

**National Recreation and Park Association
National Therapeutic Recreation Society**

Standards of Practice for a Continuum of Care in Therapeutic Recreation

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Part I Standards of Practice

Introduction

The standards of practice document is a companion document to the NTRS definition of therapeutic recreation, vision and mission, and code of ethics. These documents are available on the NTRS website. The constructs in these foundational documents undergird the Standards of Practice. The philosophical context implied in these foundational documents is inherent with the application of the NTRS Standards of Practice to particular delivery settings. Congruency of the setting operational philosophy with the NTRS statements is essential if the validity of the Standards of Practice is to be maintained.

Purpose of Standards of Practice

Standards of practice define a set of values and provide a means to evaluate the practice of therapeutic recreation. Professional standards of practice incorporate internal standards generated from within the profession (ethics codes, for example) and external standards generated by regulatory bodies outside of the profession (JCAHO, CARF, CMS, assessment standards or state and county health inspection standards, for example) while defining the scope and dimensions of a service. Thus, professional standards of practice provide the criteria to judge service quality according to internal and external standards. A scope of practice or service defines a minimal level of service and consumer well being.

Standards of practice define the role of professionals and the manner in which the professional carries out his or her role as a professional. They establish accountability measures for professional practice and identify the benchmarks that document quality. The practice of therapeutic recreation is interpreted to consumers, caregivers, colleagues, and the general public through standards of practice documents.

Standards of practice have a number of benefits and uses. First and foremost focus is placed on the consumer and his or her participation in service delivery and evaluation. Effective management is promoted through a system of accountability. By using the standards as a self-assessment tool, the professional is assisted in the preparation of survey documents for external program reviews and accreditations. As a planning tool, standards of practice integrate and align the activities necessary to deliver quality services. Lastly, the use of standards of practice encourages on-site education and coordination of interdisciplinary efforts.

Developing Standards of Practice for a Continuum of Care in Therapeutic Recreation

The standards have been enhanced and developed from the 1995 edition, Standards Of Practice For Therapeutic Recreation Services And Annotated Bibliography, and the Guidelines For The Administration of Therapeutic Recreation Services (1990). Initially, a panel of experts reviewed the standards to note missing or inappropriate terms and concepts. The standards underwent review and revision by the Board of Directors of

NTRS, NTRS Committee Chairs, audiences attending the NTRS Institutes in Phoenix (2000), Denver (2001), and Tampa (2002); delegates at the TR Forum and the Midwest Therapeutic Recreation Symposium, and various state conferences between 2000-2002. A committee having representation from in-patient, day treatment, and outpatient settings agreed upon modifications that addressed consumers representative of the populations across the care continuum.

Two foundational assumptions are implied in this edition of the Standards of Practice. One assumption is that the NTRS definition, vision, mission, and Code of Ethics guide the professional implementation of the Standards of Practice. A second assumption is that the professional is qualified to practice as a CTRS by the National Council for Therapeutic Recreation Certification standards. Consequently, the 1997 Job Analysis was a foundational document considered as the standards were developed. Each standard is presented with a definitional statement followed by bullets that outline interpretation criteria.

A glossary of terms includes interpretations of words and phrases used in this document. In the reference section, resources on standards in general and specific regulatory bodies are cited. The publication concludes with identification of the individuals instrumental to the development of this edition of the NTRS Standards of Practice.

Standards of Practice for a Continuum of Care in Therapeutic Recreation National Therapeutic Recreation Society

Standard One: Therapeutic Recreation (TR) Process

The therapeutic recreation specialist uses a systematic and purposeful process that consists of assessment, planning, implementation, and evaluation to create therapeutic recreation programs that benefit the participant's health, functional status, personal development and quality of life. The therapeutic recreation assistant contributes to this process under the supervision of the therapeutic recreation specialist.

A. Assessment

The therapeutic recreation personnel (specialist) follow(s) a written plan for assessing and reassessing physical, emotional, cognitive, social, spiritual and leisure behaviors; functional abilities and skills; and lifestyle needs, strengths, preferences, and expectations of participants to ascertain relevant factors impacting the design of individual and comprehensive program plans. Assessment findings: 1) provide the foundation for planning program delivery; 2) provide a method of participant and program evaluation; 3) provide a tool for quality improvement; and 4) provide a baseline for efficacy research.

