

2013

NBCOT OTR[®] Matrix Study

A comparison study of the 2012 NBCOT[®] Validated Domain, Task, and Knowledge Statements for the OCCUPATIONAL THERAPIST REGISTERED OTR[®] and the 2011 ACOTE[®] Accreditation Standards for a Master's-Degree-Level Educational Program for the Occupational Therapist (OT)



National Board for
Certification in
Occupational Therapy

About NBCOT®

The National Board for Certification in Occupational Therapy, Inc. (NBCOT®) is the national certification body for occupational therapy professionals in the United States.

The mission of NBCOT is to serve the public interest by advancing client care and professional practice through evidence-based certification standards and the validation of knowledge essential for effective practice in occupational therapy.

Currently, 50 states, Guam, Puerto Rico and the District of Columbia require NBCOT initial certification for occupational therapy state regulation (i.e., licensing).

NBCOT certification programs are accredited by the American National Standards Institute (ANSI) and the National Commission for Certifying Agencies (NCCA). NBCOT is a member of the Institute for Credentialing Excellence (ICE).

Introduction

The National Board for Certification in Occupational Therapy NBCOT® is the certification agency for occupational therapy professionals in the United States, certifying eligible individuals as OCCUPATIONAL THERAPIST REGISTERED OTR® or CERTIFIED OCCUPATIONAL THERAPY ASSISTANT COTA®.

NBCOT employs a formal process to grant a certification credential to an individual who a) meets academic and practice experience requirements; b) successfully passes an examination to assess knowledge for practice, and; c) agrees to adhere to the NBCOT Candidate/Certificant Code of Conduct.

To meet the requirements of a) above, each certification candidate must be a graduate - or meet equivalency standards - from a program accredited by the Accreditation Council for Occupational Therapy Education ACOTE® of the American Occupational Therapy Association, Inc. AOTA®. The primary mission of ACOTE is to “foster the development and accreditation of quality occupational therapy programs”. To this end, ACOTE sets a standard for occupational therapy/occupational therapy assistant education and accredits those programs that meet these standards. ACOTE continually evaluates its accreditation standards

and processes, and proposes changes to its standards based on the results of these evaluations. The *2011 ACOTE Accreditation Standards for a Master's-Degree-Level Educational Program for the Occupational Therapist (OT)* become effective July 31st, 2013.

To meet the requirements of b) above, NBCOT develops certification examinations that measure the knowledge required for entry-level occupational therapy practice. The content standards of these examinations are aligned to an examination blueprint developed from the results of a practice analysis study. Practice analysis is the critical foundation for developing a psychometrically sound and legally defensible credentialing examination. The primary goal of a practice analysis study is to collect data that describes current practice and to assure that there is a linkage between exam content and practice.

Accreditation bodies that oversee certification agencies require comprehensive and periodic studies as an essential element for the development of certification examinations. Adhering to these standards, NBCOT systematically re-evaluates the test specifications of its certification examinations to ensure content validity and appropriate evaluation of what is required to practice as an OTR or COTA professional. Re-evaluation is routinely conducted by completing a review of

blueprint content standards and via regular practice analysis studies.

In 2012, NBCOT completed the latest OTR practice analysis study with OTR entry-level certificants (0-36 months from initial certification) across the country. Survey respondents were asked to consider job requirements of an OTR in terms of domains, tasks, and knowledge. Domains are the major areas of responsibilities or activities of a job or profession. Tasks are the individual functions, whether mental or physical, required for certain aspects of a job or profession, essentially a description of critical duties performed. Knowledge statements describe in detail how to do a task. They include information, actions, or other learnable skills that an individual must possess in order to perform a task. Survey respondents were asked to evaluate the OTR domains, tasks, and knowledge on criticality and frequency rating scales. Criticality was defined as the degree to which a stakeholder would be physically, emotionally, or financially harmed if the certificant failed to perform the task competently. Frequency was defined as the time a competent practitioner spends performing duties within each domain or task. The results of this practice analysis study led to the development of the *2012 NBCOT Validated Domain, Task, and Knowledge Statements for the Occupational Therapist Registered OTR®* guiding the examination blueprints (content outline) for the OTR certification examinations administered from January 2014 onward.

