic led to the creation of *OT on the Hill's* podcast series and YouTube channel as it addressed the need for promoting further education and awareness on policy to OT students and practitioners.

Osman et al. (2020) found that for the OT profession to be successfully engaged with policy the profession and its' practitioners need to reach in and reach out in their everyday practice and routines. Reaching in includes generating data to inform policy and consulting with

other OTs and healthcare providers to engage in policy. Reaching out includes building relationships, educating occupational therapy practitioners and students on policy, and developing position statements (Osman et al., 2020). The profession promotes staying up to date on evidence-based practice for skilled interventions; so, it also needs to promote staying up to date on policy related matters.

OT on the Hill is a great resource for OT practitioners and students to learn how to effectively build a stronger presence in policy related matters by providing various resources on how to actually reach in and reach out in the community. It is a full-time job to stay up to date and follow along with the current events and news, but if we start incorporating this early, it becomes part of our routine. I would encourage the NSU OTD department, to incorporate policy in each class. This could be done, for example, by assigning monthly discussion posts on current events or policies focused on that specific class (pediatrics, physical disabilities, mental health, etc.). The creation of *OT on the Hill* was based on a need for increasing policy awareness and now consists of a website, podcast series, YouTube channel, Instagram, and Twitter account.

Goals and Objectives Achieved

At the start of my capstone experience, I set three goals to accomplish with the overarching focus of learning about health policy and sharing the knowledge I gained with OT students, professionals, and the community. My 1st goal was to inform the community, both OT and non-OTs, on current issues and events through various social media platforms including *OT on the Hill's* podcast series. The first objective to address this goal was to learn and implement effective communication methods for delivering and promoting health and social policies to the OT profession by attending webinars, lunch-and-learns, and conferences. The second objective was to produce five podcast episodes addressing current issues and policies impacting the OT

community (see Appendix A). The 2nd goal was to present a lecture to NSU OTD students on policy, leadership, and advocacy. The objectives to address this goal were to create a PowerPoint presentation and to present a 90-minute lecture to OTD students during their Leadership course (see Appendix C). My 3rd goal for my capstone experience was to develop a pathway preparing for a future leadership position in the OT profession and community. The first objective to address this goal was to develop a resume tailored to display my work in leadership, advocacy and policy (see Appendix D). The second objective was to network with OT leaders (see Appendix E).

At the end of my capstone experience, I achieved my three goals and their objectives; however, as anticipated, my third goal will be continued after this capstone experience is completed, with modified objectives, as it is not only a goal for my doctoral capstone experience, but also a personal and professional goal; I will be able to say I successfully achieved this long-term goal when I become a leader in the OT community.

A large part of my capstone experience was attending webinars and conferences. During the webinars, I not only listened to gain knowledge on the topic, but also how the presenters provided the material to the attendees. I did this so I could in turn successfully explain the material to others in a digestible, understandable and exciting way in hopes of encouraging others to become involved in policy and advocacy. It was no surprise that COVID-19 was a hot topic for the webinars and conferences hosted by various coalitions, businesses, and organizations, but it was interesting and eye opening to see just how much it pertained to policy development and advocacy as it relates to the clients served by each organization. By attending webinars, I was able to formulate topics used to create resources for the community like *OT on the Hill's* podcast series (see Appendix A).

Additional learning opportunities continuously arouse throughout my 16-weeks because the work in policy and advocacy changes based on current events and issues impacting the OT profession and the clients we serve. Entering my capstone experience, I knew my objectives would need to be fluid and flexible. A perfect example of how I had to change gears and turn my focus towards an area requiring advocacy and attention, happened in the last month of my capstone experience when several states passed new voting laws discriminating against marginalized communities, black voters, and even people with disabilities (Durkee, 2021). To address this current event, Meaggan and I, produced two podcast episodes and invited two additional guests who are both OTs and both strong advocates and leaders. One guest is also an attorney and the other is an occupational therapist who has faced discrimination as she herself has a disability leaving her in a wheelchair. On the episode we discussed voting rights, accessibility and intersectionality and what it means for the occupational therapy profession (see Appendix A). This episode in particular has had 55 views to date.

By setting these three goals and objectives including informing the community on current issues and events through various social media platforms, hosting a lecture on policy to OTD students, and developing a pathway preparing for a future leadership position within the OT profession, I was able to successfully complete my DCE with ample new knowledge on ways to be an advocate, a leader, and a participant in policy development.

Summary

The result of my goals and objectives included the creation of *OT on the Hill's* podcast series (see Appendix A) and the continuation of managing *OT on the Hill's* website including additional current issue pieces, one-minute reads and take action reports (see Appendix B). The three goals achieved helped fill the gap previously identified in the literature, which was a need

for improving education, awareness, and involvement in advocacy, policy, and leadership by spreading knowledge in a more digestible and understandable way to encourage more involvement with policy and OT.

The work completed during this capstone experience was added to the platform, *OT on the Hill*, created by previous NSU OTD students. Meaggan and I produced additional write-ups to *OT on the Hill's* website, including current issues pieces, one-minute reads, and take action posts, and continued to run *OT on the Hill's* Twitter account (see Appendix B). We also created a podcast series, an Instagram account and a YouTube channel providing current information in a new format. *OT on the Hill* will be sustained by previous OT students who are now OT professionals, as well as current and future OT students. Recommendations for future students and work in this area include being an independent learner, taking initiative, reaching out to professionals and start networking early; also, it is important to be flexible and continuously stay up to date on topics and events relating to OT and the clients we serve.

The reader can access the work produced during this capstone experience by referring to the Appendices which provides links to *OT on the Hill's* website and podcast series. The appendix is organized by the podcast series, followed by the website write-ups, and finally the policy lecture slide deck. The podcast series is listed by the episode's title in chronological order of the date recorded and the website write-ups are organized modeling the website's structure.

