

ASHT

AMERICAN SOCIETY OF HAND THERAPISTS™

40 YEARS OF VISION

ASHT 2016-2017  
ANNUAL REPORT



A close-up photograph of a hand painting a vibrant blue abstract pattern on a canvas. The brush is held in the right hand, and the index finger is pointing towards the work. The pattern consists of irregular, overlapping shapes in various shades of blue, from light turquoise to deep navy. The background is a dark, textured surface, possibly a canvas or fabric, which makes the blue colors stand out. The lighting is bright, highlighting the texture of the paint and the hand.

**INSIDE**



## THE BEGINNINGS

It was 1975 in San Francisco at the 30th Annual Meeting of the American Society for Surgery of the Hand (ASSH), when six therapists with a special interest in hand rehabilitation formed a planning committee exploring the concept of a united hand therapy organization. The “original six” founders included Bonnie Olivett, Karen Prendergast Lauckhardt, Evelyn Mackin Henry, Judy Bell (Krotoski), Mary Kasch and Pegge Carter Wilson.

Surprised to find other therapists at the ASSH meeting, the seeds for a collaborative group grew and Bonnie Olivett posted a note on the bulletin board for interested therapists to meet for coffee. Over those cups of coffee, Bonnie, Karen, Evelyn, Judy, Mary and Pegge laid the groundwork for the formation of the American Society of Hand Therapists (ASHT).

Incredibly, the original six therapists represented the diversity of our profession. Within the group were four occupational therapists and two physical therapists employed in a variety of practice settings—doctor-based, hospital-based and private practice. The term “hand therapy,” unknown before, was coined when the group began deliberating on a name for this new organization.

Paramount to our founders’ beliefs was that hand therapy specialists should be recognized as a unique entity, promoting our expertise in peer-reviewed papers and hand conferences. They felt that through individual recognition of their work,

there would be increased opportunity for education and research specific to the treatment of upper extremity injuries, ultimately benefitting both hand therapists and their patients.

During the next two years, the original planning committee established guidelines for membership and formulated plans toward incorporation. With guidance from surgeons and therapists, the purpose, direction and goals of ASHT were clarified and incorporation became a reality on March 28, 1977.

The first official business meeting of ASHT was held February 20, 1978 in Dallas. Bonnie Olivett was elected as the first president and members of the “planning committee” (with the addition of Elaine Fess as board member-at-large), were selected to the first board. Committee chairs were appointed, preliminary bylaws were reviewed and 75 members were inducted into the Society as founding members. The new Society was dedicated to “advancing hand therapy through communication, education, research and establishing clinical standards.”

The incredible progress made by our Society in 40 years is a credit to the founding members, whose insight and direction shaped our future. The organization began for the same reasons that it still flourishes today: It is a collegial and inclusive community of therapists who want to ensure quality care for our patients and promote the value of hand therapy to patients, referral sources, legislators and payors.

40 YEARS OF VISION

ASHT

AMERICAN SOCIETY OF HAND THERAPISTS™

## About ASHT

Founded in 1977, ASHT is an organization of hand therapy professionals dedicated to advancing the field of hand and upper extremity therapy by promoting education, advocacy, research and clinical standards. ASHT members include occupational and physical therapists, physician extenders, researchers, surgeons and administrators.

## Membership

ASHT is a growing society that welcomed 397 new members in 2017, re-captured 190 lapsed members and reported an 88% member retention rate overall.

The ASHT Board of Directors, leadership volunteers and staff have taken great strides to grow membership value. Our goal has been and continues to be building on past and present organizational accomplishments in an innovative, collaborative and global manner to meet the future needs of hand therapists, allied professional communities and patients.





*Gary Solomon, MBA, MS, OTR/L, CHT*

## PRESIDENT'S MESSAGE

On behalf of the ASHT Board of Directors and professional staff, I am extremely pleased to offer this annual report to the members of the American Society of Hand Therapists! I have been truly honored to serve as president of this organization. I would like to take this opportunity to highlight some of the programs and initiatives of the past year, and share how ASHT continues to work strategically to have greater impact on therapists, physicians and consumers of our specialty.

ASHT membership has remained strong. We continue to work to offer programs and benefits to appeal to members throughout their career span. The member resources available for research, practice, networking and education continue to make ASHT the leader in providing professional resources for our specialty practice.

We have continued to make professional and educational resources easily accessible. The growth of our ASHT webinars, live and recorded, has enhanced the ability of our members to learn from respected leaders throughout the country. Our e-Community provides members opportunities to seek advice, debate clinical quandaries and allow us all the opportunity to share knowledge instantaneously. Through our improved website and social media outlets, ASHT membership has become a significantly more interactive experience.

This year, we are proud to have partnered with HTCC to improve resources available for mentoring, as well as match willing mentors with therapists looking for an experienced therapist to help with their professional development. New online resources as well as an e-Community group dedicated to helping match

potential mentors and mentees will help to strengthen and educate the next generation of therapists.

To increase awareness of our specialty, this year the Technology and Communication Committee led the production of a public awareness video campaign. Three incredible videos were released during Hand Therapy Week to promote public awareness. These videos received a high level of engagement on our social media sites and were a reflection of the incredible and meaningful work done by ASHT members.

Our improvements in communication and technology also helped ASHT improve our ability to advocate for issues that impact professional practice. The Legislative Action Center launched in 2017. This new website portal allows members to directly reach their congressional representatives, significantly enhancing our ability to make our voices heard regarding legislation affecting our specialty, including orthotics fabrication and the Medicare Cap.

Our enhanced member communications, including social media, also allowed us to lead a grassroots letter-writing campaign to CMS to protect our ability to be reimbursed for custom-fabricated orthotics. CMS received over 5,000 responses, with the overwhelming majority representing our professional perspective.

Alliances with other professional organizations including AOTA, APTA, ASSH and AAHS have also been an important component of our outreach: Our patient education blogs are the most popular on the ASSH HandCare website; we continue our partnership with AAHS of presenting at each other's annual meetings; and we

## ► PRESIDENT'S MESSAGE

### [CONTINUED]

have worked to strengthen relationships with AOTA and APTA leadership to share information impacting practice. All of the above organizations were key players in helping us gather and disseminate critical information over the past year.

Making research more accessible was a key initiative of the Research Division this year. Monthly article summaries of research impacting areas of professional practice allows evidence to be delivered to a broader audience, and hopefully spark further interest in exploring full articles from a number of different publications. The *Journal of Hand Therapy* print and online editions continue to enhance accessibility to clinicians to make decisions based on the strongest and latest evidence.

The ASHT board along with the Independent Finance Committee continues to search for ways to improve our long-term fiscal health. Membership and participation in ASHT programs continues to be our greatest source of revenue. Our ability to attract sponsorship for the many ASHT offerings also is a key component of our financial health. As we continue to have success, we are investing in our future through our long-term investment and reserve funds.

Last, as you read through the report, take a moment to think about how all of the incredible programs are created and organized by dedicated volunteers and implemented by our professional staff! The volunteers are passionate about seeing this organization grow from strength to greater strength, and make sure no member feels “left out” of what ASHT can offer.

On a personal note, thank you to the Board of Directors, committee volunteers and ASHT professional staff for your ideas, engagement, debate and hard work over this past year. Your support for me has been humbling, and I am extremely grateful. My hope is that we continue to grow as an organization and a professional community, and that future leaders will find the same level of inspiration from the members and leaders, past and present, that I have experienced.



Take a moment to think about how all of the incredible programs are created and organized by dedicated volunteers and implemented by our professional staff!





# YEAR IN REVIEW

CALENDAR YEAR 2016-2017 WAS CHARACTERIZED BY SIGNIFICANT ACTIVITY WITHIN EACH OF THE THREE PILLARS OF ASHT'S MISSION: EDUCATION, RESEARCH AND PRACTICE.

## Education

**A**SHT's commitment to educating hand therapy professionals has never been stronger. The Society's educational portfolio has significantly expanded through live meetings, online education and publications. ASHT's 2016-17 educational activities included:

- Organized and hosted three Hand Therapy Review Courses through September, with one more course planned for October **(324 attendees)**
- Organized and hosted four Hands on Orthotics workshops through September **(98 attendees)**
- Facilitated 11 live webinars through September **(827 participants)**
- Generated and facilitated discussion on the ASHT e-Community specific to the CHT Exam and the Mentoring Program
- Provided content for the Test Your Knowledge column in the *ASHT Times*.
- Launched a new regional live course—Education on Tour—to provide dynamic, evidence-informed education on upper extremity rehabilitation. Upcoming traveling courses include:
  - » Beating Pain: What Can a Hand Therapist Do?
  - » Foundations in Hand Therapy: Elbow to Finger Topics
  - » Simply, the Wrist

The Education Division is accepting and evaluating new submissions.

