

Advocacy through a professional journal : the need for entrepreneurs in occupational therapy

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Advocacy through a Professional Journal:

The Need for Entrepreneurs in Occupational Therapy

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Note: This document describes a capstone dissemination project reflecting an individually planned experience conducted under faculty and site mentorship. The goal of the capstone experience is to provide the occupational therapy doctoral student with a unique experience whereby he/she can demonstrate leadership and autonomous decision-making in preparation for enhanced future practice as an occupational therapist.

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Introduction

1. State the purpose of the paper.

The purpose of this paper is to advocate for entrepreneurship within the profession of occupational therapy in the form of a scholarly written article intended for publication in the *American Journal of Occupational Therapy* (AJOT) "The Issue Is" format. Through an extensive literature review, multiple expert interviews, an internship with a prominent entrepreneur, and observation of trends in entrepreneurship and health care professionals, it was confirmed that occupational therapists have not taken advantage of the opportunities of entrepreneurship. In accordance with the Centennial Vision (Baum, 2006), entrepreneurship is an important means to achieve the professions' goals of becoming "powerful [and] widely recognized." It is hoped that through this effort, occupational therapy practitioners will better understand and feel inspired to explore entrepreneurship. See Appendix A for further details.

2. Briefly describe the policy, issue, or professional trend to be discussed.

The article, provided as Appendix A, will detail how occupational therapists have not taken advantage of the professional trend of entrepreneurship. Although there are many opportunities for several different forms of entrepreneurship in occupational therapy, our therapists have not engaged in entrepreneurship as frequently as other health care professionals such as physicians, chiropractors, physical therapists, and speech and language pathologists. Refer to Appendix A for a more detailed description of this issue.

3. Identify the framework that will be used to analyze the issue.

The Centennial Vision is the guiding framework for this issue. This vision and the American Occupational Therapy Association (AOTA) both advocate for the advancement and future of the occupational therapy profession. The Centennial Vision is the framework to guide

the profession, entrepreneurship is an example of how occupational therapy can be “powerful”, and “meet society’s needs”, with the fundamental service is occupation. In addition to this statement, two texts were utilized to analyze the issue of entrepreneurship and occupational therapy. *The Entrepreneurial Age: Awakening the Spirit of Enterprise in People, Companies, and Countries*, Farrell (2001) addressed the relationship between entrepreneurship and American spirit. Also, Farrell identified entrepreneurial traits and strategies used by successful business people. Farrell describes the entrepreneurial spirit as having four fundamental practices, “Sense of mission, customer/product vision, high-speed innovation, [and] self-inspired behavior” (p. xviii). Through this text, Farrell provides anecdotal evidence of successful entrepreneurs, describing how treating all partners, employees, and citizens like entrepreneurs instead of subordinates will lead to the success of every party involved. The second book was authored by Richmond, an occupational therapist in private practice and Powers, a physical therapist, an owner of a private practice and holder of a Master’s degree in Business Administration. *Business Fundamentals for the Rehabilitation Professional* is written specifically for occupational therapists, physical therapists, and speech and language pathologists interested in entrepreneurship.

In addition to these sources, entrepreneurial expert, Teresa Nelson, was interviewed. Nelson holds the Elizabeth J. McCandless Professor of Entrepreneurship Chair and is the Director of the School of Management’s Entrepreneurship Program at Simmons College in Boston, Massachusetts. T. Nelson has researched entrepreneurship, nationally and internationally, and frequently speaks on the topic of female entrepreneurship. In addition to T. Nelson’s expertise in business, she has a specific interest in occupational therapy entrepreneurship. Health care, according to T. Nelson, provides more entrepreneurial

opportunities for women because the industry is predominantly female. T. Nelson admits that even though more businesses are owned by men, there is no research dictating gender differences in entrepreneurship. Small businesses owned by men are statistically larger and have higher profits than businesses owned by women. T. Nelson theorizes that this occurs because women tend to be less concerned with making large profits, and are more concerned with operating a family-oriented business. Also, T. Nelson confirms the importance of the movement to reform health care, “The private sector just has to be a part of it [health care reform]” (personal communication, February, 27, 2009).

Framework for Policy Analysis

1. Explain the framework that will be used to analyze the issue.

Entrepreneurship has been a crucial component of the American economy, “The entrepreneurial spirit is the best model ever invented for creating growth and prosperity” (Farrell, 2001, p. xxvii). In the book *The Entrepreneurial Age: Awakening the Spirit of Enterprise in People, Companies, and Countries*, Farrell (2001) shares his experiences with entrepreneurs from around the globe, all the while explaining how businesses that are run by entrepreneurs are far more successful than businesses run by managers. Farrell argued that the 1980’s produced too many business “experts” as a result of the overwhelming amount of management theories that were being taught in the Masters of Business Administration programs at that time. For the past twenty years, Farrell (2001) stated that a new “age” for businesses has been developing. The concepts of self-employment, innovation, and entrepreneurship are becoming more important in the economy, and well respected within American communities (Farrell, 2001). This text continues to tell the stories of successful entrepreneurs and encourages the reader to apply these strategies to his or her potential business venture.

Richmond and Powers (2009) authored a text for rehabilitation professionals interested in business ventureship. This text is extremely helpful, filling the need for business information specifically written for rehabilitation professionals. Specific issues such as identifying health care trends, planning a business, and maintaining professional competencies are addressed.

2. Discuss how this framework has been used in the past to analyze issues.

Many sources are available for students of entrepreneurship, *The Entrepreneurial Age: Awakening the Spirit of Enterprise in People, Companies, and Countries*, (Farrell, 2001) is the second installment of entrepreneurial texts by the same author. Within the business literature, this source has been referenced in numerous texts. *Business Fundamentals for the Rehabilitation Professional* (2009) is the second edition of the 2004 version. The first edition has been cited in the occupational therapy literature.

3. Describe how occupational therapy practitioners can use this framework.

Occupational therapy practitioners interested in entrepreneurship are encouraged to utilize the sources described previously, seek out successful entrepreneurs, and search library resources. There are endless sources of information for small business owners; one just has to determine which books apply to his or her business idea. For more resources and information regarding occupational therapy entrepreneurship, refer to Appendix A.

The Issue

1. Identify and discuss the issue, describing the historical background and how the issue has evolved over time.

Entrepreneurship has driven the American economy even since the first colonists. Baron (2004) describes how Americans learned to survive following the separation from England; we were forced to create goods for ourselves. Benjamin Franklin and Thomas Jefferson were

inventors and entrepreneurs. From Eli Whitney and the cotton gin, to Andrew Carnegie and his railroads, innovation and entrepreneurship have shaped our country. Small business is how Americans “do business”; occupational therapy needs to be a part of this. See Appendix A for further arguments.

The health care industry has changed dramatically in the past 50 years, and more changes are yet to come. Frazian (1985) discussed the history of private practice in occupational therapy. Titled “Tidal Surge and Private Practice: The Historic Eighties,” Frazian attributed the surge in health care businesses to deinstitutionalization, government and consumer awareness, and changes in technology (Frazian, 1985). Competition among insurance companies also contributed to the practicality of private practices (Frazian, 1985). Cynthia Epstein and her business collaborator, both occupational therapists, created an ultimately large and successful occupational therapy business in 1979, Occupational Therapy Consultants, Inc. The company offers occupational, physical, and speech therapy consultations for a variety of clients. Epstein has become an advocate for entrepreneurship and the consultation model of practice. In the chapter *A Consultative Approach to Occupational Therapy Practice*, Epstein writes that occupational therapy entrepreneurship grew in the 1980’s and 1990’s (Crepeau, Chon, & Boyt Shell, 2003). Finally, Frazian projects that “There will be no foreseeable end to the list of variables... as innovative therapists increase in number to meet society’s appetite” (Frazian, 1985, p. 12).

The issue is that occupational therapists are not taking advantage of these entrepreneurial opportunities for growth. As a result, we are not fulfilling our Centennial Vision (Baum, 2006) to become a “powerful” and “widely recognized” profession. Entrepreneurship is a part of the American business world; other health care practitioners have opened practices, began

consultative companies, and succeeded as professional entrepreneurs. Occupational therapists have the ability, knowledge, and skills to become successful entrepreneurs; however too many do not venture into the business world. Refer to Appendix A for a detailed explanation of this issue.

2. Identify and describe the individuals involved in the issue.

In order to learn about entrepreneurship in health care 20 professionals were interviewed. The following is a list of the occupational therapists, physical therapists, chiropractors, and leadership experts involved in this advocacy effort.

- Christopher J. Alterio, OTR/L, OTD, president of ABC Therapeutics.
11390 Transit Road East Amherst, NY, 14051. (Interviewed March 2, 2009).
- Gina Arroyo, OTR/L, co-owner of CGA Home Modifications.
2218 Airline Avenue, Toledo, Ohio 43609 (Interviewed February 11, 2009).
- Becky Austill-Clausen, MS, OTR/L, FAOTA, president of Austill's Rehabilitation Services, Inc. 100 John Robert Thomas Drive, Exton, PA 19341. (Interviewed April 30, 2009).
- Ron Carson, MHS, OTR/L, owner of HOPE Therapy Services, LLC. 1310 Deer Path Drive, Osteen, FL 32764. (Interviewed February 13, 2009).
- Marc Dy, OTR/L, president of Functional Solutions, Inc. (Interviewed March 2, 2009).
- Cynthia Epstein, MA, OTR, FAOTA, executive director of Occupational Therapy Consultants, Inc. 14 M Worlds Fair Dr. Somerset, NJ08873. (Interviewed March 9, 2009).

- Coralie Glantz OT/L, BCG, FAOTA, co-owner of Glantz/Richman Rehabilitation Associates. 1560 Indian Trail Drive, Riverwoods, Illinois 60015. (Interviewed February 24, 2009)
- Tara Glennon, EdD, OTR/L, FAOTA, president of Center for Pediatric Therapy. 1300 Post Road Suite 204, Fairfield, Connecticut 06824. (Interviewed March 2, 2009).
- Marianne Hassen MA, OTR/L, vice president of business development at Concept Rehab Inc. 7150 Granite Circle, Toledo, Ohio 43617. (Interviewed January 30, 2009).
- Patrick Hoban, PT, MS, OCS, ATC, FF-CIMT, co-owner of Probility Physical Therapy. 3145 Clark Road, Suite #102, Ypsilanti, MI 48197. (Interviewed April 7, 2009).
- Maureen Kane-Wineland, PhD., OTR/L, co-owner of Rehab Dynamics. 3160 Central Park West Drive, Toledo, Ohio 43617. (Interviewed January 28, 2009).
- Carol Loria, PT, co-owner of Education Resources, Inc. 266 Main Street, Suite #12, Medfeild, MA 02052. (Interviewed March 31, 2009)
- Steve Morrison, D.C., owner of Toledo Chiropractic. 743 South Byrne Road, Toledo, Ohio 43609-1049. (Interviewed March 31, 2009).
- Teresa Nelson, Ph.D., professor, Elizabeth J. McCandless Chair in Entrepreneurship, Simmons School of Management, 300 The Fenway, Management 334, Boston, MA 02115. (Interviewed February 27, 2009).
- Nancy Richman, OTR/L, FAOTA, co-owner of Glantz/Richman Rehabilitation Associates. 1268 Sheridan Road, Highland Park, IL, 60035. (Interviewed February 27, 2009).
- Fred Sammons OTR/L, FAOTA, former president of Sammons, Inc. (Interviewed February 27, 2009)

- Shoshana Shamberg, OTR/L, MS, president of Abilities O.T. Services and Seminars, Inc. 3309 W. Strathmore Ave., Baltimore, MD 21215-3718. (Email interview March 25, 2009).
- Virginia Stoffel, Ph.D., OT, BCMH, FAOTA, chair and associate professor of occupational therapy. University of Wisconsin-Milwaukee, PO Box 413, Enderis Hall 989, Milwaukee, WI 53201. (Interviewed February 20, 2009).
- Joseph K. Wells, OTD, OTR/L, president and chief executive officer of AmeriCare Health Services, LLC. 1440 S. Byrne Road, Toledo, Ohio 43614. (Interviewed initially January, 15, 2009).
- Neeti Wells, OTR/L, MBA, vice-president and administrator, Americare Health Services, LLC. 1440 S. Byrne Road, Toledo, Ohio 43614. (Interviewed February 15, 2009).

Entrepreneurship is a challenging endeavor, and may not be an interest for all occupational therapists. An entrepreneur must be willing to take risks; have the drive to achieve and improve; have energy, perseverance, and tenacity; and be able to see the big picture (Herz, Bondoc, Richmond, Richman, & Kroll, 2005). Additional entrepreneurial characteristics are discussed in Appendix A. The purpose of this effort is to encourage all occupational therapists to evaluate his or her personal entrepreneurial desire. A therapist who notices a need in his or her community should have the knowledge and the tools available to create an entrepreneurial solution. The therapists not interested in business ownership may decide to encourage a colleague or friend.

3. Identify and describe the public or private organization/systems that affect the issue.

The largest, and most unknown, system that will affect entrepreneurship in all health care fields is the newly proposed health care system. The Obama Administration is working toward a

national health care plan, changing how health care is reimbursed and delivered. Currently, conversations are starting across the country to determine what reforms are needed. Each of these proposed changes will directly affect the delivery of occupational therapy services as well as how small businesses offer health insurance to its employees.

Publicly, there are many government-sponsored organizations available to assist small business owners to either start-up or grow an enterprise. The Small Business Administration (SBA) is a federally funded organization committed to educating, funding, and supporting small businesses in America (SBA, 2009). SBA departments such as Service Corporation of Retired Executives (SCORE) and Small Business Development Centers (SBDC) are available across the country to offer personal mentorship. Additional services for small businesses are offered through the State Department of Development and local Chambers of Commerce. Each of these resources offers free support to potential entrepreneurs and small business owners. There are also many online resources available for potential entrepreneurs. Private networking groups and business organizations also offer support, however membership is required. Additional information is provided in Appendix A.

This advocacy effort is directed specifically toward the members of AOTA as they are the audience of *AJOT*. AOTA provides some information for its members in the form of an online private practice document. It is anticipated that this source will be updated within the next year (Glennon, personal communication, March 2, 2009). Even with this resource, many occupational therapists commented during informal interviews that AOTA has not met the needs of its entrepreneurial members. Some occupational therapists engaged in private practice feel that AOTA has attempted to address this need; “there are much more resources available now”

(Richman, personal communication, February 27, 2009). Refer to Appendix A for specific recommendations for AOTA to further support entrepreneurship.

4. Identify and discuss any groups or organizations that are already involved in the issue.

Refer to #3 above and Appendix A.

5. Identify the resources that exist related to this issue.

In addition to the resources provided in #3 and in Appendix A, AOTA provides some information for occupational therapy entrepreneurs. Resources for AOTA members desiring to develop a private practice will find information on the AOTA website (www.aota.org), from the Administration and Management Special Interest Section (AMSIS), and in the publication *OT practice*. The website will also direct the therapist to the online community OT Connections (otconnections.aota.org). OT Connections provides therapists an opportunity to discuss occupational therapy issues with other therapists across the nation. AMSIS members are able to discuss private practice issues and communicate about upcoming conference proceedings on this online forum as well. Along with this resource, AMSIS produces a quarterly newsletter, sponsors continuing education seminars, holds networking sessions, and engages in round table discussions at national conferences. The *OT Practice* magazine often times spotlights a successful occupational therapy business person, describing how the business came into existence. Occasionally, the publication will run articles explaining business topics such as reimbursement, management, and partnerships.

In addition to formal sources of information, practicing entrepreneurs are often available for mentorship. The multiple business and leadership experts interviewed for this advocacy paper, willingly and generously offered their time to educate the writer. Please refer to item # 2:

identify and describe the individuals involved in the issue, as detailed previously and Appendix A for additional resources.

Analyze the Issue

1. Analyze the issue using the selected framework.

In order for an occupational therapist to become an entrepreneur, he or she should have the desire to take a risk, as well as an idea for a successful business venture. Much inspiration can be found in texts such as Farrell's *The Entrepreneurial Age: Awakening the spirit of enterprise in People, Companies, and Countries (2001)* or in any number of biographies detailing the successes of American entrepreneurs. Richmond and Powers (2009) suggest the reader to first engage in a self-assessment process to determine personal strengths and weaknesses in terms of business management and knowledge. The authors include worksheets that allow the potential business owner to complete the self-assessment immediately. The next step is to create a vision, value, and mission statement. With prompts and examples, the reader is instructed to write his or her personal values and associate these values with a business mission. Once a therapist has an idea for a business, the therapist must explore how the business will operate and begin the process of creating the establishment.

The business plan is the most important preparatory tool for a successful enterprise. Often, the business plan is only created in order to obtain funding from lending institutions. Many sources suggest creating a business plan regardless of financial purpose. Initially, this business plan will estimate the potential for profitability of a business. The entrepreneur is instructed to engage in an in-depth market analysis to determine the viability of the service or product delivered by the business (Richmond & Powers, 2009). The business plan also guides how the business will begin and how it will be operated. Both sources describe specific

information for each section of the business plan. The entrepreneur should research his or her business idea extensively, using all resources available. A topic unique to health care business owners, Richmond and Powers (2009) provide information regarding insurance and managed care reimbursement as well as proper billing procedures. These concepts are crucial to the success of a rehabilitation business.

Another important component to the success of an enterprise is marketing. A business' survival is directly related to the success and accuracy of its marketing efforts. The entrepreneur must develop a customer profile in order to determine where the marketing efforts will be directed (Richmond & Powers, 2009). Risk management and professional standards are another aspect of business planning that an occupational therapist must explore. For rehabilitation businesses, risks include property, equipment, rehabilitation techniques or methods, and unprofessional conduct (Richmond & Powers, 2009). Due to the level of specialty that an employee is required to maintain, the business must ensure that each therapist is competent, current with professional licensures and regulations, and ethical. Another concept a business owner will encounter is withholding employee taxes and other financials. The employer is responsible for withholding federal, state, and local taxes; contributions to worker's compensation, Social Security, and Medicare/Medicaid; unemployment taxes, and any fringe benefits. Refer to Appendix A for additional information.

2. Identify and discuss implications for occupational therapy.

Entrepreneurship lends itself extremely well in the occupational therapy profession because occupation is often offered in the community, in the most natural environment. Occupational therapy services model a certain frame of reference, this serves as a theory base and treatment guide for all services. A small occupational therapy business may provide sensory

integration treatments for children, following this specific model of practice. Occupational therapists who decide to begin a small business will become more directly involved in health care reform and the recovery of the current economy. The Obama Administration has called upon entrepreneurs to assist in the recovery of our nation's economy (The White House). Many small business owners are considered leaders within their profession and may have seats at the table of health care reform.

