

AOTA
2017 Representative Assembly
March 30, 2017
Philadelphia, PA

Final Report

Agenda:	A 1	Charge:	1	Outcome:	Adopted
Title:	Commission on Continuing Competence & Professional Development (CCCPD) SOP				
Originator:	BPPC		Charged To:	BPPC	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of BPPC, I move to adopt the Commission on Continuing Competence and Professional Development (CCCPD) SOP.

Rationale:

- BPPC reviewed and edited for consistency and clarity
- Titles of the board certification and specialty certification were updated for consistency throughout the document. Language related to Association staff was updated for consistency throughout documents.
- Requested clarification on intention of “volunteer sector” (e.g. external to Association or within Association).

Agenda:	A 2	Charge:	2	Outcome:	Adopted
Title:	Board for Advanced and Specialty Certification (BASC) SOP and Attachment				
Originator:	BPPC		Charged To:	BPPC	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of BPPC, I move to adopt the AOTA Board for Advanced and Specialty Certification (BASC) SOP & Attachment.

Rationale:

- BPPC reviewed and edited for consistency, clarity, and to minimize redundancy.
- Titles of the board certification and specialty certification were updated for consistency throughout the document.
- Language in Composition section clarified to reflect: additional ad hoc members, appointed by the CCCPD Chairperson, may be assigned to the BASC as non-voting members at the discretion of the CCCPD Chairperson.
- Updated document to include correct title of AOTA Division to address appeal.
- Longer sections of the document were formatted to a multilevel list for ease of reading.
- Updated policy number reference.

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Agenda:	A 3	Charge:	3	Outcome:	Adopted
Title:	Representative Assembly Coordinating Committee (RACC) Attachment A				
Originator:	BPPC		Charged To:	BPPC	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of BPPC, I move to adopt the Representative Assembly Coordinating Committee (RACC) Attachment A.

Rationale:

- Reviewed edits made by Representative Assembly Coordinating Committee (RACC).
- BPPC reviewed and edited for consistency and clarity.
- Updated policy number reference.

Agenda:	A 4	Charge:	4	Outcome:	Adopted
Title:	Speaker Job Description (JD)				
Originator:	BPPC		Charged To:	BPPC	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of BPPC, I move to adopt the Speaker JD.

Rationale:

- Reviewed edits made by Representative Assembly Coordinating Committee (RACC).
- BPPC reviewed and edited for consistency and clarity.
- Updated policy number reference.

Agenda:	A 5	Charge:	5	Outcome:	Adopted
Title:	Vice Speaker JD				
Originator:	BPPC		Charged To:	BPPC	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of BPPC, I move to adopt the Vice Speaker JD.

Rationale:

- This document was reviewed by BPPC in August 2016 and was approved by the Assembly at the Fall 2016 Assembly meeting. Therefore, the review of this document was focused on suggested minor edits made by the RALC.
- Term of Office was added for consistency in structure across Association documents.

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Agenda:	A 6	Charge:	6	Outcome:	Adopted
Title:	Recorder JD				
Originator:	BPPC		Charged To:	BPPC	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of BPPC, I move to adopt the Recorder JD.

Rationale:

- This document was reviewed by BPPC in August 2016 and was approved by the Assembly at the Fall 2016 Assembly meeting. Therefore, the review of this document was focused on suggested minor edits made by the RALC.
- Term of Office was added for consistency in structure across Association documents.

Agenda:	A 7	Charge:	7	Outcome:	Adopted
Title:	Representative JD				
Originator:	BPPC		Charged To:	BPPC	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of BPPC, I move to adopt the Representative JD.

Rationale:

- Reviewed edits provided by the RALC including reducing years of experience to 1 year in Qualifications section (to promote volunteer leadership).
- BPPC reviewed and edited for consistency and clarity
- The statement related to completion of Rep Prep educational session(s) was moved from Qualifications to the Responsibilities section, as this is a responsibility to be completed following election to the position. Term of Office was added for consistency in structure across Association documents.