- Launched new Mentoring Program. Online resources include a mentoring handbook, self-assessment tools, videos and a contract template. The program also utilizes the mentoring e-Community page to help mentors and mentees find one another. Mentors are eligible to receive continuing education credit for mentoring; HTCC awards hours toward re-certification. Phase two of the program is in development, targeting new therapists with less than three years of hand therapy experience.
- Completed and published eight new Patient Education Resources through September, topics include:
  - » Edema
  - » Hand Infections
  - » Preparing for Arm/Hand Surgery
  - » Scapholunate Ligament Sprains
  - » TFCC Injuries
  - » Total Elbow Arthroplasty
  - » Traumatic Shoulder Dislocation
  - » Volar Plate Ligament Injuries of the Finger

The Patient Education Committee has developed these resources for the public and for therapists to use as a convenient tool for patient care. The committee will continue developing this series and more resources will be released in the near future.

## Research

Research is critical to ensure the viability and advancement of hand therapy. ASHT is committed to supporting a generation of evidence-informed research to promote hand therapy clinical practice. The Society disseminated and promoted hand therapy research to members through the following initiatives:

- Organized and hosted monthly Journal Clubs, the official online forum for the *Journal of Hand Therapy*, with discussion topics posted by a moderator to facilitate communication in the forum **(471 participants)**
- Awarded four research awards (Best Scientific Paper, Best Scientific Poster, First Time Researcher, *Journal of Hand Therapy* First Time Writers' Award)
- Awarded the ASHT Founders Grant for Research in Hand Therapy
- Facilitated, vetted and distributed four research surveys to ASHT membership. Created a new research survey webpage to assist researchers who are seeking study participants. This service is provided at no cost as a member-only benefit.
- Developed protocol to assist researchers who are seeking study participants. Vetted and approved two research studies.
- Launched the Research Updates series to increase awareness of emerging research in the field of hand therapy. Distributed monthly summaries of an original published research paper. Created a new webpage to house the updates.
- Participated in the AAOS-ASSH Carpal Tunnel Quality Measures Workgroup
- Developing a new research podcast series
- Developing five new online chapters for the popular *Clinical Assessment Recommendations, 3rd edition*

## Practice Division

The Practice Division comprises three committees dedicated to keeping members informed about legislation, regulations and industry trends affecting the delivery of and payment for hand therapy services.

While there were individual accomplishments for each committee listed below, this year provided opportunities for collaboration:

- Tiered evaluation codes: Federal and State Regulations and Practice Committees worked to understand the code requirements and alert ASHT members to the changes. To that end, they:
  - » Provided education for ASHT members on our website and as a complimentary webinar for members
  - » Updated documentation templates to reflect the code changes
  - » Responded to members' questions submitted through the e-Community or directly to ASHT

These committees are continuing to review coding updates from CMS, APTA and AOTA in anticipation of tiered reimbursement for the codes in the future.

### **ESTABLISHMENT OF SPECIAL PAYMENT PROVISIONS AND REQUIREMENTS FOR QUALIFIED PRACTITIONERS AND QUALIFIED SUPPLIERS OF PROSTHETICS AND CUSTOM-FABRICATED ORTHOTICS**

All three committees collected data to support ASHT's response to this proposed rule including:

- » Researched and presented data outlining ACOTE and CAPTE educational standards
- » Reviewed every state's occupational and physical therapy practice acts
- » Compiled a list of therapist-authored or edited orthotics texts
- » Researched and documented the cost burden for the proposal required equipment

This information was organized and submitted as evidence of occupational and physical therapists' qualifications for fabricating orthoses.

## ADVOCACY COMMITTEE

The Advocacy Committee worked with Cision® and ASHT staff to launch the Legislative Action Center on our public policy pages. Volunteers on this committee:

- Reviewed legislation introduced into both the U.S. House and Senate for potential impact on the delivery of hand therapy services
- Identified and prioritized content for the Legislative Action Center
- Wrote content and position letters for the Legislative Action Center
- Represented ASHT at the combined ASHT-AOTA Capitol Hill Day (Fall 2016), the APTA Federal Forum (Spring 2017) and the upcoming AOTA Capitol Hill Day in September
- Followed developments in the evolving debate over healthcare reform, keeping members informed

## FEDERAL AND STATE REGULATIONS COMMITTEE

Members of this committee closely followed proposed payment updates and regulatory changes issued by CMS and communicated changes to the ASHT membership by updating our website resources, including:

- Documentation templates to reflect the new tiered evaluation code documentation requirements
- Quality reporting requirements (PQRS)
- Changes in Medicare Administrative Contractor assignments
- Changes in Medicare beneficiary card identifiers

Committee members researched and responded to email inquiries sent to ASHT and e-Community questions concerning federal regulations and responded to CMS' proposed rules for 2018 payment changes in orthotics and prosthetic management codes. They also attended the AOTA Centennial Meeting and APTA Combined Sections Meeting

## PRACTICE MANAGEMENT COMMITTEE

In addition to the collaborations noted earlier, members of the Practice Management Committee:

- Worked behind the scenes to address members' individual practice questions submitted through the e-Community or directly to ASHT
- Reviewed the yearly update CMS orthotics code list and updated the ASHT website DME coding information
- Provided resources for AOTA and APTA staff outlining the use of the orthotics management codes
- Reviewed ASHT position papers

## LEGISLATIVE ACTION CENTER

The Legislative Action Center (LAC) was a project spanning the last two years. ASHT's goal was to simplify the process for advocating for our profession by providing an all-in-one, easy-to-use legislator communication portal. The LAC enables our members to:

- Obtain information about pending local and national legislation and regulation impacting the delivery of hand therapy services
- Identify federal and state legislators
- Access lawmaker staff directories and contact information
- Follow voting records of members of Congress on key issues
- Access position letters, phone scripts and tweets that can be used as is or personalized by members to send to elected representatives with just a click or tap of a finger

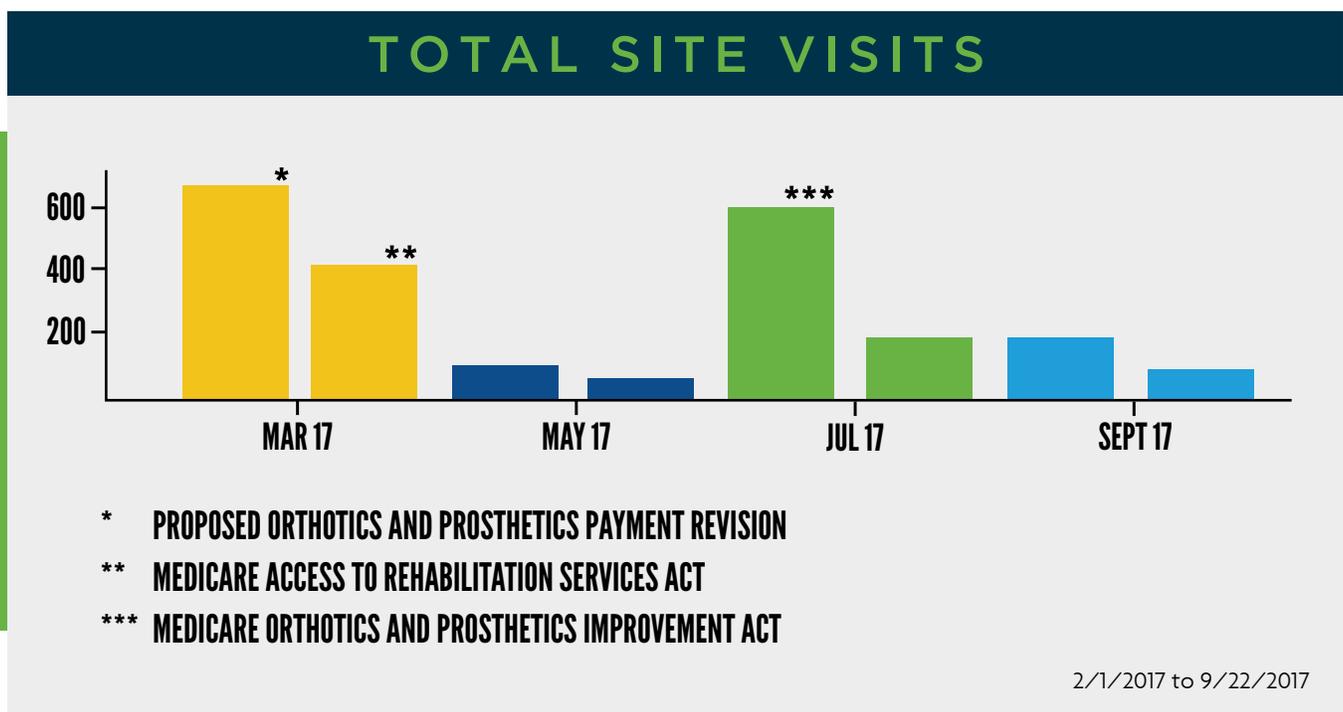
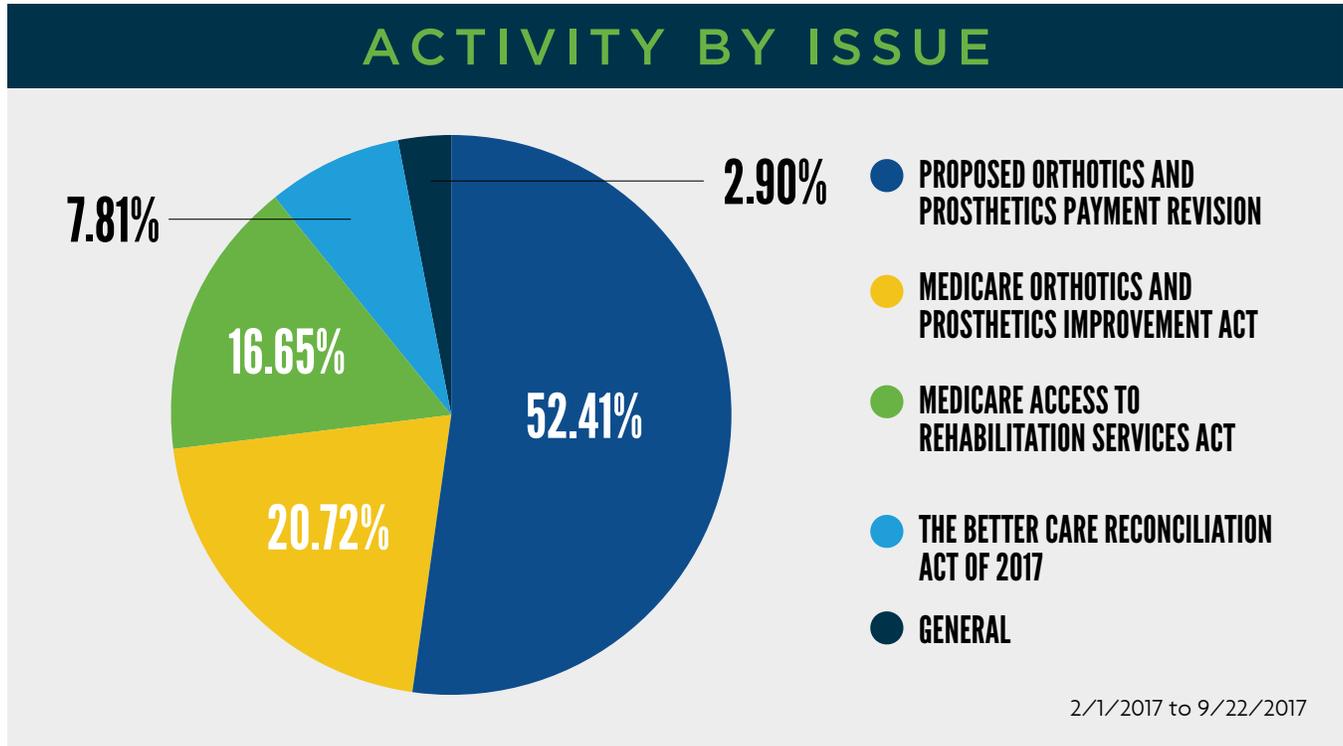
The Advocacy Committee prepared background information on a variety of issues including:

- The proposed orthotics accreditation rule
- The orthotics and prosthetics exception legislation
- House legislation to repeal the Affordable Care Act, the American Health Care Act (AHCA)
- The Senate proposal to repeal the Affordable Care Act, the Better Care Reconciliation Act (BCRA)
- The Medicare Access to Rehabilitation Act, which repeals the Medicare Therapy Cap

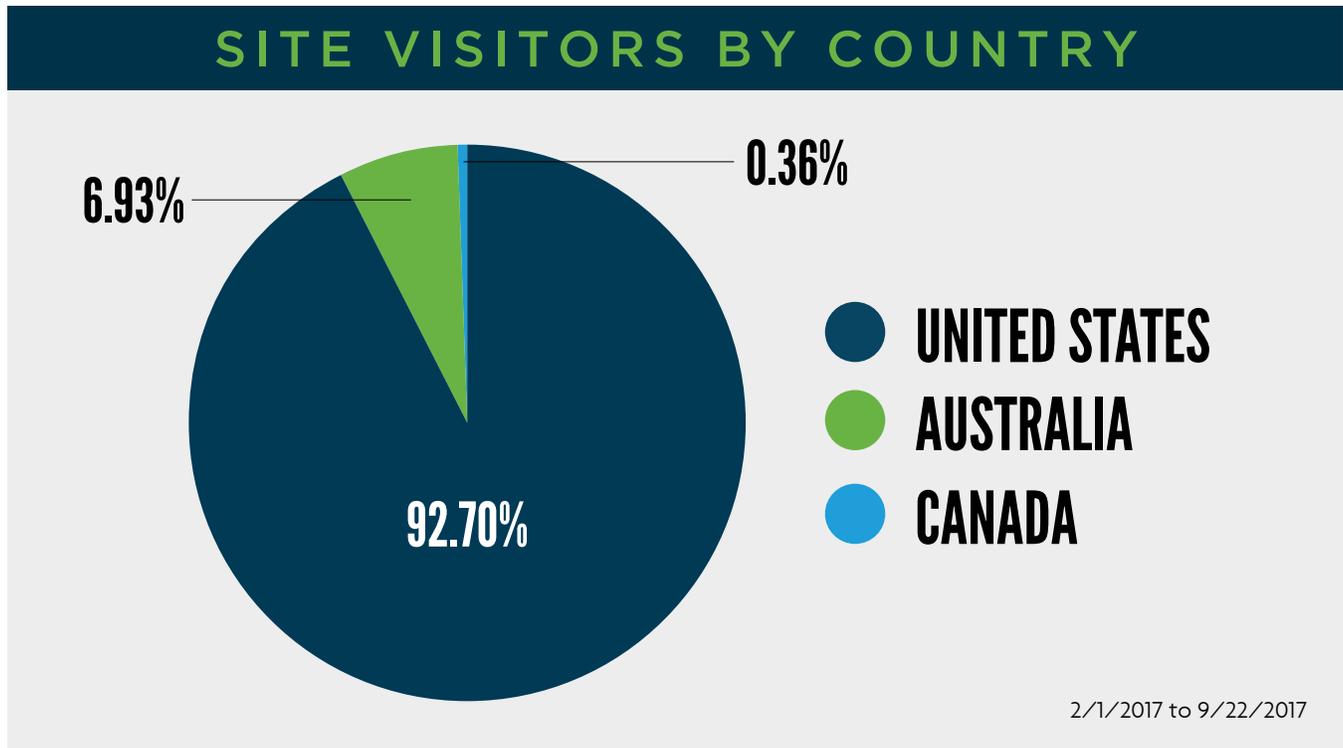
## ▶ YEAR IN REVIEW

[CONTINUED]

ASHT members responded most enthusiastically on the issues relating to the payment of orthotics and prosthetics as demonstrated by the activity reports.



And even though the Legislative Action Center targets therapists in the United States, we piqued the curiosity of some of our international members:



# GIVE US A DOLLAR AND WE'LL GIVE THEM YOUR TWO CENTS

Support ASHT's new Legislative Action Center designed to help you connect with legislators on issues important to the hand rehabilitation community.

[asht.org/donate](http://asht.org/donate)

## STRATEGIC FOCUS: 2017 AND BEYOND

Looking ahead, the one thing we know for certain is that healthcare will change, fueled by the search for an answer to increasing service utilization and costs. The Practice Division will continue to keep members informed; engage our affiliated professional organizations to increase our impact on the developing policies and urge our members to communicate with their legislators on the federal and state level.

# JOURNAL OF HAND THERAPY

THE *JOURNAL OF HAND THERAPY* CONTINUES TO SERVE AS THE RECOGNIZED SOURCE OF EDUCATION AND INFORMATION IN HAND AND UPPER EXTREMITY THERAPY. REGULAR FEATURES INCLUDE ORIGINAL REPORTS, CLINICAL REVIEWS, CASE STUDIES, EDITORIALS AND BOOK REVIEWS.

## Content Overview

### SUBMITTED ARTICLES

Calendar Year: Jan '16 – Dec '16  
206 (24% above prior year)

Last 12 months: July '16 – June '17  
214 (14% above prior period)

### ACCEPTED ARTICLES

Calendar Year: Jan '16 – Dec '16  
75 (83% above prior year)

Last 12 months: July '16 – June '17  
90 (50% over prior period)

### PUBLISHED ARTICLES

Calendar Year: Jan '16 – Dec '16  
52 (12% under prior year)

Last 12 months: July '16 – June '17  
54 (2% above prior period)

### SPEED TO PUBLICATION

- *Time to first decision* in 2016 (calendar year) was 9.6 weeks; in the previous 12 months (July 2016 to June 2017), it was 10.4 weeks; and year to date time is 10.8 weeks. The average time for comparable journals is 8-10 weeks.
- *Time from submission to acceptance* in 2016 (calendar year) was 28.5 weeks; in the previous 12 months (July 2016 to June 2017), it was 28.6 weeks; and year to date time is 24.5 weeks. The average time for comparable journals is 25-27 weeks.
- *Time from acceptance to publication* (calendar year) was 20.4 weeks; in the previous 12 months (July 2016 to June 2017), it was 26.9 weeks; and year to date time is 27.1 weeks. The average time for comparable journals is 25-27 weeks.