The Centennial Vision, proposed by AOTA (Baum, 2004), encourages occupational therapists to advance the profession to be more "powerful" and "widely recognized" in order to "meet society's occupational needs." There are many methods to achieve this goal. For example, occupational therapists actively involved in the largest effort to reform our national health care system will certainly promote AOTA's vision of occupational therapy as a powerful profession.

Occupational therapists in small business may alleviate public confusion and misunderstandings regarding the profession, thus contributing to the goal of being "widely recognized." Perhaps a community member may better understand physical therapy because there is a private physical therapy clinic in his or her neighborhood. If occupational therapists created more opportunities for the public to understand what occupational therapy is, there would be less confusion about what occupational therapists do. Patients could be asking for occupational therapy services by name.

Each entrepreneurial venture will serve a unique portion of a community. Thus ensuring that occupational therapists are "meeting society's occupational needs" (Baum, 2006). Offering occupational therapy to a small market of consumers, who would otherwise not have access to therapy services, is yet another unique advantage of entrepreneurship. A large health care

company cannot meet the needs of small patient groups efficiently; a solo practitioner or small company is better suited to meet the needs of a niche market.

Entrepreneurship provides an array of personal and professional rewards. The therapist is able to offer occupational therapy services in a client-centered, and occupation-based natural environment. Personal advantages of entrepreneurship may also include the thrill and excitement of operating a business and leading others, financial rewards, and the ability to be one's own boss. Occupational therapy entrepreneurs are considered experts in their field, and may be asked to participate in committees, boards, or associations. These opportunities may also be extended to practitioners not engaged in business ownership; exceptional therapists are working in all areas of occupational therapy practice. Whatever the motive may be, entrepreneurship offers endless opportunities for every therapist seeking change and self-fulfillment.

Advocacy Efforts

1. Identify specific strategies that will be used to address this issue.

This advocacy effort will result in a scholarly written article intended for publication in the *AJOT*. Should the manuscript not be accepted for publication in this journal, the student will submit the manuscript to other publications such as *OT Practice* or *OTAdvance*. The student has become involved in discussion groups via OT Connections and has asked AOTA members about their experiences with private practice and entrepreneurship. It is anticipated that through these efforts, AOTA will continue to evaluate this issue and promote entrepreneurship in occupational therapy.

1. Include business education in the occupational therapy curriculum.

Overwhelmingly, interviewees agreed that occupational therapy entrepreneurs do not receive adequate business education. Glantz recommended that occupational therapy programs

should include general business concepts such as starting and operating a business, including the basics of marketing for all students (personal communication, February 24, 2009). Even though most students might not become full-time entrepreneurs, all occupational therapists could benefit from basic business training. Most therapists will work for organizations employing business strategies, and having some understanding of what is needed to operate a successful business can make one a better employee. The potential cost of this effort can be minimal; a guest lecture or the time away from other course content may fulfill this need. Optional courses or tracks could be offered to occupational therapy students in order to learn about business principles.

2. Adopt an official educational standard by the Accreditation Council for Occupational Therapy Education (ACOTE).

Every occupational therapy program must adhere to the standards promulgated by ACOTE; however, no standard exists promoting small business or entrepreneurship education. Should the council accept such a proposal, it would ensure a standardized level of education regarding entrepreneurship. An entrepreneurial standard may read: The student will demonstrate understanding of the similarities and differences between occupational therapy practitioners working as an employee and occupational therapy practitioners working as private practitioners and will identify key differences between non-profit and for-profit organizations.

3. Support business-oriented continuing education seminars.

An occupational therapist with a desire to develop his or her business idea and skill should have the opportunity to attend an appropriate continuing education course. Business courses offered in the past cover a variety of private practice topics, yet, as Richman observed, “I think we’ve been lacking in conference presentations that attract managers and entrepreneurs” (personal communication, February 27, 2009). Business related continuing education courses

should target all possible occupational therapy entrepreneurs. Entrepreneurial courses could be offered at each national AOTA conference, or could be sponsored multiple times a year across the country. Most of the costs of producing such a course may be recovered through attendance fees.

4. Provide more sources for self-directed learning for all potential occupational therapy entrepreneurs.

Currently, AOTA offers few entrepreneurial resources and opportunities for its members. One of the goals of the current AMSIS committee is to revise and update the online private practice resource within the next year, supplying readers with comprehensive information. This publication should also be offered at true cost to non-members of AOTA, reaching all potential entrepreneurs. Richman observed, “Not all entrepreneurs are members of AOTA and don’t see all of the support [available] for them” (personal communication, February 27, 2009). This leads into the next recommendation for potential occupational therapy entrepreneurs.

5. Execute marketing campaigns promoting entrepreneurship.

As stated previously by Leslie (2005), many people lack the motivation to pursue entrepreneurship. A national marketing campaign, sponsored by AOTA, AMSIS, and practicing entrepreneurs, would generate entrepreneurial discussion. This effort could include regular columns in *OT Practice* or *OT Advance* featuring an occupational therapy entrepreneur, or entrepreneurial conversations via AOTA’s networking website, OT Connections.

6. Be actively involved in state and national professional associations.

Many successful entrepreneurs interviewed for this paper attributed his or her business success to being actively involved in AOTA, either at the state or national levels. As Austill-Clausen stated, “My best suggestion for an entrepreneur is to get involved in state and national

associations because it keeps you in the groove, it keeps your name in front of people, it keeps you open to the cutting edge of what is happening” (personal communication, April 30, 2009).

Successful business-owner Epstien became a part of the New Jersey Occupational Therapy Association early on in her career. “I became involved in [AOTA at the] national and state level because I was looking at the big picture, change, the impact of the political world onto the profession” (personal communication, March 9, 2009).

7. Encourage entrepreneurial networking and mentorship.

All the occupational therapy entrepreneurs interviewed for this paper insisted upon good mentorship and advising. Still, more is needed, “I don’t think we have enough people out there to really be mentors. You need good mentors, people who are willing to sit down and take time, talk about how important [your business] is” (Arroyo, personal communication, February 11, 2009). Potential entrepreneurs should seek out successful therapists in the area of business he or she is interested in. Therapists desiring entering the business world should also become a member of the AMSIS, sponsored by AOTA. This group supplies a quarterly newsletter and presents networking sessions at national AOTA conferences.

8. Take risks!

Entrepreneurs are risk takers, and the business world is full of chances. One must not be afraid to take reasonable risks. One just has to analyze each opportunity and choose the most appropriate business risk. Occupational therapy has unique entrepreneurial potential; one can begin a small one-person enterprise and slowly grow into a larger business. This process is how many current successful occupational therapists began their current companies. If one wants to remain a solo practitioner, this option is also available.

9. Spread the word.

Successful entrepreneurship requires professional encouragement in order to develop. For the entrepreneurs who have succeeded in business, the next step is to tell others how to achieve the same results. Business owners could begin online or in-person networking events, publish an article, write a book, or conduct a continuing education course regarding an area of expertise. Therapists also have the responsibility of educating the community about therapist-owned and -operated businesses.

Refer to Appendix A for additional recommendations for occupational therapists and AOTA.

2. Identify to whom the advocacy efforts would be directed.

The article is specifically intended for the readers of the *AJOT*, as members of AOTA, as well as the leaders of this association. The proposed recommendations are directed toward occupational therapy educational institutions, the Accreditation Council for Occupational Therapy Education (ACOTE), AOTA, and individual therapists.

3. Identify which level of government, business, professional organization, etc. you would direct your efforts towards.

Refer to items # 3 and 4 from the previous section regarding the organizations and systems that affect this issue.

4. Describe the funding that would be necessary to carry out these advocacy efforts and identify which sources would be available.

Upon acceptance of this article, AOTA may consider improving private practice resources available to its members. The association would internally fund projects of this nature. Costs associated with continuing education programs could be redeemed through attendance

fees. Practice resources such as online documents or textbooks could be sold at a discounted price for members of AOTA and offered at a true price for nonmembers. An advertising or marketing campaign has the potential to be the most expensive endeavor, but it also has the potential to reach the most occupational therapy practitioners. Additional recommendations and possible funding sources are identified in Appendix A. Individual therapists who are inspired to begin a new business have many funding options available. Many entrepreneurs choose to fund their operations with personal savings, however, many government sponsored programs exist. The entrepreneur would need to research each loan program offered through the SBA or local lending institutions to decide if a loan is appropriate. The business plan would then have to meet the requirements of the needs of the loan program.

Conclusions

As explained in the article, entrepreneurship is how American's do business, how our country has grown and established ourselves. Entrepreneurship is certainly underutilized in occupational therapy. The opportunities for entrepreneurship are all around us, assistive device development, community wellness programming, lifestyle planning, or any numbers of possible ventures exist. Businesses may begin in a basement or in the back seat of a car, entrepreneurship is as flexible as the person allows. Occupational therapists have the knowledge and skills to serve patients, or customers; however, we have not taken advantage of entrepreneurship. Through entrepreneurship occupational therapists can provide the necessary products and services to people in need of therapeutic occupation. The author intends to inspire both occupational therapy practitioners and the profession to support and explore entrepreneurship.

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Appendix A

Running head: THE ISSUE IS... WANTED: ENTREPRENURS

The Issue Is...

Wanted: Entrepreneurs

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University of Toledo Health Science Campus

Keywords: Centennial Vision, private practice, consultation, direct service, product development

The Issue Is... Wanted: Entrepreneurs

In 2003 the American Occupational Therapy Association (AOTA) challenged occupational therapy practitioners to advance the profession so that we may become more “powerful” and “widely recognized” by the year 2017 (Baum, 2006, p. 610). This paper will argue that in order to achieve this vision, the profession requires occupational therapy practitioners who are true entrepreneurs. In AOTA's March 2005 *Administration and Management Special Interest Section (AMSIS) Quarterly* publication, Herz, Bondoc, Richmond, Richman, and Kroll stated, “Entrepreneurship may provide us with the means to achieve the outcomes we need in order to succeed in the current health care environment” (2005, p. 2). This paper will also argue the urgency of seizing the many opportunities that entrepreneurship offers, so that the profession can meet society’s needs in powerful and appropriate ways.

Entrepreneurship and the American Way

Baron (2004) defines an entrepreneur as a “person who organizes, operates, and assumes the risk of a business venture” (p. 305). Baron goes on to describe entrepreneurial qualities, “Entrepreneurs may or may not be innovators, but they are always experimenters; they are individuals able to recognize opportunities and willing to take the risks necessary to develop those opportunities” (p. 30). Entrepreneurship has driven the American economy and way of life since our country’s conception. Recognizing the importance of small businesses and their connections to American entrepreneurship Farrell (2001) stated, “The entrepreneurial spirit is the best model ever invented for creating growth and prosperity” (p. xxvii). In President Barack Obama’s address to the joint session of Congress on February 24, 2009, he called for entrepreneurs to continue to innovate and contribute to the economy despite difficult financial times. “The answers to our problems don’t lie beyond our reach. They exist in our laboratories

and universities; in our fields and our factories; in the imaginations of our entrepreneurs and the pride of the hardest-working people on Earth” (The White House, ¶15). These bold statements demonstrate how entrepreneurship is a major component of the American economy and the American dream. Business scholarship has also recognized the importance of entrepreneurship. Teresa Nelson, professor of business and entrepreneurship at Simmons University with an interest in occupational therapy, commented, “Entrepreneurship as a discipline, as a study, has risen in the past 25 years. Groups have begun that conversation across disciplines” (personal communication, February 27, 2009).

Entrepreneurship is the center of the American economy. The Small Business Administration (SBA) reports that small businesses (those with less than 500 employees) are central to the way Americans practice business (2009). Small businesses represent 99.7% of all ventures and employ half of all employees in the private sector (SBA, 2009). These small businesses also account for 13 times more patents per year than larger firms (SBA, 2009). Small businesses can become huge institutions through the lifelong practice of entrepreneurship. Henry Ford (Ford Motor Company) and Walt Disney (The Walt Disney Company) shaped how and where Americans travel and are entertained. Ben Cohen and Jerry Greenfield (Ben & Jerry’s) and Jenny Craig (Jenny Craig’s Weightloss Program) have changed what Americans eat. Entrepreneurs Bill Gates (Microsoft) and Steve Jobs (Apple) created international technology standards. These Americans are among many other entrepreneurs who have helped to shape and advance our country. Farrell (2001) illustrated, “Seventy out of the next one hundred people you see are thinking about becoming an entrepreneur. Fifteen of the hundred will actually give it a go in the next twelve months. At least five will be successful on their first try. All of them... are part of the greatest explosion of entrepreneurship the world has ever seen” (p. 3). Readers should

consider this impressive statistic when surrounded by other occupational therapists at conferences or seminars.

Leadership and successful entrepreneurship tend to coincide. According to Bygrave, entrepreneurs must have the following leadership skills: internal locus of control, commitment, network, vision, entrepreneur, and strategy (1994). A perfect example of the relationship between leadership and entrepreneur is illustrated by the works of Mary Foto. She has led the profession as AOTA president (1995-1998) and represents occupational therapy on a number of professional boards. Foto is also the chief executive officer of two successful companies, The Foto Group and Treat-it.com. Through her efforts as an advocate, leader, therapist, and entrepreneur, Foto exemplifies how the roles of leader and entrepreneur compliment one another.

Entrepreneurship in Occupational Therapy

In order to prepare for this report, the author conducted 20 personal interviews with successful entrepreneurs in various allied health care professions, occupational therapy, physical therapy, speech and language pathology and chiropractic. Specifically, interviewees were asked how his or her business was created and how each therapist learned how to operate the enterprise, why he or she decided to begin a business, and what resources should be offered to potential entrepreneurs. Many of the interviewees described their learning processes as “trial and error” (Carson, personal communication, February 13, 2009) or “by the seat of our pants” (Loria, & Glantz, personal communications, March 31, 2009; February 24, 2009). President of Functional Solutions Inc., Marc Dy explained, “We went to OT school to become clinicians, not [to learn] how to run a business” (personal communication, March 2, 2009). Dy also commented that other health care professionals such as chiropractors, physicians, and physical therapists,

promote and teach small business techniques within their educational programs. McClain, McKinney, and Ralston (1992), surveyed 74 occupational therapists in private practice to determine motivation, preparation, and perceived risks and benefits before and after becoming an entrepreneur. Participants reported previous work experience as the most beneficial learning experience prior to entrepreneurial activities, information from others in private practice was second, and observation of businesses was ranked third (McClain, McKinney, & Ralston, 1992).

Occupational therapy entrepreneurship offers many possibilities. As T. Nelson explains, business “Success is related to competitive advantage. Occupational therapists would have a good competitive advantage because [therapists] actually are the best at understanding what the field is about, where the edge is, and where innovation is possible, and [therapists have] the potential to turn into a profit stream” (personal communication, February 27, 2009). Who better to offer continuing education courses for occupational therapists or to create and distribute self-care devices for clients than occupational therapy professionals? As an occupational therapist and president of Austill’s Rehabilitation Services, Inc, Becky Austill-Clausen stated, “The sky is the limit!” in terms of entrepreneurial potential (personal communication, April 30, 2009). Another huge advantage for occupational therapy entrepreneurs is the affordability of starting a business. Contrary to opening a coffee shop or marketing company, an occupational therapy business can be operated out of a home. A home based business eliminates the need for overhead costs such as office space and equipment. Closely related to the low cost, another benefit exclusive to rehabilitation entrepreneurs is the therapist’s ability to start the business as a small, one-person enterprise. The entrepreneur has the option of expanding the business, if the market supports it, or selling the business and making a profit.

Despite relative ease of entry into private practice, occupational therapy practitioners are not as involved in entrepreneurial opportunities as other health care professionals. During a personal interview, occupational therapist and executive officer of Occupational Therapy Consultants, Cynthia Epstein commented, “I don’t think occupational therapists have taken advantage of our opportunities. Just look at the number of physical therapists versus occupational therapists in private practice; there is a huge difference” (personal communication, March 9, 2009). This discrepancy is confirmed simply by comparing occupational therapy to any other health care profession. If one opens the Toledo, Ohio, telephone book, one discovers 667 listings for physician private practices, 105 chiropractic-owned businesses, 52 listings for privately owned and operated physical therapy clinics, and two private occupational therapy listings. The Bureau of Labor Statistics (BLS) has documented the number of practitioners involved in several areas of professional practice. According to the 2006 figures, 17% of occupational therapists work in either private or group practices of physical, occupational, and speech therapists and audiologists, whereas 27% of physical therapists (BLS, 2009). This figure of 17% would be much smaller if therapists working as regular contractors to agencies (much like employees) were not counted. The 2008-2009 Occupational Outlook Handbook for occupational therapy specifically states, “A small number of occupational therapists were self-employed in private practice” (BLS, 2009).

There is a disproportionate number of males versus females involved in entrepreneurship within the profession of occupational therapy. In reference to all fields, the SBA (2002) reported that women own 28% of nonfarm U.S. firms, even though women account for 47% of the workforce. Within the field of occupational therapy, 95% of occupational therapists are women (AOTA, 2006). Epstein referred to the relatively high percentage of male physical therapy

entrepreneurs and observed that occupational therapists may not be as entrepreneurial as other health care professionals because of a “gender difference” (personal communication, March 9, 2009). Nevertheless, T. Nelson explains “In healthcare, it’s different because there are more women overall. [This] provides more opportunities for women to become entrepreneurial” (personal communication, February 27, 2009). Nancy Richman, co-owner of Glantz/Richman Rehabilitation Associates, stated that her company could have an advantage in participating in government sponsored programs, such as obtaining state contracts: “We would probably have a better chance because we are female” (personal communication, February 27, 2009). Many government small business loan programs target minority groups; another opportunity for female entrepreneurs. The possibility of discrimination against female business owners in a male-dominated business world was not supported through the literature or interviews.

Types of Entrepreneurship and Profiles of Success

Entrepreneurship in occupational therapy takes on many forms, presenting problems in its categorization. Frazian (1985) commented,

“Even the definition of private practice is disputed. There is the purely staff therapist and the purely independent therapist. And in-between there are uncounted occupational therapists who are designing lifestyles and professional practices to suit need, theirs and society’s, in varying degrees of risk” (p. 12).

These “in-between” careers by therapists who work for pay and who also work privately for profit might be difficult to classify in this paper, yet their existence points to an active if somewhat undeveloped sense of entrepreneurship, that can be nurtured toward the pursuit of larger endeavors. In 2007, AOTA provided its members with an online document serving as a resource for private practice. This document defined the objective of private practice as follows:

“to create a business that receives payment for occupational therapy services directly from or on behalf of the client/patient or consumer” (p. 5).