Agenda:	A 8	Charge:	8	Outcome:	Adopted
Title:	Occupational Therapy Assistant (OTA) Representative and OTA Rep-Elect JD				
Originator:	BPPC		Charged To:	BPPC	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of BPPC, I move to adopt the Occupational Therapy Assistant (OTA) Representative and OTA Representative-Elect JD.

Rationale:

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- Reviewed edits provided by the RALC including reducing years of experience to 1 year in Qualifications section (to promote volunteer leadership).
- BPPC reviewed and edited for consistency and clarity
- BPPC added information to the Qualifications section for consistency with the Representative JD as well as qualifications indicated per the Bylaws for consistency. Completion of Rep Prep was moved to the Responsibilities section of the document.
- Term of Office was added for consistency in structure across Association documents.

Agenda:	A 9	Charge:	9	Outcome:	Adopted
Title:	Credentials Review and Accountability Committee(CRAC) SOP and Attachment				
Originator:	BPPC		Charged To:	BPPC	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of BPPC, I move to adopt the Credentials Review and Accountability Committee (CRAC) SOP & Attachment.

Rationale:

- Reviewed edits provided by the RALC including changes in qualifications regarding previous volunteer service in the Assembly from “within the past 5 years to within the past 8 years” (to promote volunteer leadership).
- BPPC reviewed and edited for consistency and clarity
- Requested input from the RALC to determine if Chairperson carries out functions independently or continues to operate as a “committee” with committee members.
- Term of Office was added for consistency in structure across Association documents.

Agenda:	A 10	Charge:	10	Outcome:	Adopted
Title:	Agenda Committee SOP				
Originator:	BPPC		Charged To:	BPPC	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of BPPC, I move to adopt the Agenda Committee SOP.

Rationale:

- BPPC reviewed and edited for consistency and clarity
- Term of Office was added for consistency in structure across Association documents.

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Agenda:	A 11	Charge:	11	Outcome:	Adopted
Title:	Representative Assembly Leadership Committee(RALC) SOP				
Originator:	BPPC		Charged To:	BPPC	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of BPPC, I move to adopt the Representative Assembly Leadership Committee (RALC) SOP.

Rationale:

- Reviewed edits provided by the RALC including changes in qualifications regarding previous volunteer service in the Assembly from “within the past 5 years to within the past 8 years” (to promote volunteer leadership).
- BPPC reviewed and edited for consistency and clarity.
- Term of Office was added for consistency in structure across Association documents.

Agenda:	A 12	Charge:	12	Outcome:	Adopted
Title:	Telehealth				
Originator:	COP		Charged To:	Speaker/Board	
Fiscal Imp:	\$1360		Due By:	Immediate	

Motion:

I move to charge the Speaker to deliver the final report of the COP on Telehealth to the AOTA Board of Directors with the request that the Board consider implementation of activities to address the use of telehealth within occupational therapy practice. This includes requesting the Executive Director explore with staff creating a “landing page” to organize telehealth related content on the AOTA website into a centralized location to facilitate access, convenience and utility of information; and, direct staff to discuss additional findings of the COP report and consider the feasibility of investigating strategies to address:

- Continuing education and training needs of occupational therapy practitioners in the area of telehealth (both technology and content related).
- In conjunction with SISC leadership, designation of a “telehealth champion” to serve as a content expert and go-to person on matters related to telehealth.
- Development of additional basic resources related to getting started, legal and regulatory, education and training, links to content on other websites.
- Opportunities for collaboration with the American Telemedicine Association (ATA)

Rationale:

- Telehealth content is currently located in different sections of the AOTA website making it difficult to locate and access.
- No designated area or “landing page” on telehealth currently exists similar to content on topics such as Documentation, Productivity, and ICD-10 coding.
- As identified in this report, there are opportunities to increase service delivery;

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mentorship (professional development); consultation/networking among occupational therapy practitioners in telehealth but those who are interested do not have a central place to find needed information.