## Reach and Usage

### TOP 10 MOST CITED ARTICLES PUBLISHED IN 2014-2015 – CONTRIBUTING TO 2016 IMPACT FACTOR (1.159)

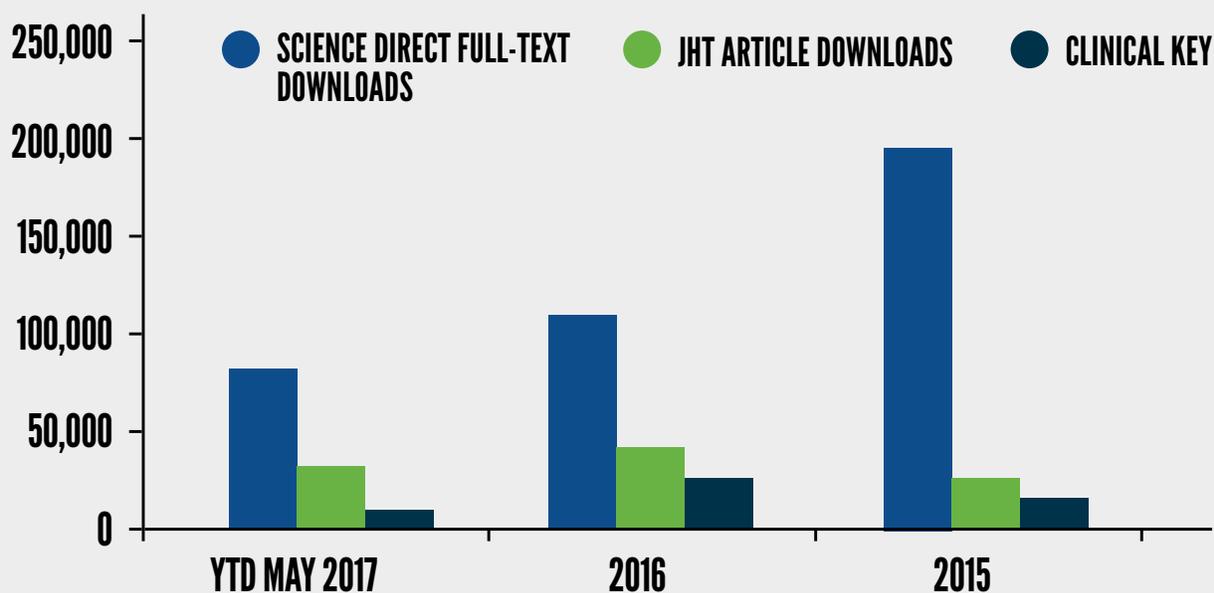
2. Current practice patterns in conservative thumb CMC joint care: Survey results, Volume 27, No. 1, 2014 – O'Brien VH
3. A scoping review of the use of elastic therapeutic tape for neck or upper extremity conditions, Volume 27, No. 3, 2014 – Taylor RL
4. An introductory study of common grasps used by adults during performance of activities of daily living, Volume 27, No. 3, 2014 – Vergara M
5. Hand therapist use of patient report outcome (PRO) in practice: A survey study, Volume 27, No. 4, 2014 – Valdes K

6. A systematic review of prognostic factors for return to work following work-related traumatic hand injury, Volume 27, No. 1, 2014 – Shi Q
7. Dart-Splint: An innovative orthosis that can be integrated into a scapho-lunate and palmar midcarpal instability re-education protocol Volume 28, No. 3, 2015 – Braidotti F
8. Conservative treatment of mallet finger: A systematic review, Volume 28, No. 3, 2015 – Valdes K
9. Dexterity as measured with the 9-Hole Peg Test (HPT) across the age span, Volume 28, No. 1, 2015 – Wang Y-C
10. A novel way of treating mallet finger injuries, Volume 27, No. 4, 2014 – Devan D
11. The inclusion of activities of daily living in flexor tendon rehabilitation: A survey, Volume 27, No. 1, 2014 – Powell RK

### TOP 10 ARTICLE DOWNLOADS, JANUARY 2016 – MAY 2017 (SCIENCE DIRECT)

1. Effectiveness of rehabilitation for patients with Subacromial impingement syndrome: A systematic review, Publication Date Apr-Jun 2004 – Michener L
2. Hand therapy versus corticosteroid injections in the treatment of de Quervain’s disease: A systematic review and meta-analysis, Publication Date Jan-Mar 2016 – Cavaleri R
3. Effectiveness of hand therapy interventions in primary management of carpal tunnel syndrome: A systematic review, Publication Date Apr-Jun 2004 – Muller M
4. Upper limb neural tension testing and mobilization, Publication Date Apr-Jun 2005 – Walsh M

## ELECTRONIC USAGE



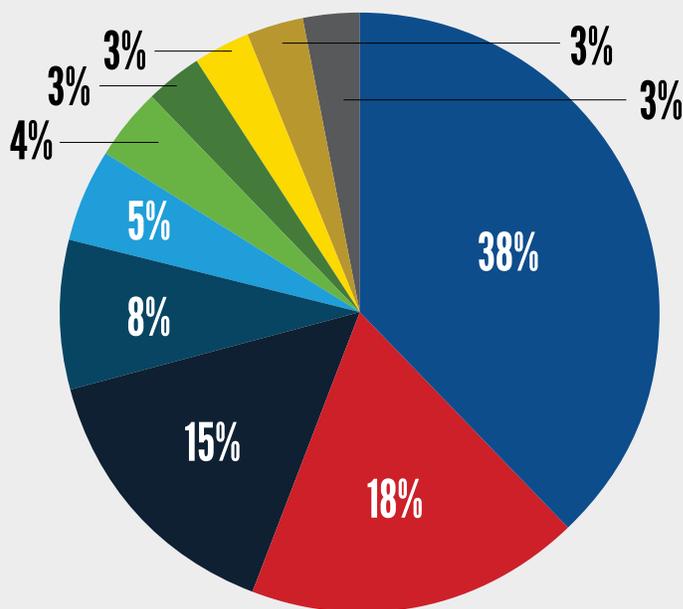
PLATFORM	ARTICLE DOWNLOADS		
	YTD MAY 2017	2016	2015
ScienceDirect	85,237	196,509	197,740
www.jhandtherapy.org	29,755	39,686	27,049
Clinical Key	10,018	20,927	13,458

## JOURNAL OF HAND THERAPY

### [TOP 10 ARTICLE DOWNLOADS CONTINUED]

5. Osteoarthritis and rheumatoid arthritis: Conservative therapeutic management, Publication Date Apr-Jun 2012 – Beasley J
6. Mirror visual feedback therapy: A practical approach, Publication Date Apr-Jun 2011 – McCabe C
7. Chronic lateral epicondylitis: Comparative effectiveness of a home exercise program including stretching alone versus stretching supplemented with eccentric or concentric strengthening, Publication Date Oct-Dec 2005 – Martinez-Silvestrini J
8. Comparison of effects of eccentric training, eccentric-concentric training, and eccentric-concentric training combined with isometric contraction in the treatment of lateral elbow tendinopathy, Publication Date Jan-Mar 2017 – Stasinopoulos D
9. A systematic review of conservative interventions for osteoarthritis of the hand, Publication Date Oct-Dec 2010 – Valdes K
10. Rehabilitation for patients with lateral epicondylitis: A systematic review, Publication Date Apr-Jun 2004 – Trudel D

## SCIENCE DIRECT TOP COUNTRIES



### TOP TEN COUNTRIES DOWNLOADING HAN THE ARTICLES, 2016



COUNTRY	REQUEST FOR ARTICLES	COUNTRY	REQUEST FOR ARTICLES
United States	53,475	Hong Kong	5,307
Australia	24,710	Brazil	4,772
United Kingdom	20,424	Netherlands	4,772
Canada	11,363	Turkey	4,228
China	7,193	Spain	3,921

40 YEARS OF VISION

WWW.JHHANDTHERAPY.ORG-2016

## TOP TEN REFERRAL SITES

REFERRER	VISITS	PAGE VIEWS
Typed/Bookmarked	47,915	143,518
Google Sites	32,572	82,951
nih.gov	6,609	16,373
bing.com	3,178	9,041
yahoo.com	1,683	3,645
elsevier.com	832	3,973
facebook.com	517	864
elsevierhealth.com	513	4,005
asht.org	304	2,086
csht.org	263	1,242

# MEMBERSHIP ENGAGEMENT

**A**SHT continues to work diligently to promote practice, research and education in the field of hand therapy. In order to support these goals, ASHT strives to identify and meet the needs of the membership and to engage the membership at many levels, including the communities in which they serve. The following are some of the membership engagement projects this year.

## MEMBERSHIP SURVEY

In June 2017, a survey was released to ASHT members. The goals were to determine the extent to which members use programs and services; to learn whether services should be added, revised or improved; and to gauge members' understanding of the issues that are central to ASHT. The survey results will serve as a framework to design programs and initiatives based upon identified member needs.

