Behavioral Health Sub-Report Recreational Therapy

Overview

The practice of recreational therapy is regulated in four other U.S. jurisdictions outside of Utah: the District of Columbia, Oklahoma, New Hampshire, and North Carolina. In Utah, the regulation of recreational therapists is overseen by the Division of Professional Licensing, Department of Commerce. Current license types include Master Therapeutic Recreation Specialist (MTRS), Therapeutic Recreation Specialist (TRS), and Therapeutic Recreation Technician (TRT).

License Type	Scope	Authority	Education	Experience	Exam
MTRS	Non-Mental Health Therapist	Independent	Master's Degree	~	V
TRS	Non-Mental Health Therapist	Limited Independent	Bachelor's Degree	V	v
TRT	Non-Mental Health Therapist	Supervised	High school/GED + Approved training	~	v

Fee Structure

	Initial Lice	ensing Fee	Annualized Renewal Fee	
License Type	Utah Fee	US Median	Utah Fee	US Median
MTRS	\$70	\$98	\$24	\$37
TRS	\$70	\$133	\$24	\$33
TRT	\$70	\$85	\$24	\$33

Complaints

During the past 5 years (2018-2022), an average of **5** complaints were filed annually against an average of **2** Utah recreation therapists–or .3% of active licensees in any given year. This is very low relative to other BH occupations. On average, **2** of those complaints were found to be substantiated (40%).⁷⁰ Common types of substantiated complaints among behavioral health

⁷⁰ OPLR Analysis of DOPL Substantiated Complaint Data

licensees include violations of ethical standards, incompetence and/or negligence, sexual misconduct, criminal conduct, substance use, unauthorized practice, and failure to release records.

Wait Times and Active Licensees

On average, Utah recreational therapists report that at their primary practice location there is a **~21 day wait time** for those seeking care. This is lower than the **~37 day** average across Utah's behavioral health care field, but higher than the **10 day CMS** guideline.^{71,72}

Name	# Active Licensees	Annualized 5-Year Growth Rate ⁷³
MTRS	37	-2.38%
TRS	286	-3.23%
TRT	224	-5.02%
All	510	-3.96%

Recommendations

Relevant Recommendations from OPLR's Periodic Review

The following recommendations from OPLR's periodic review of the regulation of the behavioral health care workforce are relevant for recreational therapy (see final report for additional information):

- 1c. Continuing Education
- 3a. Recovery Assistance (UPHP)

Additional Recommendations

In addition to the relevant recommendations listed above, OPLR recommends that Utah policymakers enact the following changes to the regulation of recreational therapists.

- National Certification Path. Create a national certification pathway to licensure for Utah recreation therapists by granting licensure as a Therapeutic Recreation Specialist (TRS) to candidates who are currently certified in good standing with the National Council for Therapeutic Recreation Certification (NCTRC) as a Certified Therapeutic Recreation Specialist (CTRS). *(58-40-302)*
- **TRT Exam.** Remove TRT state exam requirement for licensure; instead, require that qualifying courses must include a summative assessment. (58-40-302; R156-40-302a)
- **TRT Education.** Remove the high school/GED requirement for licensure as a TRT. *(58-40-302)*

⁷¹ OPLR Behavioral Health Care Workforce Survey (CPMDS)

 ⁷² Centers for Medicare & Medicaid Services Center for Consumer Information and Insurance Oversight (2022). 2023 Letter to Issuers in the Federally-facilitated Exchanges. [online] U.S. Department of Health and Human Services. Available at: <u>https://www.cms.gov/files/document/2023-draft-letter-issuers-508.pdf</u>
 ⁷³ OPLR Analysis of DOPL Licensing Data

National Certification Licensure Pathway

Summary of Recommendation

Create a national certification pathway to licensure for Utah recreation therapists by granting licensure as a Therapeutic Recreation Specialist (TRS) to candidates who are currently certified in good standing with the National Council for Therapeutic Recreation Certification (NCTRC) as a Certified Therapeutic Recreation Specialist (CTRS). *(58-40-302)*

Status Quo. Currently, candidates for licensure must have each of their entry qualifications (e.g., exam, education, experience) verified by the state. Candidates may submit either:

- NCTRC certification (as proof of passing the exam) and university transcripts (as proof of education and experience)
- Exam scores and university transcripts (as proof of education and experience)

The NCTRC certification requires verification of university transcripts and practicum experience, thus making it redundant for DOPL to re-verify the transcripts of applicants who have submitted proof of NCTRC certification.

