

**NCTRC POSITION PAPER ON THE LEGAL REGULATION
OF THE PRACTICE OF RECREATION THERAPY**



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Preface

The *NCTRC Position Paper on the Legal Regulation of the Practice of Recreation Therapy* is a direct outgrowth of many years of dedicated service by dozens of individuals who served on the State Recognition Project Committee from 1998 to 2005. The States Recognition Project (SRP) served as a joint task force established by the American Therapeutic Recreation Association, National Therapeutic Recreation Society and National Council for Therapeutic Recreation Certification in an effort to share information and to create a unified document to advocate for the establishment of legal recognition (licensure) within the TR profession. As a result of the SRP effort, a commonly defined Scope of Practice pertaining to the practice of recreation therapy was developed and subsequently accepted by all three participating organizations. Additionally, the SRP was also responsible for the development of a list of terms and definitions pertaining to the practice of recreation therapy. Both of these documents appear in the appendices of the position paper.

The authors of this position paper would like to acknowledge the contributions and legal editorial assistance of Margaret Bloom, Esq., NCTRC Legal Counsel, as well as NCTRC Board Members, past and present, for their support and endorsement of both the SRP project and the position paper contained within this document.

It is hopeful that this document will provide valuable assistance and serve as an impetus to organizational leaders to pursue legal recognition of recreation therapy practice within their given states and provinces.

Respectfully submitted,

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NCTRC Board of Directors
(2003-2006)

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Introduction

The primary purpose of this document is to set forth the position of the National Council for Therapeutic Recreation Certification (NCTRC) with respect to the governmental (legal) regulation of recreation therapy practice by therapeutic recreation professionals within the United States and Canada. A secondary purpose is to provide guidance and direction to professionals and professional organizations that choose to pursue the regulation of recreation therapy practice within their respective states or provinces. A third purpose is to ensure that proposed licensure efforts are pursued in a collaborative manner with NCTRC in an effort to streamline the legislative process, reduce costs, and to assure legal compliance with state and federal trademark laws.

NCTRC recognizes the imperative for therapeutic recreation professionals to actively seek regulation within their respective states and provinces in an effort to protect the public. NCTRC also recognizes the potential negative financial and professional consequences for not pursuing such action. It is advised that professional groups pursue this important goal in a very cautious and deliberate manner and in doing so, establish a collaborative relationship with NCTRC.

NCTRC is a nonprofit corporation, currently accredited by the National Commission for Certifying Agencies (NCCA), the accrediting body of the National Organization for Competency Assurance (NOCA). NCTRC is required to safeguard its credentialing program and maintain the integrity of its certification marks. To this end, NCTRC owns the trademark for the credential Certified Therapeutic Recreation Specialist[®] and the certification mark CTRS[®]. It is the legal and ethical responsibility of NCTRC to protect its trademark registrations and its proprietary examination materials. While NCTRC stands as a willing resource to professional groups seeking licensure for the practice of recreation therapy, legislative initiatives that infringe on NCTRC's trademarks and proprietary materials will be met with immediate opposition from NCTRC and from NCTRC's affected certificants. It is the Council's position that a well developed and carefully exercised plan, established in collaboration with NCTRC, will ensure a successful and effective recreation therapy licensure program, as well as avoid unnecessary delays and expenses due to the illegal use of NCTRC proprietary materials.

This position paper contains five sections designed to convey important information pertaining to the process of legal regulation for recreation therapy practice and NCTRC's critical role in the process.

The five sections are:

- Credentialing and Legal Regulation of Professional Practice in Therapeutic Recreation
- NCTRC Endorsement of the Legal Regulation of Recreation Therapy Practice
- Recommendations for the Establishment of the Legal Regulation of the Practice of Recreation Therapy
- Summary and Conclusion
- Appendices

Credentialing and Legal Regulation of Professional Practice in Therapeutic Recreation

It is widely recognized that occupational groups engage in the credentialing process to establish professional autonomy and recognition in an effort to protect the public. Furthermore, nearly every profession uses credentialing strategies to establish criteria for fairness, quality, competence and safety related to their professional practice. The credentialing process, for the most part, involves three distinct (although at times inter-related) levels of professional recognition: registration, certification, and licensure. According to Knapp and Knapp (2002), each of these processes involves a distinct level of regulation and recognition:

Registration: process by which the possession of a specific credential relevant to performing tasks and responsibilities within a given field is verified.