- Telehealth is a growing area of interest by AOTA members and will continue to impact our practice.
- The findings of this report yield potential opportunities for occupational therapy practice and telehealth. A coordinated effort by AOTA to assure that occupational therapy is well positioned is critical.
- AOTA has invested staff time and to date has developed a number of resources on the topic of telehealth. However, in spite of these resources and as reflected in this additional charge to COP, additional discussions on an AOTA staff level are warranted.

Agenda:	A 13	Charge:	13	Outcome:	Adopted
Title:	Medication Management				
Originator:	COP		Charged To:	COP	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of COP, I move to adopt the position paper *Occupational Therapy's Role in Medication Management*.

Rationale:

- In the spring 2016 COP was charged by the Representative Assembly Coordinating Council (RACC) to develop an official document that asserts occupational therapy's role in addressing medication management as a self-care/instrumental activity of daily living.
- This document was developed by occupational therapy content experts in conjunction with COP and offers guidance to practitioners, employers, policy makers, payers, and regulatory entities regarding the role of occupational therapy in medication management.
- The document was distributed widely to AOTA volunteer sector groups and staff, and the general membership for review and comment.
- Final edits based on feedback from the external review were incorporated into the final draft submitted to the RA.

Definition: Position Papers—Present the official stance of the Association on a substantive issue or subject. They are developed in response to a particular issue, concern, or need of the Association and may be written for internal or external use.

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Agenda:	A 14	Charge:	14	Outcome:	Adopted
Title:	Primary Care Education in OT Curricula				
Originator:	COE		Charged To:	COE	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of the Commission on Education, I move to approve the new position paper titled “The Importance of Primary Care Education in Occupational Therapy Curricula”.

Rationale:

- The American Occupational Therapy Association (AOTA) has recognized the need to educate entry-level occupational therapy students in occupational therapy’s distinct contribution to primary care settings, as well as the role of primary health care within the various health care delivery systems (AOTA, 2014).
- Purpose of this document is to provide evidence to support the inclusion of content in entry-level occupational therapy programs addressing the ability of entry-level occupational therapy practitioners to work in primary care, and the unique challenges and opportunities available to practitioners in these settings.
- Vision 2025 states that Occupational therapy maximizes health, well-being, and quality of life for all people, populations, and communities through effective solutions that facilitate participation in everyday living (AOTA, n.d.). Therefore, occupational therapy practitioners must be responsive to the changing healthcare environment and prepared to contribute to interprofessional teams in primary care.

Agenda:	B 1	Charge:	15	Outcome:	Adopted
Title:	Reaffirmation of Commitment to Occupation Based Practice				
Originator:	President		Charged To:	RA/BPPC	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

I move that the Representative Assembly adopt the following resolution: ***Reaffirmation of Commitment to Occupation-Based Practice***

Rationale:

Whereas occupation is the core of occupational therapy;

Whereas “adopting occupation as the core concept of occupational therapy is a confirmation and commitment to the original mission and purpose of the profession” (Evans, 1987, p. 627);

Whereas occupation has been defined as “the things that people do that occupy their time and attention; meaningful, purposeful activity; the personal activities that individuals choose or need to

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engage in and the ways in which each individual actually experiences them” (Boyt Schell, Gillen, & Scaffa, 2014, p. 1237);

Whereas “achieving health, well-being and participation in life through engagement in occupation is the overarching statement that describes the domain and process of occupational therapy” (AOTA, 2014, p. S4);

Whereas the profession’s belief that “active engagement in occupation promotes, facilitates, supports, and maintains health and participation” (AOTA, 2014, P. S4) in daily activities that are found to be purposeful and meaningful to the client;

Whereas occupational therapy’s distinct value is to improve health and quality of life through facilitating participation and engagement in occupations--the meaningful, necessary, and familiar activities of everyday life. Occupational therapy is client-centered, achieves positive outcomes, and is cost-effective (AOTA, 2015, para 6);

Whereas occupation-based practice is operationalized starting with the evaluation, including an occupational profile, selection of occupational goals, and provision of interventions that use occupation as a the means of intervention as well as the targeted outcomes of intervention, all as described within the *Framework* (AOTA, 2014);