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Appendices

Appendix A: Podcast Series

- [Home Health Flexibility Act & Occupational Therapy Advocacy](#)
- [OT Advocacy, Immigration Policy, Medicaid Work Requirement Waivers, & the Affordable Care Act](#)
- [OT Advocacy Outside of The Box with Delvin Champagne MSHE, CHES, COTA/L](#)
- [Part 1- Voting Rights & Accessibility with Sandy Hanebrink and Dr. Barbara Kornblau](#)
- [Part 2- Intersectionality & Occupational Therapy with Sandy Hanebrink and Dr. Barbara Kornblau](#)

Appendix B: Website Write-ups

Take Action

- [HCBS Funding in New COVID Relief Package](#)

Current Issues

- [Developments of Immigration and Health Policies](#)
- [Updates on Medicaid Work Requirement Waivers](#)

One Minute Reads

- [Autonomy to Continue After the Public Health Emergency Ends](#)
- [Reduced Cuts to Medicare Part B](#)
- [Special Enrollment Opportunity](#)
- [Intersectional Medical Discrimination](#)

Appendix C: Lecture Presentation

- [Policy, Leadership, and Advocacy Lecture](#)

Appendix D: Advocacy and Leadership Resume

HANNAH HUBBARD, OTD-S, COTA

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404.432.5811

WORK HISTORY

09/2015 to Present

**Certified Occupational Therapy Assistant, Full Time
Emory Healthcare – Atlanta, Georgia**

- Primary member and leader of the facilities Cognitive Rehabilitation and Dementia Management Program
- Train and educate therapy and support staff on protocols created for Dementia care and cognitive rehabilitation to improve overall patient care for long-term and short-term residents
- Plan and implement client-centered and occupation-based interventions to assist clients develop, regain, and maintain their best ability to perform activities of daily living

PROFESSIONAL EXPERIENCE

12/2020 to 04/2021

**Doctor of Occupational Therapy Resident Intern, Full Time Internship
The Coalition for Disability Health Equity (CDHE) – Washington, DC**

- Education: Gained advanced training and experience in advocacy, leadership, and policy development as a member of the CDHE - a coalition of self-advocates and researchers working with public health organizations and advocacy groups supporting the inclusion of individuals with disabilities in all provisions of healthcare and healthcare reform
- Assisted with the preparation of evidenced based advocacy sign-on letters/position statements to defend individuals with disabilities and other marginalized communities against new state voting laws
- Created OT on the Hill's podcast series tailored to discuss policy, advocacy, and current events impacting the occupational therapy profession and the clients it serves

12/2020 to Present

**Non-Clinical COVID-19 Vaccine Clinic Staff, Volunteer
Emory Healthcare (EHC) – Atlanta, Georgia**

- Operated various Electronic Medical Record platforms to assist and verify patient documents, consent forms, and second dose scheduling for the COVID-19 vaccine
- Ensured optimal operation of Emory Healthcare's Vaccine Clinic in order to serve the community through the administration of COVID-19 vaccines

EDUCATION

Expected Graduation
May 2021

**Clinical Doctorate of Occupational Therapy
Nova Southeastern University – Tampa, Florida
Dr. Pallavi Patel College of Health Care Sciences**

- 2015 **Associate of Occupational Studies in Occupational Therapy**
Pima Medical Institute – Denver, Colorado
 Graduated with honors. Overall 3.9 GPA
- 2012 **Bachelor of Human Sciences: Human Development and Family Studies**
Auburn University – Auburn, Alabama
 College of Human Sciences

HONORS

- 2018 to Present Pi Theta Epsilon Occupational Therapy Honor Society

CERTIFICATIONS

- 2016 to Present Certified Dementia Care Specialist
 2016 to Present Certified in Physical Agent Modalities
 2015 to Present Certified and Licensed Occupational Therapy Assistant
 2015 to Present CPR and First Aid Certified

RESEARCH

- 02/2018 to Present **Researcher**
Nova Southeastern University – Tampa, Florida
 “Promoting Safe, Comfortable Sex: Efficacy of an Occupational Therapy Program”

PROFESSIONAL PRESENTATIONS

- November 2020 Presented research findings as a short course to the Florida Occupational Therapy Association and the Maryland Occupational Therapy Association
- April 2021 Presented research findings as a short course to the American Occupational Therapy Association
- 2019 to Present Lectured research material and findings to three of Nova Southeastern University’s OTD cohorts

PROFESSIONAL AFFILIATIONS

- 2018 to Present Member of Pi Theta Epsilon
 2017 to 2018 Secretary of Student Occupational Therapy Association
 2017 to Present Member of Student Occupational Therapy Association
 2017 to Present Member of Special Olympics Georgia Honorary Board Committee
 2017 to Present Member of Georgia Occupational Therapy Association
 2013 to Present Member of American Occupational Therapy Association

REFERENCES

Available upon request

Appendix E: Contacts and Resources

Contacts:

Andy Bopp Senior Legislative Representative at American Occupational Therapy Association

Barbara Kornblau, JD, OTR/L

Delvin Champagne, MSHE, CHES, COTA/L, ATP

Micah Fialka-Feldman, self-advocate for disability rights

Rachelle Dorne, M. Ed., Ed.D., OTR/L, CAPS

Sandy Hanebrink, OTR/L

Resources for Advocacy and Policy:

[A Guide to Disability Rights Laws](#)

ADA National Network

Administration for Community Living

Americans with Disabilities Act

Health Equity and Accountability Act

National Disability Rights Network

Network of OT Practitioners with Disabilities & Supporters

The Rehabilitation Act of 1973