Certification: voluntary process by which an organization grants recognition to an individual who has met certain predetermined qualifications or standards.

Licensure: mandatory credentialing process by which a government agency grants permission to persons to engage in a given occupation or profession by attesting that those licensed have attained the minimum degree of knowledge and skills required to protect the health, safety, and welfare of the public. (p.2)

The history of professional credentialing within the therapeutic recreation profession reveals that all three levels of recognition (defined above) have been utilized and to some degree are present in the field today. Early in the inception of the therapeutic recreation profession, voluntary registration was established in 1956 by the Council for the Advancement of Hospital Recreation. This voluntary registration program was maintained for more than twenty years until replaced in 1968 by a new plan initiated by the emergence of the National Therapeutic Recreation Society (NTRS). In 1981, a separate autonomous organizational unit was established to oversee a newly adopted two-level registration plan. The new organization, National Council for Therapeutic Recreation Certification (NCTRC), was fully incorporated as a separate entity in 1985. The Certified Therapeutic Recreation Specialist (CTRS) certification program sponsored by NCTRC grew significantly over the ensuing years and is currently represented in all 50 states and five foreign countries. Today, the CTRS certification program is the most prominent and widely recognized credential within the profession of therapeutic recreation. The marks “*Certified Therapeutic Recreation Specialist*” and “*CTRS*” have trademark protection on the federal level in Canada and the United States and also at the state level within all 50 states.

The establishment of legal recognition programs, including licensure, title acts, certification, and registration are quite limited with respect to the practice of recreation therapy. At present, there are three states that have an established licensure program regulating TR professionals: Utah, North Carolina, and New Hampshire, along with several others that are in the proposal phases. Although these three state licensure programs vary with respect to rules and regulations, all do include the base requirement of the passage of the NCTRC Certification Exam as a necessary component of their licensure eligibility criteria. In addition to these established licensure

programs, there are a few other states that maintain certification or registration programs (i.e., Washington and California).

When addressing legal recognition, it is important to consider that there are many different types of "recognition." It is important to realize that legal recognition could be of limited value if reimbursement parties (such as, insurers, the state and federal government) do not authorize reimbursement for services provided by the CTRS. In some states, legal recognition may be required before reimbursement is authorized. In other states, recognition through the reimbursement process may be all that is needed to gain legal status.

Additionally, the CTRS credential might also be recognized in facility standards and hiring practices. Some rehabilitation facilities must provide recreation therapy services in order to be licensed by the state. In such instances, the facility licensure laws may "require" services be provided by a CTRS. As with other forms of legal recognition, only individuals certified by NCTRC as a CTRS may utilize the CTRS credential.

Given the procedural complexities and funding requirements associated with the establishment of a licensure program the process can potentially be quite lengthy and politically challenging. It is hopeful that there will be many more established programs in the near future. However, as legal recognition opportunities become more readily available, it is recommended that TR professional organizations proceed in an organized and deliberate manner utilizing NCTRC as a critical resource within the process.

NCTRC Endorsement of the Legal Regulation of Recreation Therapy Practice

The NCTRC Board of Directors adopted the following proclamation regarding the endorsement of the legal regulation of the practice of recreation therapy on November 2, 2006:

It is hereby acknowledged and accepted that the National Council for Therapeutic Recreation Certification (NCTRC) supports the purpose and intent of the legal regulation of recreation therapy practice, including, but not limited to, professional registry, practice acts, and licensure. NCTRC maintains that the primary purpose and intent of regulation is the protection of public welfare through the establishment and monitoring of competent and ethical professional practice of recreation therapy. Furthermore, it is the intent of NCTRC to work with professional organizations and recognized leaders in a collaborative manner in the pursuit to establish the legal regulation of the practice of recreation therapy.

Further elaboration pertaining to the critical components of NCTRC's position statement on legal regulation of the practice of recreation therapy is provided as follows:

- *Rationale for the Regulation of Recreation Therapy* – While the mission and purpose of the Therapeutic Recreation profession is quite broad (i.e., promoting the importance of play, recreation and leisure in the health and life quality of all people across the lifespan), NCTRC recognizes that the primary focus of governmental (legal) recognition of this

profession is that segment which pertains to *recreation therapy*, that aspect of practice that holds the greatest potential for public harm.