Whereas third-party payers and regulators have called for achievement of outcomes targeted to performance and functional needs;

Whereas, the 2017 AMA *CPT* occupational therapy evaluation codes include language from the *Occupational Therapy Practice Framework* that focuses on performance of activities and participation and requires conducting an occupational profile to clarify intervention goals and outcomes, as described within the *Framework*;

Resolved, the American Occupational Therapy Association supports and promotes occupation-based practice;

Resolved, members of AOTA shall reaffirm their commitment to occupation-based practice in their individual practice settings in evaluation, intervention, and outcomes identification;

Resolved, members of AOTA shall use the language of the *Occupational Therapy Practice Framework* when conducting occupational therapy assessments, developing occupational therapy plans of care, and providing occupational therapy interventions all supported by the *Framework*’s emphasis on occupation;

Resolved, members of AOTA shall document and communicate their professional activities using the language of the *Framework* to show clear links between occupation and improved outcomes for payers, supervisors, and interprofessional teams.

Task Group Rationale: Task Group 1 believes that the timing of this motion is ideal because this is our profession’s Centennial. Members also feel that this motion is an encouragement, not a disciplinary action for practitioners to commit to occupation-based practice. Additionally, they agree that this motion will clearly demonstrate and articulate occupational therapy’s distinct value.

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Agenda:	B 2	Charge:	16	Outcome:	Adopted
Title:	Diverse Workforce: Education, Competence, and Ethics				
Originator:	Cristina R. Smith, Cheranne Bennett, Catherine Hoyt		Charged To:	RA	
Fiscal Imp:	\$1229		Due By:		

Motion:

On behalf of the Coalition of Occupational Therapy Advocates for Diversity (COTAD) and the Multicultural and Diversity Inclusion (MDI) Network, we charge the Speaker of the Representative Assembly (RA) to direct the following bodies of the RA to develop **professional and** educational tools and supports for **occupational therapy professionals academician** practitioners and students to develop skills in cultural competence and humility. These would include:

- AOTA Commission on Education (COE) to develop a comprehensive Blueprint for Teaching Cultural Competence and Humility similar to the Blueprint for Teaching Cultural Competence in Physical Therapy Education developed by the American Physical Therapy Association (APTA, 2014): <https://www.apta.org/Educators/Curriculum/APTA/CulturalCompetence/>
- With the professional development tool **being reassigned to the AOTA Staff** rather than the Commission on Continuing Competence and Professional Development (CCCPD) to develop a section on cultural competence and sensitivity as part of the AOTA Professional Development Tool (PDT) for AOTA members to assess individual learning needs and interests and incorporate themes into a professional development plan: <http://www.aota.org/Education-Careers/Advance-Career/PDT.aspx>
- Ethics Commission (EC) to ~~develop~~ **revise to the extent not otherwise addressed in the an** Advisory Opinion on addressing bias and discrimination to support occupational therapy practitioners and students.

REPORT BY THE Spring 2018 meeting

Rationale:

- These tools would be helpful to support the globally-connected and diverse workforce of the Centennial Vision and to move the profession of occupational therapy toward more effectively meeting society's occupational needs.
- The term "culture" or "cultural" appears 36 times within the OT Practice Framework. All students and clinicians would benefit from additional opportunities for development of knowledge, skills, and attitudes around cultural competence and sensitivity.
- Clinicians and students from underrepresented minority groups continue to informally report incidences of bias and discrimination within

Task Group Rationale: Task Group 1 is in favor of the motion; however, there was consideration throughout the discussion to amend the original motion based on Christina Reyes-Smith's suggestion, which stated: "With the Professional Development Tool (PDT) being reassigned to the AOTA Staff rather than the CCCPD, I would like to recommend that the group consider an amendment to the motion to "...charge the Speaker to request that cultural competence be included within the upcoming professional development training revision and considered for additional continuing education resources."

