HISTORY OF PROFESSIONAL OCCUPATIONAL THERAPY EDUCATION AT INDIANA UNIVERSITY

1924-2022

THOMAS F. FISHER, PhD, MS, EdS, OTR, CCM, FAOTA

ELAINE EWING FESS, OTD, MS, OTR, CHT, FAOTA

Thomas F. Fisher

Elaine Fox

History of Professional Occupational Therapy Education at Indiana University

1924 – 2022

Thomas F. Fisher, PhD, MS, EdS, OTR, CCM, FAOTA

Elaine Ewing Fess, OTD, MS, OTR, CHT, FAOTA

With contributions by former Directors,
of the Department of Occupational Therapy,
Indiana University, Indianapolis, IN

Patricia Laurencelle, PhD, OTR, FAOTA
Carol D. Nathan, EdD, MA, OTR, FAOTA
Celestine Hamant, MS, OTR, FAOTA

TABLE OF CONTENTS

PREFACE

During its 100+ year history as a profession, Occupational Therapy (OT) has provided leadership in teaching, research, and civic engagement pertaining to health for the citizens of Indiana, the region and the nation [1, 2]. Indiana University began its OT program in 1957, forty years after the profession was founded. It was the first program established in the state.

Influenced by some of the most well-known leaders and founders in the field, Occupational Therapy at Indiana University (IU) has a long and rich history. In 1924, OT clinical services at Indiana University Medical Center (IUMC) were established; and over successive years, these services expanded to include multiple venues. Currently, OT clinical services continue at the major hospitals associated with IUMC. Additionally, the IU OT academic program, founded in 1957, is the oldest continually accredited professional occupational therapy program in Indiana. In its 61 year history (1956-2017), OT has had only five program directors (not counting the two year appointment of George Rowley, MA, OTR, whose term of service occurred between those of Nathan and Hamant).

The following chronology elucidates changing duties and respective titles associated with these five OT leaders as their corresponding responsibilities evolved at Indiana University Medical Center (IUMC), Indianapolis, IN. Additionally, advancement of educational requisites[1] is apparent as time passed; and lineage of associated Departments, Divisions, and Schools also changed over time.

- Founder and Director, Occupational Therapy (1924-1934); Director of Occupational Therapy and Physical Therapy clinical programs (1934-1957)[3]; Founder of Occupational and Physical Therapy academic programs (1957); Administrative liaison for establishment of the Cerebral Palsy Clinic (1957)[4]:
    - 1924 – 1959 Winifred Conrick Kahmann, OTR[1, 4-6]

      1924: OT Certificate, Devereaux Mansion, MA
- Director, Occupational Therapy Program and Clinics, Division of Allied Health, School of Medicine, Indiana University:
    - 1957 – 1962 Patricia Laurencelle, PhD, OTR, FAOTA

      PhD: Boston University in Social Anthropology
    - 1962 – 1968 Dorothy Ericson, MA, OTR[7]

      1952: BS in Occupational Therapy, University of Kansas
      1959: MA, Columbia University

[1] For brevity and clarification, individuals' professional credentials are listed at highest level attained per each individual

- 1969 – 1981 Carol D. Nathan, EdD, AM, OTR, FAOTA[1, 8, 9]

  1958: BS, New York University
  1958: Certificate in Occupational Therapy
  1968: MA in Occupational Therapy, University of Southern California
  1988: EdD in Higher Education Administration, Indiana University

- 1981 - 1983 George Rowley, MA, OTR[10]

  BS in Occupational Therapy, Kansas University
  MA in Education, University of Alabama at Birmingham (UAB)

- 1983 - 1984 Carol D. Nathan, EdD, MA, OTR, FAOTA (*Acting Director*)

- 1984 - 2004 Celestine Hamant, MS, OTR, FAOTA[11]

  1962: BA in English, St. Mary-of-the-Woods College
  1962: Post BA Certificate in Occupational Therapy, Washington University
  1971: MS in Special Education, Butler University

- Chair, Department of Occupational Therapy, School of Health & Rehabilitation Sciences (SHRS), Indiana University:

  - 2004 – 2017 Thomas F. Fisher, PhD, OTR, CCM, FAOTA[2]

    1977: BS in OT, Division of Allied Health, School of Medicine, Indiana University
    1982: MS in Education, Purdue University
    1995: Education Specialist degree in Educational and Counseling Psychology, University of Kentucky
    2001: PhD in Educational Psychology, University of Kentucky

  - 2017 – 2018 Patricia Scott, PhD, MPH, OT, FAOTA (*Interim Director*)

- Chair, Department of Occupational Therapy, School of Health & Human Sciences (SHHS), Indiana University:

  - 2018 – 2021 Terry M. Petrenchik, PhD, OTR/L .

Introduction

Establishment of clinical and educational Occupational Therapy (OT) programs at Indiana University (IU) is inextricably connected to regional, national, and world influences. Molded by previously occurring actions, and influencing subsequent actions, the ever evolving, intricate interlacing of key events excludes rote categorization. Considering events in context of their influencing factors facilitates more accurate understanding. This narrative is presented in chronological order, allowing readers to appreciate interlinked events as an evolving collective instead of a litany of isolated, free-standing occurrences. National and local events are grouped by decade, with national accounts preceding those relating to IU OT within each respective decade. To facilitate reading and to save space, first names and credentials (PhD, MS, MD, BA, etc.) are included only once at the time when an individual is first mentioned. Further, for brevity, professional credentials are listed only at the highest level attained per person. IU OT faculty, practitioners, and graduates that are recipients of United States government awards; AOTA honors; or IU recognitions are listed in Appendix A. Appendix B details information regarding Annual Professional Development Workshops. Definitions for abbreviations are included in Appendix C. Individuals mentioned in this chronicle, along with the associated page(s) where cited, are listed alphabetically by last name in the Index.

Contextual Background and National Founders

"The late nineteenth century's Industrial Revolution brought about major scientific, sociocultural, economic, technologic, and political changes"[6]. World War I (WWI) further propelled the concept of occupation as therapy to the forefront; and influence of legislation and governmental agencies had far-reaching ramifications. Beginning at the end of WWI, "vocational rehabilitation programs progressively expanded from aiding veterans to assisting civilians with disabilities(1920)"[12].

Defined by psychobiology's concept that the mind-body connection is inseparable, in 1917, key bio-psycho-social advances joined to create the National Society for the Promotion of Occupational Therapy (NSPOT), with emphases on worth of individuals, scientific knowledge, social justice, government regulation, and social reform[6, 13]. The six NSPOT founders, three men and three women, came from different vocational backgrounds, including medicine (W. R. Dunton, Jr., MD), architecture (G. E. Barton and T. B. Kidner), social work (E. C. Slagle), arts & crafts instructor (S. C. Johnson), and secretary (I. Newton Barton). Additionally, two other "near founders" involved in the early creation of NSPOT, contributed to the vocational diversity of the original group, including nursing (S. E. Tracy) and medicine (H. J. Hall, MD)[6]. In order to promote therapeutic use of occupation, "the founders and near founders each brought different skills, values, beliefs, and experiences to shape the new profession of occupational therapy"[6]. Emphasizing the mental health component, "although not a founder of the Society, Adolf Meyer, MD, a prominent psychiatrist, was a major proponent of occupation as therapeutic intervention"[6].

Occupational Therapy at Indiana University

1920s:

Rapid and significant advancements occurred during the six years following formation of NSPOT. In 1921, NSPOT's name was changed to the American Occupational Therapy Association (AOTA); and, providing an early step toward communication of scientific, OT-related content, the Archives of Occupational Therapy was created in 1922[6]. Two years later, the journal was renamed to Occupational Therapy and Rehabilitation (1924)[6]. Another major step for the burgeoning profession, the first minimum training standards were adopted for occupational therapy education (1923)[14].

In 1924, Winifred Conrick[2], OTR[3], was recruited to Indiana University Medical Center (IUMC) to help initiate and organize the first occupational therapy clinic at James Whitcomb Riley Hospital for Children[15]. Conrick received her OT training at Devereaux Mansion, a private, elite psychiatric 'Retreat' in Marblehead, MA [3, 16], similar to the Sheppard-Pratt Hospital in the Baltimore area. Over ensuing decades, her unique leadership skills were crucial to the rapid advancement of OT at IUMC. "What you should understand about [Conrick's] 'Director' style is that she did not 'direct' in the management style generally assumed. She planned well and creatively, hired well and confidently, and then took her hands off the wheel"[3].

The new Riley OT clinic was sponsored by the Junior League of Indianapolis (JLI). Over several years, the Junior League contributed in excess of $150,000.00 toward establishing the OT Department[1]. The following illustrates JLI's commitment to the Department:

> The Riley Memorial Association (RMA) was formed to fund building the new Riley Hospital for Children. A JLI officer asked Hugh McKay Landon, Chairman, RMA how best JLI could be involved. McKay "conferred with his co-trustees and the medical staff and they came up with the idea of an occupational therapy department. O.T. became very popular during the Great War and was being used more and more by both orthopedic men and other doctors."[5]
>
> "Winfred Conrick is hired by JLI at the recommendation of the National Society of Occupational Therapists. The League equips and decorates the clinic[4] in time for the dedication of Riley Hospital, October 7, 1924."[5]
>
> "We found Winifred Conrick, a young woman who had just graduated from the Boston School of Occupational Therapy. Winifred rose to the height of her profession – she had not been with us long before Dr. Willis Gatch asked her to take over all the physical therapy of the University hospital as well as the O.T., Dr. Gatch being Dean of the I.U. Medical Center. Then along came World War II and the Army grabbed her to supervise the occupational therapy in all the Army hospitals. But she came back to us when the commotion died down…"[5]

In 1926, Conrick founded the Indiana Occupational Therapy Association (IOTA), along with a small cadre of other OTs from around the state. Many of these OTs were employed by Veterans

---

[2] Winifred Conrick married in 1934 to become Winfred Kahmann

[3] Winifred Conrick Kahmann (1895-1982)

[4] Beginning in 1938, JLI support of Riley OT Department was gradually ceded to Riley Hospital.

Administration (VA) hospitals or state psychiatric hospitals. Conrick was president of IOTA for the organization's initial five years, as well as being president for another term in later years[1].

1930s:

Attention to academic standards paralleled clinical advancements in the 1930s. "Essentials of an Acceptable School of Occupational Therapy", published in the Journal of the American Medical Association (JAMA) in 1935 and 1936, defined admission and curriculum criteria, in addition to program organization, administration, and faculty requisites for OT schools[6]. In 1938, the first five OT schools were accredited jointly by AOTA and AMA.[6, 17].