- *Protection of the Public* – While recreation therapy practice has the potential to be beneficial for persons served, it also has the potential to cause harm if not practiced according to the most current therapeutic recreation professional standards and ethical guidelines. The issue of protecting the public from harm resulting from unregulated recreation therapy practice is the most important basis for legal recognition. The process of seeking legal regulation requires that professional leaders provide direct evidence of public harm that has or could result from the unregulated practice of recreation therapy. This is typically provided in the form of “case review” and/or assessment of available qualified service providers and is usually germane to the state or province in which the regulation is being sought.
- *Regulated Practice* – The regulation of practice begins with ensuring that recreation therapy is provided to the public by qualified and competent practitioners. NCTRC standards and entry requirements are based on current knowledge and skills necessary for competent practice and continued competence in the practice of recreation therapy. Standards are based on an independently conducted Job Analysis Study and certification is awarded upon successful completion of a psychometrically valid entrance exam. The NCTRC Job Analysis, NCTRC exam program, and all related information regarding the NCTRC certification process are the copyrighted property of NCTRC, and may not be used without the expressed written permission of NCTRC.
- *Qualified Professionals* – Protecting the public from harm begins with ensuring that recreation therapy is practiced by qualified professionals who practice in accordance to the most current professional standards and ethical guidelines. The strongest indicator of being a qualified therapeutic recreation professional is being certified by NCTRC as a Certified Therapeutic Recreation Specialist (CTRS). The CTRS mark is the most widely accepted and recognized credential pertaining to the practice of recreation therapy and is presently endorsed by the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO), the Commission on Accreditation of Rehabilitation Facilities (CARF), and the Centers for Medicare and Medicaid Services (CMS).
- *Continued Competence* – The CTRS certification reflects more than just initial qualification of the therapeutic recreation practitioner. In addition, the CTRS demonstrates continued qualifications to practice recreation therapy throughout the certification cycle. Such continued qualifications include, adherence to disciplinary standards, mandatory reporting of disciplinary actions, and continued education of the CTRS.
- *Professional Advancement and Recognition* – Legal regulation of recreation therapy practice provides a clear and unequivocal message to the public about the profession’s commitment to responsible action. As such, legal recognition efforts may contribute to the advancement of the profession through public awareness and support.

Recommendations for the Establishment of the Legal Regulation of the Practice of Recreation Therapy

The process to establish an effective legal regulatory program involves complex and multifaceted procedures and often takes several years to complete. While there are no readily available shortcuts to recommend, there are several insightful steps to follow to eliminate potential conflicts and streamline the length and cost of the legislative process. NCTRC recommends consideration of the following critical steps:

- *Recognition of Existing Professional Standards* – Each pursuant of legal recognition of recreation therapy practice should duly recognize and incorporate currently accepted guidelines that outline professional standards of practice and ethical guidelines as endorsed by national professional organizations.
- *Collaborate with NCTRC to Create a Viable Program* – NCTRC stands ready to collaborate with states and provinces to ensure that legal recognition efforts benefit from the national/international perspective and legal guidance available to NCTRC.
- *CTRS as Basis of Legal Recognition* – While each state may have unique circumstances regarding recreation therapy practice (e.g., numbers of professionals, practice settings, etc.), and the process for establishing legal recognition may vary from state to province, there is one universal constant that should be followed: the recognition and incorporation of the NCTRC eligibility requirements and the CTRS credential as the basis of legal recognition of a qualified therapeutic recreation professional. The CTRS credential is the only credential that universally denotes a qualified therapeutic recreation professional.
- *List of Current CTRSs* – All legal recognition programs should include a reference to NCTRC as the most reliable source of information on credentialed recreation therapists. NCTRC maintains a listing of currently credentialed therapists, which is readily available to the public. The most inexpensive and acceptable form of licensure is one that utilizes NCTRC's list as a basis for determining eligibility for initial and continued licensure.
- *Portability* – Given the mobility of health-related professionals in contemporary society, legal recognition programs should ensure a degree of flexibility so that qualified professionals (i.e., CTRS) may move from state to state, province to province, relying on their credential to verify current qualification to practice recreation therapy.
- *Reciprocity* – Related to the concept of portability, reciprocity allows for established licensure programs to automatically recognize and accept other duly established programs in other states or provinces in an effort to facilitate the international market for the practice of recreation therapy. The utilization of the CTRS as the baseline requirement in all licensure programs ensures that reciprocity can exist on an international basis.