For the purposes of this paper, entrepreneurial ventures are divided into the following categories:

1. Direct Service.

Increasingly, over the past 20 years, more occupational therapists provide direct services as independent contractors for hospitals, clinics, and agencies. A contractor is different from an employee; laws and regulations specifically define the differences between an employee and an independent consultant or contractor. According to the Internal Revenue Service (IRS), a manager may not dictate how an independent contractor carries out a task, only request that the task be completed (IRS, 2009). An occupational therapist may consult with a school and its teachers, regarding students with sensory processing disorders. Another form of direct service entrepreneurship includes a therapist completing job site analysis for individual companies. A therapist may engage in direct service entrepreneurship on a full time or part time basis, allowing for flexibility and adjusting for demand.

2. Ownership or management of a direct service business.

Often times a small one or two person business, grows into a large enterprise, allowing the founding therapists to become managers and business owners. The therapist must become an effective manager of staff and resources in order for the business to succeed. Direct therapy services may be delivered in the home, a hospital, an outpatient clinic, a community center, or any other facility appropriate for the business. An occupational therapist has the knowledge and skills necessary to coordinate these efforts.

3. Consultation.

A consulting occupational therapist does not directly engage in occupational therapy. This therapist utilizes his or her occupational therapy background as a knowledge base. Ergonomic consulting with a local company, and wellness programs in the community are both examples of occupational consultation. Consultation entrepreneurship also allows for flexibility. A therapist may choose to consult on a full time, part time, or occasional basis.

4. Product development.

Occupational therapy professionals often recommend the use of assistive devices for their clients. Often times, client needs cannot be met by products commercially available. The therapist then has the opportunity to create a unique product. An entrepreneur would then mass produce and market the device.

5. Educational seminars.

A presenter who has extensively researched a topic and has been recognized as an expert in an area of interest may then decide to venture into the business of disseminating the information for a profit as an entrepreneur. This form of entrepreneurship may also be marketed to the community in order to educate the public.

These entrepreneurial categories are not exclusive. A therapist may decide to create a contracting company, which also offers continuing education seminars.

Presented below are profiles of successful occupational therapy entrepreneurs in each of the five categories identified above:

1. President of Functional Solutions, Inc, and an occupational therapist, Marc Dy began his journey as an entrepreneur as a one-person enterprise. In an interview on March 2, 2009, Dy described the difficulty he experienced when attempting to find work as an occupational therapist when he graduated from school in the late 1990's. He decided to use his knowledge of

lymphedema treatments, began traveling to patients' homes delivering occupational therapy, and billed Medicare. "When facilities began to understand PPS [Prospective Payment System], I started a contract company." Dy coordinated occupational therapy contracts with hospitals and skilled nursing facilities. Over the years, his company has taken on many challenges, thus providing an example of how types of occupational therapy entrepreneurship may overlap. Dy not only has experience as an individual direct service provider; he also manages other direct service employees, develops ergonomic products, and operates an outpatient industrial rehabilitation clinic. In hopes of encouraging other occupational therapists, Dy advises, "Don't be afraid to start something new; just because nobody else is doing it, doesn't mean it won't work" (personal communication, March 2, 2009).

2. Coralie Glantz and Nancy Richman, both occupational therapists, began their contract company Glantz/Richman Rehabilitation Associates in 1982. Glantz and Richman both began their careers as contract therapists and eventually decided to hire other therapists to work with them. The company has since grown, employing close to 100 therapists. All the while, the company holds true to their commitment to ethical practice, human values, and therapists' needs. Richman noted, "One of the things we have always done is have a company that is very responsive to therapists' needs. It's been a niche market for us" (personal communication, February 27, 2009). Currently, the business contracts physical therapists, occupational therapists, recreational therapists, speech and language pathologists, and social workers with a wide variety of facilities. Glantz still enjoys the freedom that her entrepreneurial venture allows, "I love that I have been able to open a business and run it by occupational therapists, and have the opportunities to choose to spend my time to volunteer for AOTA and other leadership roles in the profession" (personal communication, February 24, 2009). Coralie Glantz has been recently

elected to the AOTA Board of Directors. Both women are actively involved in their state associations.

3. Independent consultation using occupational therapy as a knowledge base is a common form of entrepreneurship. Occupational therapist and co-founder of CGA Home Modifications Gina Arroyo has successfully co-owned and operated her small business since April of 2007. She and her partner work with clients who aspire to remain independent in their homes, despite age or disability. CGA Home Modifications allows Arroyo to use her occupational therapy background to suggest modifications; her partner then installs them. Her company continues to expand. Arroyo is applying for her Medicare Provider Number, which will enable her to bill as an occupational therapist.

4. Perhaps the most well known personality in the arena of product development is Fred Sammons. He began his “little mail-order business” in Chicago as a hobby, a means to earn extra income (personal communication, February 27, 2009). While working as an occupational therapist, Sammons discovered how to expand his business, “We would have a patient with a problem, and [we] would devise some kind of way to solve the problem. Then I would find a way to make that product and put it in my little catalogue. I invented it and controlled the manufacturing, and then I took the money to the bank” (personal communication, February 27, 2009). He attributes his success to being in the right place at the right time and to having the right advisors, lawyers, marketers, and manufacturers. Because Sammons did not have business or manufacturing experience, he relied on this team to manage the company and to mass-produce products. Even though he sold his interest in the company, which has subsequently been repeatedly re-sold, Sammons remains an employee of Patterson Medical, the current publisher of the Sammons and Preston catalogue.

5. Lecturing to the community and presenting continuing education seminars as a business is often overlooked as a form of occupational therapy entrepreneurship. Becky Austill-Clausen began her company, Austill's Rehabilitation Services, Inc, in 1984. Austill-Clausen began hiring occupational therapists to work as independent contractors with local school districts; she also began offering continuing education seminars for all occupational therapists. She stated that she has three main goals of her continuing education division, "We want to train our staff, recruit our therapists..., and we want to give back to the community" (personal communication, April 30, 2009). Austill's Rehabilitation Services, Inc. is an AOTA continuing education provider, ensuring contact hours for the therapists attending each seminar. The company offers different types of courses: two hour evening workshops; full-day seminars offered two to three times a year; and "cottage workshops" offered at the cottage building where the business is operated. Soon, Austill-Clausen hopes to become "*The* school system online continuing education program" (personal communication, April 30, 2009).

Taking Advantage of Opportunities

Entrepreneurship favors occupation because the opportunities for a profit-making business are located in the community (i.e., home modifications, school consultation). These places need experts of both daily living and the connection between occupational form and people with complex lives or specific impairments. Occupational therapist and entrepreneur Chris Alterio, President of ABC Therapeutics, speculated "Endless opportunity is almost a barrier," and proposed that occupational therapy services can benefit any population (personal communication, March 2, 2009). Johansson (2000) identified ten emerging practice areas for the 21st century: ergonomic consulting, driver rehabilitation and training, home modification, low vision, community private practice, assistive device development, welfare to work, health and

wellness consulting, ticket to work services, and psychosocial needs of children and youth. When looking at each of these areas individually an occupational therapy practitioner may discover how to include these services to create a new business. Each of these areas provides unique opportunities for business ventures.

Entrepreneurs need to be aware of specific local needs, or niches, as trends present themselves in many forms. Entrepreneur and occupational therapist Marianne Hassen, Vice President of Concept Rehab Inc, worked closely with her business partners in the early 1980's to better understand the reimbursement process in long term care facilities. "The girls" would then travel to various sites, deliver therapy services, and properly bill for these services generating income for the facility (personal communication, January 30, 2009). Eventually, this practice resulted in the creation of Concept Rehab, Inc. a contract company with currently over 650 employees. Cynthia Epstein offered this advice to potential entrepreneurs, "Be aware of the changes in the industry, the economy, and local businesses" (personal communication, March 9, 2009). By monitoring the needs in her community, Epstein's company, which started as a consulting practice in 1979, opened an outpatient clinic over 10 years ago. Similarly, Dy encourages occupational therapists to explore "Different, [and] creative ways occupational therapists can see themselves and create new niches. It's an ever-changing profession" (personal communication, March 2, 2009). Richmond and Powers (2009) suggest that therapists monitor economic forecasts provided by government websites and reports, subscribe to healthcare magazines, become involved in professional associations, and remain informed of reimbursement changes in order to identify trends.

Current economic climate always affects the success of small businesses. Fortunately, as Autill-Clausen commented, "We [occupational therapists] are very lucky in this tough economic

time, that occupational therapy is really continuing to be a viable source” (personal communication, April 30, 2009). Healthcare as a whole is expected to expand, creating 3 million new jobs between 2006 and 2016 (BLS, 2009). The BLS projects faster than average growth for the profession of occupational therapy (2009). New legislation is also encouraging more small business ventures and assisting existing businesses to succeed. The American Recovery and Reinvestment Act has increased the amount of funds available to small businesses by guaranteeing 90% of small business loans and supplementing loans offered through the SBA (SBA, 2009). The Obama administration is positioned to increase incentives for American entrepreneurs in the next four years and beyond.

Challenges

With any business venture comes certain risks and challenges. The SBA (2009) confirms that only two thirds of new businesses survive the first two years, with 44% of businesses remaining open after four years. Richmond and Powers (2009) explain small business failure as a result of poor planning, lack of expert support, procrastination, poor location, cash flow problems, ineffective marketing, and poor staffing. Legislation and tax regulations also pose unique challenges for small businesses. As Mourtrey (2009) commented, “Policymakers will have to consider the impact of taxes and regulations on small business owners and would-be entrepreneurs.” Occupational therapy professionals will also have to monitor the changes that will occur in the healthcare industry over the next few years as the Obama administration implements new strategies. Entrepreneurial expert T. Nelson acknowledges, “The government is looking at profit making social ventures to propose how the new healthcare system is going to complement or supplement government actions” (personal communication, February 27, 2009).

More specific to the field of occupational therapy, barriers to entrepreneurship are often internal. Virginia Stoffel professor of occupational therapy at the University of Wisconsin at Milwaukee, agrees that occupational therapists often do not consider entrepreneurship; “I think sometimes that we underestimate the knowledge that we have... [therapists are] not recognizing that something we know a lot about would be actually valued in the marketplace” (personal communication, February 20, 2009). Leslie (2005) described lack of innovation and ability to motivate employees as entrepreneurial obstacles for occupational therapists. President of her own small business, Callaria Coaching, and an occupational therapist, Leslie encourages therapists to brainstorm, create, learn, and lead within their organizations (2005). Alterio also stated, in a personal interview, that the lack of resources and support for occupational therapy entrepreneurs is a barrier “We [entrepreneurs] have learned to function without [support] because we just don’t have it” (personal communication, March 2, 2009). A common theme discovered during the interview process was that of self-learning, due to limited professional support. Small business owner Dy remarked, “I wish that education and AOTA would provide more resources for occupational therapy entrepreneurs, to develop skills and learn new ways of delivering services” (personal communication, March 2, 2009).

Also unique to the occupational therapy profession, most occupational therapy practitioners are female and women are not as likely to become business owners as men are. Hassen commented to this effect, “Most occupational therapists, like speech therapists, are young women... and at some point need to take care of their families and at some point need to switch their priorities. Physical therapists... a fair amount of them are male... but they have the freedom to have a practice and maybe have the support of a spouse at home taking care of their family” (personal communication, January 30, 2009). Similarly, Austill-Clausen offered that

“Occupational therapists are very creative and want to help people, but I don’t think business is our strong suit... I think occupational therapists don’t really see themselves as entrepreneurs” (personal communication, April 30, 2009). Austill-Clausen attempts to remedy this conflict by employing therapists as independent contractors, then teaching them how to operate as an entrepreneur, “It’s a cool thing [entrepreneurship] to teach women, because we mostly work with women, and women are not traditionally used to managing what they do on their own” (personal communication, April 30, 2009).

How to be an Occupational Therapy Entrepreneur

Fortunately, there are many books and resources in the business literature to assist potential entrepreneurs on the development of skills and business planning. A visit to a public library will reveal a wide range of business resources ranging from management principles to macroeconomics. The texts *The Small Business Start-Up Kit: A Step-By-Step Legal Guide* (Pakroo, 2006) and *Business Fundamentals for the Rehabilitation Professional* by Richmond and Powers (2009) have proven to be useful resources and are commonly cited within business literature. Richmond and Powers (2009) created a business resource specifically designed for rehabilitation professionals. In this text, the authors provide step-by-step instructions and worksheets for the therapist to use when problem-solving and developing his or her business plan.

The first step in any business venture is to complete a self-assessment to determine personal strengths and weaknesses. A commonly used assessment is SWOT, which represents strengths, weaknesses, opportunities, and threats. Next, the reader is guided through a process to identify potential entrepreneurial ventures, “Opportunities are combinations of ideas, circumstances, and educational backgrounds that can grow into a viable business” (Richmond &

Powers, 2009, p. 11). The therapist is then encouraged to complete a marketing assessment, or needs assessment, of his or her local community to determine the viability of the proposed business idea.

Developing a business plan may be the most intimidating part of the entrepreneurial process, but it does not have to be. Business plans vary in structure, and must contain details regarding operation and management (business description, mission statement, location, services, and long-term goals), marketing (industry trends, target markets, competition analyses, and marketing plans), and finances (start-up and operating costs, income statements, cash flow projections, and various other balance statements). There are many resources, in print, online, and in person, that will guide therapists through this process. The SBA provides sample business plans on its website (www.sba.gov) and lists links to additional online resources. Local Chambers of Commerce and Small Business Development Centers (SBDC) offer free advice and training sessions for individualized services.

With the business plan complete, the next actions are to implement the ideas and execute. Common sources of capital are personal savings or loans, such as SBA-guaranteed loans, or from friends or family members (SBA, 2009). The entrepreneur then executes the details outlined in his or her business plan and becomes a business owner. Of course these “details” may be challenging, such as applying for a Medicare Provider Number for a direct service entrepreneur; however, mentors are available to offer assistance. Mentorship from both the business world, such as SCORE (Service Corporation of Retired Executives), and from within the occupational therapy field will contribute to an entrepreneurs success. Similar to mentorship, networking is another crucial learning method. “[Networking] is all about building relationships and establishing trust,” Arroyo remarked during an interview on February 11, 2009. Arroyo also

stressed the importance of networking outside of your professional industry; she encourages therapists to talk with executives from all fields (personal communication, February 11, 2009). National opportunities such as trade conferences and the annual AOTA conference provide a central meeting place for potential entrepreneurs and like-minded persons to network. OT Connections (otconnections.aota.org) has been established as an online networking community for occupational therapists to blog and participate in communication boards with other therapists from across the country. Other professional online communities exist, such as Linked-in (www.linkedin.com) and Entrepreneur.com (www.entrepreneur.com). Local networking opportunities may also be offered through the Chamber of Commerce or professional networking groups. A simple Google search presents many networking options.

Recommendations to Encourage and Inspire

It is not enough to simply discuss the importance of entrepreneurship; the profession needs to continually encourage therapists to explore this form of occupational therapy practice. This may be achieved through a variety of methods. The following are suggestions for occupational therapists as well as the governing organizations of our profession.

2. Include business education in the occupational therapy curriculum.

Overwhelmingly, interviewees agreed that occupational therapy entrepreneurs do not receive adequate business education. Glantz recommended that occupational therapy programs should include general business concepts such as starting and operating a business, including the basics of marketing for all students (personal communication, February 24, 2009). Even though most students might not become full-time entrepreneurs, all occupational therapists could benefit from basic business training. Most therapists will work for organizations employing business strategies, and having some understanding of what is needed to operate a successful business can

make one a better employee. In spite of this, adding entrepreneurial or business-related content to current occupational therapy curriculums remains controversial. Epstein explained her concern regarding educational priorities, “We expect so much of our entry level therapists... perhaps schools should plant the seed about entrepreneurship and provide mentorship” (personal communication, March 9, 2009). The potential cost of this effort can be minimal; a guest lecture or the time away from other course content may fulfill this need.

Optional courses or tracks could be offered to occupational therapy students in order to learn about business principles. T. Nelson is currently developing such a venture. In T. Nelson's proposal, a university would offer a certificate program in entrepreneurship, separate from the school of business. Enrollment in such a program would be open to students and alumni who have no previous business training; this certificate could generate income for the sponsoring institution (personal communication, February 27, 2009). Since this certificate program would be available to previous graduates, alumni therapists would be able to attend. It is hoped that each certificate would include industry-specific information depending upon each class.

2. Adopt an official educational standard by the Accreditation Council for Occupational Therapy Education (ACOTE).

Every occupational therapy program must adhere to the standards promulgated by ACOTE; however, no standard exists promoting small business or entrepreneurship education. Should the council accept such a proposal, it would ensure a standardized level of education regarding entrepreneurship. An entrepreneurial standard may read: The student will demonstrate understanding of the similarities and differences between occupational therapy practitioners working as an employee and occupational therapy practitioners working as private practitioners and will identify key differences between non-profit and for-profit organizations.

3. Support business-oriented continuing education seminars.

An occupational therapist with a desire to develop his or her business idea and skill should have the opportunity to attend an appropriate continuing education course. Glennon strongly recommends enrolling in business related seminars; however, “that’s a challenge because you spend your time in clinical CEU’s” (personal communication, March 2, 2009). Business courses offered in the past cover a variety of private practice topics, yet, as Richman observed, “I think we’ve been lacking in conference presentations that attract managers and entrepreneurs” (personal communication, February 27, 2009). Business related continuing education courses should target all possible occupational therapy entrepreneurs. Entrepreneurial courses could be offered at each national AOTA conference, or could be sponsored multiple times a year across the country. Most of the costs of producing such a course may be recovered through attendance fees.

4. Provide more sources for self-directed learning for all potential occupational therapy entrepreneurs.

Currently, AOTA offers few entrepreneurial resources and opportunities for its members. One of the goals of the current AMSIS committee is to revise and update the online private practice resource within the next year, supplying readers with comprehensive information. This publication should also be offered at true cost to non-members of AOTA, reaching all potential entrepreneurs. Richman observed, “Not all entrepreneurs are members of AOTA and don’t see all of the support [available] for them” (personal communication, February 27, 2009). This leads into the next recommendation for potential occupational therapy entrepreneurs.

5. Execute marketing campaigns promoting entrepreneurship.

As stated previously by Leslie (2005), many people lack the motivation to pursue entrepreneurship. A national marketing campaign, sponsored by AOTA, AMSIS, and practicing entrepreneurs, would generate entrepreneurial discussion. This effort could include regular columns in *OT Practice* or *OT Advance* featuring an occupational therapy entrepreneur, or entrepreneurial conversations via AOTA's networking website, OT Connections.

