

Manual M-2, Professional Services. Part XXII, Recreation Service
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Chapter 4, Staff Development
(Sections I through IV; Paragraphs 4.01 through 4.14)

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**Veterans
Administration**

Professional Services Recreation Service

**June 20, 1984
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**Department of
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Part XXII, "Recreation Service," VA Department of Medicine and Surgery Manual M-2, "Professional Services," is published for the information and compliance of all concerned. This new part to Manual M-2 was previously published in M-1, "Operations," as part IX.



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RESCISSIONS

The following material is rescinded:

1. COMPLETE RESCISSIONS

a. Manual

Part IX, M-1 dated August 14, 1979

b. Interim Issues

II 10-74-25

2. LIMITED RESCISSIONS

The following material is rescinded insofar as it pertains to Recreation Service:

a. Paragraphs

4.08 to part VIII of M-2, change 1

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1. GENERAL
2. ADMINISTRATIVE
3. MANAGEMENT
4. STAFF DEVELOPMENT
5. REFERENCES
6. VA/VERY SPECIAL ARTS PROGRAM

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CHAPTER 4. STAFF DEVELOPMENT

4.01 STATEMENT OF PURPOSE

a. Staff development is the third primary functional area (par. 1.01b) of Recreation Service. This chapter identifies the policy, resources and procedures for staff development programs.

b. Employees are a major organizational resource for Recreation Service. Each employee is unique and represents a significant possession of talent, skills, abilities and training. Recreation Service must develop and implement appropriate staff development procedures, i.e., assessment, training plan, evaluation, etc., to effectively utilize and maintain these human resources in the achievement of service goals. This program does not eliminate the personal responsibility and commitment of each therapist in their continuing professional development to strengthen their effectiveness in health care.

SECTION I. CONTINUING EDUCATION

4.02 POLICY

Continuing education shall be a planned, deliberate, carefully guided process for staff development. It does not happen as a matter of course, and cannot be left to chance. There are many procedures by which competencies are acquired and maintained. All procedures shall be examined and the most appropriate plan selected. Through education, personnel can work more effectively in increasingly varying situations, using progressive clinical practices to meet the changing needs of their clients. This process will bring about desired outcomes if the Chief, Recreation Service is a skillful leader who is dedicated and able to guide and support the staff in professional advancement.

4.03 RESPONSIBILITY

The Chief, Recreation Service will be responsible for the planning, documentation and evaluation of continuing education and staff development programs determined by, but not limited to, utilization reviews, program audits, individual assessments, clinical privileges, Treatment Plan Review and peer reviews. These educational programs will provide an improved delivery of health care to hospitalized veterans.

4.04 RESOURCES

a. Local educational funds at the discretion of the medical center Director may be used for payment of tuition and fees for staff members to participate in staff development programs. These programs will allow therapists to update their professional knowledge base and improve delivery of service to patients.

b. Recreation Service educational programs will be conducted through institutes, workshops, staff meetings, conferences, intra-VA details, seminars and other appropriate means. Full utilization of the Regional Medical Educational Centers resources shall be incorporated in all phases of the service's educational program.

c. Recreation Service shall utilize the services of well qualified consultants for educational program planning, implementation and evaluation. The expertise of the consultant as a change agent can be of value to recreation personnel (DM&S Supp., MP-5, pt. II, ch. 2).

4.05 PROCEDURES

a. The Associate Chief of Staff for Education or designee shall be consulted and advised of all phases of Recreation Service educational programs to meet individual and group staff needs.

b. The educational program will be designed to assure participation by therapists. This program will meet the current VA and OPM requirements and prepare the therapist for higher levels of competence and greater job satisfaction.

c. Chief, Recreation Service will be responsible for the staff members' understanding and compliance with the local medical centers' procedures. These procedures would include authorization and documentation of the assessment, planning, implementation and evaluation of the service's continuing educational program.

d. Recreational personnel educational programs will only be developed from comprehensive individual and peer review assessments. Development or revision of therapeutic skills will be within the context of the work situation and the changing requirements of the recreation program.

e. Recreation Service will hold regularly scheduled meetings for the exchange of professional information, to maintain an acceptable level of service delivery to patients. The Chief will be accountable for recording and maintaining the records of these meetings in compliance with local directives.

f. The Chief, Recreation Service, will participate as requested in the orientation program for newly assigned physicians, medical residents, nurses, ward clerks, volunteers and others involved in providing services through or with Recreation Service to patients. Request for assistance by other services for educational programs shall be coordinated through the Chief, Recreation Service. Therapists possessing the knowledge, skills, or abilities in the requested subject content will provide appropriate instructions.

g. Recreation personnel may be taught appropriate emergency procedures necessary for patient care during circumstances that call for immediate action, such as cardiopulmonary resuscitation and senior life saving. Needs and provisions for special training will be determined locally and published in a policy statement. Recreation personnel will be accountable for their actions in executing these special procedures.

h. The development of comprehensive continuing education shall include:

(1) Documentation of course or unit of study with a brief description of content, objective, learning method, content outline and criteria and method of evaluation.

(2) Written behavioral objectives describing the expected measurable outcomes and conditions under which specific behaviors will occur.

(3) Indication of how the content will be directed at the level of the learner in a way consistent with the scope of their assignment.