- *Scope of Practice* – Recreation therapy is that aspect of practice that holds the greatest potential for public harm and thus should be the focus of practice regulation through legal recognition efforts. The scope of recreation therapy practice is clarified in Appendix A. It should be used consistently in all legal documents establishing the regulation of recreation therapy throughout the United States and Canada.
- *Terminology and Definitions* – While there are numerous concepts and terms associated with the broad field of TR, legal recognition efforts need to focus only on those terms that are most germane to regulating recreation therapy practice. Appendix B contains a listing of “definition of terms” endorsed in December 2004 by the States Recognition Project – a joint committee of ATRA, NTRS and NCTRC.
- *Review Previously Established RT Legislation* – As mentioned earlier in this paper, there are three legally established recreation therapy licensure acts currently in existence in the United States:
 - New Hampshire
(<http://www.gencourt.state.nh.us/rsa/html/NHTOC/NHTOC-XXX-326-J.htm>)
 - North Carolina (<http://www.ncbrtl.org>)
 - Utah (<http://www.rules.utah.gov/publicat/code/r156/r156-40.htm>).

It would be prudent to review these existing licensure bills prior to drafting new recreation therapy legislation in a given state or province. Much can be learned from the review of existing legislation, particularly the fact that the NCTRC eligibility standards and certification exam serve as the entry level requirement for each of the existing state licensure programs.

Summary and Conclusion

National organizations sponsoring professional credentialing programs and governmental regulatory bodies share a common goal: protection of the public from unqualified and incompetent providers. To this end, the purpose of this position paper is to document NCTRC’s unequivocal support for the legal regulation of the practice of recreation therapy within the United States and Canada. NCTRC stands ready to assist and support professional organizations who are attempting to secure legal recognition of recreation therapy within their respective states and provinces. The establishment of a collaborative relationship between NCTRC and professional organizations seeking legal recognition will ensure that the legislative process proceeds in a timely and cost effective manner. Working cooperatively with NCTRC and utilizing authorized NCTRC proprietary materials will also ensure that the network of legislative regulation pertaining to recreation therapy practice throughout the United States and Canada remains portable and accessible to all qualified CTRSs.

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Appendices

- Appendix A: Recreation Therapy Scope of Practice
- Appendix B: Definitions
- Appendix C: Resource List
- Appendix D: Legislative Case Review (NH)

Appendix A: Scope of Practice

The primary purpose of recreation therapy practice is to improve health and quality of life by reducing impairments of body function and structure, reducing activity limitations, participation restrictions, and environmental barriers of the clients served. The ultimate goal of recreation therapy is to facilitate full and optimal involvement in community life.

The scope of recreation therapy practice includes all patient/client services of assessments, planning, design, implementation, evaluation and documentation of specific therapeutic interventions, management, consultation, research, and education, for either individuals or groups that require specific therapeutic recreation or recreation therapy intervention. This scope of practice represents, at a minimum, the process and knowledge base delineated in the most recent National Council for Therapeutic Recreation Certification (NCTRC) Job Analysis Study (Job Tasks and Knowledge Areas for the Certified Therapeutic Recreation Specialist) and delivered by a CTRS consistent with professional standards of practice, and codes of ethics with the intent of enhancing consumer safety.

(Developed via State Recognition Project and accepted by the Boards of Directors of ATRA, NTRS, and NCTRC, 2004)

Appendix B: Terminology and Definitions

Certified Therapeutic Recreation Specialist™ (CTRS®): the professional certification credential issued by the National Council for Therapeutic Recreation Certification® (NCTRC®) indicating the individual has voluntarily met the NCTRC required standards for professional practice. An individual certified in recreation therapy is deemed to have the required knowledge, skills, and abilities to provide services within their scope of practice. The CTRS specification is an official trademark of NCTRC and, as such, is not intended to be used as a job title for employment positions, but may be identified as a requirement or qualification for a specific employment position.

CTRS (Certified Therapeutic Recreation Specialist): certification mark; trademark owned and issued by National Council for Therapeutic Recreation Certification (NCTRC).