## REGIONAL HAND THERAPY INTEREST GROUPS

The ASHT community outreach program is designed to promote new relationships and to build upon existing relationships with all local and regional hand therapy groups. ASHT's vision is to provide quarterly updates that are pertinent to the existence and growth of hand therapy within these smaller groups, through the sharing of information. ASHT also welcomes the opportunity to purchase a vendor table when smaller regional groups hold meetings where vendors are invited to participate.

Ultimately, ASHT would like to develop channels for sharing resources and information throughout the entire country. Reciprocally, ASHT posts announcements of upcoming meetings and educational offerings from all interested groups in the *ASHT Times*. The section in the *ASHT Times*, called "What's Happening?" will continue to be a platform for communication with these groups. Each edition will have updates from many areas, including Illinois, Michigan, California, Wisconsin, Georgia, South Carolina, Arizona, Texas, Oregon, Virginia and Ohio. All interested local and regional hand therapy groups are welcome and invited to participate.

## STUDENT AND NEW THERAPIST TRANSITION PROJECT

The most commonly asked question from students who visit the ASHT exhibit booth at allied health conferences is "What can I do to begin a career in hand therapy?" These students have chosen a career in occupational or physical therapy, but seek information to help them navigate the career pathway into hand therapy specialization.

The purpose of the student and new therapist transition project is to grow membership in ASHT, attract students to the hand therapy specialty and develop the necessary educational material to plan and prepare for a career in hand therapy. Informational materials are being developed to distribute to colleges and universities with PT/OT curriculum to help students become aware of hand therapy as a career option. In addition, ASHT is developing educational materials and programs that are specifically designed to help entry-level therapists achieve the goal of becoming a hand therapist.

The poster features the ASHT logo at the top left. The main title is "WHAT IS A HAND THERAPIST?". Below it, a definition states: "A hand therapist is an occupational therapist (OT) or physical therapist (PT) who, through advanced study and experience, specializes in treating individuals with conditions affecting the hands and upper extremity." Two columns of text describe the qualifications and responsibilities of a hand therapist. The bottom section is titled "WHAT CAN I DO TO BEGIN A CAREER IN HAND THERAPY?" and lists requirements for becoming a hand therapist, including graduation from an accredited program and passing a national registration exam. A small graphic of a hand holding a green folder labeled "JOBS" is on the right. A footer note says "Please see reverse for more information" with a green arrow pointing right.

# GOVERNANCE

## STRATEGIC PLAN

**A** strategic plan serves as a roadmap for an organization. The ASHT strategic plan guides the Board of Directors, committees and staff. Most important, the plan informs members what they can expect from the organization.

Much progress was made in 2016-2017 toward accomplishing the Society's goals. The strategic planning process will continue, and the ASHT Board of Directors will work to ensure the process is mission-directed and data-driven.

## LEADERSHIP DEVELOPMENT PROGRAM

Committed to leadership development within its membership, the ASHT Board of Directors and volunteer leaders are working to expand educational offerings to provide members with resources to gain additional confidence and strategies for personal and professional success.

A virtual book club was held in April, with a discussion on *The 21 Irrefutable Laws of Leadership* by John Maxwell. The response was positive, with participants reporting reading and discussing the book enhanced awareness of their own and others' leadership skills.

This year, we started a board intern position. The intern appointment to the ASHT Board of Directors is aimed at introducing a member to the process of board governance, non-profit finance and activities of ASHT. The appointment provides the intern with an experience that will enhance his/her career in hand therapy and help develop leadership skills that could lead to later participation as a committee chair or a board member for ASHT or another non-profit organization.

Stacy Hite served the inaugural term for the board intern position. Her duties included assisting with the virtual book club, participating in monthly board conference calls and assisting with special projects. She encourages members who may be interested in working with ASHT to consider serving as board intern. "This position was a rich learning experience. I am in awe of and inspired by the great work of ASHT volunteers," Stacy said.

## 2015-2018 STRATEGIC PLAN

- 1 Support and strengthen the hand therapy community through increased ASHT membership.
- 2 Support a dynamic association of engaged hand therapy professionals.
- 3 Facilitate and promote awareness of the value of hand therapy to individuals, organizations and communities.
- 4 Expand technology resources to communicate information to members, organizations and communities.
- 5 Provide timely resources to inform members about pending legislation, regulation and industry trends.
- 6 Integrate education and research to promote evidence-informed practice.
- 7 Contribute to the global hand therapy community for the purpose of advancing hand health.

# FINANCIAL SUMMARY

## FY 2016 Audit Results:

### STATEMENT OF FINANCIAL POSITION

As of December 31, 2016, ASHT had total assets of \$1,609,326 and total liabilities of \$519,877 for total net assets of \$1,089,449. Net assets increased from December 31, 2015 by \$111,128. The detail is outlined below.

December 31, 2016 with comparative totals for 2015

ASSETS	2016	2015
Cash	\$568,847	\$582,409
Accounts Receivable	\$18,768	\$54,010
Prepaid Expense	\$65,929	\$67,235
Inventory	\$2,850	\$6,818
Investments	\$832,963	\$723,945
Website Development/ Amortization	\$119,969	\$39,341
<b>TOTAL ASSETS</b>	<b>\$1,609,326</b>	<b>\$1,473,758</b>

LIABILITIES	2016	2015
Accounts Payable/ Accrued Expenses	\$37,171	\$69,517
Deferred Revenue	\$482,706	\$425,920
<b>TOTAL LIABILITIES</b>	<b>\$519,877</b>	<b>\$495,437</b>

NET ASSETS	2016	2015
Unrestricted	\$1,032,062	\$917,606
Temporarily Restricted	\$57,387	\$60,715
<b>TOTAL NET ASSETS</b>	<b>\$1,089,449</b>	<b>\$978,321</b>

# VOLUNTEER RECOGNITION

**V**olunteers are essential to all nonprofit organizations, and the individuals named here have chosen to dedicate their time to ASHT. Volunteer service contributes to the core products, programs and services offered to ASHT membership. Their passion for hand therapy provides them with the energy to create new learning opportunities and/or services to help ASHT members meet the demands of clinical practice.

Thank you to all of our generous ASHT volunteers. These individuals may or may not know their contributions have made a difference to their fellow members, to a professional colleague in the allied health community or to a patient with an upper extremity injury, but they have served willingly and passionately.

## ANNUAL MEETING COMMITTEE

Nora Barrett, MS, OTR/L, CHT - *Chair*  
Jane Fedorczyk, PT, PhD, CHT - *Vice Chair*  
Gary Solomon, MBA, MS, OTR/L, CHT  
Gwen Dunning Dorn, OTR/L, CHT  
Mary Anne Dykstra, OTR/L, CHT  
Rebecca Saunders, PT, CHT  
Stacy Lynn Hite, PT, DPT, MS, CHT  
Tambra Marik, OTD, OTR/L, CHT

## ASHT TIMES

Bryan Carlson, MS, OTR/L, CHT - *Editor*  
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# ASHT TIMES

**E**ach quarter, ASHT members look forward to receiving an update on ASHT activities, members, current events affecting hand therapy practice and clinical content, all in the society's flagship publication, *ASHT Times*. Here's a look at some key metrics from the publication.

January 1, 2016 through September 13, 2017

## ASHT Times Readership Metrics



**UNIQUE VISITORS:**  
1,917

This is the number of individuals who viewed the publication. Each reader is counted just once.



**ISSUE VIEWS:**  
3,932

This is the total number of times issues were read, and includes returning visitors, who may come back to the issue several times.



**PAGE VIEWS:**  
44,467

This is how many pages were viewed in *ASHT Times* during the year. People may read pages of the magazine several times, and helps us identify which articles get the best readership and are of most interest to members.



**PAGES PRINTED:**  
4,345

This is the number of pages readers printed from the digital edition.



**ISSUE DOWNLOADS:**  
456

This is the number of times full issues of *ASHT Times* were downloaded as PDFs by readers.

## TOP 5 ARTICLES

### THERE'S A TREND IN THE TOP ARTICLES OF 2016: ASHT MEMBERS VALUE CLINICAL CONTENT OUTLINING PRACTICAL APPLICATIONS FOR THEIR PRACTICES.

1. Cutaneous Functional Units and their Clinical Implication on the Treatment and Evaluation of the Burned Upper Extremity
2. Casting: The Art of Healing Pediatric Hand Burns
3. Wounds in the Upper Extremity
4. Viewpoint: As a non-burn care specialist, what resources do you consult to aid in the treatment of a patient with a burn?
5. Associate Member Spotlight: Kim McClintick, OTD, OTR/L, CLT

# SOCIAL MEDIA

**A**SHT's social media following and engagement has continued to climb, with a 15-percent increase in total followers year over year, and a 12-percent overall increase since January 2017. The ASHT Facebook page experienced the largest percentage increase, with a 25-percent increase in followers since September 2016 and a 19-percent increase since January 2017.