Ten years after arriving in Indiana, Conrick married in 1934, becoming Mrs. Winifred Conrick ("Connie") Kahmann.[1, 4] That same year, "Kahmann was named Director of Occupational Therapy and Physical Therapy (PT), with administrative responsibility for services of both therapies in the four hospitals of the Medical Center"[4]. "She retained the title Director of the clinical programs of O.T. and P.T. until her retirement." in1959.[3]

As occupational therapy expanded and came under the sponsorship of Indiana University, an adult occupational therapy unit was opened in Robert W. Long Hospital in 1934. Kahmann hired Elizabeth Gallager to oversee the occupational therapy department at Long Hospital (retired 1969). She also hired Ruth Ladue to manage the Physical Therapy adult clinical services at Long Hospital.[1]

The Cerebral Palsy Clinic was organized in May 1934 by Margaret Rood, MS, OTR, PT, FAOTA. This Clinic was sponsored by the Services for Crippled Children, State Department of Public Welfare and the Indiana University School of Medicine. Rood, who was adjunct OT faculty at IUMC, eventually became distinguished for her contributions to development of neurophysiological treatment approaches of central nervous system disorders. The Cerebral Palsy Clinic was founded by the Children's Bureau to develop a federal model for coordinated services meeting the total needs of all referred patients. Winfred Kahmann was appointed administrative liaison for the establishment of the CP Clinic, continuing in this capacity until her retirement.[1].

1940s:

By1940,"vocational rehabilitation services included persons in sheltered workshops, the homebound, and workforce personnel"[12]. During the Second World War (WWII), survival rates of injured servicemen increased markedly due to advances in infection control, rapid evacuation transport, and surgical technique. In turn, these greater survival rates identified a critical deficiency of skilled upper extremity rehabilitation personnel. Occupational therapy was in a unique position to address this shortage as surgeon specialists[5] "emphasized the need for active, as opposed to passive, therapy and active use of the hand [and upper extremity] as a mainstay of good rehabilitation", noting that "rough manipulation joints, was more harmful than good"[12, 18]. In response to personnel shortages, the number of OT schools and OT assistant curriculums increased. The biomedical model began replacing arts and crafts movement.[6].

[5] Sterling Bunnell, MD, the "Grandfather of Hand Surgery".

In 1943, during WWII, Kahmann was recruited and appointed by the Surgeon General of the United States. She was released "on leave" by Indiana University to assume the position of Chief of the Occupational Therapy Branch in the Reconditioning Consultant's Division of the Surgeon General's Office. The purpose of this position was to organize occupational therapy and other rehabilitation armed services[6]. One year later, through Kahmann's leadership, U.S. Army War Emergency Courses in occupational therapy began[19]. During WWII, Kahmann not only provided outstanding service to her country; she also brought recognition and status to occupational therapy and to Indiana University. In 1945, the Army Surgeon General bestowed Kahmann with the War Department's Award of Merit for Meritorious Civilian Service[4]. A complete record of Kahmann's tenure at Indiana University, including many photographs, may be found in the IUPUI archives as well as the archives of the American Occupational Therapy Association[1].

With the end of WWII in 1945, Kahmann returned to IU. In 1946, she hired Anita Slominski, OTR, FAOTA[7], as staff therapist at the Cerebral Palsy Clinic; two years later, in 1948, Slominski was appointed coordinator of the unit, a position she held until 1987[20-22]. Slominski contributed her time, energy, dedication and love to the development and growth of one of the country's premier cerebral palsy facilities. Her knowledge of cerebral palsy and the needs of these individuals were second to none. Slominski was instrumental in hiring Joy Huss, MS, OTR, RPT, FAOTA, who eventually left IU to assume a faculty position at the University of Minnesota's Occupational Therapy Program[1]. In 2005, Slominski was awarded the IUPUI Spirit of Philanthropy Award.[21].

Thirty years after the founding of NSPOT and with only one founder still active in the Association, "a new era began in 1947, when Winfred Kahmann became the first registered Occupational Therapist and first woman since Eleanor Clarke Slagle, a social worker, to be elected President of AOTA"[6]. The same year, the American Journal of Occupational Therapy (AJOT) replaced the Occupational Therapy and Rehabilitation Journal.

1950s:

In 1950, Mary Switzer, considered the "grandmother" of the independent living movement, was named director of the Office of Vocational Rehabilitation. "Switzer, an economist, career bureaucrat, and long-time advocate of rehabilitation concepts, demonstrated to Congress the economic advantages of rehabilitating the disabled rather than supporting them in long term care facilities, noting that rehabilitated adults with disabilities become productive, tax-paying citizens"[12]. For the OT profession, the 1950s were defined by a series of official statements, policies, and standards published by AOTA to more accurately define the profession of Occupational Therapy and to provide benchmarks for OT practitioners and educators. A paradigm shift was occurring as OT moved from occupation to reductionism[6].

---

[6] Occupational Therapists were not commissioned in the Army until after WWII. They served as Women's Army Auxiliary Corps or *WAAC*.

[7] Anita Slominski (1922-2010)

The first official statement describing occupational therapy was published in AJOT (1950):

> "Occupational therapy is a professional service which uses purposeful activities to aid the patient in recovery from and/or adjustment to disease or injury. It is prescribed by the patient's physician and administered by the occupational therapists with consideration not only of the specific disability but also of the patient's physical, mental, emotional, social and economic needs[23]".

AOTA criteria continued with "*Minimum Standards for an Occupational Therapy Department*" (1952); and the "*Policy on Advanced Study*" (1955) reinforced the idea that OTs should maintain their competencies through continuing education. At this time, most OTs had post bachelor certificates, not bachelor's degrees. The "*Guide for Professional Responsibilities for the Occupational Therapist*" (1956) further delineated responsibilities of OTs [23]. By the end of the decade, AOTA adopted educational standards for Certified Occupational Therapy Assistants (COTAs); and published the "*Guide for the Development of Graduate Education Leading to Higher Degrees in Occupational Therapy" (1958)*, outlining requirements for master's-level OT curricula[23].

At Indiana University, focus was transitioning from exclusively delivering clinical services (practice) to including a student education component, integrating practice education for OT interns. With the development of the three OT Clinics (Riley, Long and CP Clinic), Kahmann went on to initiate two academic programs, one in occupational therapy and one in physical therapy. The year was 1955 when she, Slominski, and Dean Van Nuys, MD (Dean of the IU School of Medicine) went to Bloomington to meet with Herman Wells, President of IU, to propose establishment of these programs and to suggest where they would be housed. The IU Medical School wished to start these programs and supported them being housed in the School of Medicine. In February 1957, Kahmann recommended Patricia Laurencelle[8], PhD, OTR, FAOTA, as Director of the Occupational Therapy academic Program. The following August 1957, Kahmann selected Frances Ekstam, MS, PT, as Director of the Physical Therapy academic Program. Both women subsequently were appointed as faculty at the rank of Associate Professor to the newly approved Division of Allied Health Sciences in the IU School of Medicine (1959), to report directly to that Division's Dean, Aaron Andrews, a Professor of Public Health. Although Andrews was Dean of the Division, his input into the development of new OT and PT programs was nominal. He "kept his hands off the OT and PT Academic programs"[3], supporting approval for courses as they funneled through his office[3]. Laurencelle noted:

> "When a serious or major decision was required, it was the Dean of the School of Medicine (John VanNys, MD) who decided, but, like Caesar, he was seldom called upon, and was not particularly controlling. The *new 'programs'*, OT and PT Academic, struggled for Department status largely undirected and largely unassisted. I think this was a large component of their survival: nobody meddled."[3]

<u>IU OT undergraduate program</u>

[8] Laurencelle: "Anita Slominski recruited me, Mrs. Kahmann nominated me, Dean VanNys hired me."

In 1957, by action of the Trustees of Indiana University, the Division of Allied Health Sciences was formed in the School of Medicine. Two years later, the Trustees established the Occupational Therapy Program (1959); and three months after formation of the OT Program, the Physical Therapy (PT) Program was launched. Indiana University Trustees conferred upon the faculty of the School of Medicine the responsibility and authority to qualify for the Bachelor of Science degree in either Occupational Therapy or Physical Therapy for those students who successfully completed the prescribed curriculum in four allied health programs (Radiography and Clinical Laboratory Science Programs were added after the founding of OT and PT)[1].

1957 was a pivotal point in the general history of OT profession. The original proprietary Schools of OT had evolved as educational programs and were being endorsed by the American Medical Association. Over time, these proprietary schools ceased to exist or were absorbed into various U.S. colleges and universities in response to enormously increased demand for trained clinical personnel during WW II. Many experienced faculty in these programs either did not hold baccalaureate degrees; or they possessed only baccalaureate degrees. As these faculty members became aware of their vulnerabilities in their university communities, they proceeded to repair their deficiencies, and began to acquire master's degrees. At this time, very few OT faculty members were credentialed at the doctoral level. Universities similar to IU, almost immediately began increasing pressure on health profession curricula for increased academic and scientific rigor. This made faculty recruitment quite challenging given faculty did not have terminal degrees[24].

With the occupational therapy academic Program approved at IU, finding a qualified program director was a daunting task. To meet the AOTA/AMA Accreditation Essentials and to meet standards at a research institution, IU required the program director have, at a minimum, a master's degree, which made Laurencelle an eminently qualified candidate. She already had a master's degree; and a new era began under her leadership. Laurencelle, in collaboration with many nationally known occupational advisors, such as Beatrice Wade[9], developed and initiated a new occupational therapy curriculum for the School/Division for consideration by OT programs throughout the country[1, 3].

Kahmann's administrative responsibilities with the academic Programs (OT and PT) ceased when IU Trustees approved the two Programs, as did any lateral connection between the OT and PT academic Programs. However, Kahmann remained in full charge of the clinical services at IUMC until her retirement in 1959. Several months after her retirement, administrative responsibilities for the evolving clinical services of OT and PT were assigned to Laurencelle and to Ekstam respectively [1, 3, 4].

Laurnecelle's summary of Kahmann's contributions is astute:

---

[9] Wade was Chair of the Department of Occupational Therapy, University of Illinois. She was instrumental in alerting AOTA to potential issues if physical medicine controlled OT education and registry. Physiatrists wanted OTs to be known as occupational therapy technicians and that a physician or physiatrist should head OT schools. At the time, physical therapy was under the control of physiatrists. Anderson p-141-2

"Mrs. Kahmann's serious focus in a "hands on" style of Director began, continued and ended the way it had started, in the clinical program in OT for the children of Riley Hospital. The rest was politics. She was very good at both styles. Interestingly, she had no academic degree, which was part of the reason, repeatedly stated by her, that she did not interfere with me. Mrs. Kahmann was a very great and very influential OT. We still practice today in the shadow of her influence, although not much remains of the institutional forms in which she functioned. Like an iceberg, much of her massive accomplishment remains hidden, just bits showing at the top. I feel both lucky and privileged to have been professionally associated with her."[3]

1960s:

Nationally, the 1960s introduced federal government programs of Medicare (1965) and Medicaid (1966) into the health care arena; OT moved from physician prescription to physician referral services, thereby attaining greater autonomy; AOTA revised the 1949 "*Statement of Basic Philosophy, Principle and Policy*" that discussed relationships with other professional health personnel and OTs' qualifications; and the revised "*Essentials of an Accredited Program in Occupational Therapy*" (1965) shortened OT Level II Fieldwork (affiliations) for OT students from nine months (36 weeks) to six months (24 weeks); and divided them into two domains to include physical and psychosocial disabilities. Moreover, OT students had the option of doing an additional 12 weeks if they so desired; but most did not take this opportunity.