Clinical: a process that involves assessment, treatment planning, intervention, evaluation and discharge/transition planning. It is not tied to a specific facility or environment but dependent upon the therapeutic relationship and treatment process.

Clinical supervision: “A consultative, counseling or educational process whereby a qualified and experienced professional assists a supervisee (i.e., professional staff member or student) to maintain or improve quality and appropriate clinical services consistent with assessed client needs and professional standards of practice, thereby reducing the risk of harm to clients.” (Shank and Coyle, 2002)

Community integration/re-entry: purposeful services designed to prepare the individual to make the transition from facility based care to community life after experiencing a significant change in abilities or environmental supports. Community integration involves the application of skills learned or strengthened in a treatment setting to home, work, school, and community environments.

Continuing professional development: a professional responsibility to maintain and update professional knowledge, ability and skill in order to competently practice recreation therapy. To complete recertification requirements at the national level, the qualified professional completes continuing professional development that includes a combination of continuing education, practice/service delivery, and/or examination.

Credentialed professional: a person who is professionally recognized by state law, or a licensing or certification board.

Disability: according to the Americans with Disabilities Act (1991, PL 101-336), a physical or mental impairment that substantially limits one or more of the major life activities of an individual. Disability is also a general term used in Healthy People 2010 to represent the interactions between individuals with a health condition and barriers in their environment.

Impairment: any loss or abnormality of psychological, physiological, or anatomical structure of function. Impairments may or may not be permanent and may or may not result in a disability.

Inclusion: a planning process in which individuals with disabilities have the opportunity to participate fully in all community activities offered to people without disabilities. Inclusion requires providing the necessary framework for adaptations, accommodations and supports so that the individual can benefit equally from an experience.

Job title: the official title assigned to an employment position or category of employment positions by the employing agency or state regulatory entity. The job title is distinct from professional certification credentials.

National Council for Therapeutic Recreation Certification (NCTRC): the nationally recognized certification body for the profession of therapeutic recreation.

Outcomes: observed changes in an individual's health status and functional abilities as a result of services. Outcomes must be measurable, achievable, documented, meaningful, and linked to professional intervention.

Person served: a patient, client, consumer, participant or resident.

Privileging: a formal system used to determine if a staff member has demonstrated the minimum level of competency to carry out a specific intervention or job task. Privileging occurs at an agency or departmental level and is separate from professional certification.

Reasonable and necessary care: active treatment, necessary for the treatment of a particular medical condition or used for diagnostic purposes with a reasonable expectation that services provided will improve functioning and/or contribute to the diagnosis. Recreation therapy is considered reasonable and necessary care when interventions are used as active treatment for specific medical or health related conditions by credentialed recreation therapists (CTRS) in response to physician orders for recreation therapy assessment and treatment.

Recreation therapy: a systematic process that utilizes recreation and other activity-based interventions based upon the assessed needs of individuals with illnesses and/or disabling conditions. The purpose of the RT process is to improve or maintain physical, cognitive, social, emotional and spiritual functioning in order to facilitate full participation in life.

Recreation therapy intervention: the purposeful use of recreation and other select activities and facilitation techniques that are based upon assessed need and intended to produce measurable outcomes related to the improvement or maintenance of human functioning. RT interventions are also of an educational nature and can assist individuals to use play, recreation, and/or leisure to maintain health and participate more fully in life.

Recreation(al) therapist, qualified: an individual who, at a minimum, is a graduate of a baccalaureate degree program in recreational therapy; is currently a Certified Therapeutic Recreation Specialist by the National Council for Therapeutic Recreation Certification; meets any current legal requirements of licensure, registration, or certification; and is currently competent in the field. Recreational therapists assess and treat patients individually using interventions to restore, remediate, or re/habilitate to improve functioning and independence in life activities as well as to reduce or eliminate the effects of illness or disability. (JCAHO, 2003 CAMH.)

Recreation(al) therapy assistant or technician, qualified: an individual who, at a minimum, is a graduate of an associate degree program in recreational therapy; meets any current legal requirements of licensure, registration, or certification or has the documented equivalence in education, training, and experience; and is currently competent in the field. Recreational therapy assistants or technicians assist recreational therapists to assess and treat patients individually using interventions to restore, remediate, or re/habilitate to improve functioning and independence in life activities as well as to reduce or eliminate the effects of illness or disability. A qualified recreational therapist clinically supervises the work of recreational therapy assistants or technicians. (JCAHO, 2003 CAMH)

Scope of practice: delineates the tasks, skills, modalities and intervention techniques that are within the profession's area of expertise.