Jurisdiction	NCTRC Certification Required	Other Documentation Required
District of Columbia	Yes	None
Oklahoma	No; only required for state title protection as a "certified" practitioner	 Proof of bachelor's degree in recreational therapy Supervised field experience Passage of NCTRC examination
New Hampshire	Yes	Proof of bachelor's degree in recreational therapy
North Carolina	No; accepted as proof of exam passage	 Proof of bachelor's degree in recreational therapy Passage of NCTRC examination or North Carolina state board examination

Existing Approaches. Of the four other U.S. jurisdictions that license bachelor's-level recreational therapists, each approaches recognition of the NCTRC certification differently.

Rationale. Creating a national certification pathway to licensure may be beneficial for Utah consumers and recreation therapists in several ways. First, this pathway would likely make it easier for nationally certified practitioners to move to Utah and become licensed. Because so few other states license recreational therapy to begin with, Utah's current licensure by endorsement system may not have a significant impact on streamlining licensure for out-of-state applicants. A national certification pathway to licensure, on the other hand, could have a much broader impact. According to the NCTRC website, there are currently over 19,000 certificants in the U.S., and the organization

receives about 1,500 applications for certification each year.⁷⁴ By accepting national certification for licensure, Utah would be better able to attract these practitioners to join the state's workforce. Second, the NCTRC offers an 'Equivalency Path'⁷⁵ which allows individuals with a bachelor's degree in an unrelated field to gain certification after completing additional recreational therapy related coursework and work experience. This is consistent with OPLR's recommendations to allow alternative paths to licensure in behavioral health to ensure that qualified and competent individuals are not kept out of the workforce.

Further, accepting NCTRC certification as a direct pathway to licensure will reduce the documentation burden both for applicants and for state administrators. Currently, DOPL's efforts to verify applicants' qualifications may end up duplicating the same work for candidates who are already certified by NCTRC. There is also already precedent for this option, both in the District of Columbia, which only requires NCTRC certification for licensure, and even within Utah itself: Utah music therapists are only required to present proof of national certification in order to gain state certification. Additionally, NCTRC's standards are comparable to Utah's existing standards for TRS licensure: to receive NCTRC certification, practitioners must complete a bachelor's degree and relevant coursework, supervised experience, and pass the NCTRC examination.

	Utah Licensure	NCTRC Pathways to Certification ⁷⁶		
	Current UT Requirements	Academic Path	Equivalency Path	
Degree	Bachelor's degree or	Bachelor's degree	Bachelor's degree or higher	
Recreation Therapy Content	higher with concentration in recreational therapy	or higher with concentration in recreational therapy	Completion of specific coursework in recreational therapy	
Fieldwork	Practicum verified on degree transcript	14-week/560-hour supervised internship	Paid work experience that uses the therapeutic recreation process	
Exam	NCTRC Exam	NCTRC Exam	NCTRC Exam	

Key Considerations. Policymakers should note that this new pathway would be made available in addition to the existing pathway to reduce the documentation burden both for administrators and for those who are already nationally certified. Applicants would have the option to either present their national certification as proof of qualifications for licensure, or to have documentation of each entry qualification individually verified by DOPL. Where NCTRC certification is specified in statute or rule, language should be designed to ensure that recognition of national credentials is not

⁷⁴ National Council for Therapeutic Recreation Certification (2023). *About NCTRC*. [online] Available at: <u>https://www.nctrc.org/about-ncrtc/</u>.

⁷⁵ National Council for Therapeutic Recreation Certification (2023). *Equivalency Path.* [online] Available at: <u>https://www.nctrc.org/new-applicants/paths-to-certification/equivalency-path-b/</u>.

⁷⁶ National Council for Therapeutic Recreation Certification (2023). *Paths to Certification*. [online] Available at: <u>https://www.nctrc.org/new-applicants/paths-to-certification/</u>.

exclusive to those from NCTRC. Such language should specify that certification from successor organizations or other national certifications deemed equivalent by the board can also be accepted.

Exam Requirement for Therapeutic Recreation Technician

Summary of Recommendation

Remove TRT state exam requirement for licensure; instead, require that qualifying courses must include a summative assessment. *(58-40-302; R156-40-302a)*

Status Quo. Currently, candidates for TRT licensure must pass the Therapeutic Recreation Technician Theory Examination with a minimum score of 70%.⁷⁷ This examination is not associated with the national certifying board (NCTRC); it was developed by DOPL specifically for use in Utah.

Existing Approaches. Only one other state, North Carolina, offers a non-bachelor's recreation therapy license, the licensed recreational therapy assistant (LRTA).⁷⁸ North Carolina does not require LRTA applicants to pass any examinations as a requirement for licensure.