In 1967, the Association of Schools of Allied Health Professions[2, 25] and the World Federation of Occupational Therapists (WFOT) were founded [1, 2, 6, 26]; and in 1968, AOTA adopted an official definition of occupational therapy:

"the art and science of directing man's response to selected activity to promote and maintain health, to prevent disability, to evaluate behavior, and to treat or train patients with physical or psychosocial dysfunction."[26].

During the late 1960s, OT educators and OT practitioners adopted divergent directions regarding advanced degree acquisition. Concomitantly, recreation, music/dance and art were redirected, forming new professional groups of therapists. Dissatisfied with their restrictions to junior academic ranks, OT faculty began to consider and apply for doctoral studies. In contrast, at this time, many clinicians saw little need for additional degrees to enhance their practices. This shared mindset influenced OT leadership, both at state and national levels. Instead of endorsing attainment of advanced degrees, concerns of OT leaders focused on credentialing; and subsequent transferability of these credentials into various work settings. Further, advent of auxiliary personnel was viewed as advancing OT services offered to patients, without the requisite that all OT providers be prepared at the bachelor's or post-baccalaureate certificate level. Consequently, occupational therapy assistants became an initiative in the 1960s[24].

Paralleling the disparity between educators and practitioners, a schism between OT governance and practice at the national level became evident with the emerging topic of licensure. In 1969, AOTA published a position paper supporting "*Licensing and Standards of Competency in Occupational Therapy*"; and the Delegate Assembly responded conversely by taking a negative stance on licensure[26]. Two years later and portending future legislation, Puerto Rico became the first of all U.S. states and jurisdictions to require licensure for OT practice[27].

At Indiana University, the occupational therapy and physical therapy programs had been approved by the Board of Trustees, July 7, 1956. The first accreditation on-site survey for the IU Occupational Therapy Program was conducted April 7, 8, and 9, 1959. Full approval and accreditation was granted to the Program by the American Medical Association and the American Occupational Therapy Association on June 8, 1960[1].

Freshmen that eventually entered the professional programs (OT or PT) started at Indiana University Bloomington on September 10, 1956. Therefore, the first junior class at the Medical Center was admitted in September 1959; and graduated in 1960. They completed their nine months of supervised clinical experiences in 1961. Three occupational therapy students and six physical therapy students respectively were included in the first IU OT and PT classes. It was quite challenging to initiate these programs on a graduate professional campus like the IU Medical Center[1, 24].

Reflecting alignment with national OT trends, educational programs, including the IU OT Program under Laurencelle's leadership, began moving away from the classic preparation of occupational therapists in therapeutic craft analysis and skills. It is obvious from documentation and correspondence from these early years, that Laurencelle and Kaufmann were highly respected by the administration of Indiana University; and also by both the officials of the American Occupational Therapy Association and the American Medical Association. In fact, it is important that due credit be given to Laurencelle for early and rapid success of the Occupational Therapy curriculum. Under Laurencelle's leadership the occupational therapy Program expanded both clinically and academically[1].

When Laurencelle left IU (1962), she went to Boston University (BU) to obtain a PhD in Social Anthropology. After completion, Dr. Laurencelle was recruited by Alice Jansen, ScD, OTR, FAOTA, to teach at the University of Florida (UF) in the OT Program. Dr. Laurencelle stayed at UF until moving to Chicago to start an OT Program at Northwestern University. However, the new dean at Northwestern School of Medicine, decided not to initiate an OT program, or any other allied health program, in order to direct resources toward medical student education only. He subsequently appointed Laurencelle as the of Chair and Associate Dean of Health Sciences[24].

Upon Laurencelle's resignation from IU, Dorothy Ericson, MA, OTR, became Chair of the IU OT Program and hospital clinics. During this period, occupational therapy clinics remained stable, with some changes in staffing and increase in patient caseload. By mid-decade, the number of students admitted to the OT program had increased to twenty. Taught by School of Medicine faculty, OT and PT students attended the same, science based classes (anatomy, physiology, pathology, etc.). When content was discipline-specific (OT or PT), students attended separate classes aligned with their respective chosen professions. Discipline-specific classes customarily were taught by therapist educators from their respective fields. Nancy L. Griffin, EdD, OTR was primary faculty for OT specific class content.

Numerous curriculum revisions occurred under Ericson's directorship, the most significant of which was shortening the academic program to three semesters of didactic work and six months of clinical internship beginning with the graduating Class of 1967. This change was made in

response to changes in the "*Essentials*" of accredited programs in occupational therapy[10]. During Ericson's tenure, no further accreditation survey was required and the Program remained fully accredited[1].

Concurrent with Ericson's stint as Chair of the Department, a formal, very early, impetus for interdisciplinary cooperation emerged in 1967, when Indiana University's Division of Allied Health Sciences was one of 13 similar units from across the country to participate in the planning and formation of a national professional society, the Association of Schools of Allied Health Professions (ASAHP)[2]. Established by the deans of thirteen university-based schools of allied health professions, ASAHP was created "in response to an urgent need for an interdisciplinary and interagency association to relate to improving the quality and quantity of needed workforce in the health occupations and professions"[25].

Ericson resigned in 1968 and Carol Nathan, EdD, M.A., OTR, FAOTA, was appointed Director of the OT academic Program and the OT clinics at IUMC. Nathan focused on building relationships between the clinics and the school, as well as strengthening both. Her major objectives were to up-grade clinic programming and facilities; and to create better communication between the clinics and the academic program[1]. These objectives were Nathan's primary concerns for the first five years of her administration. During this time, the occupational therapy facility at Robert W. Long Hospital was expanded and moved to Ball Annex[1].

In 1969, Nathan appointed Celestine Hamant, MS, OTR, FAOTA, to the position of Supervisor of the James Whitcomb Riley Hospital for Children, Occupational Therapy Department. Soon after that, Hamant also assumed responsibility as the coordinator for the clinical internship or affiliation (aka, fieldwork) program for all Medical Center Occupational Therapy Departments. Over the next decade, Hamant guided the occupational therapy clinics and the OT internship program to a nationally recognized level of excellence[1].

> Having a long and successful association with OT at IUMC, Hamant was uniquely qualified to assume supervisory responsibilities at Riley OT, as well as the OT affiliation/fieldwork program. Originally, Slominski had selected Hamant to be the first teenage volunteer at the CP Clinic. This initiative established a module that, over time, morphed into the successful "Teen Tonic" program. In 1964, Hamant, with a post baccalaureate certificate in OT, had accepted the position of staff therapist at the Cerebral Palsy Clinic, serving in that capacity for the next five years[1].

In 1969, as supervisor of Riley Hospital OT, Hamant initiated a practice that was both practical and recognizable for patients, staff, and the general public, the Riley wagons. Because the OT Department was located on the 4th floor of Riley Hospital, in-patients with their accompanying IV poles and other equipment had to be transported (often carried) up and down elevators and hallways to attend their therapy sessions. Hamant realized what a risk this was to patients, therapists, aides, etc. Within a year of her appointment as Supervisor, Hamant decided that the

[10] Unfortunately, shorting the OT academic program resulted in unanticipated IU Registrar confusion, generating an error that has persisted more than fifty years. Based on "commencement event timing", the Registrar erroneously combined the OT Class of 1966, the last Class of the long program, with the OT Graduating Class of 1967, the first class of the shortened program.

simplest solution for patients that were unable to sit in wheelchairs would be to use wagons for transporting them. Subsequently, a new wagon was purchased and it quickly became a big hit for both the children and the OT staff. A second wagon was adapted to carry bags, IV poles, and other equipment for the children. Soon, the OT Department wagons were so popular that they often went missing; and the OT staff would find them on the nursing units. The nurses quickly realized the wagons' benefits---practical, safe, and fun for the children. After many searches for missing wagons, the OT Department painted its wagons blue and yellow; and suggested that other departments purchase wagons for their own uses. It wasn't long before other departments in the hospital acquired the traditional red/wood colored wagons that are used throughout Riley Hospital today. Eventually, the wagon became the logo of the Riley Hospital for Children and serves as the symbol of Riley Children's Foundation to this day[28, 29].

In 1969, the Indiana University Medical Center transitioned to Indiana University – Purdue University Indianapolis (IUPUI), when IU and Purdue merged their Indianapolis programs and facilities under the administrative direction of IU. IUPUI was accredited by the North Central Association of Colleges and Schools (later became Higher Education Council)[2].

1970s:

In the 1970s, governmental legislation affecting OT practice, protected at-risk populations; while OT generated regulation strengthened practice requisites through licensure and a code of ethics. The Rehabilitation Act of 1973 (P.L. 93-112) included major civil rights protections for people with disabilities; AOTA approved a position in favor of state licensure (1974); the first AOTA Model Practice Act was created (1974); Black Occupational Therapy Caucus (BOTC) was founded (1974); Education for All Handicapped Children Act (P.L. 94-142) specifically identified occupational therapy as a related service in schools for students with disabilities (1975); and Florida and New York became the first states to pass state OT licensure laws (1975). Supplanting the voluntary 1926 Pledge & Creed, AOTA adopted the first stand-alone Occupational Therapy Code of Ethics, requiring therapists to abide by the Code or be censured; and the AOTA Roster of Fellows was created[27]. Additionally, Association endeavors focused on higher education and specialization. The first PhD program in occupational therapy was approved at New York University (1973); and AOTA created five Special Interest Sections (SIS), including Developmental Disabilities, Gerontology, Mental Health, Physical Disabilities, and Sensory Integration in 1977[27]. Paralleling AOTA SIS evolution, the American Society of Hand Therapists (ASHT), an independent organization of OTs and PTs specializing in upper extremity rehabilitation, incorporated in early 1977[30]. The long debated concept of OT specialization was rapidly being translated into action.

Indiana University OT Program advanced to reflected national trends. With fundamental revisions to the AOTA "*Essentials*" as well as increasing evolution of the occupational therapy body of knowledge toward an occupational performance and behavior model, Nathan and the OT faculty determined that a major curriculum revision was needed. This revision was in process at the time of the 1973 accreditation survey which was the first survey conducted since the initial approval in 1960[1].