Purpose of the Matrix Document

From an occupational therapy educator perspective, the completion of the most recent NBCOT practice analysis study and the implementation of the *2011 ACOTE Accreditation Standards for a Master's-Degree-Level Education Program for the Occupational Therapist (OT)*, is a timely reminder of the factors influencing curricular development. While distinct missions drive both

entities, it is the occupational therapy educational community who strive to meet the ACOTE accreditation standards as well as prepare their students for the NBCOT OTR certification examination.

This report is a review of both documents; the results of which may help to serve as a basis for discussion during curricula review.

Method

Using the *2012 NBCOT Validated Domain, Task, and Knowledge Statements for the OTR* as the anchor document, a cross-tabulation process was completed by comparing the validated knowledge statements from the NBCOT anchor document with Section B of the *2011 ACOTE Accreditation Standards for the Master's-Degree-Level Educational Program for the Occupational Therapist (OT)*.

Acknowledging that the terminology and ordering/sequencing of statements across both documents is not uniform, a level of interpretation was necessary

in order to align statements with the anchor document.

The matrix appearing in Table 1 Summary of Results records areas of alignment between the NBCOT anchor document (classification descriptions) and Section B of the ACOTE Accreditation Standards.

Domains are specified in bold with a two-digit classification code, tasks are grouped under each domain with a four-digit classification code, and the knowledge statements associated with each task is listed with a six-digit classification code.

Table 1: Summary of Results

| NBCOT OTR Classification Code | NBCOT OTR Classification Code Description (Effective on examinations beginning January 2014) | Master's-Degree-Level ACOTE Standard (Effective July 31st, 2013) |
|-------------------------------|--|---|
| Domain 01 | Acquire information regarding factors that influence occupational performance throughout the occupational therapy process. | |
| Task 0101 | Acquire information about a client's functional skills, roles, context, and prioritized needs through the use of available resources and standardized and non-standardized assessments in order to develop an occupational profile. | |
| Knowledge 010101 | Normal development and function across the lifespan | B.1.1, B.1.2, B.1.3, B.4.4, B.4.7 |
| 010102 | Expected patterns, progressions, and prognoses associated with conditions that limit occupational performance (e.g., stages of disease, secondary complications, outcomes) | B.1.1, B.2.6, B.4.4, B.4.7 |
| 010103 | Processes and procedures for acquiring client information (e.g., client records, observation, interview, occupational profile) | B.1.3, B.4.1, B.4.2, B.4.4 |
| 010104 | Administration, scoring, purpose, indications, advantages, and limitations of standardized and non-standardized screening and assessment tools | B.1.7, B.4.1, B.4.2, B.4.3, B.4.4, B.4.6, B.4.7, B.4.8, B.8.2, B.8.3, B.8.4, B.8.5 |
| 010105 | Influence of client factors, context, and environment on habits, routines, roles, and rituals | B.1.4, B.1.5, B.2.2, B.2.9, B.4.2, B.4.4, B.4.7, B.5.1, B.5.17, B.5.23, B.5.24, B.5.28, B.5.29, B.6.1 |

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|-------------------------------|--|--|
| 010106 | Methods for recognizing and responding to typical and atypical physiological, cognitive, and behavioral conditions | B.1.1, B.1.2, B.1.3, B.2.6, B.2.8, B.4.4, B.5.7, B.5.23, B.5.28 |
| Task 0102 | Analyze evidence obtained from the occupational profile to identify factors that influence a client's occupational performance. | |
| Knowledge 010201 | Therapeutic application of theoretical approaches, models of practice, and frames of reference | B.2.1, B.2.11, B.3.1, B.3.2, B.3.3, B.3.5, B.4.4, B.4.8, B.5.1 |
| 010202 | Activity analysis in relation to the occupational profile, practice setting, and stage of occupational therapy process | B.1.3, B.2.2, B.2.6, B.2.7, B.4.2, B.4.4, B.5.23 |
| 010203 | Internal and external influences on occupational performance (e.g., environment, context, condition, medication, other therapies) | B.1.3, B.1.4, B.1.5, B.1.6, B.2.2, B.2.4, B.2.6, B.2.7, B.2.9, B.4.2, B.4.4, B.4.7, B.5.1, B.5.17, B.5.23, B.5.24, B.5.28, B.5.29, B.6.1 |