- Regular (scheduled) and periodic review of assessment and reassessment procedures/tools are conducted.
- The assessment process provides information on participant's functional abilities and skills, needs, strengths, preferences, and expectations.
- The assessment process uses standardized assessment procedures or accepted practices appropriate to the program focus and participant's needs.

- The participant and any identified caregivers; family and significant others participate in the assessment process.
- The therapeutic recreation specialist obtains pertinent background information about the participant from relevant others and integrates this information along with the information collected into the planning process.
- The therapeutic recreation assistant accepts assignments from the therapeutic recreation specialist commensurate with his/her demonstrated competence. Assessment responsibilities for the therapeutic recreation assistant may include: record review, interview, direct observation, and questionnaire administration.

B. Planning

The therapeutic recreation specialist uses assessment information to develop goals and objectives, content and processes, an evaluation plan and operational guidelines to manage and implement participant-oriented programs and services. Three types of plans may exist: operational plans for the management of the department, specific therapeutic recreation service plans for delivery of services offered, and individual intervention plans used with each participant. The therapeutic recreation assistant may assist in the planning process under the supervision of the therapeutic recreation specialist.

- The therapeutic recreation specialist develops a written plan of operation for therapeutic recreation programs/services in accordance with the agency operational plan. This plan should include: vision, mission, objectives, policies and procedures, personnel criteria and practices, protocols and service plans, quality improvement monitors, ethical standards, research and evaluation procedures, safety and risk management directives, scope of service, and mechanisms for program review and participant feedback. The therapeutic recreation assistant may contribute to the development of the written plan under the supervision of the therapeutic recreation specialist.
- The therapeutic recreation specialist prepares specific written therapeutic recreation service plans, which are recorded in the plan of operation, to guide the delivery of specific programs and services and the inclusion of participants in the therapeutic recreation process. Contents of the plan may include: goals, objectives, facilitation techniques and interventions, leadership and supervision strategies, resources, safety and risk procedures, quality improvement monitors, formative and summative evaluation measures and participant feedback mechanisms. The therapeutic recreation assistant may contribute to the development of the service plans under the supervision of the therapeutic recreation specialist.
- The therapeutic recreation specialist prepares individual intervention plans that are documented in agency records when required. The plans may include but are not limited to: referral information, assessment and progress data, participant diagnosis and needs, goals, objectives, outcome measures, restrictions, contraindications, limitations and precautions, facilitation techniques and interventions employed, referral, discharge, after-care, and follow-up criteria, quality monitoring and evaluation criteria, and safety and risk protocols. The therapeutic recreation assistant may contribute to the development of the individual intervention plan under the supervision of the therapeutic recreation specialist.

- There are written policies and procedures in the operational manual concerning the method of: referral, assessment, reassessment, registration, documentation/progress, billing, reimbursement, and program placement methods or approval necessary for participant involvement in therapeutic recreation services.
- The plans are developed with interdisciplinary and inter-agency participation, family, caregivers, and significant others.
- Participant plans accommodate participant's culture, age, gender, sexual preference, physical, spiritual, social, educational, and economic backgrounds and any related diversity need.
- Participant plans recognize and promote inclusion throughout the therapeutic recreation process.

C. Implementation and Operations

The therapeutic recreation specialist establishes a therapeutic relationship, creates a safe environment and facilitates and supervises therapeutic recreation programs/services. The therapeutic recreation assistant shares responsibility for establishing a therapeutic relationship, creating a safe environment and facilitating therapeutic recreation programs/services.

- Participants, caregivers, and significant others assist in and/or are encouraged to assist in program/service implementation.
- Formative evaluation occurs in accordance with the standards of regulatory agencies and includes effectiveness and quality improvement outcome measures.
- Goals and plans are modified based on participant needs, progress, changes in status, and formative evaluation results.
- Programs and services are scheduled regularly and a comprehensive schedule is established in cooperation and coordination with agency services.
- As a result of formative evaluations, the therapeutic recreation specialist reports changes in the participant's status and, if deemed necessary, reassesses the participant.