The 1973 survey accreditation team recommendations predominantly involved 1) improving facilities and 2) expanding Occupational Therapy Program faculty. The physical facilities were minimal with all accommodations, including classrooms, laboratories, and faculty housed exclusively in the basement of Ball Annex. A provisional move of the Director's office to Riley Hospital and a short-term laboratory created at Robert W. Long Hospital alleviated the problem temporarily. Fortunately this situation lasted less than a year; at which time, the Program acquired facilities on the first floor of Ball Annex, allowing faculty members to have their own private offices and adequately expanding administrative offices to meet needs of the growing Program. Additionally, new laboratory and classroom spaces were allocated in the basements of Ball Annex and Ball Residence[1].

Under the leadership of Erma Rozmarynowski (Rozy) Simek, MBA, OTR, FAOTA[11], an associate degree program for occupational therapy assistants was established at IU. The initial accreditation survey for the OT assistant Program was conducted October 13, 14, and 15, 1971. Provisional approval of the associate Program was granted as a result of that survey; and following a progress report, full approval was granted by the American Occupational Therapy Association, effective December 20, 1972[1].

By 1973, with changes in the curriculum; plus increases to forty students in each baccalaureate class; and concomitant increases in the associate degree Program; it became increasingly evident that more efficacious curriculum coordination was required. To address this need, Nathan appointed T. Kay Carl, BS, OTR, to the newly created position of Curriculum Coordinator for the OT baccalaureate Program. Simek continued with the coordination of the OT associate degree Program. Much of the subsequent growth and development of the baccalaureate curriculum and its attendant rigor is attributed to Carl's leadership and to the OT faculty's dedication to ensuring a comprehensive professional OT curriculum. Carl remained Curriculum Coordinator for four years until she was promoted to Associate Dean of the Division of Allied Health Sciences, Indiana University School of Medicine, October 1980[1].

Again related to the growth and expansion of both the academic OT Program and the OT Clinics, in 1974, Nathan appointed Hamant to the newly created position of Director of Occupational Therapy Clinics. Hamant took charge of the budget and administration of the Adult OT Unit at Robert W. Long Hospital; and the new OT Unit in the recently constructed addition to James Whitcomb Riley Hospital for Children. In addition, she helped develop and implement the Occupational Therapy Department in the newly established Psychiatric Unit at Indiana University Hospital. Following a short transition period, Hamant assumed full responsibility for these Occupational Therapy Clinic areas as well as the OT internship program to which students were accepted from all over the nation[1].

The OT academic Program successfully passed another accreditation survey, March 21, 22, and 23, 1977. This survey included both the occupational therapy assistant Program and the baccalaureate Program. Both Programs received full approval/ accreditation and although a progress report was requested, recommendations given were minimal and full accreditation status continued[1].

---

[11] Erma Simek (1922-2013)

During the 1970s, growth in quality and quantity of both OT Programs was impressive. By the end of the decade, OT Program faculty appointments had tripled to seventeen persons, including some part-time faculty and two outside administrators[1].

1980s:

Federal legislation further supported OT services in the 1980s. The Omnibus Budget Reconciliation Act of 1980 (P.L. 96-499) classified OT as a qualifying service under the home health benefit and also identified comprehensive outpatient rehabilitation facilities as providers under Medicare Part B. Qualifying service language regarding occupational therapy in home health was rescinded as part of budget cuts passed under the Omnibus Budget Reconciliation Act of 1981 (P.L. 97-35); but OT in home health was expanded via Medicare (1981); OT in hospice care was covered by Medicare (1982); and Diagnostic Related Groups (DRGs) were implemented[6, 31].

> "The Education for the Handicapped Amendments of 1986 (P.L. 99-457) includes two new programs: pre-school special education and related services, including occupational therapy, for ages 3–5 and early intervention services for infants and toddlers birth to age 3, in which occupational therapy is identified as a primary service. The Omnibus Budget Reconciliation Act of 1986 (P.L. 99-509) establishes separate coverage for occupational therapy as a distinct Medicare Part B benefit and OTs as private practitioners, as well as expands Part B availability to skilled nursing facilities and rehabilitation agencies, and establishes a $500 cap for private practitioners in physical therapy, occupational therapy, and speech-language pathology"[31].

Representing a major shift at the national level, OT certification was disassociated from AOTA membership. The new recognition entity was the American OT Certification Board (AOTCB). Both the "*Essentials and Guidelines of an Accredited Education Program for the Occupational Therapist*" and Essentials for the OT Assistant were revised (1983)[6]. The Representative Assembly adopted a Policy on physical agent modalities (PAMs) use; and hospitals, schools, and nursing homes were key employers of OTs[6].

In 1981, as Nathan prepared to assume her new academic position of Assistant Dean of the Faculties, IUPUI, she reflected:

> "It has been an interesting exercise to review the history and development of the Occupational Therapy complex at Indiana University. We have much to be proud of both in its past, it's present and, I am sure, in its future. [In 1968], when I was appointed director of the [OT] Program by Glenn W. Irwin, Jr, MD, he said to me, '*What can we do to make the Occupational Therapy program at Indiana University the best in the country*?' That question has been the very foundation of my administration and the commitment of the faculty, staff and students. I know that the program will move forward with that remaining as the fundamental thrust. ... [It also] was the very essence of the motivation of Mrs. Winifred Kahmann who created for us such an invaluable heritage[1]."

From 1981-1983, George Rowley, MA, OTR, led the professional OT Program. Simek continued to direct the OTA Program. Rowley previously taught in the Department of Occupational Therapy at the University of Alabama at Birmingham (UAB). Prior to coming to IUPUI, he served as "Occupational and Activity Therapies Consultant, Department of Health and Mental Hygiene Administration and Director of Rehabilitation Services, Springfield Hospital

Center, Sykesville, MD".[10] Upon Rowley's departure[12][32], the Dean of the Division of Allied Health, in the IU School of Medicine, reappointed Nathan as the interim OT Program Director while an internal search for a new Director was conducted. After a year of searching, Hamant was offered and accepted the position of OT Program Director (1984). Hamant's appointment as OT Program Director included promotion to Associate Professor ranking, with tenure. Initially, she continued supervisory responsibility of the Occupational Therapy Services for patients at Riley Hospital for Children[13], Long Hospital and University Hospital, in addition to her academic role as Chair of the Department of OT and OT Program Director, in the IU School of Allied Health, within the School of Medicine[1]. Hamant continued the well-established OT Program curriculum, and in 1988, initiated the innovative, 1-credit hour, Senior OT Elective classes.

1990s:

Influencing OT practice and research, national legislation implemented during the 1990s increased awareness of and protected individuals with disabilities; guarded individual patient privacy; and regulated therapy payment. Americans with Disabilities Act (P.L. 101-336), prohibited discrimination on the basis of disability (1990); and the Health Insurance Portability and Accountability Act (HIPAA) (1996) ensured patient privacy[6, 33]. "Individuals with Disabilities Education Act (P.L. 101-476) emphasized parent and family involvement and stated that services should be provided in the least restrictive environment and continued coverage of occupational therapy as a related service and, in early intervention, a primary service" (1997)[33]; Balanced Budget Act (P.L. 105-33 capped therapy, other than hospital outpatient departments, at $1,500; Olmstead decision by Supreme Court stated that individuals with disabilities should be placed in community settings instead of institutions (1999)[6, 33]. The University of Southern California, OT Department, began a doctorate in occupational science (1991)[33]. AOTA adopted Uniform Terminology III (1994); and Guide to OT Practice (1999) was published. Further defining requisites for OT education programs and competency criteria for OTs, the Accreditation Council for Occupational Therapy (ACOTE) (1994) and the National Board for Certification in Occupational Therapy (NBCOT) (1996) were founded. AOTA and NBCOT began disagreement over credentialing marks (1996)[6]. ACOTE established a post-baccalaureate entry for OTs, with all schools to become compliant by 2007[33]. "The legal dispute between NBCOT and AOTA over the NBCOT trademarking of OTR and COTA ended"[33].

At the April 1991 meeting of the Trustees of Indiana University, the Division of Allied Health Sciences was granted school status. The School of Allied Health Sciences encompassed allied health programming on five of the eight campuses of Indiana University and incorporated 21 distinct allied health academic degree programs[2].

---

[12] In 1997, Rowley was appointed associate executive director of professional resources for the American Occupational Therapy Association in Bethesda, MD.

[13] The CP Clinic was part of Riley Hospital for Children services.

2000s:
AOTA adopted the Occupational Therapy Practice Framework: Domain and Process to replace Uniform Terminology (2002)[34]. "The Consolidated Appropriations Act of 2004 (P.L. 108-199) allocates a small amount for training in research-based interventions for patients and caregivers dealing with Alzheimer's disease, including occupational therapy. The Individuals with Disabilities Education Improvement Act (P.L. 108-446) continues support for occupational therapy provided by qualified practitioners" (2004)[34]. "AOTA and ACOTE sign a memorandum of understanding, giving ACOTE 'unfettered autonomy for establishing standards for educational programs' (2005)"[34]. "The revised ACOTE standards include criteria for entry-level doctoral degree programs and entry-level master's degree programs for OTs; and AOTA adopts the Occupational Therapy Practice Framework, 2nd Edition" (2008).

In 2003, the IUPUI School of Allied Health Sciences began to restructure to better align campus resources in support of the graduate health professional degree programs. The resulting School of Health & Rehabilitation Sciences (SRHS) would focus solely on delivering graduate professional degrees in selected health and rehabilitation science disciplines, as well as the post-bachelor certificate in dietetics. Concurrently, undergraduate allied health sciences related degrees were transferred to other academic units on the IUPUI campus, primarily to the School of Medicine.

To better reflect the more focused academic mission, and based on faculty recommendation, the new School (SHRS), was established when the decision to emancipate from the School of Medicine was approved by the Indiana University's Board of Trustees, June 2004. Becoming an independent School allowed organizational autonomy and provided opportunity for resources to be allocated directly to programs included within SHRS. Four departments comprised the School: Health Sciences, Nutrition & Dietetics, Occupational Therapy, and Physical Therapy.

<u>IU OT graduate program</u>
The Indiana University Master of Science in Occupational Therapy (IU MSOT) Program was developed under the leadership of the Director of Graduate Studies, Thomas F. Fisher, PhD, OTR, CCM, FAOTA. Prior to coming to IU, Fisher was a full-time, tenured, faculty member at Eastern Kentucky University. He also had an adjunct appointment in the Department of Environmental and Occupational Medicine, College of Medicine, University of Kentucky.