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Members feel there is a need to focus on cultural competency and humility in our profession. They agree additional tools and resources in this area should be provided to practitioners. Having this motion is a good opportunity to continue to support the Centennial Vision and Vision 2025's initiatives.

Agenda:	B 3	Charge:	17	Outcome:	Defeated
Title:	Supporting OT Practice in the field of Feeding, Eating, and Swallowing				
Originator:	Kimberly Grenawitzke and Kary Rappaport		Charged To:	Speaker	
Fiscal Imp:	\$748		Due By:		

Motion:

We move that the RA charge the Speaker to appoint an ad hoc committee to develop an educational plan around feeding, eating, and swallowing in order to better support those therapists pursuing specialty certification in this practice area, as the education opportunities for OTs by OTs in the realm of dysphagia are minimal and difficult to find.

Rationale:

-- There are many continuing education courses on feeding eating and swallowing that are NOT open for occupational therapists to sign up for. This is not aligned with the AOTA code of ethics in regards to fidelity. AOTA attests that those pursuing specialty certification must independently complete training, but there is no pipeline in place to do so.
 --Other professionals are constantly listed in professional materials (even the American Heart Association) as "swallowing therapists," and occupational therapists are not included in this discussion.

Task Group Recommendation: Recommend to defeat the motion (14 red votes).

Task Group Rationale: This is not a professional standard or policy standard, it is an AOTA business decision. AOTA's continuing education department makes decisions about the type of continuing education courses that are offered.

Agenda:	B 4	Charge:	18	Outcome:	Defeated
Title:	Societal Statement on Sustainability				
Originator:	Julie Dorsey		Charged To:	RA	
Fiscal Imp:	\$0		Due By:	Immediate	

Motion:

On behalf of the RACC, I move to adopt societal statement on Sustainability.

Rationale:

- Sustainability is an important concept, particularly with the globalization of health care concerns.
- Idea for an official document on this topic (which is also addressed by WFOT) was brought forward by a member, discussed by COP and determined by the RACC to be

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appropriate for a societal statement. After member and RACC feedback on the first draft, the second draft is now ready for RA discussion and vote.

Task Group Recommendation: Recommend to defeat the statement (10 red votes, 4 yellow votes).

Task Group Rationale: There is no need for the statement. The document cites sources that AOTA has not endorsed (WFOT document). The document exclusively focuses on the environment and not the person.

Agenda:	B 5	Charge:	19	Outcome:	Adopted
Title:	Role of Occupational Therapy in Reducing Opioid Drug Abuse				
Originator:	Mary Hager		Charged To:	Speaker	
Fiscal Imp:	\$480		Due By:	Fall 2017	

Motion:

I move to charge the Speaker to appoint a small Ad Hoc Committee of content experts to compile resources and information related to the role of occupational therapy in reducing **and preventing** opioid drug abuse. The committee shall identify existing resources and information that could be made available to AOTA members and state occupational therapy associations to use to advocate **for the role that occupational therapy contributes can play in addressing this issue as an alternative adjunct to treatment.** A report should be made to the RA at its fall 2017 meeting.

Rationale:

- The abuse of opioid drugs has reached epidemic proportions in the United States
- Occupational Therapy Practitioners can play a major role in decreasing opioid abuse
- This motion aligns with AOTA's Strategic Priorities: "Maximizes health, well-being, and quality of life" and "Promote occupational therapy's role in meeting client and system needs as new service delivery models evolve."

Task Group Recommendation: The task force supported this motion but had lots of discussion about the extent of the motion as to whether it should be limited to opioid use or should be extended to include other substance abuse and pain management. Some members objected to the idea that occupational therapy was an "alternative" treatment.

Task Group Rationale:

- The motion to be timely and relevant with current societal trends.
- OT services are valuable in the treatment of addiction.
- Opioid addiction is one of many substances that OT's do and should address.
- New programs that deal with prescription opioid abuse in addition to the illegal drug abuse are being developed. This is timely and relevant for OT to be involved.
- The United States has a crisis in health care related to the epidemic of prescription opioid addiction and overdose.
- U.S. Surgeon General and the website and campaign for all health professionals to play a role in intervening in this public health crisis.