D. Evaluation

The therapeutic recreation specialist collects and analyzes summative data to make subsequent decisions about the individual participant's plan and specific therapeutic recreation programs and services according to agency evaluation and program protocols. The therapeutic recreation assistant may assist in the collection of data; she/he reports this information to the therapeutic recreation specialist. The therapeutic recreation assistant may contribute to the analysis and subsequent decision-making process.

- Established agency evaluation and protocols govern documentation and collection of data.
- Participant and comprehensive summative evaluation demonstrate the effectiveness of programs/services in accordance with standards of regulatory agencies, including effectiveness and quality improvement measures to support research and grant initiatives.
- Goals and plans are continued, modified, or discontinued according to evaluation results and participant response.

- A plan for continuity of care/service (referral, discharge, after-care, follow-up) is developed with participants, caregivers, and team members and assists participants in transitioning to appropriate programs/services.

Standard Two: Participant Involvement

The therapeutic recreation (specialist) personnel support(s) participant, caregiver, family, and significant other involvement in the therapeutic recreation process and create(s) opportunities to incorporate and empower the participant, caregiver, family and significant others during the therapeutic recreation process.

- Plans include opportunities for feedback, adaptation and modification to accommodate participant needs.
- Plans evaluate the improvement or lack of progress, change in participant conditions and expectations.
- The therapeutic recreation (specialist) personnel create(s) opportunities for participant input and feedback that may include, but are not limited to, advisory committees, advocacy networks, patients' rights groups, caregiver support groups, focus groups, friends.
- Reactions of the participant to the program/services and input into participant goals are regularly recorded and reported.
- Plans include referral sources identified by participants, caregivers, family, and significant others.
- The therapeutic recreation (specialist) personnel recognize(s) and encourages the right of the participant to make choices regarding the content and process of programs including the choice of not participating.

Standard Three: Interventions and Facilitation Techniques

The therapeutic recreation (specialist) personnel use(s) interventions and facilitation techniques to promote changes that empower the individual toward improvement in his/her functional skills, leisure, health, personal development and quality of life.

- The therapeutic recreation (specialist) personnel use(s) activity and task analyses to select, modify, design individual and group experiences that enable participants to achieve their goals and result in measurable outcomes and documented benefits.
- The therapeutic recreation specialist selects interventions and facilitation techniques to achieve identified and desired outcomes and that comply with protocols developed for diagnostic groups and activities. The therapeutic recreation assistant may assist in the selection of interventions and facilitation techniques.
- The therapeutic recreation (specialist) personnel, as member(s) of the team and in cooperation with the participant, caregivers, family, and significant others selects interventions and techniques relevant to the participant's continuity of care/service.
- Based on the participant's needs, and financial and supportive resources, the therapeutic recreation (specialist) personnel schedule(s) the frequency, duration, and intensity of the interventions and techniques in coordination with other disciplines serving the participant.

Standard Four: Documentation

The therapeutic recreation specialist documents and records information; periodically reviews and updates documents; and maintains records on the management of programs and services to ensure accountability, effectiveness and compliance with regulations and standards. When the therapeutic recreation assistant documents and records information, the therapeutic recreation specialist conducts periodic reviews of the documentation.

- The assessment and reassessment results are documented in participants' and/or agency plans in a timely fashion, in compliance with regulatory standards by therapeutic recreation personnel (specialist).
- Plans, operational, service, and/or individual, are documented in individual and agency records.
- Documentation of involvement may occur in the individual intervention plans and/or the specific therapeutic recreation service plans and is completed by the therapeutic recreation (specialist) personnel who has(have) provided the service.
- The therapeutic recreation (specialist) personnel who has(have) provided the program or service documents the frequency, duration, interventions, facilitation techniques and nature of the participant's involvement.
- The therapeutic recreation specialist counter signs, reviews and approves documentation when a therapeutic recreation intern or adjunct therapist provides the programs/services.
- Records are reviewed and updated regularly in accordance with agency and regulatory bodies and documentation of the review is entered in appropriate records.
- Records and documentation of historical significance are maintained.
- The therapeutic recreation specialist documents occurrences related to risk management; the therapeutic recreation assistant reports risk management information to the therapeutic recreation specialist.
- The therapeutic recreation specialist prepares and reports quality improvement data; the therapeutic recreation assistant may collect data for quality improvement; she/he reports this information to the therapeutic recreation specialist.

