

Top 10 Questions About the CTRS

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Many professionals ask me about the CTRS, how to get certified, and the role of the CTRS in long-term care. The following are some commonly asked questions:

1. What is a CTRS?

CTRS stands for Certified Therapeutic Recreation Specialist.

2. What type of education is required to become a CTRS?

Required education includes a BA in TR or recreation with specific coursework or a BA accredited school with specific coursework.

3. Is an internship required?

Yes, the academic path requires an internship of 480 hours.

4. Do I have to take a national exam?

Yes, all CTRS candidates must pass the national exam.

5. Is there an alternate path to becoming a CTRS?

Yes, there is an equivalency path which requires varying years of paid full-time experience in TR, education, additional TR coursework, and exam.

6. Are there continuing education requirements for the CTRS?

Yes, all CTRS candidates must complete 50 hours of continuing education every 5 years to maintain certification (plus experience or re-take the exam).

7. What is the name of the certifying body for the CTRS?

NCTRC (National Council for Therapeutic Recreation Certification)

8. Where does a CTRS work?

The CTRS is qualified to work in long-term care, sub-acute, adult day care, assisted living, residential, CCRC's, group homes, rehabilitation facilities, hospitals, school systems, behavioral health centers, substance abuse facilities, jails, and vocational facilities. The CTRS can work with any special population.

9. What is the difference between a CTRS and an Activity Professional?

Many leisure professionals feel that there is controversy in defining the differences between the CTRS and an Activity Professional, especially in long-term care. There are those who feel that the line is clearly drawn between the two while others state that the roles are very similar. It is my belief that Recreation Therapists and Activity Professionals can and should work together in the provision of Recreation Therapy and Activity Therapy services to enhance and support the physical, emotional, behavioral, and cognitive well-being of the individuals they serve. Both are equally important, especially in long-term care, and greatly compliment and enhance each other. With that being said, here are some general differences. Please note: These differences are not endorsed by ATRA, NTRS, NCTRC, NAAP, NCCAP, or any other organization.

Education and Training

The CTRS is required to have a bachelor's degree. He/she receives extensive education and training in therapeutic recreation services, clinical/diagnostic information, treatment modalities, working with special populations, leisure education and much more. The curriculum includes taking challenging courses such as Anatomy and Physiology. Recreation Therapy students can choose various areas of studies such as geriatrics, pediatrics, individuals with developmental disabilities, behavioral health, rehabilitation, etc. Training consists of a 480 hour internship, under the direction of a CTRS and can be done in a variety of settings as well.

As of January 2007, all Activity Professionals who wish to become certified through the National Certification Council of Activity Professionals (NCCAP) as an Activity Director or Activity Consultant are required to take the Modular Education Program for Activity Professionals, 2nd Edition (MEPAP 2nd Edition) which includes 180 hours

of classroom time plus 180 hours practicum working with the elderly. The MEPAP course has really evolved over the years and is specially designed to educate individuals who work with the elderly. The course has an extensive curriculum which includes the aging process, the assessment process, planning, facilitation techniques, care planning, evaluation, as well as management issues specifically related to working in geriatric facilities. Several certification tracks require a Bachelor's degree in a health-related field as well.

Populations Served

The CTRS can work with any special population whereas Activity Professionals generally work with the elderly in various health care settings.

Services Rendered

Throughout my career in Therapeutic Recreation, I have followed The National Therapeutic Recreation Society's (NTRS) definition of Therapeutic Recreation which states: "Therapeutic recreation uses treatment, education and recreation services to help people with illnesses, disabilities and other conditions to develop and use their leisure in ways that enhance their health, functional abilities, independence and quality of life." This definition is based on Peterson and Gunn's Therapeutic Recreation Service Model. The three components consist of: treatment, leisure education and recreation participation (Peterson & Gunn, 1984)

Activity Professionals and CTRSs provide the recreation participation component of this model, providing activities for fun and enjoyment. It's not to say that these activities are not therapeutic, because we know that they most certainly are. Activity Professionals and CTRSs provide a variety of therapeutic activities that are designed to meet the needs and interests of the individuals they serve. Activity Professionals and CTRSs utilize the APIE process of assessment, planning, implementation and evaluation. Both professionals specialize in breaking down the barriers to leisure pursuits to provide opportunity for residents and patients to participate in their favorite past times at their highest practical level. Activity interventions are present in the resident's comprehensive care plan and play a significant role in the quality of life and care of each resident.

