

2/18/2025



The Occupational Therapy  
Association of Oregon

Honorable Chair and Members of the House Committee on Behavioral Health & Healthcare,

I am Katie O'Day, President of the Oregon Occupational Therapy Association, and I'm here today to strongly advocate for HB 2357, the Occupational Therapy Licensure Compact bill.

Occupational therapy has a rich history dating back to the late 1800s, when psychologists and social reformers recognized the therapeutic value of meaningful activity in mental health treatment. Our founders understood that engaging patients in purposeful occupations was crucial for their recovery and wellbeing. This understanding revolutionized mental health care, moving away from purely custodial approaches to active, occupation-based inclusive treatment for individuals with mental disabilities.

The profession expanded significantly during World Wars I and II, where occupational therapists played a crucial role in rehabilitation hospitals, helping wounded soldiers regain function and return to civilian life. This work demonstrated the power of occupation-based intervention for both physical rehabilitation and psychological recovery from trauma. Today, this dual expertise in both physical and mental health continues to distinguish our profession, making us uniquely qualified to address the complex intersection of physical, cognitive, and psychological challenges that many individuals face.

Occupational therapy is a client-centered health profession that empowers individuals to engage in meaningful daily activities - what we call 'occupations.' These occupations include everything from basic self-care to complex job tasks, from playing with grandchildren to managing chronic conditions. Our practice is guided by the Occupational Therapy Practice Framework, which recognizes that meaningful participation in life activities is fundamental to health, wellbeing, and quality of life.

In my dual roles - serving rural community hospitals and our public school system - I witness daily the transformative impact of occupational therapy. In our hospitals in Hood River and Seaside, I evaluate patients' abilities to safely perform essential daily activities after medical events such as strokes, surgeries, or injuries. This involves comprehensive assessments of their ability to:

- Safely navigate their home environment
- Manage personal care tasks
- Prepare meals safely
- Handle medications independently
- Use adaptive equipment when needed
- Access their community safely

We don't just assess - we problem-solve, adapt environments, and train caregivers to ensure successful transitions home. This work is crucial in preventing falls, reducing hospital readmissions, and maintaining independence in our rural communities where resources are limited.

In our school systems, my role is even more diverse. I work with students facing complex challenges, including:

- Supporting students with autism to process sensory information and regulate their emotions

Helping children who've experienced trauma develop self-regulation skills through evidence-based sensory integration approaches

Teaching executive functioning strategies to students with ADHD to organize their materials and manage their time

Collaborating with teachers to implement classroom-wide movement breaks and sensory strategies

Supporting students with severe physical disabilities through specialized seating, positioning, and assistive technology

Addressing feeding challenges for medically complex students

Developing handwriting and fine motor skills crucial for academic success

Our profession is unique in understanding the intersection of sensory processing, trauma, and learning. Research shows that adverse childhood experiences significantly impact sensory processing and nervous system regulation. As occupational therapists, we're specially trained to address these challenges through:

- Trauma-informed sensory integration approaches

- Teaching interoceptive awareness (internal body signals)

- Supporting co-regulation and attachment

- Implementing environmental modifications

- Developing self-advocacy skills

This summer, the OT Compact will begin its initial implementation across participating states. This is a pivotal moment for our profession and our state. The compact represents a carefully crafted interstate agreement that has been developed through collaboration between the American Occupational Therapy Association (AOTA), the National Board for Certification in Occupational Therapy (NBCOT), and the Council of State Governments.

Oregon stands at a crucial decision point. By passing HB 2357, we can ensure our state is among the early adopters of this innovative solution to workforce challenges. If we delay, we risk:

- Losing qualified practitioners to compact member states

- Reducing our attractiveness to traveling therapists

- Limiting our ability to utilize interstate telehealth services

- Creating unnecessary barriers for military spouses and relocating practitioners

The compact has been thoughtfully designed with important safeguards:

- Requires FBI fingerprint-based criminal background checks

- Maintains state regulatory board authority

- Preserves consumer protections

- Ensures practitioners meet all jurisdictional requirements

- Facilitates sharing of disciplinary information between states

Currently, Oregon faces a critical shortage of occupational therapy practitioners, particularly in our rural areas. While we're developing new educational programs, the immediate need is pressing. The Occupational Therapy Licensure Compact would:

- Improve workforce mobility and recruitment

- Enable seamless telehealth service delivery
- Support rapid response to healthcare needs
- Enhance professional development opportunities
- Create cost efficiencies compared to maintaining multiple state licenses

The aging of our population, combined with increasing mental health needs and rising rates of developmental disabilities, makes this compact more crucial than ever. Studies project a 33% increase in demand for occupational therapy services over the next decade. Without joining the compact, Oregon risks:

- Continued workforce shortages
- Reduced access to specialized services
- Delayed care for vulnerable populations
- Increased healthcare costs due to preventable hospitalizations
- Limited ability to attract new practitioners

This isn't just about making licensing easier - it's about ensuring Oregon remains competitive in attracting and retaining qualified occupational therapy practitioners. It's about providing our citizens with access to specialized services when and where they need them. It's about being part of a forward-thinking solution to healthcare delivery.

I urge you to support HB 2357. This legislation represents a carefully considered, professionally endorsed approach to addressing our workforce challenges while maintaining the highest standards of patient care and safety.

Thank you for your time and consideration. I'm happy to answer any questions."

Katie O'Day, MOT, OTR/L  
President

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