6. Be actively involved in state and national professional associations.

Many successful entrepreneurs interviewed for this paper attributed his or her business success to being actively involved in AOTA, either at the state or national levels. As Austill-Clausen stated, "My best suggestion for an entrepreneur is to get involved in state and national associations because it keeps you in the groove, it keeps your name in front of people, it keeps you open to the cutting edge of what is happening" (personal communication, April 30, 2009). Successful business-owner Epstein became a part of the New Jersey Occupational Therapy Association early on in her career. "I became involved in [AOTA at the] national and state level because I was looking at the big picture, change, the impact of the political world onto the profession" (personal communication, March 9, 2009).

7. Encourage entrepreneurial networking and mentorship.

All the occupational therapy entrepreneurs interviewed for this paper insisted upon good mentorship and advising. Still, more is needed, "I don't think we have enough people out there to really be mentors. You need good mentors, people who are willing to sit down and take time, talk about how important [your business] is" (Arroyo, personal communication, February 11, 2009). Potential entrepreneurs should seek out successful therapists in the area of business he or she is interested in. This is not as difficult as it may seem. All of the professionals interviewed for this article generously offered their time and knowledge at the request of an occupational

therapy student, and stated they would make themselves available for additional time if necessary. Scheduling and contacting certain individuals could be challenging, but a therapist seeking mentorship should not be deterred by the thought that a busy businessperson would not want to help. Therapists desiring entering the business world should also become a member of the AMSIS, sponsored by AOTA. This group supplies a quarterly newsletter and presents networking sessions at national AOTA conferences.

8. Take risks!

Entrepreneurs are risk takers, and the business world is full of chances. One must not be afraid to take reasonable risks. One just has to analyze each opportunity and choose the most appropriate business risk. Occupational therapy has unique entrepreneurial potential; one can begin a small one-person enterprise and slowly grow into a larger business. This process is how many current successful occupational therapists began their current companies (Epstein, Glennon, Glantz, Richman, Hassen, Arroyo, Alterio, and Dy). If one wants to remain a solo practitioner, this option is also available.

9. Spread the word.

Successful entrepreneurship requires professional encouragement in order to develop. For the entrepreneurs who have succeeded in business, the next step is to tell others how to achieve the same results. Business owners could begin online or in-person networking events, publish an article, write a book, or conduct a continuing education course regarding an area of expertise. Therapists also have the responsibility of educating the community about therapist-owned and -operated businesses.

Conclusion

As members of the occupational therapy profession and the American Occupational

Therapy Association, we are challenged by our Centennial Vision to advance our profession.

Entrepreneurship is certainly underutilized in occupational therapy. Therapists interested in entrepreneurship should make the commitment to explore the possibilities, and the profession should support them. Entrepreneurship is the American way, and that applies to occupational therapy also. Through entrepreneurship occupational therapists can provide needed products to help people achieve their potential, can educate fellow therapists, and can provide enhanced professional services to people in need of therapeutic occupation.

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Appendix B

Annotated Bibliography

Aaltio, I., Kyro, P., Sundin, E. (Eds). (2008). *Women entrepreneurship and social capital*. Gylling, Denmark: Copenhagen Business School Press.

“This book explores social capital as the multiple relationships between gender, management and entrepreneurship. Human resources are the social capital of a firm and business life, based on trust as well as expertise, values and cultural diversity. This calls for cross-cultural knowledge and an understanding of gender issues and individual differences in the social capital of the firm and society. In its eleven chapters, twenty-six researchers representing a variety of disciplines from different parts of the world are presenting findings on diverse aspects of the dialogue between women entrepreneurship and social capital. As a consequence the central concepts, social capital, entrepreneurship and gender, are given a variety of meanings. Women entrepreneurs and business owners regardless of their cultural context, branch and education provide interesting ideas to the global debate on equality and social capital” (back flap).

Specifically, this text provides a comprehensive literature review of the research involving gender and entrepreneurship. Demographics and historical data are discussed, contributing to the student’s knowledge of women involved in entrepreneurship. The authors also analyze an international study of women-owned small businesses. This study identifies motivating factors for women entrepreneurs, barriers, and many other factors. The authors identified minimal cultural differences between groups when controlling for firm size and other factors. Understanding the challenges and advantages of women entrepreneurship is critical for the student, as she develops the final dissemination paper and conducts interviews with female business owners.

American Occupational Therapy Association. (2006). *The reference manual of the official documents of the American Occupational Therapy Association, Inc.* 11th ed., (W. A. Schoen, Comp.) Bethesda, MD: Author.

As a student of occupational therapy, I must adhere to the ethical and safety guidelines provided by my profession.

American Occupational Therapy Association. (2006). 2006 AOTA workforce and compensation survey: Occupational therapy salaries and job opportunities continue to improve.

[Electronic Version]. *OT Practice*, 11(17), 10-12.

Demographic information of the American Occupational Therapy Association members was reported in this survey. The authors reported many statistics, information related to this advocacy effort includes, 95% of occupational therapists are female, and 12% of occupational therapists reported being self-employed or contracted for all of their occupational therapy work. Similarly, 12.9% reported being self-employed or contracted for some of their occupational therapy services. Occupational therapy assistants reported 16.4% self-employment of contracted work on either a part-time or a full-time basis. Of the participants reported working as contractual or self-employed, 62% considered themselves to be a contractor, 17.9% as a solo practitioner, 5.8% as a part of a practice group of occupational therapy practitioners, 13.% as a part of a multi-specialty group practice, 0.4% working within a physician group practice, and 0.3% worked in other areas. This information is vital for the student when describing the current status of occupational therapy entrepreneurship and when comparing health care industry trends of entrepreneurship.

American Occupational Therapy Association. (2007, May). *Occupational therapy private practice advocacy resources*. Retrived Feburary 5, 2009, from www.aota.org/practitioners/reimb/pay/private/private.aspx.

Prepared by AOTA, this online document offers information to its members interested in entrepreneurship. This source extensively covers Medicare and Medicaid guidelines concerning occupational therapists in private practice. Due to the complexity of this topic, the student will use this source to better understand how Medicare and Medicaid reimburse occupational therapy services. Included in the document are enrollment applications for payer sources and checklists to manage of reimbursement procedures. AOTA also explains the purpose and need for accurate documentation and billing procedures within a private practice. Finally, comprehensive lists of website resources are provided to direct the reader to additional sources of information.

Currently this document is the primary resource for AOTA members interested in entrepreneurship. Upon reading this resource, the student will better understand the reimbursement procedures. Unfortunately, many concepts relating to private practice are not covered by this document. The authors do state that this packet of information is intended to be a starting point for entrepreneurial research and additional resources are provided.

American Occupational Therapy Association. (2008). *AJOT - Author's guide*. Retrieved April 16, 2009, from http://www.aota.org/Pubs/AJOT_1/AJOT_1/AJOTGuide.aspx.

The *American Journal of Occupational Therapy* is the desired journal for publication of the article "The Issue Is...". The student will understand and adhere to the editorial guidelines provided by AOTA. The final manuscript will be fewer than 25 pages, address the professional

trend of entrepreneurship, have no abstract, and have abbreviated references. The student will submit the manuscript for publication as detailed in this document.

American Occupational Therapy Association. (2009). *Ethical considerations in private practice*. Retrived March 16, 2009, from www.aota.org/Practitioners/Ethics/Private-Practice.aspx.

“Occupational therapy practitioners who work in private practice, as either a business owner or employee, must consider a variety of issues to ensure that they maintain an ethical practice. Although practitioners should follow ethical principles regardless of clinical setting, in private practice clinicians are generally more directly involved with and affected by organizational aspects and ethical issues related to business practices. Therefore practitioners, whether owners or employees, need to understand that business stability and predictability of referrals are important; however these must be balanced against their possible influence on clinical care. Whether working in independent practice or in a physician’s office, the burden is on practitioners to ensure that they are making clinical decisions that are in compliance with core ethical principles related to benefitting the consumer or patient” (p.1).

Created by the AOTA Ethics Commission, this document addresses many key issues such as referrals, access to care, continuity of care, collaboration, practice ownership, documentation, and billing. The authors refer to the *Guidelines to the Occupational Therapy Code of Ethics* and offer practical responses to these common ethical issues. In order to accurately comprehend all that is necessary to enter into occupational therapy entrepreneurship responsibly, the student will understand and apply these principles as necessary during practicum experiences.

American Psychological Association. (2005). *Publication manual of the American Psychological Association*. (5th ed.). Washington, D. C.: Author.

“With more than 10 million copies sold, the *Publication Manual of the American Psychological Association* is the style manual of choice for writers, editors, students, educators, and professionals in psychology and the behavioral sciences, sociology, business, economics, nursing, social work, criminology and justice administration, and other disciplines in which effective communication with words and data is fundamental” (back cover).

This publication manual is critical for the student during the writing and editing process of the final manuscript for the dissemination course. The article written for the *American Journal of Occupational Therapy* (AJOT) must be written in APA style, which is detailed in this manual. The final document must also follow APA guidelines regarding submission of a manuscript to a professional journal. The student will follow all guidelines described in order to appropriately prepare the final document for the editors of the *AJOT*.

AmeriCare Health Services, LLC. (2008). *AmeriCare home health services: Client information packet*.

Clients of AmeriCare are provided with educational material regarding patient rights, responsibilities, and safety when they begin a relationship with AmeriCare Health Services. New clients learn about the services provided by AmeriCare: nursing, physical therapy, occupational therapy, speech and language therapy, and home health aides. Clients are also informed of their legal responsibilities such as advance directives, Ohio Do Not Resuscitate (DNR) laws, advanced beneficiary notice for supplies for Medicare patients, client bill of rights and responsibilities, and AmeriCare’s non-discrimination policy. Also included in this packet are safety suggestions

regarding home and medication safety. General information such as infection control and disposal of medical waste is also outlined in this document.

AmeriCare must follow government documentation requirements therefore the student must have a clear understanding of these regulations. Medical information is collected using the Outcome and Assessment Information Set (OASIS). Clients are informed about this system and this document identifies what information will be used. Also included in the client information packet is the AmeriCare policy regarding client privacy. This notice documents how the employees and the company will safeguard private health care information. AmeriCare is dedicated to providing quality services to their clients. As a result, problems regarding any service, the client may file a grievance with the local AmeriCare office. The administrator of AmeriCare has supplied her contact information for quality assurance. The student will be familiar with these concerns. This gives the student awareness of appropriate client interaction and will aid during observations in the field.

AmeriCare Health Services, LLC. (2008, January). *AmeriCare home health services: Orientation Manual*.

The main site for this capstone experience is AmeriCare Health Services and its many branch offices. This manual provides the policies and procedures for all employees, as well as the mission and visions statements for the company. Also included in the manual are the client and staff bill of rights and responsibilities created by government entities. Information regarding infection control, universal precautions, and waste disposal is offered to ensure compliance with federal standards. Specific to AmeriCare Health Services, information related to hours of operation, job performance, documentation, communication, and personnel are included. The

orientation manual also explains types of services covered by specific insurance: Medicare, Medicaid, Passport, private insurance, Veteran's Administration, private pay, Workman Compensation, and other general information. Client policies such as the grievance policy, DNR orders, and advance directives are explained briefly. Staff policies in this manual include: full time, part time and per-diem position definitions, performance evaluations, paydates, overtime, breaks, holiday pay, vacation requests, personal days, bereavement leave, insurance benefits, leave of absence requests, discipline processes, and termination statements. Appendices offer forms and additional literature on the topics covered in this manual.

It is imperative for the student to understand and to be oriented to this agency, as it is the primary site for the practicum course. The student will follow these guidelines and discuss their importance and application to the AmeriCare staff with appropriate department managers. Through doing this, the student will learn the importance of certain policies and how they are created to serve a company.

Anderson, C. (2006). *The long tail: Why the future of business is selling less of more*. Hyperion: New York.

“Our world is being transformed by the internet and the near limitless choice that it provides to consumers; tomorrow's markets belong to those who can take advantage of this. *The Long Tail* is really about the economics of abundance, an entirely new model for business that is just starting to show its power as unlimited selection reveals new truths about what consumers want and how they want to get it. The record business has been transformed by iTunes and Rhapsody; a similar transformation is coming to just about every industry imaginable. What happens when everything in the world becomes available to everyone? When the combined

value of all the millions of items that may sell only a few copies equals or exceeds the value of the few items that sell millions each? When a bunch of kids with no profit motive can record a song or make a video and get the same electronic distribution for it as the most powerful corporation?” (Inside flap).

C. Anderson explains this new economic concept of “the long tail” as it applies to different markets. Industries such as music, literature, and even supermarkets are affected by this new concept. Anderson argues that the internet increases the availability of all items, especially niche items that were not accessible to consumers before. For example from music industry, a person may go online and purchase a single song. Popular songs are purchased at a very high rate, bringing in a high profit for the company. On the other hand, niche songs or rare recordings that only appeal to a small group of customers are also selling. These songs are being purchased at a much higher rate than the popular songs and are becoming more profitable because there are simply more niche songs available for purchase. C. Anderson explains this concept as the “economics of abundance”. The ever-increasing availability of specialty items redistributes how consumers buy. Although the concept of “the long tail” mostly applies to merchandise instead of service industries, it is important for an entrepreneur to understand new economic developments. The student is attempting to learn about all aspects of business. Economic trends that affect one industry, such as music sales, may eventually influence the health care industry.

Much of this text reveals new consumer trends and buying strategy as well. Due to the availability of information from the internet, consumers are able to research brands and companies before they decide to spend money. Another important tool for consumers is the peer review; past clients or purchasers rate their experiences and publish a review of the encounter. This concept is vital for all business owners to understand. Now more than ever, customer

satisfaction, and dissatisfaction, is widely published and easier to find. A comment posted on a personal blog has the potential to immediately influence a business. The student understands this concept and has begun to explore online resources. Blogs reporting the day-to-day operations of an occupational therapist that operates a clinic, and email-based discussion groups are examples of how online experiences shape customer buying habits.

Baum, C. M. (2006). Centennial challenges, millennium opportunities. *The American Journal of Occupational Therapy*, 60(6), 609-616.

This advocacy capstone experience will address many of the initiatives provided by the AOTA and the Centennial Vision. Baum introduced the Centennial Vision in her 2006 Presidential Address, presented in *The American Journal of Occupational Therapy*. “Successful professions plan wisely and determine their own destinies. As we design our future, it is important for us to clearly understand what services will be needed and how we can best provide them to the individuals and populations who can most benefit from them” (p. 609).

The Centennial Vision was introduced, “We envision that occupational therapy is a powerful, widely recognized, science-driven, and evidence-based profession with a globally connected and diverse workforce meeting society’s occupational needs” (p. 610). Baum asks occupational therapy professionals to “Place occupational therapy in the public eye; to deserve and receive payment for our services; and to contribute our knowledge to benefit individuals, organizations, and communities” (p. 610). Entrepreneurship certainly contributes to this vision. This Capstone experience and advocacy effort has been fueled by the challenge provided in this vision statement. The student has utilized the Centennial Vision to encourage therapists to

explore entrepreneurship and ultimately contribute to the vision of becoming a “powerful” and “widely recognized” profession, “meeting society’s occupational needs”.

Branchesende, A. (2005, January 24). The evolution of an enterprise. *OT Practice*, 10(1), 7-8.

A biographical story of how Cynthia Epstein and Sandra Fornuff began their company, Occupational Therapy Consultants, this article provides detailed information regarding to occupational therapy entrepreneurship. Epstein was interviewed and discussed her experiences in small business ownership for this piece in *OT Practice*. The article focuses on occupational therapy consultation, teaching the student about this type of entrepreneurship. In addition, Epstein’s personal history included in this article, providing the student with information prior to conducting an informal interview.

Braveman, B. (2006). *Leading & managing occupational therapy services: An evidence-based approach*. St. Louis, MI: F. A. Davis.

“The purpose of this book is to overview the primary roles, responsibilities, and functions of an occupational therapy manager. Additionally, in writing this text I sought to focus on strategies for using therapy and evidence related to a wide range of occupational therapy knowledge as well as knowledge from related fields. This book presents a particular approach to leading and managing occupational therapy services - and *evidence-based* approach” (p.ix).

This text provides a practical approach to occupational therapy management utilizing evidence-based principles and case study examples. Initial chapters explain health care systems and other large organizations, where an occupational therapist has the opportunity to become involved in management. Braveman then details the characteristics and methods of leadership

and management. Specific managerial topics include: roles and functions of supervisors; managing change, and solving problems; developing programs; evaluating services; communicating; and marketing. The entire book will be utilized because of its focus on leadership and management, critical elements of entrepreneurship, supplementing the student's education.

Bygrave, W. D. (1994). *The portable MBA in entrepreneurship*. New York: Jon Wiley & Sons, Inc.

“In *The Portable MBA in Entrepreneurship*, you'll find out how top business schools are preparing students to meet the challenges of the entrepreneurial-driven business climate of the 1990's and beyond. William Bygrave, a successful entrepreneur and Director of the Center for Entrepreneurial Studies at Babson College, has brought together an all-star team of thinkers and *doers* to offer both established and aspiring entrepreneurs this comprehensive, highly-practical guide. They include professors, consultants, and entrepreneurs - most of them successful business people, in addition to being first-class academics” (inside cover).

This text is comprehensive, addressing many entrepreneurial topics. Chapters include: the entrepreneurial process, opportunity recognition, entry strategy, successful business plan, financial projection, venture capital, debt and finance, external resource, legal and tax issues, intellectual property, franchises, and economics. Due to the overlap of information from other sources, this text will be selectively utilized. Specific to this capstone experience, this book describes the entrepreneurial process: innovation, triggering event, implementation, and growth. This process is key to understanding personal and environmental factors that lead to the creation

of an enterprise. The student will apply these principles to her own personal and professional goals, gaining insight as to what becoming an entrepreneur entails.

Christopher, D. (2005). *The Pampered Chef: The story of one of America's most beloved companies*. New York: Doubleday.

“*The Pampered Chef* is Doris Christopher’s extraordinary account of how she turned an innovative concept and \$3,000 investment into a business with annual sales approaching the billion-dollar mark. It is packed with real-life lessons and inspiring insights for small-business owners and aspiring entrepreneurs” (back cover). Christopher’s story of growth and innovation is inspiring. From her very small mail order business operated out of her basement, to a multi-million dollar corporation, this book detailed how she became a successful business woman. Christopher encourages the reader to explore business opportunities, just as she did. The student took these lessons to heart, theorizing possible direct sales programs an occupational therapist could create. The student utilized this text to better understand the entrepreneurial spirit required to create a successful enterprise.

Cossar, A. (1992). The growth of private practice in occupational therapy in Great Britain.

British Journal of Occupational Therapy, 55(4), p. 157-161.