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- I do believe it is important to provide educational materials on opioid use and successful OT interventions, both for OT practitioners and external audiences. The broader picture of substance use should be inclusive of all substances and what OT can offer.
- Some feel that the scope of the research should be broader and cover more abuse topics.
- More resources from AOTA on our role, evidence-based interventions, and screenings for and treatment of opioid addiction would be helpful to expand our role in prevention and treatment ultimately addressing occupational performance.
- This motion would help practitioners by providing them with evidence and recommendations for OTs role in combating this terrible problem.

Agenda:	B 6	Charge:	20	Outcome:	Adopted
Title:	Creation of an Academic Fieldwork Coordinator (AFWC) Leadership Council				
Originator:	Jamie Geraci		Charged To:	COE	
Fiscal Imp:	\$2430		Due By:		

Motion:

We move that the Representative Assembly create an AFWC division of the Academic Leadership Council under the COE (thereby adding an Attachment C) forming an **Academic Fieldwork and Capstone Coordinators – Academic Leadership Council (AFWCC-ALC)**. This proposed standing committee will follow the same standard operating procedures as the OT-ALC and OTA-ALC.

NOTE: OT-ALC and OTA-ALC are the Program Directors. Each group has an elected chairperson who sits on the COE.

Rationale:

1. Recognizing the growing importance and need to address fieldwork & experiential requirements of academic programs [AOTA Board Ad Hoc Committee on Fieldwork], it is essential that the Association create a body specifically focused on addressing their issues.
2. Due to the ever-changing demands in higher education, the current structure of OT-ALC and OTA-ALC allows limited opportunity to address issues relevant to fieldwork and the experiential components of academic programs. Note: AOTA Organizational Documents demonstrate that AFWCs are not represented
<http://www.aota.org/~media/Corporate/Files/AboutAOTA/Governance/AOTAGovernChart.pdf>
3. Provides a venue to bring issues to the Representative Assembly with a structured organized voice.
4. <http://www.aota.org/AboutAOTA/Get-Involved/BOD/2014-17-Strategic-Goals.aspx> see goal #3 Linking education, research, and practice. The AFWC is a link between the clinical sites and the academic site (practice and education)

Task Group Recommendation: Members of task Group 3 support this measure. The only addition may be to allow Capstone Coordinators to also attend

Task Group Rationale:

- It has become increasingly important to focus attention not only the fieldwork requirements, but the experiential requirements, as well, with the growing number of OTD programs.

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- Fieldwork and experiential requirements across programs are becoming increasingly more challenging and there is a need to have organized and consistent leadership addressing this area.
 - Having a united, national voice would help get issues to the forefront.
 - With the increased demand of time and effort required in placing students, our regional consortium has not had opportunities to address the current issues.
 - Because we are expanding educational tears and opportunities (OTD entry level degrees and the proposed Bachelor's level OTA degrees) it is imperative that support, training and voice is given to this body within our organization.
 - The support of leadership (such as those who attend ALC meetings) is key to operating a successful fieldwork program.
 - Fieldwork and experiential requirements across programs are becoming increasingly more challenging. On-boarding, compliance issues, payment for fieldwork, and State Authorization Reciprocity Agreements need to be addressed
 - As we increase the number of programs and other contextual factors emerge, issues surrounding FW will grow more complex and benefit from more regular AFWC-focused discussion and as-needed collaboration with ALC.
 - This leadership could propel us forward and give us more opportunity to collaborate and think toward the future as programs continue to expand and quality fieldwork sites are getting more difficult to find.
 - As this motion is designed to address both fieldwork and the experiential aspects of academic programs I wonder if the Academic Fieldwork Coordinators ALC title is inclusive enough. It looks like the new ACOTE standards will be requiring designated Capstone Coordinators for all entry-level OTD programs. Is it too cumbersome (alphabet soup) to have the AFW&CC-ALC?