In 2003, Fisher interviewed with the Executive Vice Chancellor of IUPUI, William Plater, PhD; the new Chancellor of IUPUI, Charles Bantz, PhD; the Dean of the School of Medicine, Craig Brater, MD; and Dean of the School of Allied Health, Mark Sothmann, PhD, within the School of Medicine. Following Bantz's recommendation to Deans Brater and Sothmann, in March of 2003, an offer was extended to Fisher to become the Director of Graduate Studies in the Department of OT; and within a year, to assume the role of Department Chair/Program Director of Occupational Therapy. Fisher began his duties as Director of Graduate Studies, July 1, 2003. At this time, IU OT was still at the BS level of education and needed to transition to the post-baccalaureate level by 2007 in order to remain an accredited program. Due to his experience at the graduate level at Eastern Kentucky University, Fisher was eminently qualified

to develop the graduate IU OT program. Prior to his arrival, the BS in OT faculty had proposed an MOT program; but their proposal was not approved by the School's Academic Studies Committee. Instead, the Committee opted to wait until a new OT Chair was appointed. Fisher subsequently assumed the roles of Chair of the Department of Occupational Therapy and Program Director following the retirement of Celestine Hamant in 2004[2] .

Upon Fisher's acceptance of the Director and Chair positions, Dean Sothmann explained that before the proposed graduate OT program could be advertised and before accepting applications for the first cohort, the program had to pass a series of hierarchal authorizations. Further, the proposed OT program needed to be created promptly since this approval process was complex and exacting. First, the program had to be sanctioned by the School of Medicine and by IUPUI; and then it had to be approved by IU Bloomington. Next, the Indiana Commission on Higher Education (ICHE) had to approve the proposal, before it could be submitted to the Accreditation Council for OT Education (ACOTE). All this took time[2].

In addition to creating the graduate OT curriculum, Fisher's responsibilities included hiring new faculty. Besides Hamant retiring in 2004, other core BS OT faculty members also were retiring, including Patricia Griswold, MS, OTR, FAOTA, and Judith Kiel, MS, OTR. Concurrently, Fisher duties also involved supervising a major upgrade in physical facilities when the OT Program was moved from the basement of Ball Hall to Coleman Hall, where extensive construction was being conducted. With Coleman Hall renovation, the OT Program acquired a lecture room and three instructional laboratory spaces: one for the occupations of infants and children (including suspended equipment), one for the occupations adolescent and young adults (including ADL Kitchen, laundry, bathroom and bedroom), and one laboratory for adults/older adults (including a BTE, Valpar Work Assessments, and driving simulator). These new spaces, plus related furnishings, equipment, and materials, were necessary to advance Program instruction to the graduate level and to remain competitive with other Big 10 programs[2].

With the proposed program's emphasis on research, evidence-based practice, and sciences, the decision was made to develop a Master of Science (MS) in OT, since this better represented the degree that would be conferred. Specific rationale for the MS degree included:

- Science courses every semester in the Program
- Prerequisite science courses
- Hiring faculty with research experience and training
- Required research courses in the Program
- Scientific research product as a requirement of the degree
- Independent thesis as an option for research product requirement

Another refinement and needed component of the curriculum was created as Fisher recruited researchers and occupational therapists with research doctorates and those with extensive research experience. In 2004, Fisher established the Department's Research Advisory Council (which, in 2006, transitioned to the Department Advisory Council [DAC]). Council members recommended curriculum content; and assisted in creating and developing the research component of the graduate professional curriculum, making it very different from the

undergraduate program that focused on skills. Council members and faculty knew the new graduate level students would need to bring an additional skill set to the workplace that earlier education did not provide. These Council members were selected based on their established research experiences. Through judicious discourse, they agreed on philosophical professional tenets, beliefs about the profession, themes to be integrated in the curriculum, and the degree to be conferred[2].

Original Research Advisory Council[2]:

Michelle Catellier, MD, OT
Elaine Fess, OTD, MS, OTR, CHT, FAOTA[14]
Shereen Farber, PhD, OTR, FAOTA
Judy Feinberg, PhD, OTR, FAOTA
Dan Poff, PhD, OTR, LMFC
Karen Stroup, PhD

Core faculty and staff at the time (2003-2008)[2]:

Core Faculty:

Jeffrey Crabtree, OTD, MS, OT, FAOTA (hired, 2004)
Janet Everly, MS, OTR (EdD candidate) (hired, 2006)
Chiung-ju (CJ) Liu, PhD, OTR (hired in 2008)
Robin Janson, OTD, MS, OTR, CHT (hired, 2004) – Academic Fieldwork Coordinator *replacing Kathleen Foley, PhD, OTR*
Michael Justiss, PhD, OTR (hired, 2006)
Patricia Scott, PhD, MPH, OT, FAOTA (hired, 2007)
Arlene Schmid, PhD, OTR (hired, 2005)

Part-time faculty:

Elaine Fess, OTD, MS, OTR, CHT, FAOTA
Susan Swinehart, OTD, MS, OTR, FAOTA
Carla Chase, MS, OTR

Staff:

Mary Carpenter
Louise Watkins

Dean:

Mark Sothmann, PhD

Having acquired all requisite approvals from IU, the state of Indiana, and AOTA, the first graduate OT program cohort was admitted in 2005. This Charter Class, consisting of 23 students, subsequently graduated in 2007[15][2]. ACOTE awarded full accreditation to the IU OT

[14] From 1968 to 2018, Fess' teaching experience with the IUMC OT Program/Department spanned 50 consecutive years, including faculty positions of Lecturer, Instructor, Full Time Instructor, and Adjunct Assistant Professor.

[15] Prior to 2003, for forty-five years, graduates received Bachelor of Science (BS) in Occupational Therapy degrees. In addition, the OT Department offered an Associate of Science (AS) in Occupational Therapy for occupational therapy assistants (OTA) from 1968-1991.

MS program in 2007 with a 5-year accreditation (new programs transitioning from BS to masters were given either given a 5-year or 7-year cycle).

Over the ensuing decade, the MS in OT Program further developed state-of-the-art laboratory space and classrooms in historic Coleman Hall, conveniently located near downtown Indianapolis and the Indiana University Medical Center. This setting expedited collaboration and partnership with seven hospitals (Methodist Hospital, University Hospital, Riley Hospital for Children, Roudebush Veterans Administration Hospital, Kindred Hospital, Wishard Hospital[16] (became Eskenazi Hospital in 2013[35]) and LaRue Carter Psychiatric Hospital.

The OT Department and burgeoning graduate Program were housed in the newly founded, School of Health & Rehabilitation Sciences (SHRS), on the campus of Indiana University-Purdue University at Indianapolis (IUPUI). Prior to 2004, the BS in OT Program was situated in the Division of Allied Health & Sciences, within the School of Medicine. The second largest program within SHRS, the Program of Occupational Therapy, was an essential component to the School's fruition. Along with nursing, medicine, and dentistry, SHRS became the fourth health and life science school on the IUPUI campus[2].

2010s:

"The Patient Protection and Affordable Care Act (P.L. 111-148) passed requirements for certain insurance plans to cover rehabilitation and habilitation, the habilitation clause resulting from AOTA's lobbying efforts" (2010)[36]. "With licensure passage in Hawaii, OT licensure was achieved in all 50 states and 3 jurisdictions. Implementation of the Excellence in Mental Health Act resulted in the inclusion of occupational therapy as one of the professions that could be covered under the new Certified Community Behavioral Health Centers. Occupational therapy was included in SAMHSA's Primary Behavioral Health Integration Grants. AOTA adopted the Occupational Therapy Practice Framework, 3rd Edition" (2014)[36]. AOTA celebrated 100 years of the Association and the OT profession (2017)!

By 2010, the Indiana University health professions schools (Health and Rehabilitation Sciences, Dentistry, Medicine, Nursing, and Social Work) had long been part of IUPUI, an innovative urban campus that offered more than 200 degree programs taught by approximately 2,500 full-time faculty members to more than 30,000 students. The School of Optometry is located on the Bloomington campus. The IUPUI campus is ranked among the top 15 in the country in the number of first professional degrees it confers and among the top seven in the number of health-related degrees. Befitting their urban setting, the schools of IUPUI have always worked closely with public and private agencies, government, business and industry to provide expertise to the community and to enable students to enrich their education with practical experience. The campus does have a University Conference Center which has services for conferences, seminars, symposia, workshops and institutes. As stated earlier, there are general

---

[16] Over time, this urban hospital was given multiple designations, including City Hospital (1859); Indianapolis General Hospital (1947); Wishard Memorial Hospital (1975); Sidney & Lois Eskenazi Hospital and Eskenazi Health (December 2013).

clinical facilities located on or near the campus – Roudebush VA Medical Center, Wishard Memorial Hospital, and Larue Carter Psychiatric Hospital. In 1997, University Hospital, Riley Hospital for Children, and Methodist Hospital of Indianapolis were consolidated into Clarian Health Partners and renamed IU Health. In 2011, IU Health Partners (formerly Clarian Health Partners) was named among the "Best Hospitals in America" by U.S. News & World Report for 13 consecutive years. For the 2011-12 fiscal year, IUPUI's external research funding reached an all-time high of almost $500 million. The Indianapolis campus of Indiana University was accredited by the Commission of the North Central Association of Colleges and Schools (NCA); now the Higher Learning Commission (HLC). The most recent re-accreditation site visit occurred in 2012. The institution was granted full 10 year accreditation with no requirements for follow-up. The next review for the IUPUI Campus is scheduled for 2022[2].

Programs offered within the four Departments in the School of Health and Rehabilitation Sciences consisted of the following[2]:

- Department of Health Sciences
  - Certificates (initiated 2010)
    - Certificate in Gerontology
    - Certificate in Global Health and Rehabilitation Studies
    - Certificate in Rehabilitation and Disability Studies
  - BS Health Sciences & MS in Health Sciences (this came later in 2010)
  - MPAS -Masters in Physician Assistant Studies (first class admitted in fall 2013)
  - PhD in Health and Rehabilitation Sciences
- Department of Nutrition and Dietetics
  - E-Learning Certificate in Leadership Development in Pediatric Nutrition (discontinued in 2013 due to retirement of Karyl A. Rickard, PhD)
  - MS in Nutrition and Dietetics
- Department of Occupational Therapy
  - MS in Occupational Therapy (Discontinued 2019)
  - Doctor of Occupational Therapy (OTD)
    - Post-Professional OTD (initiated 2014)
    - Entry-Level OTD (initiated 2018)
- Department of Physical Therapy
  - Doctor of Physical Therapy in Physical Therapy (DPT) (initiated 2002)

On a departmental scale, the IU Department of OT mirrored IUPUI's growth and national recognition. As noted previously, due to its status as a new graduate program, the first ACOTE accreditation for the MS in OT program was awarded in 2007, with a five year follow-up (2012).