According to the Manual for Recreation Therapy in Long Term Care Facilities, 2nd Edition by NTRS, the leisure education and treatment components of the Therapeutic Recreation Service Model are provided by the CTRS. Peterson and Gunn define leisure education as: "A broad category of services that focuses on the development and acquisition of various leisure-related skills, attitudes, and knowledge." (Peterson and Gunn, 1984). Peterson and Gunn's Leisure Education Content Model consists of: leisure awareness, social interaction skills, leisure resources, and leisure activity skills. The CTRS receives a lot of training in this area and play an important role in enhancing current skills, assisting with the development of daily living skills and community integration.

The third component of The Therapeutic Recreation Service Model is recreation therapy which is designed to restore or rehabilitate. It is a specific, prescriptive, medically ordered, planned treatment process, which is provided by a CTRS and is recognized by CMS, JCAHO, and CARF. In July 1998, CMS (formerly HCFA) added section T1a Special Treatments, to the MDS 2.0. The CMS RAI Version 2.0 Manual defines recreation therapy as: "Therapy ordered by a physician that provides therapeutic stimulation beyond the general activity program in a facility. The physician's order must include a statement of frequency, duration, and scope of the treatment. Such therapy must be provided by a state licensed or nationally certified Therapeutic Recreation Specialist or Therapeutic Recreation Assistant. The Therapeutic Recreation Assistant must work under the direction of a Therapeutic Recreation Specialist". The scope of treatment includes: social, physical, affective and cognitive.

10. What is the role of the CTRS in long-term care?

The CTRS utilizes his/her clinical, assessment, facilitation, and evaluation skills to provide services that includes recreation therapy, leisure education and recreation participation. It has been my experience, however that many CTRSs do not take full advantage of the MDS 2.0 Section T1a, recreation therapy. Facilities that have a CTRS on staff should revisit this opportunity to increase chances for reimbursement, professionalism, purpose and validity. Consider offering these treatment-oriented recreation therapy services, beyond the general activity program. To download a free sample Physician Order Form by Re-Creative Resources Inc. please [click here](#). If you are providing recreation therapy or are considering doing so, Re-Creative Resources Inc. has also developed a one-page form that tracks the recreational therapy services provided and includes: the purpose, the scope of service, treatment time, TR Services by category, and a space for weekly progress notes. To purchase the Recreation Therapy Daily Treatment Log [click here](#).

The CTRS plays a significant role working with specialized populations in long-term care and sub-acute facilities. For example, sub-acute patients may greatly benefit from recreation therapy services and leisure

education to ensure the patient develops and retains a healthy leisure lifestyle when he/she returns to the community. Specialized leisure education programs, support groups, and community integration programs are critical for short term patients. Other specialized units may include: dementia units respirators/ventilator units, HIV/Aids, pediatric LTC, etc.

To find out more about becoming a Certified Recreation Therapist Specialist, please [visit NCTRC](#) or call NCTRC at 845-639-1439 and talk with a Credentialing Specialist.

Recommended Reading

[Therapeutic Recreation Specialists](#), a great article about Recreational Therapists written by Karen C. Wenzel, CTRS, CPRP

[Recreational Therapy Handbook of Practice: ICF-Based Diagnosis and Treatment](#) Heather R. Porter, Joan Burlingame available through Idyll Arbor.

[Long Term Care for Activity Professionals, Recreational Therapists and Social Services Professionals, Fourth Edition](#) by Elizabeth Best Martini, Mary Anne Weeks, Priscilla Wirth. This is a great book for individuals working in long-term care. The new edition expands the information on MDS version 2.0 (including Section T) and information on the Prospective Payment System.

[Innovations: A Recreation Therapy Approach to Restorative Programs](#) by Dawn R. De Vries and Julie M. Lake. Innovations integrates recreation therapy and restorative nursing to make a significant improvement in the residents' lives.

References

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