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|-------------------------------|---|---|
| Domain 02 | Formulate conclusions regarding client needs and priorities to develop and monitor an intervention plan throughout the occupational therapy process. | |
| Task 0201 | Analyze and interpret standardized and non-standardized assessment results using information obtained about the client's current condition, context, and priorities in order to develop and manage client-centered intervention plans. | |
| Knowledge 020101 | Methods for analyzing results from screening and assessments | B.1.7, B.2.6, B.2.7, B.4.1, B.4.4, B.4.6, B.4.7, B.4.8, B.5.1, B.5.28, B.5.29, B.8.2 |
| 020102 | Integration of screening and assessment results with client occupational profile, client condition, expected outcomes, and level of service delivery to develop a targeted action plan, monitor progress, and reassess the plan | B.1.1, B.1.2, B.1.3, B.1.8, B.2.6, B.2.7, B.4.1, B.4.2, B.4.4, B.4.7, B.4.8, B.4.10, B.5.1, B.5.23, B.5.28, B.5.29, B.5.30, B.5.31, B.6.1, B.8.2 |
| 020103 | Methods for determining program development and client advocacy needs (e.g., aging in place, falls prevention, health and wellness programs, community support groups, in-services) | B.1.2, B.1.3, B.1.4, B.1.5, B.1.6, B.2.3, B.2.4, B.2.5, B.2.6, B.2.9, B.4.1, B.4.2, B.4.4, B.5.1, B.5.4, B.5.17, B.5.18, B.5.19, B.5.20, B.5.21, B.5.24, B.5.27, B.6.4, B.7.5, B.8.2, B.9.3, B.9.12 |

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|--------------------------------|---|--|
| Task 0202 | Collaborate with the client, the client's relevant others, occupational therapy colleagues, and other professionals and staff, using a client-centered approach to manage occupational therapy services guided by evidence and principles of best practice. | |
| Knowledge 020201 | Interprofessional roles, responsibilities, and care coordination (e.g., referral to and consultation with other services) | B.2.3, B.2.4, B.2.5, B.2.9, B.4.1, B.4.2, B.4.5, B.4.9, B.5.7, B.5.18, B.5.19, B.5.20, B.5.21, B.5.22, B.5.25, B.5.26, B.5.27, B.5.28, B.5.29, B.5.30, B.5.31, B.6.4, B.6.5, B.7.7, B.9.1, B.9.3, B.9.8, B.9.9, B.9.10, B.9.11, B.9.12 |
| 020202 | Management of collaborative client-centered intervention and transition plans based on client skills, abilities, and expected outcomes in relation to level of service delivery, frequency and duration of intervention, and available resources (includes communication with family, caregiver, and relevant others) | B.1.1, B.1.2, B.1.3, B.1.8, B.2.3, B.2.4, B.2.5, B.2.9, B.4.1, B.4.2, B.4.5, B.4.9, B.5.1, B.5.7, B.5.17, B.5.18, B.5.19, B.5.20, B.5.21, B.5.22, B.5.24, B.5.25, B.5.26, B.5.27, B.5.28, B.5.29, B.5.30, B.5.31, B.6.1, B.6.6, B.7.1, B.7.7, B.9.1, B.9.3 |
| 020203 | Prioritize goals based on client skills, abilities, and expected outcomes in relation to level of service delivery, frequency, and duration of intervention (e.g., expected length of stay, transition plan) | B.1.1, B.1.3, B.1.4, B.2.2, B.2.4, B.4.1, B.4.2, B.5.1, B.5.17, B.5.23, B.5.27, B.5.28, B.5.29, B.5.30, B.5.31, B.6.1 |