## Total ASHT Social Media Followers



YEAR	FACEBOOK	TWITTER	LINKEDIN	PINTEREST
2013	1,654	1,251	1,328	90
2014	2,043	1,552	1,737	113
2015	2,732	1,921	2,135	133
2016	3,577	2,218	2,278	161
2017	4,265	2,423	2,349	169

*\*As of September 25, 2017. All other totals are as of December 31 of the respective year.*

While ASHT's private LinkedIn group and Twitter feed have amassed a significant number of members over the last several years, the society's Facebook has proven to be the most engaging platform for ASHT members and supporters.

The most popular Facebook posts of the last year include updates related to the proposed CMS orthotics and prosthetics

rule, the rise of "avocado hand" injuries, woodworking safety regulations, talk show hosts Ellen DeGeneres and Michael Strahan's hand injuries, tennis star Petra Kvitova's recovery from a knife attack that injured her dominant hand, Hand Therapy Week 2017 (including the annual ASHT Photo Contest) and many of ASHT's contributions to ASSH's HandCare.org blog.



## HANDS ON

*HANDS ON*, OUR BI-WEEKLY MEMBER E-BLAST, CONTINUES TO BE ONE OF ASHT'S MOST POPULAR RESOURCES WITH OPEN AND CLICK RATES WELL ABOVE THE INDUSTRY AVERAGE.

### SEPT 2016-SEPT 2017 AVERAGES

Bounce Rate	2.1%
Open Rate	36.8%
Click Rate	16.3%

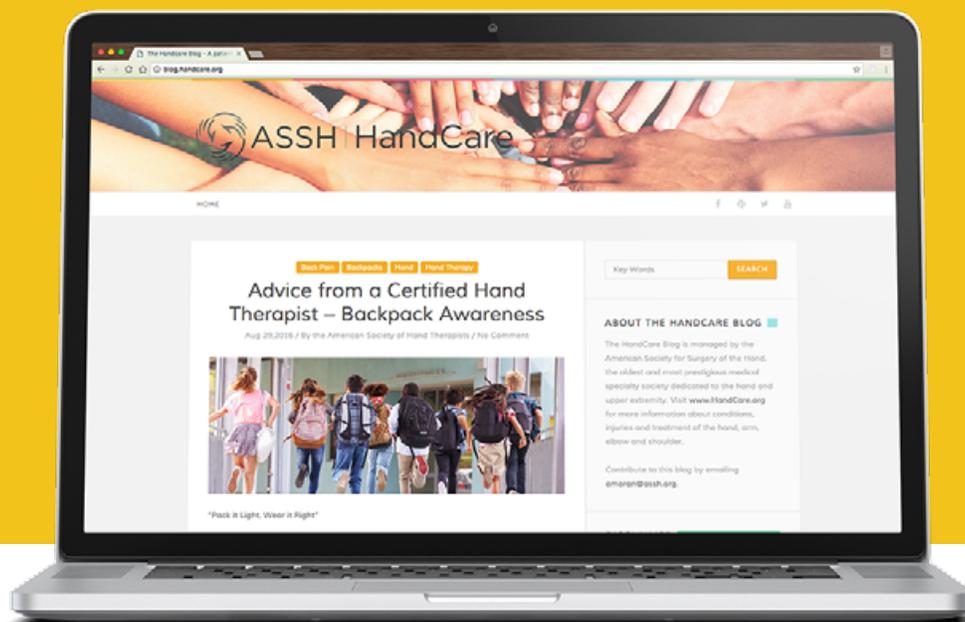
### INDUSTRY STANDARDS\* NON-PROFIT

Bounce Rate	9.5%
Open Rate	20.6%
Click Rate	7.0%

\*Source: Constant Contact, December 2016

## Analysis:

From September 2016 through September 2017, ASHT's click and open rates for the Hands On member e-blast were significantly better than industry averages for nonprofit associations. ASHT's bounce rate was also lower than the industry average.



# HANDCARE.ORG

In 2015, ASHT partnered with ASSH to provide important information to patients and the public through ASSH's HandCare.org blog. Each month, ASHT's Technology and Communication Committee contributes a piece focused on the importance of hand therapy. This information has become some of our most shared posts on social media, helping our therapists share the importance of hand therapy with the public.

Between October 2016 and July 2017, the HandCare.org website received 3,930,240 page views. Drilling down, the blog received 18,809 overall views. As was the case in 2016, **ASHT-generated content accounted for the majority of the blog's most read posts (eight of the top 10)**, according to ASSH's metrics. Popular topics included FAQs on the hand therapy specialty, cervical radiculopathy, cubital tunnel, joint protection, hand therapy for musicians, 3D printing and desk posture.

## CERVICAL RADICULOPATHY

<http://blog.handcare.org/blog/2016/04/30/do-you-have-cervical-radiculopathy/>

## CUBITAL TUNNEL SYNDROME

<http://blog.handcare.org/blog/2015/07/24/advice-from-a-certified-hand-therapist-on-cubital-tunnel-syndrome/>

## JOINT PAIN

<http://blog.handcare.org/blog/2017/02/23/advice-from-a-certified-hand-therapist-techniques-to-reduce-joint-pain/>

## THERAPIST FOR MUSICIANS

<http://blog.handcare.org/blog/2017/04/30/advice-from-a-certified-hand-therapist-for-musicians/>

## 3D PRINTING

<http://blog.handcare.org/blog/2016/06/19/3d-printing-in-hand-therapy/>

## PROTECTING YOUR JOINTS

<http://blog.handcare.org/blog/2016/05/26/advice-from-a-certified-hand-therapist-protecting-your-joints/>

## WHAT IS A HAND THERAPIST

<http://blog.handcare.org/blog/2017/06/05/what-is-a-hand-therapist-2/>

## DESK POSTURE

<http://blog.handcare.org/blog/2016/11/21/advice-from-a-certified-hand-therapist-desk-posture-part-ii/>



# e-COMMUNITY

THE ASHT e-COMMUNITY CONTINUES TO BE THE PLACE FOR MEMBERS TO CONNECT, COLLABORATE, SHARE KNOWLEDGE AND FURTHER THE ASHT MEMBER EXPERIENCE.

## Top 10 e-Community Discussions

RANK	DISCUSSION GROUP	TOPIC
1	Practice & Reimbursement	New OT/PT Evaluation Codes for Medicare
2	ASHT Community	Iontophoresis Units Discontinued
3	ASHT Community	Transitional OTD Programs
4	Clinical Treatment Issues	Casting in Hand Therapy
5	Practice & Reimbursement	New OT/PT Documentation Guidelines
6	Practice & Reimbursement	Software Solutions for Outpatient Therapy Documentation
7	Clinical Treatment Issues	Concert Pianist with Complaint of "Slow Thumb"
8	Clinical Treatment Issues	PT v. OT Scripts
9	Practice & Reimbursement	Proposed CMS Orthotics & Prosthetics Rule
10	Clinical Treatment Issues	Reference for Functional Grip and Pinch Strength

# HAND THERAPY WEEK 2017

AMERICAN SOCIETY OF HAND THERAPISTS™



SPONSORED BY



**T**his year, ASHT saw one of its most successful Hand Therapy Weeks to date, due in part to the new hand therapy awareness videos, dedicated volunteer efforts and a highly engaged audience both among the membership and social media.

## HAND THERAPY AWARENESS VIDEOS

Working in tandem with AH's digital media team, the Technology & Communication Committee produced three hand therapy awareness "vignettes," highlighting three very different hand therapy success stories. These videos were released

individually, and teased throughout the week using social media advertisements. This project addressed the committee's goal of identifying trends in communication (the impact of video), and helped promote recognition of the specialty among the healthcare community and the public/patient population.

These videos were among the most popular posts on ASHT's social media throughout Hand Therapy Week, reaching a total of about 13,000 people through ASHT's direct posts and shares from followers.



## ADDITIONAL RESOURCES/PROMOTION

New this year, ASHT released an animated Hand Therapy Week .GIF as a fun way for members and social media followers to share their excitement for Hand Therapy Week. The .GIF accrued our second largest reach (11.2K) of Hand Therapy Week on Facebook, and was the top tweet of the week with 800 impressions.

To supplement the stories told in the hand therapy awareness videos, ASHT launched a campaign to solicit patient and therapist testimonials. Patients were asked to submit their success stories through a portal, telling in their own words the impact their therapist and hand therapy had on their lives. These moving stories were shared throughout the week on social media.

# ▶ HAND THERAPY WEEK 2017 —————▶

## [CONTINUED]

The Patient Education Committee developed four new patient education resources: TFCC Injuries, Total Elbow Arthroplasty, Traumatic Shoulder Dislocation and Volar Plate Ligament Injuries of the Finger. These resources are intended for therapists to use as a convenient tool for patient care. The flyers provide information on common diagnoses, answer frequently asked questions and educate patients on the role a hand therapist plays in their treatment. The Patient Education Resource page was accessed more than 330 times during Hand Therapy Week, making up about 2 percent of website traffic and ranking fifth among page views:

Ranking total percentage of webpage views during Hand Therapy Week 2017:

**ASHT homepage (16.2%)**

**Hand Therapy Week page (5.4%)**

**Annual Meeting page (2.6% - registration opened June 1)**

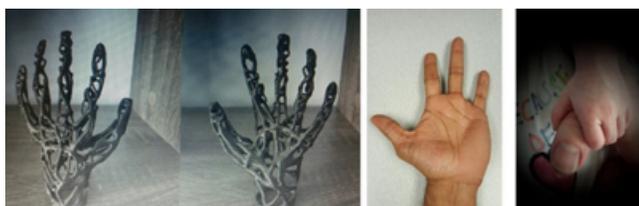
**Find a Therapist directory (2.1%)**

**Patient Education Resources (2.0%)**

In an effort to give therapists and hand therapy supporters simple and creative ways to celebrate Hand Therapy Week, ASHT also provided updated hand therapy flyers tailored to surgeons, primary care providers and the public.