Rationale. The TRT theory examination may be posing unnecessary barriers to employment for incoming TRTs due to 1) issues with the exam design and 2) time spent on test preparation rather than teaching key content in TRT training programs. First, industry leaders, employers, and regulators have expressed concerns regarding the guality of the TRT exam.⁷⁹ For example, some reports suggest that test questions may be poorly worded and difficult to understand, especially for English language learners. Much of the exam content is also reported to test skills and knowledge that are not applicable to TRTs' day-to-day responsibilities and that are too rigorous for this level of licensure. Additionally, the current TRT exam may prompt training providers to devote significant amounts of class time to preparing students for the logistics of the exam, rather than core content and competencies. One industry expert familiar with the available training programs noted that "they spend a noticeable part [of the time] on practice exams and guizzes to get them prepped [for the TRT exam]. Rather than doing that, they could just be spending more time on the actual meat of what they need to be learning and then pass [a final exam]."80 By allowing TRT training courses to design and administer their own summative assessments, those course providers would be supported in focusing more class time on teaching core content and competencies. Finally, the removal of the exam requirement does not raise significant safety concerns. Current academic research on the connection between licensing exam performance and safety or quality outcomes is limited, and to OPLR's knowledge, no research on behavioral health licensing examinations has yet satisfactorily established such a link. Further, TRTs are required to work under the ongoing supervision of another licensed professional, and often work in facilities where additional entity-level regulations provide additional safeguards for patients.

⁷⁷ <u>R156-40</u>

⁷⁸ North Carolina Board of Recreational Therapy Licensure (2023). *Documents*. [online] Available at: <u>https://www.ncbrtl.org/rtpages/documents.html</u>

⁷⁹ OPLR Listening & Vetting Tour

⁸⁰ OPLR Listening & Vetting Tour

Key Considerations. Under this recommendation, the summative exams administered by TRT training course providers could be required to cover the existing course content areas as already required in rule.⁸¹ This may help to encourage some measure of consistency in the assessments across various training programs. If the requirement for a standardized state exam is not removed, the current exam should undergo DOPL review and be revised to more appropriately reflect the level of knowledge and skill required for employment as a TRT.

Education Requirement for Therapeutic Recreation Technician

Summary of Recommendation

Remove the high school diploma/GED requirement for licensure as a Therapeutic Recreation Technician (TRT). *(58-40-302)*

Status Quo. Currently, a high school diploma or a GED is required for licensure as a TRT.

Rationale. Holding a high school diploma or GED may not be a strong determinant of an applicant's competency and safety as a TRT. There is a growing debate among employers and educators generally as to the correlation between high school diploma requirements and employability for many entry-level positions,⁸² and recreational therapy industry stakeholders shared their view that if applicants can fulfill the other training requirements and demonstrate competency in practice, that should be acceptable as proof of qualification for licensure.83 Removing this requirement may enable many gualified candidates to become eligible for licensure and to begin providing services to consumers. The required TRT training course and practicum requirements already provide sufficient opportunities for TRT applicants to demonstrate competency and to be evaluated in real-world situations by experienced recreational therapy professionals. Further, precedent exists in Utah for providing an entry-level behavioral health certification without a high school diploma/GED. Applicants for DHHS Peer Support Specialist certification, which is a similar entry-level behavioral health certification, are not required to hold a high school diploma or GED. Along these lines, research consistently shows that peer providers can be effective and supportive extenders in the behavioral health care system, even without requiring specific educational credentials.⁸⁴ "A considerable body of research demonstrates that paraprofessionals and lay-people are highly effective... [and] can be trained in a minimum of time to function effectively...."^{85,86} The same principle should apply to TRTs as entry-level providers.

⁸³ OPLR Listening & Vetting Tour

⁸¹ <u>R156-40-302a</u>

⁸² Hickox, S.A. (2015). The Job-Relatedness and Business Necessity of the 'New and Improved' High School Diploma. *Berkeley Journal of Employment and Labor Law*, [online] 36(1), pp.115–116. Available at: https://heinonline.org/HOL/P?h=hein.journals/berkjemp36&i=115.

⁸⁴ Mental Health America (2023). *Peer Support: Research and Reports.* [online] Available at: <u>https://www.mhanational.org/peer-support-research-and-reports</u>.

⁸⁵ Trebilcock, M.J. (2022). *Paradoxes of Professional Regulation*. University of Toronto Press.

⁸⁶ Hogan, D.B., 1979. *The Regulation of Psychotherapists: A study in the philosophy and practice of professional regulation* (Vol. 1). Ballinger Publishing Company, p. 112.