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| Domain 03 | Select interventions for managing a client-centered plan throughout the occupational therapy process. | |
| Task 0301 | Manage interventions for the infant, child, or adolescent client using clinical reasoning, the intervention plan, and best practice standards consistent with pediatric condition(s) and typical developmental milestones (e.g., motor, sensory, psychosocial, and cognitive) in order to support participation within areas of occupation. | |
| Knowledge 030101 | Influence of pediatric condition(s) and typical developmental milestones on areas of occupation | B.1.1, B.1.2, B.1.3, B.2.6, B.5.2, B.5.3, B.5.5, B.5.6, B.5.8, B.5.9, B.5.10, B.5.11, B.5.12, B.5.13, B.5.14, B.5.15, B.5.16, B.5.23, B.5.24 |
| 030102 | Intervention activities for supporting participation in occupations based on current sensory, cognitive, motor, and psychosocial skills and abilities | B.1.1, B.1.2, B.1.3, B.5.3, B.5.5, B.5.6, B.5.8 |
| 030103 | Intervention methods for facilitating or inhibiting sensory, motor, or perceptual processing based on pediatric condition(s), tasks, and environmental demands | B.1.1, B.1.2, B.5.3, B.5.6, B.5.8 |
| 030104 | Intervention methods for improving range of motion, strength, and activity tolerance based on pediatric condition(s) in order to promote occupational performance | B.1.1, B.1.2, B.5.3 |
| 030105 | Group facilitation methods appropriate to pediatric condition(s) and developmental level | B.1.2, B.1.3, B.5.4, B.5.7 |

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| 030106 | Splint design and fabrication, and types, functions, and use of orthotic and prosthetic devices based on pediatric condition(s) and task demands | B.1.1, B.1.2, B.5.11 |
| 030107 | Assistive technology, adaptive devices, and durable medical equipment based on pediatric condition(s), task, and environmental demands | B.1.1, B.1.2, B.1.8, B.2.10, B.5.2, B.5.5, B.5.9, B.5.10, B.5.23, B.5.24, B.5.29 |
| 030108 | Methods for adapting intervention techniques, activities, and environments in response to behaviors and developmental needs | B.1.1, B.1.2, B.1.3, B.1.4, B.2.10, B.5.2, B.5.6, B.5.7, B.5.8, B.5.9, B.5.23, B.5.24, B.5.28, B.5.29 |
| 030109 | Intervention methods for enabling feeding and eating skills based on pediatric condition(s) and developmental level | B.1.1, B.1.2, B.5.2, B.5.5, B.5.6, B.5.14 |
| 030110 | Transfer and positioning techniques based on pediatric condition(s), task, and environmental demands | B.1.1, B.1.2, B.5.2, B.5.5, B.5.10, B.5.12, B.5.13, B.5.29 |
| 030111 | Prevocational and vocational interventions that support transition planning | B.1.2, B.1.3, B.1.5, B.5.2, B.5.5, B.5.17, B.5.26, B.5.27, B.5.29, B.5.31 |
| 030112 | Seating options, positioning devices, and mobility systems based on pediatric condition(s), developmental level, and environmental demands | B.1.1, B.1.2, B.5.2, B.5.5, B.5.10, B.5.12, B.5.13, B.5.29 |
| 030113 | Environmental modifications for maximizing accessibility and mobility within various contexts based on pediatric condition(s), developmental level, and task demands | B.1.1, B.1.2, B.2.10, B.5.2, B.5.5, B.5.9, B.5.13, B.5.23, B.5.24, B.5.29 |