## ASHT PHOTO CONTEST + CELEBRATE & WIN! CONTEST

The ASHT Photo Contest had a banner year, with a record number of participants (32) and total submissions (80 —more than twice the number of photos from 2016).



**1st place:** Sally Hawkins, 3D hand

**2nd place:** Aimee Johnson, hand of a soldier

**3rd place:** Lauren King, newborn holding hands with father

As part of the Celebrate & Win! Contest, members are invited to submit photos, videos and/or links of their 2017 celebrations to ASHT during and following Hand Therapy Week. This year yielded 16 participants, as compared to 12 in 2016. A winner was randomly selected to receive an ASHT gift certificate.

This year, North Coast Medical, ASHT's exclusive sponsor, provided an Ulnar Booster for all contest participants.

## SOCIAL MEDIA ENGAGEMENT

### FACEBOOK

Activity on the [ASHT Facebook page](#) surged during Hand Therapy Week 2017. The page's total reach—the number of individuals receiving any activity from the page, including posts to the page, posts by other people, page likes, ads, mentions and check ins—peaked at 15.5K at the start of Hand Therapy Week, which was more than twice the reach during Hand Therapy Week 2016.

### PHOTO CONTEST

The ASHT Photo Contest album received the highest level of reach and engagement during the week, recording 24.9K impressions, reach of 13K and engagement of 11.2K. Other popular posts included the hand therapy awareness videos, the animated .GIF, patient testimonials and posts highlighting grassroots Hand Therapy Week celebrations and awareness pieces (blog posts, photos, news spots, etc.). There was also a jump in total Facebook page "likes" during Hand Therapy Week (84), leading to a 2 percent follower increase.

### TWITTER

During Hand Therapy Week 2017, the ASHT Twitter page earned 23.3K impressions, which is more than twice that of Hand Therapy Week 2016, and represents 25 percent of ASHT's total Twitter impressions during the first half of 2017. Top tweets during this period included the Hand Therapy Week .GIF and the hand therapy awareness videos. Many users were also engaged via the Hand Therapy Week 2017 hashtag, using #HTW2017 in their messages to connect with ASHT, fellow therapists, supporters and the public.



40 YEARS OF VISION

## ALLIED ORGANIZATIONS UPDATE

### American Hand Therapy Foundation

**T**he American Hand Therapy Foundation (AHTF) had an exciting 2016-2017—A year of growth, collaboration and acknowledgement. AHTF remains the only professional organization with the sole mission for funding hand therapy research and education. The Foundation has good news to share about increases in research funding, reorganization of AHTF's infrastructure and events.

- The Foundation launched a new website in September 2016. The new site features new navigation, automates the grant application process and allows direct links to our collaboration organizations.
- During Hand Therapy Week, the Foundation held its second annual 5K Virtual Run, which raised over \$9,000. Over 100 donors and sponsors participated in the event, which not only advances hand therapy research but also promotes health and physical fitness.
- The American Hand Therapy Foundation has completed a reorganization. This change aims to improve communication and efficiency of all board activities to meet changing demands of AHTF to grow and serve the profession of hand therapy. The Foundation is now reorganized into four working committees:
  - » Finance Committee (led by Elaine Fess, ODT, OTR, FAOTA, CHT)
  - » Communications Committee (led by Katie Yancosek, PhD, OTR/L, CHT)
  - » Grants Committee (led by Mia Erickson, PT, EdD, CHT)
  - » Development Committee (led by Dorit H Aaron, MA, OTR, FAOTA, CHT)
- The Foundation will continue to annual tradition of the silent auction on October 12 at the 40th ASHT Annual Meeting in Anaheim, California. To foster greater competition, we will be bringing back traditional paper bidding sheets. Proceeds support AHTF's general grant fund.

## [CONTINUED]

- The Foundation is also proud to sponsor the third annual Invited Scholar lecture on October 13. The event's keynote speaker, Roy Meals, MD, will discuss how research has impacted the practice of upper extremity rehabilitation. Please visit [www.AHTF.org](http://www.AHTF.org) for additional details and event registration.
- The Tri-Alliance efforts of the ASHT, HTCC and AHTF has \$25,000 set aside for research to serve this upcoming grant cycle.
- In 2018, AHTF will have a total \$43,000 available for clinical research and education.
- AHTF invites you to participate in its upcoming annual appeal (November through January). This is an opportunity to help AHTF fund clinical and scientific research, establish standards of practice and advance the field of hand therapy.
- AHTF Grant Awards in 2017:

» **Burkhalter New Investigator Grant for Clinical Research in Hand and Upper Limb Rehabilitation**

### FIRST PLACE

Sarah Wilson, MS, OTR/L, CHT, CLT, and co-investigators Richard Barth, MD; David Moss, MD; and Madeline Fetzko, OTR/L, for their project, "The Impact of Shoulder Pathology in Individuals with a Distal Radius Fracture." The project is a collaboration between Nova Southeastern University (Fort Lauderdale, FL) and Washington Orthopedics and Sports Medicine (Washington, District of Columbia).

### SECOND PLACE

Amy Menegaldo, BSc, OT, Livingstone Tertiary Hospital, Port Elizabeth, South Africa, and supervisor Helen Buchanan, PhD, OT, University of Cape Town, South Africa, for their project, "Determinants of Positive Functional Outcomes at 16 weeks after Flexor Tendon Repair at a Tertiary Hospital in South Africa: A Descriptive Analytical Study." Funding was provided for the translation of the disabilities of the arm, shoulder and hand portion of the project.

## Hand Therapy Certification Commission

There are currently 6,451 Certified Hand Therapists (CHTs) worldwide, with 6,044 in the United States, 210 in Canada, 162 in Australia and New Zealand and 35 in other countries. Other countries include: Bahamas, Bulgaria, India, Ireland and Northern Ireland, Israel, Qatar, Saudi Arabia, Singapore, South Africa, United Arab Emirates and the United Kingdom. By profession, 85 percent are occupational therapists and 14 percent are physical therapists, with less than 1 percent being both OTs and PTs. In 2017, HTCC announced and implemented two significant policy changes related to the Hand Therapy Certification Examination eligibility and recertification requirements. These changes were based on the data obtained from the practice analysis performed in 2014. Details regarding these policy changes are outlined here.

### EXAMINATION POLICY CHANGE

Starting with the May 2017 examination, candidates for the Hand Therapy Certification Examination are now required to be licensed as an occupational therapist or a physical therapist for three years instead of five. The requirement of 4,000 hours in direct hand therapy practice experience remained unchanged.

This change was influenced by several observations by the HTCC Examination Committee. In 2014, HTCC in consultation with Professional Examination Service (ProExam), performed a practice analysis study of hand therapy, the fifth in a series of similar studies performed by HTCC over a 30-year period. In 2016, HTCC published the results of this analysis in the *Journal of Hand Therapy*. Through the practice analysis process and feedback received since it was completed, it was identified that new therapists appear to be acquiring hand therapy knowledge at a more accelerated rate than their predecessors due to immediate access of information through technology and advanced academic requirements. The practice analysis showed that much of the knowledge gained by therapists was obtained in the first two years of specialization. In addition, both occupational therapists and physical therapists now enter practice with a graduate degree instead of a bachelor's degree.

## RECERTIFICATION POLICY CHANGES

The Recertification Committee used the data obtained from the practice analysis to update the requirements for the recertification program for 2017 and beyond. The Recertification Committee used the data to support an increased focus on core upper extremity therapy topics in the education and professional activities allowed for recertification. Category definitions were amended to focus on core upper extremity knowledge.

DID YOU KNOW?

The HTCC staff processed over 19,000 continuing education submissions in 2016.

Core knowledge reflects the most critical content areas from the current practice analysis and reflects the areas tested on the certification examination. These areas were rated by hand therapists in the practice analysis as being moderately or highly critical to the care of upper limb patients. Only professional development courses containing content pertaining to this core knowledge will be accepted in Category A of the recertification application. To review a list of areas classified as being core knowledge, please go to the **HTCC website**: <https://www.htcc.org/recertify/professional-development-category-overview/category-a>

Due to the focus of core upper extremity therapy topics, only 20 hours instead of 30 hours of course content will be accepted in Category C. Category C is for general occupational therapy or physical therapy content and courses related to complementary medicine. Category C no longer limits the number of complementary medicine course hours allowed in this category.