In 2012, ACOTE awarded accreditation for the MS program with a reaccreditation visit in 10-years (2022)[37]. In addition to the MS program, OT faculty championed the concept of offering a Doctor of Occupational Therapy degree (OTD) at the post-professional level (OTD-PP). In 2009, Janson and Crabtree led a needs assessment to determine whether occupational therapists with master's degrees would be interested in seeking OTD-PP degrees. The

assessment found that both demand and interest were overwhelming positive. Accordingly, a proposal to establish a post-professional OT doctoral program was presented to the new SHRS Dean, Augustine Agho, PhD[17], who, after consulting with Associate Dean Joyce McKinnon, EdD, PT, decided to postpone the proposed OTD-PP degree program due to a previous commitment to initiate a Masters in Physician Assistant Studies (MPAS)[18]. In 2012, Fisher, again, approached Agho about establishing a post-professional OTD degree. Agho requested that another needs assessment be conducted since the original was conducted three years ago. Reaffirming results of the 2009 survey, the second assessment found that considerable support and interest existed for an IU OTD-PP program. In response, a pro forma projected 6 residents and 2 non-resident students for the first cohort. Subsequently, the program was approved by IU and ICHE; and Crabtree was appointed Founding Program Director, Doctor of Occupational Therapy (Post-Professional), within the Department of OT (2012). The first OTD-PP cohort, consisting of five residents and three non-residents, was admitted, June 2015; graduating, August 2016. The second OTD-PP cohort produced ten graduates (two non-residents), August 2016. 2017, Christine Kroll, OTD, MS, OTR, FAOTA, was appointed Interim Director of the OTD-PP program as Crabtree moved toward retirement. The IU OTD-PP program continued to enroll and have admissions beyond the pro-forma developed in 2012-13. It is anticipated that this program would continue to have applicants for another decade; by which time, entry-level in the field will be at the doctorate as mandated by ACOTE[2].

From 2004-2011, the Department of OT had two tenured OT faculty members: Fisher and Crabtree. In 2009, Fisher was promoted to full professor, making him the first OT faculty member in the 50-year history of the academic OT Program to achieve this rank. Fisher felt the bar of full professor was an important accomplishment since he expected junior faculty to achieve promotion to the rank of Associate Professor with tenure; and those with Lecturer and Clinical Appointments to apply for promotion with long term contracts. He believed he needed to not only talk the talk but walk the walk. Fisher's promotion area of excellence was service; with research and teaching attaining highly satisfactory (he had been tenured in teaching excellence at Eastern Kentucky University). In 2011, Justiss received tenure with promotion to Associate Professor; and Scott received tenure in 2013. The Department of OT now had four tenured faculty[2].

In 2014, Liu received tenure and promotion to Associate Professor; and Sharon Pape, MS, OTR, (hired in 2009) received a long term clinical contract and promotion to Senior Lecturer. This was an accomplishment needed to secure the Department's existence and to avoid risk of closure, which had been discussed by campus administration from 2000-2002 due to lack of senior faculty and no research contributions. With five tenured faculty and one with a long term clinical contract, the Department would be difficult to be suspended. Faculty member, Schmid,

---

[17] Agho was hired in 2008 after Dean Sothmann left IUPUI to become the Dean, College of Health Sciences at the Medical University of South Carolina.

[18] The PA program was created; and 3 PA faculty were hired in 2009; one being the founding director Gaylen Kelton, MD, faculty from the IUSOM Family Medicine Division in Department of Medicine. The other two PA faculty left one year after being hired (2010). Three more PA faculty were hired. The program did not receive accreditation on its first attempt but was subsequently approved in 2012.

chose to leave IUPUI to assume a faculty position at Colorado State University. She would have been the sixth faculty member tenured[2].

Fortunately, the Department was able to recruit and appoint Crystal Massie, PhD, OTR, to take Schmid's faculty position. Like Schmid, Massie's expertise was in neuro-rehabilitation, having completed her post-doctoral training at the University of Maryland in Baltimore. Massie was the fourth faculty member to have completed a post-doctoral fellowship experience, well positioning herself for extramural funding. Schmid had done her post-doc training at the Rodebush VA, under Linda Williams, MD, in stroke rehabilitation; while on OT faculty at IUPUI. Justiss completed his post-doc training at University of Florida in driving rehabilitation with William Mann, PhD, OT; and Liu did her post-doc at Boston University in older adult health literacy with Allan Jette, PhD, PT[2].

Because of these researchers and the clinical expertise and recognition of other OT faculty, the Department of Occupational Therapy, in 2009, was ranked by US News and World Reports as #15 out of 150 OT programs; and in 2016, IU OT was ranked #21 out of 160 programs. In 2020, the goal was to remain in the top 10% of OT programs across the country. These were long listed goals for the Department. Under Fisher's leadership and direction, high ranking of the IU OT Program further continued the long tradition of national recognition established by previous great Indiana University Program Directors of Occupational Therapy - Laurencelle and Nathan and Hamant[2].

In 2016, John Applegate, Executive Vice President for University Academic Affairs and Vice President of Regional Campuses, approved IU South Bend Chancellor Terry Allison, PhD, and Dean of Dwyer College of Health Sciences, Mario Ortiz, PhD, RN, FANA, to discuss with Agho the idea of making the future South Bend OTD-E and DPT programs additional sites to the IUPUI OTD-E and DPT programs respectively.

With multiple changes taking place at IUPUI, the Department of OT at IUPUI having achieved the development of the post-professional OTD and the entry-OTD, and his interest in advancing in higher administration, Fisher accepted the position of Dean of Vera Z. Dwyer College of Health Sciences at IU South Bend (IUSB) on March 1, 2017. He would begin his new role as Dean July 1, 2017, giving four months to transition his role as Department Chair to Dr. Patty Scott, who had served as a Department Chair and Program Director of OT at Florida International University in Miami for many years before her appointment in 2007 at IUPUI. With ten years at IUPUI, Scott knew campus administration and processes. She was willing to serve as an "*Interim Chair*" for a year, while the School of Health & Rehabilitation Sciences searched for a new OT Department Chair. Subsequently MacKinnon, was appointed Chair of the Search Committee; and Fisher provided a list of potential successors for his position to Interim Dean, Rebecca Porter, PhD, PT, May 2017[2].

From 2004 to 2017, the following Program changes were implemented:

- Encouraged Sharon Pape, OTD, MS, OTR to initiate / implement OT's role and participation in the Student Outreach Clinic, initiated by the School of Medicine in 2010 OT began to offer services in 2013.

- With advice from OT faculty, transitioned a functional gross anatomy course to be included in the entry- OTD.
- Increased year-2 elective classes from 1-credit to 3-credit hours.
- Established an Annual Professional Development Day Workshop/Conference to thank fieldwork educators for taking IU OT students and for providing a source of continuing competency units (CCUs) needed for IN licenses. Other practitioners were invited as well. This allowed them to see benefits from taking IU OT students and to consider doing so in the future. These Professional Development conferences served as "kick-offs" to academic years, allowing essential interface time for academic faculty and clinical faculty to understand the mission, direction and trends in education, research and practice/service (see Appendix C).
- Launched the Annual Hamant Lectureship. Each year, a distinguished IU OT alum or IU OT faculty member served as invited guest lecturer for a presentation to OT students, faculty, practitioners and others from the academic and local communities.
- Fostered adjunct faculty engaged in active in practice to complement core academic faculty implementing occupation-based courses and others. Adjunct faculty members complimented the laboratory experiences with core faculty workloads and allowed for practitioners to be mentored if considering transition from practice to education/academic careers.
- Since 1973, the number of students accepted per class was capped due to limitations in physical facilities, fieldwork placements, and manageable lab section sizes given limited faculty. This cap could be increased by four students with an additional faculty line and commitments from fieldwork sites.
- OTD-E program:
    - Developed the proposal that went through the University approval process
    - Completed the candidacy application (which addressed 57 of the standards) – this was submitted to ACOTE in April (two months before Fisher left) and
    - ACOTE subsequently granted "Candidacy Status" in August 2017 at their meeting.
    - Had a plan with faculty assignments to new courses with a timeline for their completion. Martina Allen, OTD, OTR, created the database for completed OTD-E courses; and at the time he left, most were done.
    - Functional Gross Anatomy to be taught by the basic sciences in School of Medicine faculty to combined class for OT, PA, and PT students.
    - Functional Neuroscience to be taught by basic sciences in the IUSOM with the same group but including an OT faculty member (Massie) and a PT faculty member.
- The number of OT scholarships tripled.
- Through foundation accounts and other sources, faculty members were partially funded to attend three World Federation of Occupational Therapists (WFOT) Conferences.
- Total number of faculty & staff (2017) : 9 full-time; 7 adjunct; 2.5 staff

- OT Faculty with FAOTA recognition[19] (2017):
    1. Crabtree
    2. Fess
    3. Fisher
    4. Kroll
    5. Scott

Dr. Fisher Departure:

Upon his exit from IUPUI, Fisher, assumed the Dean position of the Vera Z. Dwyer College of Health Sciences at Indiana University South Bend. At the time, this College was comprised of two established Schools, the School of Nursing and School of Applied Health Sciences, which had multiple programs. Fisher's charge was to establish a third School, the a School of Rehabilitation Sciences that would include occupational therapy, physical therapy and Speech Language Pathology Graduate Programs at the IU South Bend – Elkhart Center. In addition, he was to advance the mission of the Dwyer College on the South Bend campus by enhancing existing nursing, radiological sciences, clinical laboratory science, dental hygiene , and an undergraduate health sciences programs[2].

Through Fisher's aforementioned leadership, August 2017, the IUPUI OTD-E program was granted Candidacy Status:

> "At its August 3-6, 2017 meeting, ACOTE considered the Candidacy Application from the Occupational Therapy Doctoral Program at Indiana University, Indianapolis, Indiana, and voted to GRANT CANDIDACY STATUS. As a result of this action, the institution may admit students into the Occupational Therapy Doctoral Program according to the approved timeline (May 2018) and may proceed to the Pre-accreditation Review step of the accreditation process. The Occupational Therapy Doctoral Program at Indiana University, Indianapolis, Indiana, will be included on AOTA's list of programs that are holding Candidacy Status and are eligible to admit students. The due date for the program's Report of Self-Study is July 1, 2020 ..."[38]

July 1, 2018, SHRS merged with the School of Physical Education and Tourism Management (PETM) to become School of Health and Human Sciences (SHHS). The new Department of OT Chair, Terry Petrenchik, PhD, OTR, arrived, September 2018. She stepped down as Chair in April of 2021.