Standards of practice: statements of professional expectations for service delivery in order to assure systematic provision of recreation therapy services. Such statements are set by the organizations representing the specific profession.

Treatment plan: also known as “intervention plan”, a treatment plan is an individualized plan of care or intervention for a person served by a qualified RT professional (CTRS) based on assessed strengths and needs, and includes goals, objectives and intervention strategies aimed at fostering desirable and necessary outcomes.

Treatment team: also referred to as “intervention team”, and “multidisciplinary, interdisciplinary, transdisciplinary team”. A treatment team is a group of qualified professionals who provide individual and collective treatment to address the needs of a specific individual receiving service.

(Developed via State Recognition Project and accepted by the Boards of Directors of ATRA, NTRS, and NCTRC, 2004)

Appendix C: Resource List

References

- Joint Commission on Accreditation of Healthcare Organizations. (2003). *The comprehensive accreditation manual for hospitals*. Oakbrook Terrace, IL: JCAHO.
- Knapp, L., & Knapp, J. (2002). *The Business of Certification*. Washington, DC: American Society of Association Executives.
- Shank, J., & Coyle, C. (2002). *Therapeutic recreation in health promotion and rehabilitation*. State College, PA: Venture.

Bibliography

- American Therapeutic Recreation Association. (2000). *Standards for the practice of therapeutic recreation*. Alexandria, VA: ATRA.
- American Therapeutic Recreation Association website. Online at <http://www.atra-tr.org/atra.htm>
- Austin, D. R. & Crawford, M. E. (1996). *Therapeutic recreation: An introduction* (2nd ed.). Boston: Allyn and Bacon.

- Bureau of Labor Statistics. (2002). Recreational therapists. *Occupational outlook handbook (2002-2003)*. Retrieved from <http://stats.bls.gov/oco/ocos082.htm#outlook>
- burlingame, j. (Ed.). (2001). *Idyll Arbor's therapy dictionary* (2nd ed.). Ravendale, WA: Idyll Arbor.
- burlingame, j. & Skalko, T. K. (1997). *Idyll Arbor's glossary for therapists*. Ravendale, WA: Idyll Arbor.
- Dell Orto, A. E., & Marinelli, R. P. (Eds.). (1995). *Encyclopedia of disability and rehabilitation*. New York: Macmillan Library Reference.
- Joint Commission on Accreditation of Healthcare Organizations. (2003). *The comprehensive accreditation manual for hospitals*. Oakbrook Terrace, IL: JCAHO.
- Kinney, J. S., Warren, L., Kinney, T., & Witman, J. (1999). Use of therapeutic modalities and facilitation techniques by therapeutic recreation specialists in the northeastern United States. *Annual in Therapeutic Recreation*, 8, 1 –11.
- Kelly, J. R. (1996). *Leisure*. Boston: Allyn and Bacon.
- Miller, K. D. & Schleien, S. J. (N.D.). *A community for all children*. Raleigh, NC: North Carolina Division of Mental Health.
- National Council for Therapeutic Recreation Certification website. Online at <http://www.nctrc.org>
- National Therapeutic Recreation Society. (1995). *Standards of practice for therapeutic recreation services and annotated bibliography*. Ashburn, VA: NRPA/NTRS.
- National Therapeutic Recreation Society website. Online at <http://www.nrpa.org/index.cfm?publicationID=21>
- North Carolina Recreation Therapy Association website. Online at <http://www.ncrta.org>
- Shank, J., & Coyle, C. (2002). *Therapeutic recreation in health promotion and rehabilitation*. State College, PA: Venture.
- Sylvester, C. D., Voelkl, J. E., & Ellis, G. D. (2001). *Therapeutic recreation programming: Theory and practice*. State College, PA: Venture Publishing.
- U. S. Department of Health and Human Services. (2001). *Healthy people 2010*. Retrieved from <http://www.health.gov/healthypeople/document/>
- World Health Organization. (2000). *International classification of functioning, disability, and health*. Geneva, Switzerland: Author.

Appendix D: Legislative Case Review (NH)

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Six

AN ACT relative to the regulation of recreational therapists.