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|-------------------------------|--|---|
| 030114 | Methods for adapting or grading an activity, task, or an environment based on pediatric condition(s), developmental needs and task demands | B.1.1, B.1.2, B.2.10, B.5.2, B.5.3, B.5.5, B.5.6, B.5.7, B.5.8, B.5.9, B.5.24, B.5.28, B.5.29 |
| 030115 | Methods and techniques for promoting the continuation of the interventions within multiple contexts based on current pediatric condition(s), developmental level, and expected outcomes (e.g., home program, caregiver instructions, teacher consultation) | B.1.1, B.1.2, B.1.5, B.1.8, B.2.2, B.2.10, B.5.2, B.5.5, B.5.7, B.5.8, B.5.9, B.5.17, B.5.18, B.5.19, B.5.20, B.5.21, B.5.23, B.5.24, B.5.26, B.5.27, B.5.28, B.5.29, B.6.1 |
| Task 0302 | Manage interventions for the young, middle-aged, or older adult client using clinical reasoning, the intervention plan, and best practice standards consistent with general medical, neurological, and musculoskeletal condition(s) in order to achieve functional outcomes within areas of occupation. | |
| | Knowledge 030201 | Influence of medical, neurological, and musculoskeletal condition(s) on activity selection and areas of occupation |
| 030202 | Rehabilitative strategies and procedures specific to medical, neurological, and musculoskeletal condition(s) (e.g., joint protection, work simplification, energy conservation) | B.1.1, B.1.2, B.5.2, B.5.5, B.5.9, B.5.24 |
| 030203 | Methods and strategies for improving range of motion, strength, and activity tolerance based on general medical, neurological, and musculoskeletal condition(s) in order to promote occupational performance | B.1.1, B.1.2, B.5.3 |

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|--------------------------------------|---|--|
| 030204 | Strategies and procedures for facilitating or inhibiting sensory, motor, and perceptual processing based on general medical, neurological, and musculoskeletal condition(s) | B.1.1, B.1.2, B.5.3, B.5.6, B.5.8 |
| 030205 | Methods for selecting and effectively applying superficial and deep thermal, mechanical, and electrotherapeutic physical agent modalities as an adjunct to participation in an activity | B.1.1, B.1.2, B.5.15, B.5.16 |
| 030206 | Splint design and fabrication, and types, functions, and use of orthotic and prosthetic devices based on general medical, neurological, and musculoskeletal condition(s) and task demands | B.1.1, B.1.2, B.5.11 |
| 030207 | Assistive technology (i.e., high and low tech), adaptive devices, and durable medical equipment based on client needs and general medical, neurological, and musculoskeletal condition(s) | B.1.1, B.1.2, B.1.8, B.2.10, B.5.2, B.5.5, B.5.9, B.5.10, B.5.23, B.5.24, B.5.29 |
| 030208 | Intervention methods for enabling feeding and eating skills based on client needs and medical, neurological, and musculoskeletal condition(s) | B.1.1, B.1.2, B.5.2, B.5.5, B.5.6, B.5.14 |
| 030209 | Transfer methods and positioning techniques based on client needs; general medical, neurological, and musculoskeletal condition(s); task; and environmental demands | B.1.1, B.1.2, B.5.2, B.5.5, B.5.10, B.5.12, B.5.13, B.5.29 |
| 030210 | Seating options, positioning devices, and mobility systems based on client needs; medical, neurological, and musculoskeletal condition(s); task; and environmental demands | B.1.1, B.1.2, B.5.2, B.5.5, B.5.10, B.5.12, B.5.13, B.5.29 |

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|-------------------------------|---|---|--|
| 030211 | Environmental modifications for maximizing accessibility and mobility within context based on client needs; medical, neurological, and musculoskeletal condition(s); and task demands | B.1.1, B.1.2, B.2.10, B.5.2, B.5.5, B.5.9, B.5.13, B.5.23, B.5.24, B.5.29 | |
| 030212 | Ergonomic principles and universal design for health promotion and injury prevention | B.1.1, B.1.2, B.1.6, B.5.3, B.5.6, B.5.9, B.5.23, B.5.24, B.5.29 | |
| 030213 | Methods for adapting and grading tasks and activities based on client needs and medical, neurological, and musculoskeletal condition(s) | B.1.1, B.1.2, B.2.10, B.5.2, B.5.3, B.5.5, B.5.6, B.5.7, B.5.8, B.5.9, B.5.24, B.5.28, B.5.29 | |
| 030214 | Methods and strategies for promoting the continuation of the intervention within context based on medical condition(s) and expected outcomes (e.g., home program, caregiver instructions) | B.1.1, B.1.2, B.1.5, B.1.8, B.2.2, B.2.10, B.5.2, B.5.5, B.5.7, B.5.8, B.5.9, B.5.17, B.5.18, B.5.19, B.5.20, B.5.21, B.5.23, B.5.24, B.5.26, B.5.27, B.5.28, B.5.29, B.6.1 | |
| Task 0303 | Manage interventions for the young, middle-aged, and older adult client, using clinical reasoning, the intervention plan, and best practice standards consistent with psychosocial, cognitive, and developmental abilities in order to achieve functional outcomes within areas of occupation. | | |
| | Knowledge 030301 | Influence of psychosocial, cognitive, and developmental abilities on areas of occupation | B.1.1, B.1.2, B.1.3, B.2.6, B.5.2, B.5.3, B.5.5, B.5.6, B.5.8, B.5.9, B.5.23, B.5.24 |
| | 030302 | Methods for facilitating groups to enhance participants' psychosocial, cognitive, and developmental skills | B.1.2, B.1.3, B.1.4, B.5.4, B.5.7, B.5.8, B.5.9 |