Standard Five: Outcomes

The therapeutic recreation specialist records data on the participant's response to the therapeutic recreation process in the behavioral areas, cognitive, physical, social, emotional, spiritual; leisure functioning; personal development; and, quality of life variables and uses these results to enhance the therapeutic recreation process. The therapeutic recreation assistant assists in the recording of data under the supervision of the therapeutic recreation specialist.

- Outcomes resulting from the use of specific interventions are reflected in systematic and periodic written evaluations of programs and services.
- Formative evaluation monitors progress and documents timely modifications to better ensure participant's needs are addressed through programs and services.
- Summative evaluation documents program effectiveness and accountability of results directly attributable to programs and services and participant satisfaction with the outcomes.

- The therapeutic recreation specialist includes the input from the participant, caregivers, and the interdisciplinary team in the documentation of outcomes.
- The therapeutic recreation assistant provides input to the therapeutic recreation specialist to assist in the documentation of outcomes.
- The therapeutic recreation specialist uses outcomes in quality improvement and efficacy research efforts to support and demonstrate effectiveness of the therapeutic recreation process.
- Participant and program outcomes are used to regularly update programs and services.
- Frequently used data collection methods and devices are recorded in the plan of operation.
- The therapeutic recreation specialist engages in and disseminates the outcomes of efficacy research.

Standard Six: Professional Staffing and Credentials

Qualified and properly credentialed personnel conduct and monitor the therapeutic recreation process and maintain their professional competence through appropriate professional development activities.

- Credentials from the National Council for Therapeutic Recreation Certification (NCTRC) qualify the therapeutic recreation specialist.
- Credentials for the TRA follow the JCAHO definition of a “recreational therapist assistant or technician, qualified: an individual who, at a minimum, is a graduate of an associates degree program in recreational therapy; [and] meets any current legal requirements of licensure, registration, or certification . . .” (refer to references).
- The therapeutic recreation (specialist) personnel has(have) a professional development plan to maintain and expand professional competence and credentials including knowledge of current therapeutic recreation trends, facilitation techniques and interventions, issues, and professional and legal standards.
- The therapeutic recreation (specialist) personnel demonstrate(s) appropriate competence in all interventions and facilitation techniques that are used in programs and services.
- The therapeutic recreation (specialist) personnel is(are) hired, assigned and promoted based on qualifications specific to therapeutic recreation that are delineated in position descriptions and/or competency standards with established salary ranges commensurate with agency practices.
- A performance appraisal (competency assessment) evaluates the therapeutic recreation (specialist’s) personnel job performance(s) on an on-going basis and is(are) founded on individual professional development goals written in the professional development plan.
- Written personnel policies and procedures interpret expectations and relationships with supervisors, therapeutic recreation assistants, volunteers, interns, and colleagues.
- The therapeutic recreation (specialist) personnel regularly receive(s) participant input and feedback that is incorporated into performance appraisals and professional development plans.

Standard Seven: Ethics

Professionals and paraprofessionals are committed to advancing the use of therapeutic recreation services in order to ensure protection, quality, and promote the rights of persons receiving services.

- The therapeutic recreation (specialist) personnel conform(s) and subscribe(s) to the NTRS professional code of ethics.
- The therapeutic recreation (specialist) personnel conform(s) and subscribe(s) to a professional participant bill of rights.
- The therapeutic recreation (specialist) personnel conform(s) and subscribe(s) to current local, state and federal laws, guidelines, and standards established by regulatory bodies.
- The therapeutic recreation (specialist) personnel maintain(s) his/her professionalism by upholding professional credentialing practices, NTRS standards of practice, agency conduct codes, competency standards, and privileging policies.
- The therapeutic recreation (specialist) personnel maintain(s) and advocate(s) for participant integrity, confidentiality, dignity, and autonomy.