Be it Enacted by the Senate and House of Representatives in General Court convened:

220:1 New Chapter; Recreational Therapists. Amend RSA by inserting after chapter 326-I the following new chapter:

CHAPTER 326-J

RECREATIONAL THERAPISTS

326-J:1 Definitions. In this chapter and RSA 328-F, unless context otherwise requires:

- I. “Board” means the recreational therapy governing board established in RSA 328-F.
- II. “Recreational therapist” means a person currently licensed to practice recreational therapy in the state of New Hampshire.
- III. “Recreational therapy” means a treatment service designed to restore, remediate, and rehabilitate a person’s level of functioning and independence in life activities, to promote health and wellness as well as reduce or eliminate the activity limitations and restrictions to participation in life situations caused by an illness or disabling condition.
 - (a) For purposes of accomplishing therapeutic recreation goals, recreational therapy may include:
 - (1) Remediating or restoring an individual’s participation levels that are limited due to impairment in physical, cognitive, social, or emotional abilities.
 - (2) Analyzing and evaluating recreational and psychosocial activities to determine the physical, social, and programmatic elements necessary for involvement and modifying those elements to promote full participation and maximization of functional independence.
 - (3) Using recreational modalities in designed intervention strategies to maximize physical, cognitive, social, or emotional abilities.
 - (4) Incorporating the individual’s interests and the individual’s family and community to maximize relevance to the individual’s goals.

(5) Promoting the concept of healthy living into treatment strategies to decrease the potential for secondary conditions.

(6) Developing community support and encouraging attitudinal changes to reflect dignity, self respect, and involvement within one's community.

(7) Fostering peer and intergenerational relationships.

(b) Recreational therapy services include, but are not limited to:

(1) Conducting an individualized assessment for the purpose of collecting systematic, comprehensive, and accurate data necessary to determine the course of action and subsequent individualized treatment plan.

(2) Planning and developing the individualized treatment plan that identifies an individual's goals, objectives, and treatment intervention strategies.

(3) Implementing the individualized treatment plan that is consistent with the overall treatment program.

(4) Systematically evaluating and comparing the individual's response to the individualized treatment plan and suggesting modifications as appropriate.

(5) Developing a discharge plan in collaboration with the individual, the individual's family, and other treatment team members.

(6) Identifying, designing, fabricating, applying, or training in the use of, adaptive recreational equipment.

(7) Identifying, applying, and evaluating the use of non-invasive and non-pharmacological approaches to reduce or alleviate pain or manage pain to minimize its impact upon participation.

(8) Identifying, providing, and educating individuals to use resources that support a healthy, active, and engaged life.

(9) Minimizing the impact of environmental constraints as a barrier to participation.

(10) Collaborating with and educating the individual, family, caregiver, and others to foster an environment that is responsive to the needs of the individual.

(11) Consulting with groups, programs, organizations, or communities to improve physical, social, and programmatic accessibility.

326-J:2 Evaluation and Treatment Authorization.

I. Consultation and evaluation by a recreational therapist may be performed without a referral. Initiation of recreational therapy services to individuals with medically-related conditions shall be based on a referral from any qualified health care professional who, within the scope of the professional's licensure, is authorized to refer for health care services.

II. Prevention, wellness, education, adaptive sports and recreation, and related services shall not require a referral.

326-J:3 Prohibition on Unauthorized Practice; Professional Identification.

I. No person shall practice or hold oneself out as being able to practice recreational therapy or provide recreational therapy services in this state unless the person is licensed under this chapter and RSA 328-F. Nothing in this paragraph shall be construed to prohibit students enrolled in board-approved schools or courses in recreational therapy from performing recreational therapy that is incidental to their respective courses of study or supervised work. The board shall adopt rules under RSA 541-A relative to schools or courses allowing students to practice under this paragraph.

II. Licensed recreational therapists may use the letters “TR,” “TRS,” and “CTRS/L” in connection with their name or place of business.

III. A person or business entity, its employees, agents, or representatives shall not use in conjunction with that person's name or the activity of the business the words therapeutic recreation specialist, therapeutic recreation, recreational therapy, recreational therapist, recreation therapy, recreation therapist, the letters “CTRS,” “TRS,” or “TR,” or any other words, abbreviations, or insignia indicating or implying directly or indirectly that recreational therapy is provided or supplied, including the billing of services labeled as recreational therapy, unless such services are provided under the direction of a recreational therapy specialist licensed pursuant to this chapter. A person or entity that violates this paragraph is guilty of a violation for the first offense and guilty of a misdemeanor for any subsequent offense.