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| 030303 | Approaches (e.g., remediation, compensation, prevention) and interventions (e.g., problem solving, medication management, memory strategies) appropriate for psychosocial and cognitive models of practice (e.g., cognitive behavioral, behavioral, acquisitional, developmental) | B.1.2, B.1.4, B.2.10, B.2.11, B.3.1, B.3.2, B.3.3, B.3.5, B.5.2, B.5.3, B.5.5, B.5.6, B.5.8, B.5.9, B.5.24 |
| 030304 | Environmental modifications to enhance community safety and well-being consistent with occupational roles and client needs | B.5.24, B.1.3, B.1.4, B.1.5, B.2.4, B.2.10, B.5.2, B.5.5, B.5.9, B.5.17, B.5.23, B.5.24, B.5.29 |
| 030305 | Assistive technology and adaptive devices to enhance participation in occupation consistent with psychosocial, cognitive, and developmental abilities | B.1.2, B.1.3, B.1.4, B.1.8, B.2.10, B.5.2, B.5.5, B.5.8, B.5.9, B.5.10, B.5.23, B.5.24, B.5.29 |
| 030306 | Methods for adapting and grading an intervention based on psychosocial, cognitive, and developmental abilities | B.1.2, B.1.3, B.1.4, B.2.10, B.5.2, B.5.3, B.5.6, B.5.7, B.5.8, B.5.9, B.5.24, B.5.28 |
| 030307 | Methods and techniques for promoting the continuation of the interventions within multiple contexts based on psychosocial, cognitive, and developmental abilities (e.g., home program, caregiver instructions, job coach) | B.1.2, B.1.3, B.1.4, B.1.5, B.1.8, B.2.2, B.2.10, B.5.2, B.5.5, B.5.7, B.5.8, B.5.9, B.5.17, B.5.18, B.5.19, B.5.20, B.5.21, B.5.23, B.5.24, B.5.27, B.5.28, B.5.29, B.6.1 |

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|-------------------------------|--|--|
| Domain 04 | Manage and direct occupational therapy services to promote quality in practice. | |
| Task 0401 | Maintain and enhance competence using professional development activities relevant to practice, job responsibilities, and regulatory body in order to provide evidence-based services. | |
| Knowledge 040101 | Professional development activities | B.8.6, B.8.7, B.9.4 |
| 040102 | Methods of analyzing and interpreting research and its application to practice | B.1.7, B.2.11, B.4.6, B.5.30, B.8.1, B.8.2, B.8.3, B.8.4, B.8.5, B.8.6, B.8.7 |
| 040103 | Methods for evaluating, monitoring, and documenting service competency (e.g., self-assessment, peer review) | B.2.8, B.5.30, B.7.6, B.7.7, B.8.7, B.9.4, B.9.6 |
| Task 0402 | Manage occupational therapy service provision in accordance with laws, regulations, accreditation guidelines, and facility policies and procedures governing safe and ethical practice in order to protect consumers. | |
| Knowledge 040201 | Influence of policies, procedures, and guidelines on service delivery | B.2.3, B.2.8, B.5.14, B.5.15, B.5.16, B.5.16, B.6.3, B.6.5, B.7.1, B.7.2, B.7.3, B.7.4, B.7.6, B.7.7, B.9.1, B.9.5, B.9.8, B.9.9, B.9.10, B.9.11, B.9.12 |
| 040202 | Licensure laws, federally mandated requirements and reimbursement policies related to occupational therapy service delivery (e.g., client confidentiality, levels of supervision, plan of care certification/recertification, referral policy) | B.4.5, B.4.10, B.5.14, B.5.15, B.5.16, B.6.2, B.6.3, B.6.5, B.7.1, B.7.2, B.7.3, B.7.4, B.7.6, B.7.7, B.7.8, B.9.1, B.9.5, B.9.6, B.9.8, B.9.9, B.9.10, B.9.11, B.9.12 |

