



ConnOTA moves to Eliminate OT/OTA Licensure Fees

OT/OTA Licensure Fee Update – A Big Win for Connecticut OT Practitioners

The Connecticut House and Senate have officially passed **Senate Bill 1246**, which proposes **eliminating licensure fees** for occupational therapists (OTs) and occupational therapy assistants (OTAs) as part of the Governor's budget. This is a major step toward reducing financial barriers for practitioners statewide.

ConnOTA's Advocacy in Action

The Connecticut Occupational Therapy Association (ConnOTA) proudly provided testimony in support of this legislation, ensuring our profession's voice was heard loud and clear at the Capitol. This success reflects the power of advocacy and the importance of a united professional community.

What's Next?

The bill now heads to the Governor's desk for signature. If signed into law, the removal of licensure fees will take effect starting with the **next renewal period**.

Important Reminder

All OTs and OTAs must still pay their licensure fees for the **current renewal cycle**—be sure to meet your renewal deadline to maintain your license.

Stay tuned for updates as we await the Governor's signature on this historic win for Connecticut's OT community!



Who were our biggest contributors?

Joyce E Rioux, Co-chair Government Affairs

Latasha Dionne, Co-chair Government Affairs

Andy Markowski, ConnOTA Lobbyist

Leading with Empathy: An OT's Journey in Mental Health

An Interview with Peter Tascione, OTR/L

Tell us a little about your journey into occupational therapy and what led you to specialize in mental health? I became interested in mental health (also termed “behavioral health” and “psychosocial service”) care delivery after my required fieldwork as a student in an inpatient behavioral health unit of a local hospital. My supervisor had high expectations and was at the same time very supportive. When we wrapped up, I received positive feedback from patients and clinicians working in other disciplines as well, such as social work and nursing, so I really felt like this is something I can do effectively long-term.

What does a typical day look like for you in your current role? I have been the OT Supervisor for a behavioral healthcare facility for the past 11 and a half years. The day-to-day responsibilities vary, and plans can change suddenly based on hospital and patient needs. I learned it's best to be ready to reprioritize so flexibility is key, as I imagine it would be in most other OT roles. I'm responsible for assembling reports for my director such as productivity and charting audits which can be time consuming. I also maintain a small caseload of 4 to 5 individual patients along with facilitating one treatment group per week.

I am on some committees: one that looks at ways we can reduce and eliminate use of physical restraints, which is an intervention used only when absolutely necessary for a person's safety or safety of others. I co-chair the Fall Risk Reduction Committee.

So my time is divided between office tasks, meetings and being on treatment units, usually daily, which I enjoy.

How do you see occupational therapy uniquely contributing to the recovery and well-being of individuals in mental health settings? How we approach preparation for discharge through development and maintenance of independent living skills will depend on an individual's diagnosis and their unique circumstances. We may work, for example, with a person who has experienced developmental trauma and has low self-esteem and has a pattern of self-injurious behavior. Focusing on building a healthy self-concept and helping to reframe their past and instilling hope that they are not completely defined by it would be important. I also like to work on helping to see themselves in a different role in the community vs. as a patient in a psychiatric facility. Teaching self-regulation skills such as breath work, mindfulness and use of external coping strategies that may fulfill a sensory need often comes into play.

Someone with no history of self-injury who experiences psychiatric symptoms such as auditory hallucinations and copes with them by using substances would need help building a balanced routine and finding meaningful activities of interest. Depending on their stage of change, interventions such as Motivational Interviewing would likely come into play. I had the opportunity to participate in a 3-day course about 2 years ago to build skills in this technique.

I would mention also that my practice setting depends heavily on our team to complete thorough assessments of cognitive / physical performance and the impact on basic and instrumental ADLs in order to make



“Helping someone reframe their past and instill hope is central to our work..”

recommendations for appropriate living settings in the community, such as a group homes, supervised apartments or perhaps home with family depending on the individual's specific situation. We spend a great deal of time writing reports on our findings. Lastly, we are called upon from time to time to evaluate a prospective discharge environment for safety needs and perhaps to train staff in the discharge placement on sensory needs, if indicated to help the discharge go successfully

What's one therapeutic strategy, group, or intervention you feel particularly passionate about?

Having the chance to build a trusting and empathic rapport with a person with the goal of helping to see themselves as worthy and capable of a life outside of the hospital is surely part of what I feel truly blessed to be able to do each day.

As a male in a profession traditionally dominated by women, what has your experience been like?

It has something I never really had to acclimate to since my OT class back in the day had somewhere around 120 students, most of whom were female. I feel I can be an effective supervisor, supervisee, co-worker and hands-on clinician if I treat everyone with respect and honesty.

Do you feel your gender ever plays a role in how clients respond to you? In this setting, working on a sensitive issue like hygiene for example, gender needs to be considered much more carefully, whereas in an SNF setting, where I worked at one point, it was expected that a male would treat a female and vice versa.

What could you say to other men considering a career in mental health? I would say not to let gender factor into your decision and to anyone considering this field of practice, be open-minded and give it a chance. If you like to use your creativity, you'll have ample opportunities! If you don't consider yourself in that light, there are plenty of colleagues around with whom you can collaborate for the sake of our patients. This especially comes into play because in this setting, we are rather limited in what we can safely do and provide. As patients improve in their conditions, these restrictions do tend to lessen, though.