“By means of a questionnaire issued to the 65 therapists registered on the COT [College of Occupational Therapists] private practice directory in 1989, a study gathered demographic details and information regarding the growth of private practice, diversity of practice and referral sources. It appeared that trends emerging amongst occupational therapists in the private sector might be pre-empting trends in the occupational therapy profession in general. With decreasing

resources and the introduction of competitive tendering in the public sector, more therapists might have to re-examine their services in terms of cost-effectiveness. It seemed that colleagues in the private sector had already rationalized their services in order to compete in the marketplace. Those skills that were highly visible, in the physical, domiciliary and litigation areas of work, predominated. The findings have implications for those occupational therapy services presently without proven effectiveness which require urgent research to prevent their further decline” (p. 157).

This study confirms the importance of monitoring and encouraging the professional trend of entrepreneurship. The authors describe an arising phenomenon; health care trends appear to effect private practices before other health care settings, a discovery that deserves further research and confirmation. This concept could result in entrepreneurs becoming the trend setters for all health care industries. Through this article, and others, the student will learn about historical and industry trends regarding occupational therapy entrepreneurship.

Crepeau, E. B., Chon, E. S., & Boyt Shell, B. A. (2003). *Willard & Spackman's occupational therapy* (10th ed.). Philadelphia: Lippincott, Williams & Wilkins.

This comprehensive text offered basic and well-respected information about the profession of occupational therapy. Contributors analyze the past, present, and future of occupational therapy services. Specifically, this book describes the role of the occupational therapist as a consultant. The authors state that opportunities for entrepreneurship in this form, are all around us, “As the occupational therapy practitioner explores the need for consultation in the community, opportunities may arise to initiate services...” (p. 946). Additional concerns related to private practice are also discussed, such as the risks, rewards, and requirements of

entrepreneurship. Consultation is a common area of entrepreneurship in occupational therapy and is discussed in depth by the author of this chapter, Cynthia Epstein. The student will learn and understand this service model when discussing entrepreneurial opportunities. This text was also referenced when interviewing Epstein regarding her business Occupational Therapy Consultants, Inc.

Cromwell, F. S. (1985). *Private practice in occupational therapy*. New York: The Hawthorne Press.

“One of the fastest growing segments in occupational therapy practice is in the private practice arena where therapists, alone or in teams of colleagues, are venturing into the market place to offer a tantalizing assortment of needed health care services” (p. 1). The editor, a past president of AOTA (1967-1973), compiled a number of articles written by occupational therapists in private practice in order to inform and educate potential entrepreneurs. A selection of these articles were titled “Risk taking in Occupational Therapy” by McFadden & Hanschu; “Tidal surge and Private Practice: The Historic Eighties” by Frazian; and “One Person’s Experience in Private Practice: Start to Finish” written by Knickerbocker. The student reviewed historic trends and personal success stories detailed in these articles in order to understand different forms of entrepreneurship.

Duggan, R., Saunders-Green, L., MacLeod, D., Johnston, D. (2006). Developing a business model for a private practice partnership. *Occupational Therapy Now*, 8(6), 16-18.

The authors of this article are business partners and occupational therapists. They created a consulting business in 2002. The text serves as a practical guide, explaining the process of

beginning a business partnership practice in occupational therapy. Partnership is a common type of business structure than an occupational therapist may explore. Through supplying local resources and explaining the steps needed to be taken by each partner, the authors provide a how-to guide for future entrepreneurs. The student will learn how to successfully operate a partnership in business.

Farrell, L. (2001). *The entrepreneurial age: Awakening the spirit of enterprise in people, companies and countries*. New York: Allworth Press

“Today, for the first time in history, the entire world is moving in the same economic direction. Both of the twentieth century’s great experiments - big business and big government - seem to have run their course, at least in the hearts and minds of the public. In their place has come a mighty, global push for searching out and reviving the entrepreneurial spirit in people, companies, and entire countries. The available evidence does point to one simple truth: The entrepreneurial spirit is the best model ever invented for creating growth and prosperity” (inside flap).

Farrell provides anecdotal evidence of the entrepreneurial spirit as well as documented proof of its success. Farrell describes who entrepreneurs are, what characteristics make certain people successful and how a person is able to develop these skills. There is some mention of business planning and marketing, however the focus of this text is to discuss the entrepreneurial spirit. The second section of this source details how managing a company as an entrepreneur would will lead to success. Farrell illustrates how self-inspiring behavior and innovative management strategies are implemented across the globe, in entrepreneurial companies. This text is very inspiring, encouraging the student to better understand what the entrepreneurial spirit

entails. The student will utilize this book to contribute to the argument for entrepreneurship in occupational therapy. This text is instrumental in both the mentored studies and dissemination courses.

Faust, L., & Meaker, M. (1991). Private practice occupational therapy in the skilled nursing facility: Creative alliance or mutual exploitation? *American Journal of Occupational Therapy*, 45(7), p. 621-627.

“Occupational therapy private practice appears to play a major role in the provision of rehabilitation services in skilled nursing facilities. A critical look at the meaning of private practice, however, indicates that many of today’s private practitioners lack characteristics traditionally associated with that term. Group private practices are well suited to retain the essential qualities of private practice while competing effectively in a corporate environment. They accomplish this difficult task by applying therapeutic principles of growth and change to the complex relationship between the group practice and the skilled nursing facility. Application of these principles allows the occupational therapy group private practice to behave consistently with its professional identity while addressing the competitive demands of the marketplace” (p. 621).

Initially, the authors define private practice then detail the relationship between contract therapy services and skilled nursing facilities. “A common misconception is that any therapy contractor is in private practice” (p. 621). Faust and Meaker explain that a private practitioner must be able to function autonomously. According to this definition, a single therapist contracting his or her services with a single facility is not in private practice because he or she could not continue business without that contract. Nevertheless, when creating the categories of

entrepreneurship, the student decided to include solo direct occupational therapy services. As a large number of therapists engage in this type of entrepreneurship. Many therapists have begun their businesses as a one-person enterprise and eventually grow into larger businesses.

This article explains how occupational therapists tend to shy away from complex topics such as business and reimbursement, “[Occupational therapists] have excellent tools for understanding organizations in our models of human occupation and activity” (p. 622). The authors suggest occupational therapists can be successful business people by applying occupational therapy theory to business and organizational operations. This statement is critical to this advocacy effort. The nature of this project is to disseminate the fact that occupational therapists would, and do, make successful entrepreneurs. These concepts have contributed to the student’s learning process and have contributed to the development of “The Issue Is...” article.

Fleischman, L., M. Messick, B., W. (2000, November 11). Occupational therapists in private practice: No simple answer - Part 1. *OT Practice*, 5(8).

This article informs the reader of ethical and legal considerations regarding contract services. The solo-practitioner business model is explained, with both opportunities and challenges provided. The Internal Revenue Service (IRS) has defined the differences between an independent contractor and an employee in order to eliminate confusion. In the IRS definition, a person acting as a contractor cannot be directed how to deliver services. Conversely, an employee is bound through policies and procedures that dictate how to operate. This relationship affects how taxes are paid, and if benefits are offered to the employee. The occupational therapy contractor must be aware of the differences between independent contractor and employee when engaging in this type of entrepreneurship. This source makes the student aware of specific

concerns to contract occupational therapy services as it applies to entrepreneurship. It is critical that the student understand the difference between a contractor and an employee, as this concept determines if the therapist is a true solo practitioner.

Fleischman, L., M. & Messick, B., W. (2000, December 4). Occupational therapists in private practice: No simple answer - Part 2. *OT Practice*, 5(18).

Fleishman and Messick detail financial and reimbursement concerns in this second article to the “Occupational Therapists in Private Practice” series. Fee splitting issues and reimbursement concerns are addressed. One such fee splitting service occurs when a therapist works in conjunction with a physician. Occupational therapists that choose to split fees with another professional must follow strict guidelines when billing for services. This information will allow the student to better understand this type of billing and reimbursement system, a crucial component of occupational therapy entrepreneurship.

Friedman, C., Yorio, K. (2002). *The girls guide to starting your own business*. New York: HarperCollins Publishers, Inc.

“Geared toward the unique challenges faced by self-employed businesswomen, *The Girl’s Guide to Starting Your Own Business* offers solutions and advice for handling a range of issues, including how to write a business plan, how to secure funding, and how to hire (and fire) employees. Catlin Freidman and Kimberly Yorio share practice information drawn from their own extensive experience in the public relations, marketing, and consulting industries. Their concise and engaging advice is explained through entertaining tips, lists, and quizzes that speak

directly to women who are dreaming of starting, or have already stated, their own businesses” (back cover).

This book assisted the student to understand the basic procedures of business start-up and operation. Specifically, the authors include “quizzes” and expert tips that prepare the reader for the entrepreneurial process. Written in simple terms, this text encouraged the reader to explore personal strengths, weaknesses, and goals relating to entrepreneurship.

Gilkeson, G. E. (1997). *Occupational therapy leadership: Marketing yourself, your profession and your organization*. Philadelphia: F. A. Davis.

Both theoretical and case-examples are used to describe leadership and management in this book. Theoretical backgrounds regarding leadership and management, as well as methods and strategies for therapists are explained. The role of occupational therapy professionals is well defined in terms of both a manager and a leader. This text also details how to create and follow a personal vision. In order to recognize new trends and opportunities, this text advocates for occupational therapists to be aware of the economy, cultural shifts, legislation, and technology. Gilkeson stated that occupational therapy is “A tale of adaptation and entrepreneurship, of resourcefulness in response to changing times and needs” (p. 172). Finally, this book analyzes future trends and the globalization processes of occupational therapy.

Due to the very nature of entrepreneurship, community niches are the starting point for most business ventures. The student will learn how to identify potential opportunities and how to develop them into possible entrepreneurial ventures. The student analyzed her personal entrepreneurial goals while reading this text, contributing to her professional development.

Glennon, T., J. (2007, February 19). Putting on your business hat. *OT Practice*, 12(3), 23-25.

Glennon is very familiar with business operations, as she is the president of her own pediatric practice, The Center for Pediatric Therapy. “Deciding on the type of business you want to develop, how big you want it to be, and how fast you want it to grow will greatly affect the amount of preparation you will have to complete before getting started” (p. 23). Glennon provides occupational therapy practitioners with a “how-to” guide to entrepreneurship. Glennon outlines how to set up a business, beginning with the relationship between business structure and tax status. Potential entrepreneurs are encouraged to consider the types of services that could be offered through his or her practice. Marketing the practice is another concern for new businesses; the therapist is advised to learn about possible referral sources. Additional topics include reimbursement and ethical considerations. The student was able to utilize the autobiographical information provided in this article while interviewing Glennon on March 2, 2009. The student also learned about specific concerns regarding occupational therapy private practice. All of the concepts presented in this article are important for the student as she studies and observes entrepreneurship.

Halloran, J. W. (1994). *The McGraw- Hill 36 hour course: Entrepreneurship*. New York:

McGraw- Hill.

“Now entrepreneurial expertise for thousands of prospective small business owners is only 36 hours away. Tailor-made for busy people who want to master the fundamentals of successful entrepreneurial practice without wasting time and money, this book is the best and quickest way to learn how to start and run a successful business” (back cover). Halloran offers

extensive information regarding entrepreneur characteristics, business planning, marketing, advertising, management, legal concerns, and other small business issues.

This text served as a guideline for the student when preparing for practicum experiences. Due to the variety of subjects included in this text, the student applied these teachings during her observations of entrepreneurship. The information provided in this “course” is vital to the student’s entrepreneurial learning process.

Hardman, L. (2007). The heart of an entrepreneur. [Electronic Version]. *OT Practice*, 12(1), 13-15.

“Do you want to create your own destiny? If you have a multitude of ideas, and feel that they are somewhat suppressed in your present work setting, perhaps you should consider becoming an entrepreneur. Do you have a real passion about a specific area of occupational therapy? Do you have ideas about how things might be done more effectively? You be an entrepreneur at heart” (p. 13). Hardman details her experiences that have lead her to entrepreneurship. Learning from her professional experiences as an occupational therapist, Hardman decided to open a private practice in industrial rehabilitation. Hardman challenges the reader to explore alternative methods of delivering occupational therapy. Suggestions to become a successful entrepreneur include: get a vision, devise a plan, and execute the plan. Various resources and suggestions are made within each section, to encourage the reader to consider entrepreneurship. In order to better understand the process of entrepreneurship the student will utilize this information and apply the concepts to observations made in the field and during interviews. It is hoped, through this advocacy effort, for more articles of this nature to be published. Profiles of successful entrepreneurs may encourage and inspire other therapists to

explore business ventures. The student recommends, in the final written article, for AOTA to encourage therapists, via these stories of success, in order to increase awareness of entrepreneurship.

Hertfelder, S., & Crispen, C. (Eds.). (1990). *Private practice: Strategies for success*. Rockville, MD: American Occupational Therapy Association.

“The AOTA Private Practice Manual is designed for occupational and other therapists considering or already working in private practice. An increasing number of therapists are pursuing private practice, and although other manuals exist, no one manual currently guides occupational therapists in establishing or refining a practice. This manual has been undertaken by AOTA to respond to this need. The AOTA Private Practice Manual is designed for occupational therapists but much of the material may be applicable as well to other related therapists considering or in private practice. The focus is on *business*, not on occupational therapy practice. Like other therapists, occupational therapists already know how to provide their services, but they may not have much knowledge or experience in business or business practice. This manual therefore, does not address the provision of occupational therapy services per se, but rather the decisions and procedures involved in starting and organizing a private practice” (p. 1).

This manual provides therapists with detailed information to assist them in their entrepreneurial process. Part one addresses individual goals and choices. In the first chapter, the reader is encouraged to complete a self-assessment in order to determine if entrepreneurship is appropriate. Additional topics included in part one are: market assessment, business plan development, support and advice resources, business structure, payment for service, Medicare/Medicaid abuse and fraud, contracting service, and opening day planning. The second

section of the manual offers specific advice regarding the organization and development of a private practice. Chapters cover a variety of subjects: locating and choosing a space, ordering equipment, accounting, collecting fees, budgeting, employing others, servicing patients, managing risk, marketing, and changing roles.

Much of the information provided in this manual is timeless and very informative. However, due to the constant changes in health care reimbursement and business management, much of this text has become outdated. The student suggests, as a result of a review of current business literature, that this text is in need of revision. Because of this, sections of this book will not be utilized. Information offered in this manual is specific to occupational therapy entrepreneurship and is crucial to the students learning process. A critical analysis of this source is a part of the students' review of the literature available to occupational therapists. This argument contributes to the need for accurate and up-to-date information to be made available to occupational therapy entrepreneurs.

Herz, N., Bonoc, S., Richmond, T., Richman, N., & Kroll, C. (2005). *Becoming an entrepreneur.*

Administration and management: Special interest section quarterly, 21(1).

Written by business owners in various entrepreneurial areas of occupational therapy, this article encourages therapists to become an entrepreneur. The authors identify entrepreneurial characteristics and offer information regarding the entrepreneurial process. Common entrepreneurial characteristics include “Willingness and ability to take and handle risks; drive or need to achieve or improve; ability to see the ‘big picture’; [and] energy, perseverance, and tenacity” (p.1). Suggestions are offered regarding emerging practice areas and how an occupational therapist may capitalize on these opportunities. The authors place a great deal of

emphasis on the importance of a personal needs assessment. It is suggested for a potential entrepreneur to analyze his or her personal traits and desires. This self-assessment is intended to assist the entrepreneur to determine the appropriateness of entering into a business venture. Due to the focus of this article, the student has learned characteristics of entrepreneurial behavior and has included this information in the final written manuscript.

Internal Revenue Service. (2009, April 17). *Independent contractor (self employed) or employee?* Retrieved April 29, 2009, from

<http://www.irs.gov/businesses/small/article/0,,id=99921,00.html>

“It is critical that you, the employer, correctly determine whether the individuals providing services are employees or independent contractors. Generally, you must withhold income taxes, withhold and pay Social Security and Medicare taxes, and pay unemployment tax on wages paid to an employee. You do not generally have to withhold or pay any taxes on payments to independent contractors. If you are an independent contractor and hire or subcontract work to others, you will want to review the information in this section to determine whether individuals you hire are independent contractors (subcontractors) or employees” (p.1).

The Internal Revenue Service continues on to detail the differences between an independent contractor and an employee.

“Facts that provide evidence of the degree of control and independence fall into three categories:

1. Behavioral: Does the company control or have the right to control what the worker does and how the worker does his or her job?

2. Financial: Are the business aspects of the worker's job controlled by the payer? (these include things like how worker is paid, whether expenses are reimbursed, who provides tools/supplies, etc.)
3. Type of Relationship: Are there written contracts or employee type benefits (i.e. pension plan, insurance, vacation pay, etc.)? Will the relationship continue and is the work performed a key aspect of the business?" (p.1).

Due to the high frequency of occupational therapists as independent contractors, the student, and all employers, needs to understand this concept. In the past, many companies have been audited, fined, and have had to fight in court as a result of treating independent contractors as employees. In order for the student to accurately comprehend the difference between these two roles, she has read this website and has engaged in the online training items provided by the IRS.

Jacobs, K., Baker, S., Belanger, K., Bond, J., Codogni, E., Dwinal, L., et al. (2003, July 21). Top 10 ways to be a leader. *OT Practice* , 10-14.

The authors identified ten specific methods to encourage individual leadership for occupational therapy professionals. Leadership involves believing in yourself; knowing your goals and working towards them; leading by example; communicating effectively; using your expertise; looking for opportunities; bringing out the best in others; networking; and enjoying the process. These concepts contribute to professional development and may be applied to entrepreneurship. The authors conclude that "effective leadership is not an innate skill possessed by a few, but a blend of attitudes, behaviors, and qualities that is developed through personal growth and experience" (p. 10).

As a result of a comprehensive review of the literature, the student has determined that leadership is an essential quality of an entrepreneur. Due to this, the student will become familiar with the process of professional development of leadership skills. The student will apply these 10 concepts when interacting with peers and professionals encountered during her capstone experience.

Jacobs, K., & Logigian, M. (Eds.). (1999). *Functions of a manager in occupational therapy*. (3rded.) Thorafare, New Jersey: Slack.

“Many occupational therapists will assume the role of a manager or have supervisory responsibilities during the course of their career. *Functions of a Manager in Occupational Therapy*, third edition, confronts the challenges occupational therapy managers face in today's ever-changing health care environment. Chapters include essential information on Change Management, Leadership and Organizational Behavior, Managing Our Limited Resource: Practitioners, and Cost Management. Emphasis has been placed on how the manager can balance limited resources while still ensuring quality services. *Functions of a Manager in Occupational Therapy*, third edition, assists in the professional development of the occupational therapist. Readers learn how to market services, prepare budgets, supervise staff, and prepare documentation for reimbursement. By teaching supervisory, leadership, and management skills, this text successfully prepares the occupational therapist for real-world clinical practice, and provides a foundation for occupational therapists to demonstrate the value of occupational therapy in a variety of service programs” (back cover).