SECTION II. CLINICAL TRAINING

4.06 POLICY

a. The quality of patient care will be enriched by productive interrelationships between the VA Recreation Service staff and faculty from schools of therapeutic recreation. This relationship will be consistent with the philosophy and procedures outlined in M-8, part I, paragraphs 2.06 and 2.07 and part II, paragraphs 2.07 and 2.08. Clinical experiences will be carefully integrated to support recreation therapy students during their training at VA medical centers. It is expected that the faculty from schools of therapeutic recreation will be committed to the improvement of therapeutic practices, research and teaching programs. Joint appointments between schools of therapeutic recreation and VA Recreation Service personnel shall be documented and approved in accordance with agency policy.

b. All students participating in therapeutic recreation training at a VA medical center must be in an approved affiliation program (par. 4.07a), if they are receiving credit from their school.

4.07 RESPONSIBILITIES

The Chief, Recreation Service or designee will be responsible for:

- a. Obtaining approval for clinical training affiliations in compliance with DM&S Manual M-8 as referenced in 4.06
- b. Providing student learning experiences
- c. Assuring that students are appropriately supervised
- d. Providing adequate clinical experiences which meet the learning objectives of the affiliating college/university and the VA medical center; and
- e. Meeting the educational standards as defined by the National Therapeutic Recreation Society and the National Association for Musical Therapy.

4.08 PROCEDURES

- a. The affiliated students are at the VA medical center to receive supervised clinical experiences in accord with their approved learning objectives.
- b. A clinical training program requires a minimum of two therapists on staff. Less than two therapists or use of assistants will not provide the professional supervision, therapeutic program base and clinical experiences to meet the instructional objectives.
- c. In coordination with the affiliating college/universities learning objectives, the Recreation Service Clinical Training Instructional System may provide entry, behavioral and terminal objectives for each student.
- d. Affiliated recreation therapy students are appointed on a without compensation basis.

SECTION III. RECREATION SERVICE MANAGEMENT TRAINING

4.09 POLICY

- a. The RSMTTP (Recreation Service Management Training Program) is a primary means for identifying and selecting recreation therapists to be well trained as competent managers to fill Chief of Recreation Service positions.
- b. The program is to achieve an essential degree of uniformity in the quality of trainees selected, the quality of training provided and evaluation of training. The training program is to insure that each trainee enters the placement position with a high degree of both professional and managerial knowledge and skills required for successful performance.
- c. Central to this objective is a familiarity with the mission and organization of the VA; an understanding of principles, policies and procedures underlying Recreation Service operations, and an understanding of the role of the recreation manager in the health care delivery system in the VA.

4.10 RESPONSIBILITIES

The responsibility for managing the RSMTTP lies directly with VA Central Office Recreation Service, the preceptor and the trainee. Each has specific responsibilities for the success of the program and all must collaborate to ensure the effectiveness of the training program. More definitive information is provided in corresponding sections of the Recreation Service Management Training Program, TP 10-23.

4.11 PROCEDURES

Information concerning trainee applications, selection, placement, preceptor selection, training program and evaluation are maintained in the Recreation Service Management Training Program, TP 10-23.

SECTION IV. RESEARCH

4.12 POLICY

The Chief, Recreation Service will promote a receptive climate for recreation/creative art therapists to initiate or assist research activities directed toward the development of relevant and reliable data in all patient care settings where therapeutic recreation programs are provided. The qualifying criteria for therapeutic recreation research must be to improve the quality, effectiveness, and efficiency of health care. Therapists will be encouraged to publish their findings in order to communicate and implement new therapeutic knowledge.

4.13 RESPONSIBILITIES

The Chief, Recreation Service will be responsible for insuring that all recreation/leisure research, including the preparation and publication of professional papers, will be in accordance with policies and procedures in M-8, part I, chapter 4.

4.14 PROCEDURES

- a. Recreation/leisure research skills can be upgraded through courses held at a university or VA site selection.
- b. Recreation Service can derive assistance and participate when appropriate as indicated, with other disciplines, medical centers, universities, local communities, State or national groups or therapists or other health professionals in cooperative research studies.
- c. All research activities including questionnaires, studies, surveys, etc., in which Recreation Service personnel participate will be approved in conjunction with local medical center research policies and procedures. Documentation of approval will be the responsibility of the Chief, Recreation Service.

July 29, 1993

1. Transmitted is a new chapter to Department of Veterans Affairs, Veterans Health Administration Manual M-2, "Clinical Programs," Part XXII, "Recreation Therapy Service," Chapter 6, "VA/Very Special Arts Program."

2. The principal purpose is to establish objectives, policies, and guidelines for integrating the arts into the experiences of veteran patients. This includes:

a. **Paragraph 6.01:** Defines difference in VA/VSA and the National Veterans Creative Arts Program;

b. **Paragraph 6.02:** Defines purpose/mission of the VA/VSA;

c. **Paragraph 6.03:** States policy and objectives;

d. **Paragraph 6.04:** Cites legislative authority and Memorandum of Understanding;

e. **Paragraph 6.05:** Defines responsibilities;

f. **Paragraph 6.06:** Defines reporting and recordkeeping requirements;

g. **Paragraph 6.07:** Defines funding issues.

3. **Filing Instructions**

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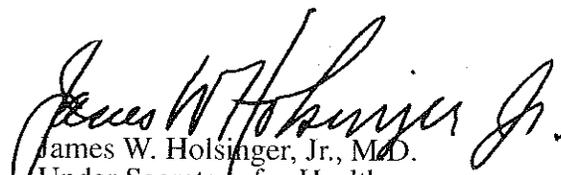
Insert pages

iii through iv ✓

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4. **RESCISSIONS:** None.


James W. Holsinger, Jr., M.D.
Under Secretary for Health

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