EPILOGUE

IUPUI:

With Petrenchik's resignation as Chair & Program Director of the IUPUI Department of Occupational Therapy in 2021, Julie Bednarski, OTD,Preface MHS, OTR, subsequently was named Program Director, of Occupational Therapy, School of Health & Human Sciences (SHHS), Indiana University. An entry-level Doctor of Occupational Therapy degree currently is offered as a three-year curriculum; and is accredited by AOTA's Accreditation Council for

[19] FAOTA designation is limited to less than 10% of all Occupational Therapists.

Occupational Therapy Education (ACOTE). Additionally, the Post-Professional OTD program was placed on hiatus by Dr. Petrenchik in 2018. It is planned to be restarted in 2022.

IU South Bend (IUSB):

Fisher's charge from Chancellor Terry Allison in 2017 was to establish a BS in Clinical Laboratory Science program; to re-envision the Radiological Science program; and to create a third School in the Dwyer College. This third enterprise, a School of Rehabilitation Sciences, would include Doctor of Occupational Therapy (OTD), Master's Speech Language Pathology[20] (SLP), and Doctor of Physical Therapy (DPT) Graduate Programs at the IU South Bend – Elkhart Center. These disciplines, OT, SLP, and PT, were identified by consultants hired by Allison to ascertain what healthcare programs were needed in the Michiana Region.

Upon Allison's departure in 2018, and the hiring of Chancellor Susan Elrod in 2019, Elrod requested that the Dwyer College not move forward with the doctorate in OT plan but rather begin with the Master of Science in OT. She believed that the mission of the regional campus is to have baccalaureate and master degree programs, not professional doctorates. Once successful with the MSOT Program, IUSB could consider transitioning to the OTD. Because of Elrod's decision, Dean Fisher shared that a PT program would not be possible as PT only allows the DPT as entry-level.

In 2018, the Master of Science Occupational Therapy program (MSOT) was initiated at the Indiana University South Bend campus (IUSB); and in 2020, Sharon Pape OTD, MS, OTR, FNAP, was named Interim Program Director of the MSOT Program. In January 2021, Pape was no longer "interim" status when she became the OT Program Director. Dr. Pape is a Clinical Associate Professor in the School of Rehabilitation Sciences in the Vera Z. Dwyer College of Health Sciences. The mission of the MSOT program "*is to prepare ethical, client-centered, entry-level competent occupational therapists who support the health and well-being of the people of Indiana and the global community.*"[21] The IUSB MSOT program currently has Candidacy Status from the Accreditation Council for Occupational Therapy Education (ACOTE), American Occupational Therapy Association (AOTA); and the Program's onsite visit is scheduled for June 2023. Consisting of 14 students, the first MSOT class was admitted, August 2021. In August 2022, 18 MSOT students are scheduled to be admitted. Beginning August 2023, 20 students will be included in future cohorts.

Future:

The future for Indiana University academic Occupational Therapy programs is bright as these excellent and extensively recognized curricula work together to graduate highly qualified Occupational Therapy practitioners, educators, and researchers. The Bureau Labor Statistics suggests a 17% projected growth in the OT job outlook from 2020-2030. The sky is the limit when mutual objectives are integrated.

---

[20] The Speech & Hearing Clinic at IUSB includes interdisciplinary pediatric evaluations with OT; and Speech Therapy had already started plans to create a Cognition Clinic; an Assistive Technology Clinic; and an Eating, Feeding and Swallowing Clinic.
[21] https://healthscience.iusb.edu/occupational-therapy/about.html

REFERENCES

1. Nathan, C.D., *The history of the Occupational Therapy educational program*. 1981, Indiana University. p. 8.
2. Fisher, T.F., *Overview of Occupational Therapy education at Indiana University 2003-2017* 2017, Indiana University. p. 9.
3. Laurencelle, P., *Preface for IU OT History*, T.F. Fisher and E.E. Fess, Editors. 2019, AOL: AOL.
4. West, W.L., *In Memoriam: Winifred Conrick Kahmann 1895-1982*. Journal of Occupational Therapy, 1982. **36**(7): p. 472-475.
5. Atkins, K.W., *Celebrating 90 years of service: The history of how women have been building better communities for 90 years*. 2012, Junior League of Indianapolis: Indianapolis, IN. p. 12.
6. Andersen, L.T. and K.L. Reed, *The history of Occupational Therapy, the first century*. 1st ed. 2017, Thorofare, NJ: Slack Inc. 397.
7. Nursing, S.o., *Calendar School of Nursing*. 1965, Indianapolis, IN: Indiana University Bulletin. 34.
8. Indiana University - Purdue University Indianapolis Office for Women. *Women Creating Excellence at IUPUI: An Online ExhibitCarol Nathan, Ph.D.* Women Creating Excellence at IUPUI 2020 [cited 2020 May 25, 2020]; Available from: https://ofw.iupui.edu/page(e054d61e-444f-4c6c-8c0c-bd12ddd8bc04).
9. Nathan, C.D., *Curriculum Vita Carol Duke Nathan*, E.E. Fess, Editor. 2010, Carol D. Nathan.
10. News Bureau, *George Rowley*, in *Green Sheet*. 1981, Indiana University- Purdue UniversJty: Indianapolis, IN. p. 4.
11. Hamant, C., *Dates, etc.*, T.F. Fisher, Editor. 2019, AOL: AOL.
12. Fess, E.E., *A history of splinting: to understand the present, view the past*. J Hand Ther, 2002. **15**(2): p. 97-132.
13. American Occupational Therapy Association. *1917-2017 Occupational Therapy celebrating 100 years, important events by decade: Events from 1910-1919*. [Web page] 2017 [cited 2018; Available from: http://www.otcentennial.org/events/1910.
14. American Occupational Therapy Association. *1917-2017 Occupational Therapy celebrating 100 years, important events by decade: Events from 1920-1929*. [Web page] 2017 [cited 2018; Available from: http://www.otcentennial.org/events/1920.
15. Indiana University School of Medicine. *Founding and Early History*. 2018 [cited 2018; Available from: https://medicine.iu.edu/about/history/.
16. Peterson, P. *MARBLEHEAD 101: At one point, Devereux Mansion a sanitarium*. 2013 [cited 2019; Available from: https://www.wickedlocal.com/x766880309/MARBLEHEAD-101-At-one-point-Devereux-Mansion-a-sanitarium?zc_p=1.
17. American Occupational Therapy Association. *1917-2017 Occupational Therapy celebrating 100 years, important events by decade: Events from 1930-1939*. [Web page] 2017 [cited 2018; Available from: http://www.otcentennial.org/events/1930.
18. Bunnell, S., *Conclusions on the care of injured hand in World War II derived from the experiences of the civilian consultant for hand surgery to the Secretary of War.*, in *Surgery in World War II: Hand Surgery*, S. Bunnell, Editor. 1955, Office of the Surgeon General: Washington, DC.
19. American Occupational Therapy Association. *1917-2017 Occupational Therapy celebrating 100 years, important events by decade: Events from 1940-1949*. [Web page] 2017 [cited 2018; Available from: http://www.otcentennial.org/events/1940.
20. Buchanan, F.a. *Helen Anita Slominski 1922-2010*. 2010; Available from: http://tributes.com/obituary/show/89241344.
21. University, I. *IUPUI Spirit of Philanthropy Award 2005: Anita Slominski*. [Website] 2005; Available from: https://honorsandawards.iu.edu/search-awards/honoree.shtml?honoreeID=7782.

22. IndyStar. *H. Anita Slominski,*. [Web page] 2010 [cited 2020; Available from: https://www.legacy.com/obituaries/indystar/obituary.aspx?n=h-anita-slominski&pid=144951862.
23. American Occupational Therapy Association. *1917-2017 Occupational Therapy celebrating 100 years, important events by decade: Events from 1950-1959*. [Web page] 2017 [cited 2018; Available from: http://www.otcentennial.org/events/1950.
24. Laurencelle, P., *Addition to OT History written by Professor Nathan provided April 2013 By Patricia Laurencelle, PhD, OTR, FAOTA*. 2013, Indiana University. p. 2.
25. Association of Schools of Allied Health Professions. *ASAHP - About*. [Website] 2018 [cited 2019; Available from: http://www.asahp.org/about/.
26. American Occupational Therapy Association. *1917-2017 Occupational Therapy celebrating 100 years, important events by decade: Events from 1960-1969*. [Web page] 2017 [cited 2018; Available from: http://www.otcentennial.org/events/1960.
27. American Occupational Therapy Association. *1917-2017 Occupational Therapy celebrating 100 years, important events by decade: Events from 1970-1979*. [Web page] 2017 [cited 2018; Available from: http://www.otcentennial.org/events/1970.
28. Hamant, C., *Riley Wagons*, E.E. Fess, Editor. 2019. p. 1.
29. Health, R.C.s. *A Brief History of the Riley Hospital for Children Red Wagon*. [Video] 2018; Includes reference to Hamant as originator of the wagons]. Available from: https://www.facebook.com/watch/?v=334893707271942.
30. Kasch, M. *Certification: Excellence in Hand Therapy*. [Web page] 2000 [cited 2018 12/29/2018]; Available from: https://www.asht.org/about/who-we-are/history/certification-excellence-hand-therapy.
31. American Occupational Therapy Association. *1917-2017 Occupational Therapy celebrating 100 years, important events by decade: Events from 1980-1989*. [Web page] 2017 [cited 2018; Available from: http://www.otcentennial.org/events/1980.
32. The Washington Post. *George Rowley*. Appointments [Newspaper] 1997 October 20, 1997; Available from: https://www.washingtonpost.com/archive/business/1997/10/20/appointments/60e9358e-41bd-4c5c-9840-088b43ec2537/.
33. American Occupational Therapy Association. *1917-2017 Occupational Therapy celebrating 100 years, important events by decade: Events from 1990-1999*. [Web page] 2017 [cited 2018; Available from: http://www.otcentennial.org/events/1990.
34. American Occupational Therapy Association. *1917-2017 Occupational Therapy celebrating 100 years, important events by decade: Events from 2000-2009*. [Web page] 2017 [cited 2018; Available from: http://www.otcentennial.org/events/2000.
35. Eskenazi Health. *Eskenazi Health: History*. 2016 [cited 2018; Available from: http://www.eskenazihealth.edu.
36. American Occupational Therapy Association. *1917-2017 Occupational Therapy celebrating 100 years, important events by decade: Events from 2010-2019*. [Web page] 2017 [cited 2018; Available from: http://www.otcentennial.org/events/2010.
37. Fisher, T.F., *Draft IU OT History*, E.E. Fess, Editor. 2019, AOL: AOL.
38. ACOTE Online Staff and H. Stagliano, *ACOTE action on cadidacy status - Indiana University*. 2017, AOTA: Bethesda, MD. p. 4.