Due to the nature of entrepreneurship, an occupational therapist will likely be an employer and a manager. These concepts are critical to business operation and success, therefore,

the student must fully comprehend how to market, budget, supervise, and successfully act as a business manager. The student will contribute to her professional and personal development by understanding the concepts provided in this textbook and applying them to her capstone experiences and practicum observations.

Jaffe, E. G., & Epstein, C. F. (1992). *Occupational therapy consultation: Theory, principles, and practice*. St. Louis, MI: Mosby - Year Book.

Used to describe the history of consultation, procedures, and models of practice, this text is very informative. Appropriate models suggested for consultative occupational practices are: systems approach, business and industry programs, and internal consultation. The authors also explore consultation as it applies to various practice settings such as, schools, long-term care facilities, mental health services, acute care settings, hospitals, rural areas, industrial settings, businesses, and more. The student will understand the different models utilized by occupational therapy consultants, in order to better comprehend this method of entrepreneurship. This textbook also provides specific information regarding legal and ethical issues a practitioner must consider when consulting. Finally, the authors outline how to develop a consultation practice. The student will utilize this information through the practicum experiences to better comprehend the consultative model of practice.

In addition, information obtained from this source was referred to when interviewing Epstein. This interview was conducted as a part of the practicum course.

Johansson, C. (2000, January 13). Top 10 emerging practice areas to watch in the new millennium [Electronic version]. *OT Practice*.

Based on information gathered by the American Occupational Therapy Association Communication Department, the author presents the top 10 areas of practice expected to grow in the next 10 years. All of the areas identified are potential opportunities for occupational therapy entrepreneurship. Economics consulting is discussed first. The author suggests for occupational therapists with business and consulting experience to guide other entrepreneurial practitioners to create a consulting practice as well. Driver rehabilitation and training is also becoming more prevalent due to recent changes in physician regulations. Occupational therapists may also develop a role in alternative transportation services for the aging population. The third emerging area of practice is design and accessibility consulting and home modification. Another opportunity for private occupational therapy consultation practices. Low vision services are also identified as a growing field within occupational therapy practice. Due to the aging of the population, this service may expand and offer more possibilities for entrepreneurship.

Additional emerging practice areas offer unique entrepreneurial opportunities, should a therapist desire to investigate these ventures. Specifically addressing entrepreneurship, the fifth emerging practice area is private practice in the community. Trend watchers have identified occupational therapy consultative services in the community as increasing. Assistive device development is yet another potential emerging area for occupational therapy entrepreneurship. The author states that new technology and cost-effective healthcare delivery systems have created a larger need for new assistive devices. Another growing area for occupational therapy is that of welfare-to-work services. Occupational therapists assist clients to reenter the workforce, evaluating performance capacities, social, and cognitive abilities. Health and wellness consulting and coaching is also becoming more prevalent. Focusing on occupational enhancement, lifestyle redesign, and changing roles, entrepreneurs may market occupational therapy workshops, or

simply use their knowledge to educate the community. Similar to the welfare program, the ticket to work program encourage persons utilizing Social Security benefits, to return to work.

Johansson suggests for occupational therapists to join advisory boards, offer support, and become involved in this area of concern. The final practice area discussed is concerning the psychosocial needs of children and youth in regards to violence and their mental health.

Occupational therapists often work with school-aged children and offer services utilizing mental health expertise. Johansson predicts this need is increasing, presenting entrepreneurial opportunities.

Opportunity and emerging niche areas are crucial for a potential entrepreneur to monitor. Each of these areas can become prospective business ventures. Many other sources suggest for entrepreneurs to be aware of professional trends, politics, and environmental needs of their clients. The student will explore these practice areas to identify potential opportunities for occupational therapy entrepreneurship.

Lager, F. (1994). *Ben & Jerry's, the inside scoop: How two real guys built a business and a social conscience*. New York: Crown Publishers.

Written by a former CEO and co-worker, Lager tells the story of how Ben Cohen and Jerry Greenfield dropped out of college to begin an ice cream business out of a gas station. The two men wanted to create a community-oriented business. Cohen and Greenfield learned how to operate their business through mistakes and bad advice, as well as luck and innovative selling techniques. Eventually, what lead to their success was the ability to fill a niche market. Ben and Jerry began experimenting with ice cream flavors, naming the new batches with unique and comical names. These flavors sold well within their community and the business began to boom.

In the beginning, both partners worked diligently to place their products in grocery stores and in creating interest in their company. The business was challenged and survived a lawsuit from the ice cream giant, Haagen-Dazs. From this success story, the student learned that businesses often begin small, struggle, and how to eventually succeed in a very competitive environment. The key is to create a company that is uniquely different from the others, provide a service that customers will ask for by name.

This biographical business success story contributes to the learning experience of the student in many ways. Understanding how to create a business in a new and very competitive market is a very important business concept, allowing the student to apply this knowledge to the various forms of occupational therapy entrepreneurship. The student is able to theorize how to create a new product and aggressively market the item, while also developing a community-oriented business.

Lensonsky, R. (2008, Spring). Breaking through: Women turning to entrepreneurship have broken through the glass ceiling. *Small Business Success: America's small business resource*, (24), 26.

Drawing on her experiences as the editor of Entrepreneur magazine for a number of years, Lensonsky explores the history and future of women and entrepreneurship. The author encourages successful women to encourage one another in order to promote female owned small businesses. Lensonsky offers the four P's of success: passion, plan, stay positive, and persistence. She also includes helping one another as an important component to business success. Because the majority of occupational therapists are female, the student will examine opportunities and challenges posed specifically to women entrepreneurs. In the final proposal,

the student recommends for occupational therapists to offer and to seek mentorship, a suggestion confirmed by this resource.

Leslie, C. A. (2005). Entrepreneurial resource. [Electronic version]. *OT Practice*. 10, (9), 8.

Authored by Carol Leslie, president of Callaria Coaching Company, this brief article identifies potential barriers to a successful business in occupational therapy. Leslie theorizes that the biggest obstacles an occupational therapy entrepreneur may encounter are the attitudes and behaviors of the persons involved in the practice. Success depends on innovation and new direction, Leslie identifies that change and creativity as difficult, and often feared by employees. Brainstorming in a supportive setting may remedy this obstacle. Another challenge described in this article, is that of motivating employees. Communication amongst employees and the management team is necessary for a healthy business. The author suggests for the entrepreneur to encourage creativity, provide prompt and constructive feedback, and engage in other communication strategies.

Because of the unique challenges an occupational therapy entrepreneur may face, the student will learn how to identify unique barriers and potential solutions. The student will be mindful of these challenges when engaging in practicum experiences and while interviewing successful entrepreneurs.

Leslie, C., S (2007, April 23). Taking it to the streets: Unconventional, entrepreneurial ways to market community-based practice. *OT Practice*, 12(7), 20-23.

This article offers occupational therapy entrepreneurs with possible marketing strategies to promote services. Leslie enforces the concept that one must specify if delivering direct

occupational therapy services or simply using his or her occupational therapy background while conducting a business. Suggested marketing areas include places of worship, corporations and factories, rural areas, and networking events. Leslie also offers advice for potential entrepreneurs, gain clinical experience, seek support, surround yourself with good people, network, and schedule time for yourself. Due to the importance of marketing and small business success, this article makes the student aware of non-traditional marketing strategies.

Lowe, J. (1998). *Bill Gates speaks: Insight from the world's greatest entrepreneur*. New York: John Wiley and Sons.

“An icon more powerful than anything on a Windows screen, Bill Gates today stands atop his fabled Microsoft fortress staring down competitors' threats and injunctions from an annoyed U.S. Justice Department. The kind of success Gates has created rarely escapes criticism. And Bill is getting more than his share. The story of how this Harvard dropout created the operating system that would become the worldwide standard for millions of computers is legendary. And equally legendary has been the take-no-prisoners tactics of his corporate colossus, Microsoft. We've witnessed Gates' transformation from a geeky wonder kid into a business titan” (back cover). The student will better understand what it means to be an entrepreneur from the lessons provided in this biography. Bill Gates has made himself a household name, as well as billions of dollars, thus making him one of the most successful entrepreneurs in American history.

Maxwell, J. C. (2002). *The 21 iffetutable laws of leadership workbook*. Nashville, TN: Thomas Nelson.

Maxwell has combined insights learned from his thirty-plus years of leadership successes and mistakes with observations from the worlds of business, politics, sports, religion, and military conflict. Maxwell also states that a leader is not a manager, an entrepreneur, a position, a pioneer, or knowledge; instead leaders are created by their influence and ability to obtain followers. Specific leadership traits are identified character, relationships, knowledge, intuition, experience, past success, and ability.

Due to the relationship between leadership and success in entrepreneurship, this book will contribute to the education of the student. The entire text will be used as a part of the mentored studies course to encourage professional and personal leadership development of the student.

McClain, L., McKinney, J., & Ralston, J. (1992). Occupational therapists in private practice. *American Journal of Occupational Therapy, 46*(7), 613-618.

“Although increasing numbers of occupational therapists are choosing to work in private practice, little data exist describing this sector of the profession. In the present study, experienced occupational therapists were asked about their moves into private practice, including (a) their motivation, (b) their preparation, and (c) their perceptions of the move’s risks and benefits before and after the move.

A survey was sent to a national random sample of 105 occupational therapists, 74 of whom responded. According to the survey, autonomy was the most important motivating factor for occupational therapists moving into private practice. However, once they were in private practice, the occupational therapists noted that increased income was a major benefit. These

occupational therapists had planned for the risks of reimbursement, referral sources, and overhead but had not anticipated problems with staffing shortages.

Incomes increased for occupational therapists who moved into private practice. The survey compared the incomes of occupational therapists before and after they entered private practice. It also compared their income and educational levels. Other comparisons included income and work experience, income and work role, and income and geographic location.

Autonomy and financial considerations appear to be the overriding issues for occupational therapists choosing careers in private practice. Almost unanimously, the survey respondents said that private practice was a good career choice” (p. 613).

This study provides the student with unique information regarding the status of occupational therapy entrepreneurship in the early 1990’s. Information regarding preparation methods will guide the student during the mentored studies and practicum courses. The student will seek to interview and observe health care professionals in private practice, as the authors of this study found direct observation and conversation to be the most beneficial learning methods.

Nicholson, S., K. (2008). *The physical therapists business practice and legal guide*. Sundbury, Massachusetts: Jones and Bartlett Publishers.

“As the profession of physical therapy continues its growth toward autonomous practice, the physical therapist, physical therapist assistant, and student are going to face liability risks and exposure like never before. *The Physical Therapist's Business Practice and Legal Guide* provides the tools needed to integrate risk management practices into the daily patient care routine. Each chapter includes key concepts and discussion questions. Also includes specific cases to present legal concepts and explain how these set the stage for future risk exposure. An

essential new resource for all physical therapists, this guide examines: tort reform, the laws governing physical therapy, medical malpractice, legal aspects of documentation, liability issues in various practice settings, surviving a lawsuit, managing risks, legal aspects of starting a private practice, the basics of employment law, ethical dilemmas, and legal opportunities for the physical therapist” (back cover).

Although this textbook is written for physical therapists, occupational therapy practitioners interested in creating a private practice may use this source to learn about legal concerns for rehabilitative professionals. Nicholson provides many case examples and resources that the reader may continue to research specific concepts. Legal management is a very important area of concern for occupational therapy entrepreneurs, the student will use this text to learn about legal terminology, practices, and risk management to better comprehend how to operate a business legally.

Pakroo, P. (2006). *The small business start-up kit: A step-by-step legal guide* (4 ed.). Berkley, CA: NOLO.

“Every entrepreneur needs *The Small Business Start - up Kit*. Want to start a business? Don’t know where to start? Start here. *The Small Business Start - up Kit* shows you how to set up a small business in your state as soon as possible, helping you deal with the hurdles, fees and forms along the way. In language that is clear, readable, and straight to the point you’ll find out how to: choose the best business structure; write an effective business plan; file the right forms in the right place; price, bid, and bill your projects; draft and use contracts, online and off; manage your finances; be prepared for, and file, required taxes; reach customers online. *The Small Business Start - up Kit* covers important considerations for any business venture, such as domain

names, trademarks, creating a limited liability company, sales taxes on internet transactions, risk management, and much more. It also provides the forms you'll need" (back cover).

This comprehensive text teaches the reader about the multiple legal procedures concerning small business ownership. The publisher, NOLO, is proud of the user-friendly legal books it produces, and considers itself a leader in this field. Understanding legal requirements related to business structure, tax status, and professional service is vital to the success of any business. Occupational therapy entrepreneurs must follow all guidelines that apply to his or her product and/or service. Therefore, the student will use this text, and others, in order to comprehend the legal matters of business operation.

Pattison, M. (2006). OT - Outstanding talent: An entrepreneurial approach to practice. *Australian Occupational Therapy Journal*, 53, 166-172.

Pattison reflects upon her experiences in entrepreneurship and encourages the profession to consider progressing "beyond traditional boundaries because that is what they are - boundaries" (p. 167) in terms of business opportunities. Pattison suggests therapists to apply occupational therapy skills in "more sophisticated and most importantly more effective ways" (p.167). Entrepreneurship is one such innovative opportunity for therapists to accomplish this challenge. This motivational lecture encourages practitioners to contribute to the growth of the occupational therapy profession.

Similar to the challenged proposed in AOTA's Centennial Vision, Pattison urges occupational therapy practitioners to think outside the box and to discover ways to contribute to the development of occupational therapy. Due to the entrepreneurial focus of this lecture, the

student will utilize this source during the mentored studies course to better advocate for occupational therapy entrepreneurship.

Prabst-Hunt, W. (2002). *Occupational therapy administration manual*. Albany, NY: Delmar.

“The most comprehensive, pragmatic guide for administration in the 21st century, covering institutional, private, and community occupational therapy programs, this book answers all the questions you need answered as a professional supervisor/manager. *Occupational Therapy Administration Manual* is the premiere primer on staying ahead of practice details, from getting started and marketing, to reimbursement and outcomes research” (back cover).

This occupational therapy text provides information regarding program development, department creation, and private practice start up. Chapters describe marketing, documentation and reimbursement processes. These topics are instrumental for an occupational therapist as a manager and especially as an entrepreneur to understand. The student will utilize selected information from this source, such as reimbursement and documentation, as these business concepts are unique to rehabilitation business-owners. Finally, methods for conducting research within the scope of occupational therapy are addressed. Due to the emphasis placed upon evidence-based practice by AOTA, the student will understand how to include research studies within a business practice.

Radomski, M. V., Trombly Latham, C. A. (Eds). (2008). *Occupational Therapy for Physical Dysfunction* (6th ed.). Baltimore, MD: Lippincott, Williams & Wilkins.

“Not only do you gain the skills needed to provide effective occupational therapy services with this Sixth Edition, you also develop a theoretical foundation to guide your

decisions. This theoretical foundation, the Occupational Functioning Model, is clearly set forth in the text's first section, setting the stage for discussions that guide you from initial evaluation to treatment to follow-up" (back cover). A core text for all occupational therapy students, this text provides a wealth of information regarding practice in occupational therapy. Specific to this Capstone experience, the student will utilize the chapters regarding historical and social foundations for practice.

Richmond, T., & Powers, D. (2009). *Business fundamentals for the rehabilitation professional* (2nd ed.). Thorofare: NJ, Slack.

"The world of business is ever changing, with much of the available information becoming quickly out-of-date. *Business Fundamentals for the Rehabilitation Professional, Second Edition* keeps pace with this changing world and provides the health care professional with the latest information to answer the 'what, where, how and when' questions that come up when transforming a health care practice idea into a successful business. Keeping the user-friendly format of a workbook, *Business Fundamentals for the Rehabilitation Professional, Second Edition* is the perfect resource for master and doctorate level students preparing for the professional world, as well as rehabilitation professionals and entrepreneurs interested in obtaining knowledge in starting up, managing, expanding, or understanding the health care practice system" (back cover).

Written by an occupational therapist and a physical therapist, this book teaches business concepts unique to the rehabilitation professional. Each chapter is broken down into systematic procedures that allow the reader to engage in personal business planning. The student completed worksheets in this manual to identify personal goals, possible business opportunities, and

marketing strategies. Specifically, this book provided unique information pertaining to rehabilitation businesses in terms of business structure, marketing, employee concerns, legal requirements, financial management, and other business concerns. These topics allow the student to better understand and apply business fundamentals to her learning experiences. This text will also be used as a framework selection when analyzing the issue of entrepreneurship during the writing process of the final dissemination article.

Reedy, J. (1993). *Marketing to consumers with disabilities: How to identify and meet the growing market needs of 43 million Americans*. Chicago: Probus Publishing Company.

“The Americans with Disabilities Act, technological advances resulting in greater mobility for the disabled population, and myriad political and social forces have contributed to the growing visibility of 43 million Americans - a market larger than African-American or Spanish speaking segments. Still, greater understanding of the needs, motivations and *capabilities* of disabled persons is needed to build mutually beneficial and profitable marketing relationships with this vast market. Few marketers have any idea of the limitations in scope and profitability that result in marketing primarily to the disabled as opposed to *persons* with disabilities. *Marketing to Consumers with Disabilities* is the only existing guide to provide step-by-step marketing methods derived from the perspective of the disabled consumer - who not only may purchase healthcare services or medical equipment, but clothing, jewelry, repair, furnishings, and every conceivable consumer good or services as well” (inside cover).

Occupational therapists must consider persons with disabilities when marketing a service or product. Businesses that serve the public with medical problems are sure to encounter persons with multiple medical concerns and disabilities. The student has become familiar with the

methods and techniques for marketing provided in this text and will apply these concepts during practicum observations.

Rist, N. J., Jones, K. Z. (2002). *A woman's guide to building a business: Small business savvy*. Avon, MS: Adams Media Corporation.

“Building a small business can be a major challenge for anyone. In today’s modern workplace, women continue to have a unique set of obstacles to overcome as small business owners: skepticism from friends and family, difficulties obtaining credit and financing, and, generally, more scrutiny than male competitors (back cover).” The authors offer practical advice from personal experiences as well as anecdotal evidence from other female business owners. Topics include: business planning, marketing, financial planning, and growing a business. This text also offers an extensive appendix, listing resources for women entrepreneurship and small business management. The student will concentrate on business concerns specific to women provided by this source, as the majority of occupational therapy practitioners are female.