Standard Eight: Quality Management

The therapeutic recreation specialist implements management policies and procedures in order to maintain the quality of therapeutic recreation programs and services. These protocols comply with governmental, accreditation, professional, and agency standards and regulations. Evaluation and research are conducted to enhance the therapeutic recreation process; and, management practices and research initiatives are compatible with agency protocols and professional standards. The therapeutic recreation assistant reports information to the therapeutic recreation specialist regarding the quality of TR programs and services.

- The therapeutic recreation specialist in consultation with management develops a written plan to monitor and evaluate the delivery and outcomes of programs and services; the plan identifies significant structure, process, outcome indicators of quality and standards of productivity for the therapeutic recreation process and for the management of the resources, areas, facilities, and equipment used during service delivery; the therapeutic recreation assistant provides input to the therapeutic recreation specialist.
- The therapeutic recreation specialist develops a plan to conduct participant and service-related evaluation and research to maintain and improve the quality, effectiveness, and integrity of the therapeutic recreation process; the therapeutic recreation assistant may assist in the development of the plan.
- The operating protocols and policies are described in the operational manual and are compatible with the agency/facility's general administrative documents and with governmental, accreditation, professional, and agency standards and regulations.
- A budget for the operation of the therapeutic recreation service is prepared by the therapeutic recreation specialist or with input from the therapeutic recreation specialist

or assistant and complies with administrative protocols; financial practices are compatible with other service units and reflect relevant reimbursement procedures.

- The therapeutic recreation specialist maintains records on the management of the therapeutic recreation service in accordance with agency/facility regulations and external agents and standards.
- The therapeutic recreation service has a marketing plan that promotes the agency, the therapeutic recreation service, and the profession; advocates for inclusionary services and the rights to accessible quality healthcare and leisure services.
- The therapeutic recreation service has a risk management plan that articulates health and safety standards compatible with agency policies and procedures and external standards.
- The necessary areas, facilities, equipment, and supportive resources are provided, designed, constructed or modified to permit programs and services to be carried out to the fullest possible extent and are in compliance with agency regulations, external agents, laws and regulations, and professional standards.
- A plan for incorporation of therapeutic recreation assistants, support staff, volunteers, and interns, in the therapeutic recreation process, is in the operational manual and identifies procedures related to training, supervision, evaluation, and recognition in accordance with agency/facility policies and professional standards. The therapeutic recreation assistant contributes to the development of management policies and procedures under the supervision of the therapeutic recreation specialist.

Glossary of Terms

Activity analysis—process of systematically determining the behaviors and skills required to complete an experience often accompanied by task analysis.

American Therapeutic Recreation Association (ATRA)—formed in 1984 as a non-profit national professional membership organization to advance the profession of therapeutic recreation.

Centers for Medicare and Medicaid Services (CMS—formerly The Health Care Financing Administration—HCFA)—a governmental agency in the Department of Health and Human Services that oversees Medicare and Medicaid programs.

Certified Therapeutic Recreation Specialist (CTRS)—refers to one who is certified to practice at the professional level by the National Council for Therapeutic Recreation Certification Inc., a non-profit organization recognized as the certifying body for therapeutic recreation specialists.

Commission for Accreditation of Park and Recreation Agencies (CAPRA)—initially approved standards in 1993 to review and accredit agencies providing park and recreation programs to the public (a therapeutic recreation program operating under the auspices of a public park and recreation department may fall under this review process).

Commission on Accreditation of Rehabilitation Facilities (CARF)—private not-for-profit independent entity formed in 1966 to promote the quality, value, and optimal outcomes of services through the accreditation process of medical and rehabilitation programs.

Council on Accreditation (COA)—the body that reviews and accredits baccalaureate programs in recreation, park resources, and leisure services including academic programs that have therapeutic recreation options.

Efficacy research—studies that document the effectiveness of therapeutic programs and services and validate the outcomes of specific interventions.

Formative evaluation—or process evaluation occurs as the program or service is being offered and allows for immediate adjustments to ensure desired outcomes.