APPENDIX A

Indiana University Occupational Therapy Faculty, Practitioners, Graduates

Recognitions & Awards

Appendix A1: Indiana University Occupational Therapy Faculty, Practitioners, Graduates

United States Department of Defense

Defense Meritorious Service Award

1945 Winifred Conrick Kahmann, OTR, FAOTA

Defense Advisory Committee on Women in the Services (DACOWITS)

1960-63 Winifred Conrick Kahmann, OTR, FAOTA

Appendix A2: Indiana University Occupational Therapy Faculty, Practitioners, Graduates

American Occupational Therapy Association Recognitions & Awards

100 Most Influential

2017 Winifred Conrick Kahmann, OTR, FAOTA
2017 A. Joy Huss, MS, OTR, RPT, FAOTA
2017 Thomas F. Fisher, PhD, OTR, CCM, FAOTA

Slagle Lecture

1973 A. Joy Huss, MS, OTR, RPT, FAOTA
1978 Shereen D. Farber, PhD, OTR, FAOTA

Award of Merit

1952 Winifred Conrick Kahmann, OTR, FAOTA
1984 Celestine Hamant, MS, OTR, FAOTA
1986 Anita Slominski, OTR, FAOTA
2016 Thomas F. Fisher, PhD, OTR, CCM, FAOTA

Fellow American Occupational Therapy Association

1973 A. Joy Huss, MS, OTR, RPT, FAOTA
1973 Patricia Laurencelle, PhD, OTR, FAOTA
1973 Margaret Rood, OTR, FAOTA
1973 Anita Slominski, OTR, FAOTA
1975 Winifred Conrick Kahmann, OTR, FAOTA
1977 Celestine Hamant, MS, OTR, FAOTA
1978 Shereen D. Farber, PhD, OTR, FAOTA
1978 Erna Simek, MBA, OTR, FAOTA
1979 Carol Duke Nathan, AM, OTR, FAOTA
1982 Elaine Ewing Fess, OTD, MS, OTR, CHT, FAOTA
1982 Zona Roberta Weeks, PhD, OTR, FAOTA
1984 Judy Rae Feinberg, PhD, OTR, FAOTA
1985 Catherine Erickson Barrett, EdD, OTR, FAOTA
1985 Patricia Ann Griswold, MS, OTR, FAOTA
1993 Jeffrey L. Crabtree, OTD, MS, FAOTA
1993 Susan Swinehart, OTD, MS, OTR, FAOTA
1994 Thomas F. Fisher, PhD, OTR, CCM, FAOTA

Fellow American Occupational Therapy Association (continued)

1994 Erica B. Stern, PhD, OTR/L, FAOTA
1997 Jacquelyn L. Chamberlin, OTR/L, FAOTA
1997 Mary Corcoran, PhD, OTR, FAOTA
2002 Brent H. Braveman, PhD, OTR/L, FAOTA
2002 Patricia J. Scott, PhD, MPH, OT, FAOTA
2012 Gerry Conti, PhD, OTR, FAOTA
2013 Leora Comis, MS, OTR, FAOTA
2014 Lucinda Dale, EdD, OTR, CHT, FAOTA
2015 Becky Barton, DHS, OTR, FAOTA
2016 Denise K. Donica, DHS, OTR, FAOTA
2016 Christine Kroll, OTD, OTR, FAOTA
2017 Sharon Rose Flinn, PhD, OTR, CHT, FAOTA
2018 Arlene A. Schmid, PhD, OTR
2021 Victoria Garcia Wilburn,

Appendix A3: Indiana University Occupational Therapy Faculty, Practitioners, Graduates

Indiana University Recognitions & Awards

School of Health and Rehabilitation Sciences

Distinguished Alumni[22]

2009 Valerie Hill, PhD, OTR
2010 Elaine Ewing Fess, OTD, MS, OTR, CHT, FAOTA
2014 Thomas F. Fisher, PhD, OTR, CCM, FAOTA
2018 Robert Hanlon, PhD, ABPP

Faculty Emeriti

T. Kay Carl, Assistant Professor Emeritus
Jeffrey Crabtree, Associate Professor Emeritus
Thomas F. Fisher, Dean Emeritus and Professor Emeritus of Health Sciences
Celestine Hamant, Associate Professor Emeritus
Nancy Lamport, Associate Professor Emeritus
Carol D. Nathan, Associate Dean of the Faculties and Associate Professor Emeritus
Patricia Scott, Professor Emeritus
Erna Simek, Associate Professor Emeritus

Department of Occupational Therapy

Hamant Lecture Series

2014 Patricia Laurencelle, PhD, OTR, FAOTA

---

[22] With the exception of 2016 when no recipient was selected, this SHRS recognition was bestowed annually over a ten-year span for a total of nine Awards:

- Four OT alumni recipients (2009, 2010, 2014, 2018)
- Four PT alumni recipients (2012, 2013, 2015, 2017)
- One Nutrition & Dietetics alumna recipient (2011)

Hamant Lecture Series (continued)

2015 Gale Hersch, PhD, OTR; Nancy Lamport, MS, OTR; Margaret Coffey, MA, COTA, ROH
2016 Shereen D. Farber, PhD, OTR, FAOTA
2017 Erica Stern, PhD, OTR/L, FAOTA
2018 Sharon Rose Flinn, PhD, OTR, CHT, FAOTA
2019 Nancy M. Cannon, OTR, CHT

APPENDIX B

Annual Professional Development Workshops

Indiana University
School of Health & Rehabilitation Sciences
Department of Occupational Therapy

Annual Professional Development Workshop to Initiate Academic Year (August)

Year	Presenter	Presentation Topic
2005	Joan Rogers, PhD, OTR, FAOTA Professor and Chair, Department of OT, School of Health & Rehab, University of Pittsburgh	*Establishing and Maintaining a Research Enterprise*
2006	Karin Opacich, PhD, OT, FAOTA Consultant recommended by the Accreditation Council for OT Education	*Creating a Graduate Curriculum: Nuts and Bolts*
2007****	Carolyn Baum, PhD, OTR, FAOTA Professor of Neurology and Occupational Therapy, Washington University, St. Louis, MO	*Advocating for Occupation-Based Practice*
2008	Gary Kielhofner, DPH, OT, FAOTA & Renee Taylor, PhD Professors of Occupational Therapy, University of Illinois at Chicago, IL	*Infusing Occupation in the Graduate Curriculum*
2009	Joy Hammel, PhD, OTR, FAOTA Professor of Occupational Therapy, University of Illinois at Chicago, IL	*Supporting Participation Across the Lifespan*
2010	Mark Di Corcia, PhD, OTR Vice Chair of OB/GYN & Sandra Petronio, PhD Professor of Communications, IU School of Medicine, Indianapolis, IN	*Professional Communication in Occupational Therapy*
2011	Daniel Pesut, PhD, RN, FAAN Professor of Nursing /Associate Dean in the Health Professions: Teaching/Learning of Research, IU School of Nursing and Research Scholarship, Indianapolis, IN	*Exploring Reflective Clinical Reasoning*
2012	Megan Palmer, PhD Assistant Dean IU School of Medicine Assistant Professor in School of Education, Indianapolis, IN	*Millennium Learners, Peer Review and Competencies: Forming the Future*
2013	Doris Pierce, PhD, OTR, FAOTA Professor & Endowed Chair of Occupational Therapy , Eastern Kentucky University; Adjunct Professor in Rehabilitation Sciences, University of Kentucky, Lexington, KY	*Occupational Science: Four Levels of Knowledge for OT*

2014+++	Sherry Muir, MOT, OTR Assistant Professor, Department of Occupational Science and Occupational Therapy, College of Health Professions, St. Louis University, St. Louis, MO	*Occupational Therapy and Primary Care*
2015	Christine Metzler Chief Public Affairs Officer at the American Occupational Therapy Association	*Advocating for Occupational Therapy* & Clients *They Serve*
2016	*Post-Professional Degree (OTD) Graduates present their respective Culminating Research Projects*	
2017	*Post-Professional Degree (OTD) Graduates present their respective Culminating Research Projects*	

**** Began inviting Fieldwork Educators and Students

+++ Began charging for attendance

APPENDIX C

List of Abbreviations

List of Abbreviations

ACOTE	Accreditation Council for Occupational Therapy
ADL	Activities of Daily Living
AJOT	American Journal of Occupational Therapy
AOTA	American Occupational Therapy Foundation
AOTCB	American Occupational Therapy Certification Board
AS	Associate of Science
ASAHP	Association of Schools of Allied Health Professions
ASHT	American Society of Hand Therapists
BOTC	Black Occupational Therapy Caucus
BS	Bachelor of Science
BU	Boston University
CCM	Certified Case Manager
CEUs	Continuing Education Units
CHT	Certified Hand Therapist
COTA	Certified Occupational Therapy Assistant
CP	Cerebral Palsy
DAC	Department Advisory Council
DPT	Doctor of Physical Therapy
DRGs	Diagnostic Related Groups
EdD	Doctor of Education
FAOTA	Fellow American Occupational Therapy Association
HIPAA	Health Insurance Portability and Accountability Act
HLC	Higher Learning Commission
ICHE	Indiana Commission on Higher Education
IOTA	Indiana Occupational Therapy Association
IU	Indiana University
IU MSOT	Indiana University Master of Science in Occupational Therapy
IUMC	Indiana University Medical Center
IUPUI	Indiana University – Purdue University Indianapolis
IUSB	Indiana University – South Bend
JAMA	Journal of the American Medical Association
JLI	Junior League of Indianapolis
MA	Master of Arts
MD	Doctor of Medicine
MPAS	Masters in Physician Assistant Studies
MPh	Masters in Public Health
MS	Master of Science
NBCOT	National Board for Certification in Occupational Therapy
NCA	Commission of the North Central Association of Colleges and Schools

NSPOT	National Society for the Promotion of Occupational Therapy
OT	Occupational Therapy
OTA	Occupational Therapy Assistant
OTD	Doctor of Occupational Therapy
OTD-E	Entry-Level Doctor of Occupational Therapy
OTD-PP	Post Professional Doctor of Occupational Therapy
OTR	Registered Occupational Therapist
PA	Physician Assistant
PAMs	Physical Agent Modalities
PETM	School of Physical Education and Tourism Management
PhD	Doctor of Philosophy
PT	Physical Therapy
RMA	Riley Memorial Association
SAHS	School of Allied Health Sciences
SHHS	School of Health & Human Sciences
SHRS	School of Health & Rehabilitation Sciences
SIS	Special Interest Sections
UAB	University of Alabama at Birmingham
UF	University of Florida
VA	Veterans Administration
WFOT	World Federation of Occupational Therapists
WWI	World War I
WWII	World War II

INDEX

Alphabetical Listing of Included Individuals

INDEX

Alphabetical Listing of Included Individuals

A

B

C

D

E

F

G

H

I

J

K

L

M

N

O

P

R

S

T

V

W