Rubin, H., & Rubin, I. (1995). *Qualitative interviewing: The art of hearing data*. Thousand Oaks: CA, Sage Publications.

“*Qualitative Interviewing* provides a comprehensive, up-to-date introduction to the theory and practice of qualitative interviewing. With this volume, researchers will learn how to design research based on interview data, to simulate conversation, to absorb what is being said, and to synthesize, analyze, and present an informed description of the data. The authors, both experienced teachers and researchers with nearly 50 years of post Ph.D. research experience in qualitative interviewing, emphasize the importance of cultural, contextual, and personal

influences on the sharing and unveiling of meaning. Their book links qualitative interviewing techniques with theories of how people communicate meaning” (back cover).

The student studied and utilized the models of qualitative interview explained in this text in order to interview effectively. While conducting interviews for the capstone practicum, the student applied these principles in order to gather accurate and detailed information. The student has created a list of main questions, as suggested by the authors, which may or may not apply to each individual interviewee. From this list the student choose the most appropriate questions for the session and used follow-up questions to discover detailed information. This source was instrumental for the student during the practicum course, providing proper interviewing methods.

Small Business Administration: Office of Advocacy. (2008). *Third quarter 2008: The economy and small businesses*. Washington, D. C.: U. S. Small Business Administration.

Each business quarter the Small Business Administration (SBA) reports trends and business indicators based on the current economy and SBA research. As of November 2008, small business owners, and consumers, reported a pessimistic attitude toward the current economy. According to SBA research, business owners stated that the next three months, (first quarter of 2009) would not be a good time to expand, hire new workers, or invest in new projects. All but four industries have seen employment losses, education and health services, government, natural resources and mining, and other services. The local and global economy is slowing, and as a result, small business lending demand is weak.

Reports of this nature are vital to the success of a small business. The student will research and refer to these reports in order to fully understand the effects of the economy on

entrepreneurship. Funding sources are also evaluated in this report, informing the student of various trends in lending.

Toledo Regional Chamber of Commerce. (2006). *Business Development Services*. Toledo, Ohio: City of Toledo.

“Our primary focus is to support businesses at all stages of development by assessing client needs and then linking them with the appropriate expertise that will help their businesses better compete in today’s global economy. The Chamber has assisted small businesses through Business Development Services programs for over 20 years. We have a strong support system in place to help entrepreneurs in the Northwest Ohio region by providing programs that can assist small business at every stage of the business life cycle” (p.2).

Topics discussed in this resource include name registration, licensure, state tax, zoning code, health department concern, business structure, employee relation, other tax concern, finances, insurance, business plans, and choosing professional advisors. All of these concepts provide local contact information. Specific to the Northwest Ohio area, this information will guide the student in the business planning process. Information provided in this source may be generalized and researched for other geographic locations, allowing the student to distribute the information via the dissemination course.

Tucker, K., Allman, V. (2004). *Animals, Inc: A business parable for the 21st century*. New York: Warner books.

“When was the last time you took a course to make yourself more marketable - and found yourself wondering just what in the world you were doing? Or watched “square peg” employees

dropped into “round hole” positions only to fail miserably as revenues tumbles? There’s a lesson to be learned in... *Animals, Inc...*The Gallup Organization rewrote the book on great management. Now Gallup brings to life the major lessons of the research behind those best-sellers through the use of a parable. *Animals, Inc* introduces you to a group of unforgettable barnyard animals trying to run a successful business” (inside flap).

The student utilized this text to better comprehend small business management. The parable of *Animals, Inc.* describes a farm environment that is operated by the animals, or employees, who have no business experience. Tales of poor management and struggle are portrayed, resulting in chaos for the business. The reader is left with the moral of proper business management, hire employees qualified for each job position, promote appropriate behavior, and always monitor the bottom line. This source encouraged the student to apply these lessons to practicum observations and contributed to her professional business education.

Turner, M. L. (2006). *The unofficial guide to marketing your small buisness*. New Jersey: Wiley Publishing.

“Whether you own an upscale boutique or a plumbing company, a design studio or a dog walking service, a wholesale business or a homey café, marketing is critical to your success. This guide helps you create a cost-effective, targeted marketing plan with a consistent image and message to build your customer base and your business. It covers traditional print and broadcast advertising, but since most small businesses can’t afford spots in the Super Bowl, it turns you on to practical alternatives ranging from online marketing to on-site marketing, and from stuffers to telemarketing to sales promotions. This guide helps you determine how to get maximum marketing impact for minimum marketing dollars” (back cover).

This book educated the student the basics of marketing a small business or product. Initially, Turner guides the reader to create a customer profile, a detailed description of the target population of the marketing plan. Techniques useful for an entrepreneur include networking, public speaking, branding, and advertising. Each of these methods is described at length. The student learned how to implement these strategies and when each is appropriate for a business. Another useful technique described by Turner, was that of a marketing evaluation. In order for an entrepreneur to survive financially, he or she must constantly evaluate what marketing methods are effective, and which are not. In addition to formal research training, the student will learn how to apply these skills to small business operation. This text proved very useful during practicum observations of the marketing promotions offered at the primary site, AmeriCare Health Services.

United States Census Bureau. (2005, November). *Establishment and firm size: 2002 (including legal form of organization)*. Retrieved January 19, 2009, from U. S. Census Bureau: www.census.gov/prod/ec02/ec0262sssz.pdf.

The United States Census Bureau researches and disseminates information regarding the small business community every five years. Broken down by industry, the US Census Bureau reports statistics for every occupation. This document specifically compared employment statistics of physicians, chiropractors, physical and occupational therapy practices, and speech therapists and audiologists. Statistics included number of firms established, firm size related to number of employees or profits reported, and legal form of operation for each industry. This information will allow the student to make comparisons between health care groups in regards to small business establishment and operation.

United States Small Business Administration. (n.d.). *Frequently asked questions*. Retrieved February 2, 2009, from <http://web.sba.gov/faqs/faqindex/cfm>.

The SBA has conducted numerous studies to document information regarding small business trends in this country. This website offers a summary of statistics gathered from a variety of SBA sponsored research studies. The SBA has determined that 99.7% of all businesses are small businesses that employ one half of all employees in the private sector. Additional information includes the frequency of small business ownership over the course of time, number of employees, success rates, and much more. The student will use this information in the Dissemination course to encourage occupational therapy practitioners to join our fellow Americans engaging in small business entrepreneurship.

United States Small Business Administration, Ohio Department of Development. (2007, July 31). *One stop business connection*. Government loan information for start-up and emerging businesses Retrieved March 4, 2008, from: www.odod.state.oh.us/onestop.

Authored by the SBA, the *One -Stop Business Connection* provides entrepreneurs with federal and local resources needed to begin a business. State specific “kits” are available, as well as checklists for specific industries. The student reviewed the choices regarding business structure and services provided to create an individualized “kit” of information for an occupational therapy entrepreneur. Included in this packet: One stop checklist: occupational therapist/ physical therapist/ athletic trainer; application for Employer Identification Number; initial Articles of Incorporation; loan information; a New Hire Reporting Form; an Organization - Registration of a Limited Liability Company; report to determine liability form; a S-

Corporation Election Form; a Withholding Agent Registration Form; and a Workman's Compensation Coverage Form. Specific to occupational therapy, a checklist is provided defining the scope of occupational therapy. This list also summarizes the specific requirements and regulations provided in the Ohio Revised Code, the Occupational Therapy, Physical Therapy, and Athletic Trainers Board, and the Ohio Environmental Protection Agency.

This "kit" prepares any potential entrepreneur with accurate, authoritative information regarding small business start-up in the state of Ohio. The student will compile this information to further her education of business planning. The forms included in the "kit" are extremely useful, as they demonstrate the beginning of the paperwork process to ensure the legality of a business. Because the SBA provides this information, entrepreneurs in all states may access state-specific resources. This source is generalizable, acting as a national resource for all small business owners.

Weeks, Z. R. (2007). *Opportunities in occupational therapy careers*. New York: McGraw - Hill, Inc.

Intended for potential students of occupational therapy, this text provides information regarding occupational therapy practice areas. The author recommends that the profession expands to meet the growing needs of health care and the changing populations. Used in the mentored studies course, this source identifies the growth of private practice in occupational therapy. The student will utilize this text to encourage entrepreneurship in occupational therapy. Specific resources and characteristics are provided as a starting point for a therapist interested in entrepreneurship.

Interviews

Alterio, C. (2009, March 2). Occupational therapist in private practice: Pediatric and adult outpatient practice. (K. Anderson, Interviewer).

“Chris has a clinical doctorate in occupational therapy from Nova Southeastern University. Chris earned his undergraduate degree at SUNY Buffalo and received his initial certification as an occupational therapist in 1987. Chris held a faculty position in the Division of Occupational Therapy at Keuka College as Instructor of Occupational Therapy and Fieldwork Coordinator. Sensory Integration International certified Chris in the Sensory Integration and Praxis Tests in 1992, and he received his Board Certification in Pediatrics from the American Occupational Therapy Association in 1999. He co-authored a book entitled *Caring for Someone in Your Home*. He previously served as Pediatric Special Interest Section Chair for the New York State Occupational Therapy Association. Chris actively participates in his profession and speaks throughout the country on issues relating to pediatric occupational therapy and injury prevention. He volunteers his time for the National Board for Certification in Occupational Therapy, previously serving as Vice-Chair of the OTR Examination for the Certification Exam Development Committee and currently serving on the NBCOT Board of Directors.” (Staff Directory. Retrieved 3/10/09 from, http://www.abctherapeutics.com/adult_therapy/abc_hand_faqs.aspx?_TemplateID=41).

Alterio discussed his career path with the student during an informal telephone interview, detailing how he has come to own two successful, outpatient clinics. He learned about business and managerial methods from both his experiences as a supervisor and department manager. Additional skills he researched or learned on the job. Alterio stressed that an entrepreneur needs

to understand the process of business ownership and the difficult demands it places upon the owner. He commented that there are many “myths” regarding occupational therapy practice, in terms of reimbursement and private practice issues. He suggested for AOTA to first address these problems in order to promote entrepreneurship. Alterio feels that the idea that occupational therapy entrepreneurship is “still in a state of infancy” and is in need of formal research and support from the association.

Arroyo, G. (2009, February 20). Occupational therapist, president CGA Home Modifications.

(K. Anderson, Interviewer).

Gina Arroyo is an occupational therapist and co-owner of CGA Home Modifications, LLC. During an in-person interview, Arroyo shared her experiences as a small business owner in the Northwest Ohio area. The focus of Arroyo’s business is to create accessible and barrier-free environments to promote independence, and safety for individuals who have a disability. Arroyo and her business partner, her husband who works in the construction industry, service residential homes and commercial buildings. Arroyo developed the idea for this company while completing her studies for occupational therapy. Her management course encouraged students to develop personal and professional development plans. Arroyo’s plans eventually lead to the business plan and creation of CGA Home Modifications, LLC.

Arroyo suggests for business-minded therapists to network and discover new and different ways to apply occupational therapy in the community setting. She recommends for entrepreneurs to network with business persons in all industries to encourage strong relationships and referral sources, “It’s all about establishing trust and building relationships.” Arroyo also advocates for more education regarding entrepreneurship in different areas of occupational

therapy. Because she began as an occupational therapy assistant and has recently returned to school to obtain her masters degree in occupational therapy, Arroyo feels that basic business education should be included in the occupational therapy curriculum. “It all begins in the schools” Arroyo stated in reference to business education. She also commented on the importance, and the lack, of mentorship, “I think we don’t have enough people out there to really be mentors. You need good mentors, people who are willing to sit down and take time.”

Austill-Clausen, B. (2009, April 30). President Austill’s Rehabilitation Services, Inc. (K. Anderson, Interviewer).

“Austill’s Rehabilitation Services, Inc. is a group of over 350 experienced occupational therapists, physical therapists, and speech-language clinicians. We service educational programs and healthcare communities throughout the Pennsylvania and Delaware Valley region. I founded the company in 1984!

We work in a variety of arenas, concentrating on Pediatrics.

- School Districts
- Early Intervention Programs
- Intermediate Units

Adult areas include:

- Skilled Nursing Facilities and Retirement Communities
- Hospitals
- Home Health Agencies
- Outpatient Clinics

Our 350+ therapists are all experienced therapy practitioners who choose their ideal location, student or adult population, and geographical territory. We provide excellent, free managerial support to all of our programs. Our highly skilled management team and administrative support staff are pleased to assist YOU in providing High Quality therapy services to meet your needs.

At Austill's, we LISTEN. Our Placement Team provides you with YOUR ideal job. Our Management Team understands preschool and school-based services and is thoroughly prepared to develop the right solutions for your unique therapeutic needs. Our Continuing Education Division offers onsite, conference center and online workshops designed specifically for Austill's therapists and Austill's community of agencies to continue their professional success and development! We are Act 48 certified and an American Occupational Therapist Association certified agency education provider (retrieved April 30, 2009, from <http://www.austills.com/letter-from-the-president>).

Austill-Clausen engaged in her first entrepreneurial venture fresh out of occupational therapy school. Upon graduation in Boston, she moved to New Mexico, intending to be employed by the local school district. Unfortunately, by the time she got there, the position had been eliminated. She began "cold calling" community health businesses inquiring if the company offered occupational therapy services, "I just went to the town hall and asked for their list of all of their health care programs and called them up. It was just something that was logical to do." After making 35 calls, she created four opportunities for herself and took on four jobs. Austill-Clausen went on to work with the New Mexico school system, as the only occupational therapist consulting to the southern school districts. "We went out to school that had never had severely handicapped kids in their schools, because at that time, they did not have to go to school. I was doing this as a second year OT." From New Mexico, Austill-Clausen moved to New Orleans to

teach community-based pediatric occupational therapy at the University of Louisiana. After returning to obtain her masters degree in occupational therapy in Boston, Austill-Clausen was employed as a sales person for an assistive device and medical equipment company. She found that she was unhappy with this position and began working as an independent consultant to Delaware school systems. Austill-Clausen soon realized that the schools she worked with needed more occupational therapy than she alone could provide this is when she began hiring employees. "I met with the lawyer in the morning and an accountant in the afternoon and that is how Austills started. The first year I hired 6 therapists, the second year we hired 17, third year 36, now 364 therapists." The rest, as they say, is history.

Austill's Rehabilitation Services is a very unique company. Instead of hiring therapists as employees, every therapist operates as an independent contractor. The company trains occupational therapists, physical therapists, and speech and language pathologists how to withhold taxes, communicate with agencies, and essentially function as an entrepreneur. "What Austills does is we empower therapists to take control of their life. And *that* is what an entrepreneur does." Austill-Clausen commented that she enjoys teaching women how to take control of their business because female therapists are not traditionally used to managing a private practice.

Austill-Clausen also has an interest in education and life long learning. Her company has recently become an AOTA continuing education provider, ensuring contact hours for the therapists who attend seminars sponsored by Austill's Rehabilitation Services. The continuing education division provides seminars in various formats. Continuing education programs are offered year round at local hotels and colleges, and in two to three day workshops during the school year. Austill-Clausen hopes to develop courses to be offered online for any occupational

therapist interested in pediatric education. “I want to be known as *the* school system online continuing education program. That’s our goal in the next two years.” She stated that she began this department of her company as soon as she began hiring employees. Austill-Clausen understands the importance of education and professional competence.

Austill-Clausen offered advice to the student, and any therapist interested in entrepreneurship. “The sky is the limit!” She recommended being active in AOTA at the state and national levels, learning about trends and business skills, and continuing practicing at a part-time job while developing a business venture. Austill-Clausen believes that occupational therapists are, in some ways, being entrepreneurial. However, she did comment that perhaps physical therapists are more entrepreneurial because the majority of physical therapists are male. “Men are traditionally thought of as business minded and quite frankly I think men are more business minded. I think OT’s are very creative and want to help people, but I don’t think business is our strong suit.” Also, Austill-Clausen commented, “I think OT’s don’t really see themselves as entrepreneurs. And that has been a cool thing for me because, that’s all our therapists are is entrepreneurs, but we give them the structures to do that.” She theorized that this is because much of the content in business courses are not interesting or exciting. To remedy this problem, Austill-Clausen teaches with an exciting and “hands-on” method.

Carson, R. (2009, February 13). Owner of Hope Therapy Services, Inc. (K. Anderson, Interviewer).

Ron Carson, MHS, OTR, currently works as a home health therapist in central Florida. Carson began his private practice four years ago, delivering occupational therapy outpatient services in patients’ homes. The business was a solo practice, with the intention of employing

additional therapists should the market demand it. Carson commented that his business failed because of poor marketing and confusion regarding occupational therapy by potential referral sources. Carson recently decided to discontinue promoting his company, effectively shutting down the operation. During a phone interview, Carson identified that his biggest challenge was educating the public and his referral sources about occupational therapy. Because his business only offered occupational therapy services, Carson stated referral sources were confused about his services. Specifically, Carson commented that even after educational sessions about his occupational therapy only company, the potential referral personnel would still ask for physical therapy services from his company or misunderstand what his scope of occupational therapy entailed.

This interview offers example of an occupational therapists' attempt to become an entrepreneur with little business experience and unfortunately not succeeding. Carson stated the biggest barrier to the success of his company was his inability to appropriately market his services. Carson remains optimistic for other occupational therapy entrepreneurs, stating "I think we should try [entrepreneurship], learn to try it. I think in some ways it is good for the profession."

Dy, M. (2009, March 2). Owner of an outpatient clinic, contract service company, and product developer. (K. Anderson, Interviewer).

Marc Dy is an occupational therapist, and founder of Functional Solutions, Inc. His company offers contract rehabilitation services to community agencies, outpatient industrial rehabilitation therapy services, consulting for injury prevention and management, as well as assistive device development. Dy stated that the creation of his business was that of necessity, there were very few jobs available at the time when he created his business, and he had started to

contract his services in new and different arenas. The corporation grew into what it is today. However, the company is currently regressing due to the poor economic climate.

Dy suggested that occupational therapists might not be engaged in private practice as much as other healthcare professionals, such as physical therapists or chiropractors, because of the nature of our education. The majority of chiropractors and physicians operate a solo or partnered practice, Dy is curious if occupational therapy encourages the same endeavors “Do [occupational therapy] schools promote entrepreneurship?” Dy suggests for schools to offer more information regarding entrepreneurship to encourage students to “think outside of the box”. In addition, Dy commented that AOTA should offer a “stronger task force for private practitioners” to promote success in entrepreneurship. Specifically, Dy suggests AOTA to sponsor continuing education sessions related to consulting and other entrepreneurial topics.

Epstein, C. (2009, March 9) Occupational therapy consultation. (K. Anderson, Interviewer).