Inclusion—inclusive services enable people of varying abilities to participate and interact in life's activities together with dignity. Services include the concepts of right to leisure, quality of life, support, assistance and accommodations, and barrier removal (NRPA, October, 1999).

Individual (participant) intervention plan—term used to describe programs that focus on achievement of individualized outcomes and benefits. Titles found in practice settings might include care plans, treatment plans, specific program plans, individual education plans, or individual rehabilitation plans (list is presented as illustration but is not all inclusive of agency practices).

InterQual Products Group—criteria statements designed by the medical community that define the level of rehabilitation care by intensity of service, severity of illness, and discharge screens (ISD).

Interventions and facilitation techniques—compatible methods of interaction and specific experiences that are selected to achieve pre-planned outcomes and pre-determined objectives or goals. Activity and task analyses may precede the identification of specific interventions and facilitation techniques. A comprehensive resource to identify interventions and facilitation techniques: Kinney, W. B., & Witman, J. (Eds.). (1997). Guidelines for competency assessment and curriculum in therapeutic recreation: A tool for self-evaluation. Hattiesburg, MS: ATRA Publications.

Joint Commission on Accreditation of Healthcare Organizations (JCAHO)—private organization that sets standards of care for several types of health care settings. The intent of the review process is to acknowledge by accreditation those programs and services that have met certain standards that assure quality patient care.

National Council for Therapeutic Recreation Certification, Inc. (NCTRC)—the non-profit national level organization formed in 1981 that issues the credential for the CTRS and verifies the competence of those individuals who apply for, are awarded, and maintain the credential.

National Therapeutic Recreation Society (NTRS)—a branch of the National Recreation and Park Association (NRPA) formed in 1966 to serve professionals and organizations involved in therapeutic recreation services.

Operational plans—those documents developed in accordance with agency plans that outline the vision, mission, goals, and procedures to manage the recreation therapy/therapeutic recreation service.

Outcomes—(participant and program) result from the use of specific intervention and facilitation techniques, are reported in efficacy research, and documented in individual, service, and agency plans.

Paraprofessional—an individual who practices at the paraprofessional level as defined by the standards of practice (refer to therapeutic recreation assistant definition).

Participant—a title used in this document to represent a number of terms which may include but are not limited to consumer, client, patient, resident, customer. The individual is involved as a recipient of recreation therapy/therapeutic recreation services.

Protocol—used to refer to 1) procedures or policies specific to agency regulations or 2) defined plans for participant interaction.

Quality improvement—measures that document structure, process, outcome variables important to evaluation and documentation of effectiveness and program and service enhancement. Improvement usually refers to level of performance and quality of the outcomes of a specific program or service.

Standardized assessment or assessment procedures—refers to the consistent administration and reporting of participant data using formal and informal processes accepted by professionals at the particular agency. Thus, this includes instruments like the MDS—Minimum Data Set, LCM—Leisure Competence Measure, LDB—Leisure Diagnostic Battery and agency developed instruments and procedures used to identify participant behaviors, abilities, strengths, skills, and expectations.

Specific therapeutic recreation service plan—refers to written guidelines for the delivery of specific programs and services like aquatics, day camps or day services, pet therapy, leisure education, or recreation therapy, for example, that are derived from the operation plan and guide the design of individual participant intervention plans.

Summative evaluation—product or outcome evaluation that occurs with the completion of service or participant programming and determines the effectiveness of specific interventions and facilitation techniques to achieve pre-determined outcomes and benefits.

Task analysis—process used with activity analysis to identify the desired sequence of skill development as defined by the complexity of the behavior.

Therapeutic recreation process—a sequential process of assessment, planning, implementation and evaluation (APIE) that describes the procedures a professional uses to design programs and services to satisfy participant needs and accomplish specific pre-determined goals and objectives. A systematic problem solving process used by the CTRS to deliver accountable programs and services.

Therapeutic recreation assistant—a person who assists a therapeutic recreation specialist in the delivery of participant programs and services. “. . . an individual who, at a minimum, is a graduate of an associates degree program in recreational therapy, [and] meets any current legal requirements of licensure, registration, or certification . . .” (JCAHO Standards, 1997; GL page 21)

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