If you could change one thing about how mental health care is delivered or perceived, what would it be? I wish we had more group homes and supervised apartments, so more resources in this direction would be great. I also wish there were more advances in medications used to treat schizophrenia that reduce symptoms without side effects such as weight gain and other physical problems. These side effects can be very upsetting to the patients as then they usually end up taking even more medications to reduce side effects.

As a supervisor, what qualities do you think are most important in a strong OT leader? In my experience, I'm careful about the language I use. I prefer expressions such as "our team" in favor of "my staff" as I want people to feel appreciated for their unique contributions versus feeling like this is just another job. So when we're interviewing candidates, I ask about values and what they think they can bring to the team and why they are choosing mental health at this stage in their career. It's also important to let a team member have input into shaping their practice according to their individual gifts and talents because they have ownership in their career and feel good about coming to work. So I definitely believe this approach will improve outcomes. Also, I want people to feel like they can come to me to resolve a problem as a collaborator, not feel nervous that I am going to be directive when there is no need.

How do you balance the clinical demands with the administrative and leadership aspects of your supervisory role? This requires prioritizing, and to the extent possible, staying on schedule and organized. That said, flexibility will also play a large part. So if I can't get to something on a given day that I expected to handle, I'm very thankful that I have a director that understands this and allows me to rearrange things as I see fit.

What lessons have you learned from supervising others that have made you a better clinician yourself? Well, I'm always seeking to learn from members of the OT team. Interestingly, I have had no problem with hiring people who may have spent a bulk of their careers in say, physical rehab because they bring a varied skill set to the table. So that's definitely a lesson I have learned since it has really worked out on behalf of our patients!

2025 Fall Conference Updates



Friday, October 24, 2025 -

Full Day Event

Prices:

Members: \$150

Non-Members: \$195

Student Member: \$120

Student Non-Member \$150

Call for Papers – Update

The call for proposals is now closed, and we are excited to share that we received many outstanding submissions! Our review process is underway, and we look forward to announcing a diverse lineup of sessions—offering many opportunities to learn, connect, and explore innovative ideas in occupational therapy. Stay tuned for more details on the upcoming conference program. Questions? Email professionaldevelopment@connota.org.



What other attractions are in mystic?



1. **Mystic Seaport Museum** – Step back in time at this living history museum with historic ships, a recreated 19th-century village, and interactive maritime exhibits.
2. **Mystic Aquarium** – Home to beluga whales, penguins, and hands-on marine experiences, perfect for a summer family outing.
3. **Olde Mistick Village** – An open-air shopping village with unique boutiques, local dining, and seasonal events in a charming New England setting.



Free COPE & CAPABLE Training Opportunity for CT OTs

Connecticut occupational therapists now have the rare chance to complete *Care of Older People in their Environment (COPE)* and *Community Aging in Place – Advancing Better Living for Elders (CAPABLE)* training **at no cost**—a value of approximately \$1,000!

Both are **evidence-based, home and community-based programs** that strengthen your ability to support older adults and their caregivers:

COPE – Developed by Drexel University, this program pairs an OT and RN as coaches for informal dementia caregivers.

- Boost caregiver confidence and problem-solving skills
- Provide strategies to adapt the home environment
- Reduce functional dependency
- Address behavioral challenges in individuals with dementia

CAPABLE – Created by Johns Hopkins University, this model uses a team approach: OT, RN, and handyworker collaborate directly with older adults and caregivers.

- Increase functional independence and safety
- Reduce depression and enhance motivation
- Achieve client-directed goals for aging in place

These programs are often implemented in the Connecticut Home Care Program for Elders (CHCPE) and other Medicaid waivers, helping people age safely at home and avoid unnecessary nursing home placement.

Deadline to complete training: September 30, 2025

To register or learn more, contact:

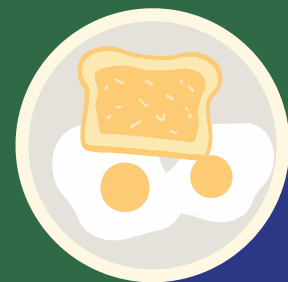
Hye-Yeon Rye Kim at hye-yeon.ryukim@ct.gov

Don't miss this chance to **expand your skills, add sought-after credentials, and impact lives across Connecticut**—all for free!



More Info Coming Soon

Legislative Breakfast



ConnOTA is now a part of the **New England Collaborative**

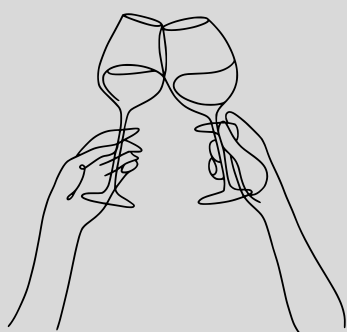
What does this mean?

ConnOTA members can now attend conferences from the following states at **member prices:**

Maine, New Hampshire, Massachusetts, Vermont, Rhode Island

Summer Meet-Up

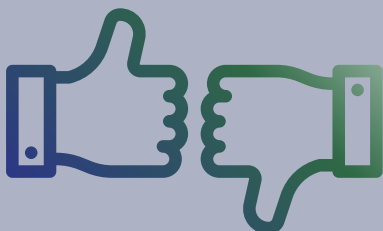
AUGUST 14, 2025



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What do you want to see
from ConnOTA?

FILL OUT OUR INTEREST SURVEY ON
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