| NBCOT OTR Classification Code | NBCOT OTR Classification Code Description (Effective on examinations beginning January 2014) | Master's-Degree-Level ACOTE Standard (Effective July 31st, 2013) |
|-------------------------------|---|---|
| 040203 | Methods for incorporating risk management techniques and monitoring safety related to occupational therapy service delivery | B.2.8, B.7.6, B.7.7, B.9.1, B.9.5 |
| 040204 | Methods for applying continuous quality improvement processes and procedures to occupational therapy service delivery (e.g., program evaluation, outcome measures) | B.5.30, B.7.6, B.7.7, B.8.6, B.8.7, B.9.5, B.9.6 |
| 040205 | Scope of practice and practice standards for occupational therapy (e.g., delegation, supervision, role delineation) | B.1.5, B.2.3, B.2.8, B.4.5, B.5.14, B.5.15, B.5.16, B.5.25, B.5.27, B.5.30, B.6.4, B.7.2, B.7.3, B.7.4, B.7.7, B.7.8, B.8.7, B.9.1, B.9.4, B.9.5, B.9.6, B.9.7, B.9.9, B.9.10, B.9.11, B.9.11 |
| 040206 | Accountability processes and procedures using relevant technology (e.g., documentation guidelines, components of an intervention plan, coding systems, electronic medical records, written documentation) | B.1.8, B.4.10, B.5.20, B.5.21, B.5.28, B.5.30, B.5.31, B.5.32, B.6.5, B.7.4, B.7.7, B.9.1, B.9.5 |

The cross-tabulation process demonstrated there is a strong linkage between the two documents. Indeed, all knowledge statements in the NBCOT anchor document are reflected in the ACOTE standards. However, given the purposes of the two documents, it is logical to expect some differences. Table 2 lists the ACOTE standards that do not appear in the NBCOT anchor document.

Table 2: ACOTE Standards That Do Not Appear in the NBCOT Anchor Document

| ACOTE Standard | Master's-Degree-Level ACOTE Standard Description (Effective July 31st, 2013) |
|-----------------------|---|
| B.3.4 | Analyze and discuss how history, theory, and the sociopolitical climate influence practice |
| B.3.6 | Discuss the process of theory development and its importance to occupational therapy |
| B.8.8 | Demonstrate basic skills necessary to write a research report in a format for presentation or publication |
| B.8.9 | Demonstrate an understanding of the process of locating and securing grants and how grants can serve as a fiscal resource for research and practice |
| B.9.2 | Discuss and justify how the role of a professional is enhanced by knowledge of and involvement in international, national, state, and local occupational therapy associations and related professional associations |
| B.9.13 | Demonstrate professional advocacy by participating in organizations or agencies promoting the profession (e.g., American Occupational Therapy Association, state occupational therapy associations, advocacy organizations) |

References

NBCOT® (2013). *2012 Practice Analysis of the Occupational Therapist Registered Executive Summary*. Gaithersburg, MD: NBCOT.

2011 ACOTE Accreditation Standards for a Master's-Degree-Level Educational Program for the Occupational Therapist. Retrieved April 8, 2013 from <http://www.aota.org/Educate/Accredit/Draft-Standards/50146.aspx>

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