Cynthia Epstein, MA, OTR, FAOTA, founded Occupational Therapy Consultants, Inc. in 1979. This company offers consultation services to a variety of consumers, schools, nursing homes, hospitals, therapy departments, work sites, and many others. Mrs. Epstein has been very active in the American Occupational Therapy Association, and attributes her success to the professional contacts that she encountered while involved with her state and national leadership roles. She has also authored many articles, book chapters, and textbooks regarding occupational therapy consultation and entrepreneurship. Her expertise and passion has encouraged many of her employees to advance in occupational therapy by way of presentations at conferences, development of new programs, and engagement in other entrepreneurial ventures.

Epstein believes that AOTA offers many opportunities to potential entrepreneurs; however she states that occupational therapists have not taken advantage of these tools. She suggests that therapists interested in small business ownership take advantage of networking and learning opportunities, pay attention to changes in the industry, economy, and other local businesses, and research business skills that are necessary in the desired venture.

Glantz, C. (2009, February 24). Partnership in occupational therapy small business. (K. Anderson, Interviewer).

Coralie Glantz, OT/L, BCG, FAOTA, collaborated with Nancy Richman over 20 years ago to establish a therapy contracting company, Glantz/Richman Rehabilitation Associates, Inc. With a strong focus on ethical practice, the two occupational therapists began working out of their homes and eventually moved into offices in the Chicago area. The company currently employs 60-80 physical therapists, occupational therapists, speech and language pathologists, and other health care professionals. Glantz/Richman Rehabilitation Associates, Inc supply health care professionals to nursing homes, hospitals, school systems and other sites.

Glantz believes that occupational programs are doing a better job of training students entering the business world as opposed to when she began her corporation. She suggests including the overall concepts of operating a business, with an emphasis on marketing to traditional occupational therapy programs. Glantz commented that only a minority of therapists will enter into entrepreneurship and suggested for these courses to be optional.

Glennon, T. (2009, March 2). Administration and management special interest chair and entrepreneur. (K. Anderson, Interviewer).

Tara Glennon, EdD, OTR/L, FAOTA, and recently elected chair of AOTA's Administration and Management Special Interest Section (AMSIS), has much experience in both the business and academic worlds. Glennon is also president of The Center for Pediatric Therapy, a company she founded in 1992, and teaches Occupational Therapy at Quinnipac University. Glennon began marketing her occupational therapy services to local families to supplement her teaching income in the beginning. The business has since grown to include two outpatient clinics employing occupational and physical therapists as well as speech and language pathologists. Much of her business knowledge was learned as she grew the business and encountered new situations. Glennon began teaching full time as her business began to expand and employing other therapists. Currently, her role in the company is mostly administrative, treating patients occasionally. She suggests for therapists interested in entrepreneurship to attend business related continuing education seminars. Glennon has been very involved with AOTA's efforts for entrepreneurship. Glennon has taught continuing education courses and managed networking sessions at national conferences, and is looking forward to her roles as the AMSIS chair.

The AMSIS attempts to meet the needs of the AOTA members who have selected this special interest group. The group monitors online discussions via OT Connections, responds to questions, presents educational courses, sponsors networking groups at conferences, and aspires to update the private practice resource that is currently available. Glennon's goal as the current chair, is to create a CD of information for AOTA members to purchase, that would detail everything a therapist would need to know about entrepreneurship. This task, in conjunction with AOTA Press, will meet the needs of those members interested in beginning or expanding a business. Glennon is hopeful for the project to be completed in 2010. This resource would be critical, filling the gap of business knowledge within the profession.

Geha, H. (2009, January 19). State Farm Insurance Agent. (K. Anderson, Interviewer).

Personal communication with a State Farm insurance agent revealed what insurances would be needed to begin an outpatient clinic. A business owner would need to purchase general liability, malpractice, and property insurance policies. This department of State Farm Insurance does not write malpractice insurance policies, however the agent referred the student to internet resources for more information.

Hansen, D. (2009, January 26). Small Business Development Center Interim Director. (K. Anderson, Interviewer).

Funded by the Ohio Department of Development, Hansen operates the Manufacturing and Technology Small Business Development Center (MTSBDC) on The University of Toledo campus. Hansen specializes in assisting engineering and manufacturing business development, however, he is available for any Ohio citizen interested in entrepreneurship. The MTSBDC serves the community as a contact for information, referrals, resources, and counseling. The consultation is one-to-one and free of charge. The student was guided through a number of government websites to assist small business entrepreneurs. The interview also included conversations regarding budgeting, management, business planning, technology, and funding sources for a small business.

Hassen, M. (2009, January 30). Occupational therapist managing contract services. (K. Anderson, Interviewer).

Marianne Hassen, OTR/L, is the Vice-President of Business Development at Concept Rehab, Inc. a company that she has worked for since its inception. In the early 1980's, she and two physical therapists began Concept Rehab by contracting their therapy services to long-term care facilities. "The girls", as they were nicknamed, learned how to document rehabilitative services in a way that would increase the probability of reimbursement for the facility. Until that time, it was rare for therapy services to be a source of revenue for a facility. Concept Rehab has grown from three employees in the 1980's, to over 650 employees today. Hassen was interviewed regarding her professional experiences in private practice, reimbursement changes, legal concerns, and professional advocacy.

Kane-Wineland, M. (2009, January 28). Occupational therapy private pediatric practice. (K. Anderson, Interviewer).

Maureen Kane-Wineland, Ph.D., OTR/L, is the co-owner of Rehab Dynamics in Toledo, Ohio. Since 1996, she and her business partner, a physical therapist, have operated Rehab Dynamics as an outpatient pediatric clinic. In 2004, they purchased and constructed a new facility to house their growing business. This venture is the second small business that Kane-Wineland has been a part of. From 1985 until 1989, she and her spouse owned and operated Clinic Rehab. Because of these experiences and with the guidance of other professionals in private practice, she currently operates a very successful clinic. Kane-Wineland recommends for any aspiring entrepreneurs to comprehensively assess personal strengths and weaknesses before entering into a business venture. While she enjoys being in business for herself, Kane-Wineland commented how stressful the process can be "The bottom line is, it's up to you, or your partner, to do all of the little things that make it [the business] run or not run." She divides her schedule

between administrative duties, client treatments, grant writing, and early intervention assessments. As the company grows, Kane-Wineland is constantly exploring new directions, “I continue to look for new ways to provide our services... Summer groups are self-pay and they are very successful and have helped [the company] financially.”

Loria, C. (2009, March 30). Educational seminars as a small business enterprise. (K. Anderson, Interviewer).

Loria is a physical therapist, and co-owner of Education Resources, Inc. She met her business partner while in school and both had decided to teach continuing education courses to supplement their incomes. The business began very small, only offering a few courses a year. Currently, the company offers over 280 courses a year and employs many presenters. Loria’s role is to manage administrative tasks instead of teaching. When asked if the American Physical Therapy Association (APTA) offers resources or assistance to members interested in private practice, Loria stated that she was not aware of any resources. Both partners learned about business operations “by the seat of our pants”. Loria stated that she had learned more about entrepreneurship during a course that she co-taught, sponsored through her business, than she had learned from her formal education.

The student was able to discuss the process of how a therapist becomes a presenter of a course for Education Resources, Inc. The business receives 4-5 offers a week from potential educators. Each project is then reviewed and matched with the goals of the company, to determine if the program will be sponsored. Loria’s business is very successful. However, she commented that the current down economy is beginning to negatively affect business. She also

stated that there is a lot of competition in the continuing education industry currently, but encourages entrepreneurs to research opportunities and take risks.

Morrison, S. (2009, March 31). Chiropractic private practice. (K. Anderson, Interviewer).

Mr. and Mrs. Morrison began their chiropractic private practice in 2000, and have been running it successfully ever since. Morrison is concerned for the future of entrepreneurship in health care “I see it [entrepreneurship] being much more limited in the near future.” Managed care systems have made small business management more difficult “I see the opportunities for entrepreneurship becoming extinguished, rapidly.” He has witnessed this trend occurring in the Northwest Ohio area with physicians working in groups or within a large health care system.

Morrison did not receive formal business training to prepare him for being a successful businessman. He identifies many challenges for entrepreneurs in terms of documentation, following and understanding regulations, and maintenance of an ethical practice. “There is always help you there from the organizations [national associations], but there is no set strategy... It’s quite a mess actually.” Morrison is not aware of any resources offered specifically for chiropractors, but understands that advocacy and research articles presented in a national forum would assist chiropractors engaging in small business ownership.

Nandy, D. (2009, April 1). Managing an outpatient clinic. (K. Anderson, Interviewer).

“Deepak Nandy is a licensed physical therapist and board certified wound specialist. Dr. Nandy earned his clinical doctorate in physical therapy from Des Moines University, Iowa, and is practicing since 1996. His strong clinical skills have been widely appreciated by his clients, and referring physicians alike. His practice is strongly founded on principles of evidence-based

rehabilitation. A big advocate of health promotion, he points out that the effects of health is not limited to the individual alone but that it concerns the whole society. He believes that *good health is important for both socio-economic and personal development*” (Retrieved April 28, 2009, from “About us” at <http://americarephysicaltherapy.com/AboutUs.html>).

Deepak Nandy opened an AmeriCare physical therapy clinic in Troy Michigan in a joint ventureship with Dr. Joseph Wells. The clinic opened in August of 2008 and unfortunately has not created profitable business as of the first quarter 2009. This clinic employs Dr. Nandy and an office assistant. The business is very slow at this time, however, Nandy commented, “I do not blame the recession because the Medicare population is constant.” Nandy is currently executing the marketing plan and hopes to employ a marketer to advertise and generate referrals. He anticipates for business to increase as the community learns about the clinic and becomes aware of its existence. Nandy discussed at length the processes and policies necessary in order to operate an ethical practice. The clinic must follow government regulations regarding patient privacy, as well as providing client-centered care. Nandy is hopeful that the clinic will grow and begin receiving more referrals. He works very closely with Dr. Wells to promote the AmeriCare name and business reputation in this new community.

Nelson, T. (2009, February 27). Women’s leadership and entrepreneurship; opportunities and barriers. (K. Anderson, Interviewer).

Teresa Nelson, Ph.D., is a professor of entrepreneurship and current director of the School of Management’s Entrepreneurship program at Simmons College in Boston. She lectures across the globe regarding entrepreneurship and business issues concerning women. Her current project is an entrepreneurship certificate program. This certificate would be offered to non-

business graduate students and alumni to engage in a series of business related courses. The program would teach the basic skills required to begin and operate a successful business in any industry. Nelson aspires to 'sell' the certificate program to all universities, increasing the knowledge levels of entrepreneurs and the ultimate success of a small business venture. Due to her expertise in entrepreneurship and gender issues, Nelson was interviewed to discover trends in entrepreneurship and how gender plays a role in entrepreneurial activities.

Due to Nelson's interest in occupational therapy and entrepreneurship, she discussed new trends and system changes in the healthcare industry. The Obama Administration is proposing radical changes in health care delivery and reimbursement. Nelson commented, "The private sector has to be a part of it [the new healthcare system]." Another trend in health care is the tendency for healthcare workers to be women; presenting more opportunities for women to become entrepreneurs. Nelson also states that there is not substantial evidence recording gender differences of entrepreneurial capabilities. She does admit that more men than women own businesses, but men and women entrepreneurs have the same qualities. Nelson theorizes family responsibilities may be the cause of less women engaging in entrepreneurship.

Nelson encourages women who are interested in entrepreneurship to monitor trends, attend her classes, learn from experts, and to take risks. "I would look carefully at the opportunities that the regime changes in health care are providing" Nelson feels very strongly that occupational therapists should be involved in this change. In addition, Nelson enforces the need for preparation, "You have to get around people who know business, you have to master certain techniques."

Richman, N. (2009, February 27). Partnership in small business. (K. Anderson, Interviewer).

Nancy Richman, OTR/L, FAOTA, collaborated with Coralie Glantz to create Glantz/Richman Associates, Inc. a therapy contract company serving the Chicago area. Richman reflected on the reasons for entering into small business ownership. Both she and Coralie were contract therapists who decided to begin a contract company in order to create jobs for themselves. Initially, they only offered occupational therapy. Richman explained how their business is different from other contract companies. Glantz/Richman is a very ethically based company. Both owners work diligently to ensure that the employees are treated with respect and professional courtesy.

Richman was a past chair of the Administration and Management Special Interest Section. During her time with this group, they developed a tool for occupational therapists interested in entering private practice. The online “Private Practice Resources” document outlines how to engage in a self-assessment and reimbursement concerns related to Medicare/Medicaid. This document is available to all AOTA members. Richman stated that with this tool, continuing education, and participation in the special interest group, occupational therapists can adequately prepare themselves for entrepreneurship. “I think one of the issues is that not all entrepreneurs are members of AOTA and don’t see all of the support available for them.” Richmond encourages potential entrepreneurs to seek mentorship and explore what is needed both personally and professionally, to create an occupational therapy business.

Sammons, F. (2009, February 27). Product development and entrepreneurship in occupational therapy. (K. Anderson, Interviewer).

Fred Sammons has made himself an occupational therapy icon. He began his mail order catalogue of assistive devices in the mid 1950’s. His marketing campaigns included word of

mouth and the famous “Photos with Fred” at conferences. Sammons shared the history of his business detailing how he is still involved in the company and occupational therapy, even though he is in his eighties. Sammons attributed his success to “being in the right place at the right time” and having good advisors. When he was starting out, he created, marketed, and sold each device himself. As the demand for his products grew, he was introduced to a team of advisors who guided him to expand his company, “That is the engine for the company to grow. It’s being willing to use your advisors and benefit from them.” Even though the company has been sold three times, Sammons is still employed as a public relations officer and an advertiser. He commented, “It is very difficult to teach entrepreneurship. The same way it’s it is difficult to teach innovation and inventing.” Instead, he suggests for practitioners to be aware of trends and potential opportunities. “People fall into businesses and then they are hired off to do other things. You probably won’t treat patients all of your career. Anything after that is entrepreneurial.”

Stoffel, V. (2009, February 20). Occupational therapy entrepreneurship opportunities. (K. Anderson, Interviewer).

Virginia Stoffel, Ph.D., OT, BCMH, FAOTA, teaches at the University of Wisconsin in Milwaukee in the occupational therapy program. She has also recently earned her Ph.D. in leadership for advancement of learning and science. Her experiences in community mental health services and her roles in the American Occupational Therapy Association over the years have provided Stoffel with a unique perspective of entrepreneurship. She offers that entrepreneurship, “Could be a type of service, not a product, but a service for a population who has issues around everyday occupation, occupational performance but haven’t received traditional services.” Stoffel argues that occupational therapists can create a niche in any market

making the opportunities for entrepreneurship infinite. Challenges present themselves when entering a new arena. Therapists must consider when do you call what you are doing “occupational therapy” and bill as such, or when does one simply use his or her occupational therapy as a knowledge base? She often asks therapists if they use their occupational therapy skills in other areas of their lives. Most often, occupational therapy training can be used in conjunction with other roles: mother, father, brother, sister, worker, coworker, etc. This is another important characteristic of an entrepreneur. Acting as a manager or small business owner, the occupational therapist typically applies his or her occupational therapy skills. Finally, Stoffel agrees that an article written for “The Issue Is..” regarding occupational therapy entrepreneurship will “get people thinking and talking” in hopes of stimulating new ventures.

Wells, J. (2009, January 15). Occupational therapist managing a small business. (K. Anderson, Interviewer).

Joe Wells, OTR/L, OTD, is the President and owner of AmeriCare Health Services and serves as the site mentor for this Capstone project. Upon multiple occasions, Wells has discussed his experiences in owning and operating this company, as well as the status of other occupational therapists interested in entrepreneurship. Wells purchased AmeriCare in 2002 with his wife, Neeti. Initially, they were interested in the business as an investment, neither were interested in managing the company. It became apparent early on, that the old management team would need to be replaced; this is when both Mr. and Mrs. Wells became therapists, managers, and supervisors of the firm. In the last seven years, the company has doubled in size, serving 15 counties in Northwest Ohio.

Wells is constantly advocating for the profession and for entrepreneurship. He suggests for schools to offer some training on business management. In reference to the lack of occupational therapists in management roles, Wells commented, “we haven’t had the education to understand and manage other disciplines.” The student has learned how to appropriately advocate for occupational therapy within the business community through observing and discussing current events with Wells.

Dr. Wells is also very involved in the Ohio Occupational Therapy Association (OOTA). Over the years he has presented conference seminars relating to private practice and reimbursement, advocating for more occupational therapy entrepreneurship. Wells is also the chair of the Older Adults interest group, sponsoring sessions at conferences. His next aspiration is to be elected as the Vice-President of OOTA. He hopes to use this role to contribute to the growth and advancement of the profession.

Wells, N. (2009, February 15). Occupational therapist managing a small business. (K. Anderson, Interviewer).

Mrs. Wells, OTR/L, MBA, has been involved with AmeriCare Health Services for the past seven years, currently acting as the Vice President and Administrator. She manages the daily operations of the business, meeting with department managers, hiring new employees, and numerous other responsibilities. In an interview, she theorized why occupational therapists are not taking advantage of entrepreneurship, “The term ‘occupational therapy’ can be misleading, doctors don’t think about occupational therapy.” She encourages therapists to advocate for and educate the public about occupational therapy services in any way possible. Wells also encourages AOTA to continue to advocate for the needs of all occupational therapists, especially

in the area of insurance reimbursement. Many insurance policies are now allowing physical therapists to determine the rehabilitative needs of the patient, and as a result are responsible for occupational therapy referrals. Wells identified this trend as a potential threat to occupational therapy.

Wells shared her experiences as a female business owner in a female dominated field. She admitted that in the beginning stages of managing AmeriCare she noticed differences between how business people treated her versus her husband. Mrs. Wells came to understand that once she was respected and well known in the business community “then the playing field is level.”

Appendix C

Sharon A. Gutman, PhD, OTR
Editor, *American Journal of Occupational Therapy*
ajoteditor@aota.org
6 Horizon Road, Apt. 1007
Fort Lee, NJ 07024

Dear Dr. Gutman,

I am enclosing a submission to the *American Journal of Occupational Therapy* entitled, "The Issue Is... Wanted: Entrepreneurs." The manuscript is 24 pages long and addresses the professional trend of entrepreneurship in occupational therapy.

My coauthor and I do not have any conflicting interests that might influence the nature of this article. This paper is not under consideration for publication in any other venue.

I have enclosed the signatures for the statement of authorship responsibility, the statement of financial disclosure, and the statement of copyright release. I will be the corresponding author for this document. Both my coauthor and I agree to the byline order and to the submission of the manuscript. I will be responsible for informing my coauthor of progress and any revisions needed.

Sincerely,

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