326-J:4 Coercion Prohibited. No person shall coerce a licensed recreational therapist into compromising client safety by requiring the licensed recreational therapist to delegate activities or tasks if the licensed recreational therapist determines that it is inappropriate to do so. Licensed recreational therapists shall not be subject to disciplinary action by the board for refusing to delegate activities or tasks or refusing to provide the required training for delegation if the licensed recreational therapist determines that the delegation may compromise client safety.

326-J:5 Eligibility for Licensure.

I. An applicant shall possess the following qualifications to be licensed:

(a) Be at least 18 years of age.

(b) Be of good moral character.

(c) Successfully complete an academic program with a baccalaureate degree or higher from an accredited college or university with a major in therapeutic recreation or a major in recreation or leisure with an option in therapeutic recreation.

(d) Successfully complete a period of field experience as defined by the National Council for Therapeutic Recreation Certification (NCTRC) under the supervision of a Certified Therapeutic Recreation Specialist (CTRS) approved by the educational institution where the applicant has met his or her academic requirements.

(e) Successfully complete the proctored examination administered by the NCTRC.

II. The board may, upon notice and opportunity for a hearing, deny an application for reinstatement of a license or reinstate the license with conditions. Conditions imposed may include a requirement for continuing education, practice under the supervision of a licensed recreational therapist, or any other conditions set forth in the section addressing conditional licenses in RSA 328-F.

III. Notwithstanding paragraph I, the board may grant initial licenses to recreational therapists who were certified by the NCTRC prior to July 1, 2007 and who hold an active CTRS credential.

326-J:6 Renewal of License.

I. Persons licensed as recreational therapists are eligible for renewal of their licenses if they:

(a) Have not violated this chapter or RSA 328-F or demonstrated poor moral character.

(b) Meet continuing competency requirements by completing a minimum of 30 hours of continuing education in formal courses approved by the board and other requirements established by the board rules adopted pursuant to RSA 541-A.

II. The board shall accept continuing education programs that meet the recertification standards of the National Council for Therapeutic Recreation Certification.

220:2 Allied Health Professionals; Definition; Governing Boards. Amend RSA 328-F:2, II to read as follows:

II. "Governing boards" means individual licensing boards of athletic trainers, occupational therapy assistants, occupational therapists, **recreational therapists**, physical therapists, physical therapist assistants, respiratory care practitioners, and speech-language pathologists.

220:3 New Paragraph; Definition; Recreational Therapy. Amend RSA 328-F:2 by inserting after paragraph VIII the following new paragraph:

IX. "Recreational therapy" means "recreational therapy" as defined in RSA 326-J:1, III.

220:4 Allied Health Professionals; Governing Board Established. Amend RSA 328-F:3, I to read as follows:

I. There shall be established governing boards of athletic trainers, occupational therapists, **recreational therapists**, respiratory care practitioners, physical therapists, and speech-language pathologists.

220:5 New Paragraph; Governing Board Membership. Amend RSA 328-F:4 by inserting after paragraph VIII the following new paragraph:

IX. The recreational therapy governing board shall consist of 3 licensed recreational therapists, who have actively engaged in the practice of recreational therapy in this state for at least 3 years, and 2 public members. Notwithstanding the requirements for licensure of professional members under this section, initial appointment of professional members by the governor and council shall be qualified persons practicing recreational therapy in this state. All subsequent appointments or reappointments shall require licensure.

220:6 License Renewal. Amend RSA 328-F:19, I to read as follows:

I. Initial licenses and renewals shall be valid for 2 years, except that timely and complete application for license renewal by eligible applicants shall continue the validity of the licenses being renewed until the governing board has acted on the renewal application. Licenses issued pursuant to RSA 328-A [~~and~~], RSA 326-G, **and RSA 326-J** shall expire in even-numbered years and licenses issued pursuant to RSA 326-C, RSA 326-E, and RSA 326-F shall expire in odd-numbered years.

220:7 Effective Date. This act shall take effect July 1, 2007. Approved: June 1, 2006