Now all 20 hours may be devoted to complementary medicine. Additionally, courses pertaining to practice management will no longer be accepted in Category C, and will be moved to Category F (Activities Related to Practice Management). The maximum hours accepted in Category F will remain six hours.

## OVERVIEW OF PROFESSIONAL DEVELOPMENT CATEGORY CHANGES

**Category A** (Formal Courses in Core Upper Extremity Therapy Knowledge/Content):

- Reserved for core upper extremity therapy

**Category C** (Formal Courses with General Clinical OT or PT Content):

- Decreased accepted hours in Category C from 30 to 20 hours per five-year cycle
- No maximum complementary medicine hours in this category (all 20 hours can be in complementary medicine courses)
- Move practice management courses to Category F

**Category F** (Activities Related to Practice Management):

- Courses related to practice management will be moved from Category C to Category F; the maximum amount will remain six hours

## EXAMINATION HIGHLIGHTS

The passing rate (percentage of people who passed the examination in any given administration) for the CHT examination since 2002 has ranged from 52 percent to 64 percent with the average pass rate being 56 percent. The mean passing rate for the past five years has been 59 percent. The pass rate of the May 2017 exam was 64 percent, for November 2016 it was 60 percent and in May 2016 it was 57 percent.

The number of therapists taking the exam in 2016 was the largest number since 2009. The number of exam candidates in 2017 appears to be on track to continue this trend of increased examination candidates.

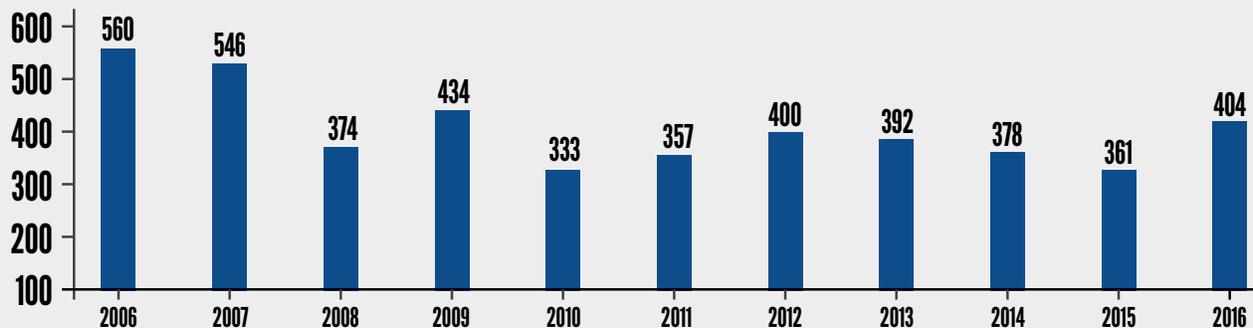
## RECERTIFICATION HIGHLIGHTS

HTCC continues to show a very high recertification rate with over 92 percent recertifying on average since 2006. The table on page 30 shows the recertification rate by year since 2006.

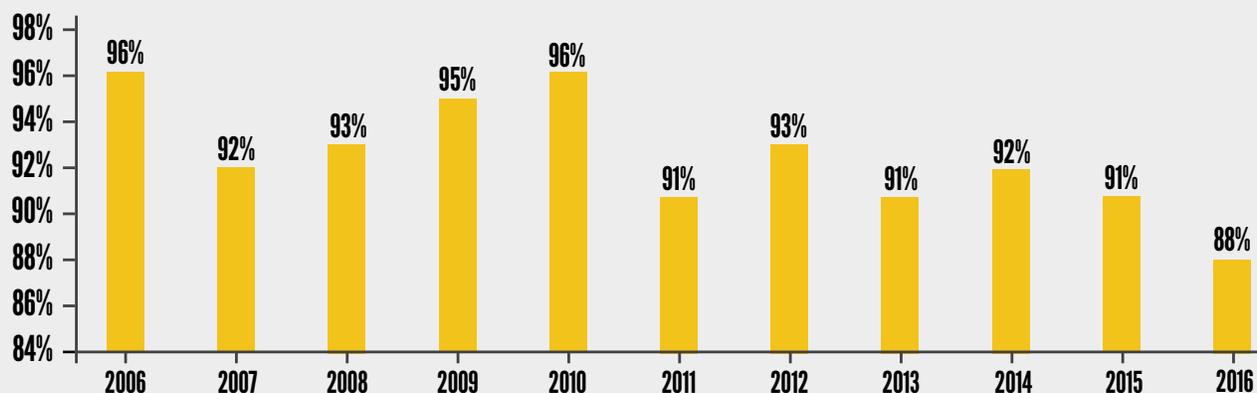
## ▶ ALLIED ORGANIZATIONS UPDATE

[CONTINUED]

### EXAM CANDIDATES 2006 TO 2016



### PERCENT RECERTIFIED 2006 TO 2016



#### DID YOU KNOW?

The “Find a CHT” section is the most frequently visited page of the HTCC website with over 47,000 visits in 2016.

1,523 CHTs (88 percent of those eligible) recertified in 2016. This recertification cycle includes those CHTs who were initially certified in 1991, many of whom have reached retirement age. The slightly lower recertification rate in 2016 reflects an increase in those leaving the profession due to age and retirement.

#### PEER MENTORING PROGRAM

In collaboration with ASHT, HTCC continues to develop the Hand Therapy Mentoring Program. [The Hand Therapist Peer Mentoring Manual](#) was updated in 2017 and resources continue to be added to the [Mentoring Section](#) on the HTCC website. HTCC’s social media site, the Hand Therapy Resource Center, was closed in 2017. Many of the resources are now offered for free on HTCC’s Mentoring Section. Content that has been added includes [flashcards](#), [online resources](#), [HTCC’s Self-Assessment](#) and [exam preparation tips](#) from therapists who recently passed the CHT exam.

# Board and Committee Recognition

HTCC would like to acknowledge and thank our board of directors, committee members and excellent staff.

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Lisa Kahn, Administrative Manager

**DID YOU  
KNOW?**

The Continuing  
Education Calendar is  
the second most visited  
page of the HTCC  
website with nearly  
20,000 visits in 2016.

# International Federation of Societies for Hand Therapy

## EXECUTIVE COMMITTEE OF IFSHT

The new executive committee was voted in at the 2016

Triennial Congress in Buenos Aires. The committee members are Anne Wajon (Australia), President; Sarah Ewald (Switzerland), Past President; Nicola Goldsmith (UK), President Elect; Cecilia Li (Hong Kong), Information Officer; Peggy Boineau (USA), Treasurer; and Maureen Hardy (USA), Secretary General. The committee met for a face-to-face meeting in Hong Kong in June 2017 to plan activities for their term.

## MEMBERSHIP

The IFSHT membership continues to grow and we are pleased to announce that we now have 36 full member societies, representing

9,029 hand therapists worldwide. There are six associate member societies and eight corresponding members. Over the last 12 months, Nepal and Qatar upgraded from corresponding to associate members, and Ghana became a new corresponding member. IFSHT appreciates the support of our commercial members and are pleased that Klarity has recently joined Orfit Industries, 3-point products, T Tape Company, NorthCoast Medical and DanMic Global in supporting our endeavors.

## COMMUNICATION

IFSHT continues to communicate regularly with delegates and therapists around the world. Avenues of communication include the *IFSHT Update*, which is available online in addition to being published quarterly in the American and British *Journals of Hand Therapy*. IFSHT also coordinates a therapy contribution to the *IFSSH Ezine* and is proud of the caliber of publications to date. Readers can access past contributions and subscribe to the *IFSSH Ezine* at <http://www.ifssh.info/ezine.html>.

## ▶ ALLIED ORGANIZATIONS UPDATE —————▶

### [CONTINUED]

IFSHT has recently created a social media committee made up of individuals who are keen to upgrade the presence of IFSHT on social media. Please like us on Facebook and contribute relevant content to make this a worthwhile experience. We currently have 1,040 followers. IFSHT also sends out the IFSHT Hand Therapy Connections E-Newsletter twice per year to email recipients.

### IFSHT WEBSITE

The website continues to be actively managed, and recently added a new page to improve the process of volunteering to join a committee. IFSHT is keen to have volunteers to help with its numerous activities, and seeks volunteers for the following committees: financial review, sponsorship, education, awards, translation, social media, silent auction and triennial scientific programme. If you are suitably qualified and interested to support our activities, apply at [www.ifsht.org/content/request-join-committee](http://www.ifsht.org/content/request-join-committee).

Applications for the International Teaching Grant are also available to be downloaded from the website. We were particularly pleased that Ghana successfully became a new corresponding member of IFSHT following our support of a teaching trip to Komfo Anokye Teaching Hospital in Kumasi, Ghana in 2016.

The website also provides the opportunity for companies offering hand therapy courses to advertise hand therapy courses for a fee.

### IFSHT TRIENNIAL CONGRESS

- 10th IFSHT Triennial Congress, October 24-28, 2016 in Buenos Aires, Argentina: This Congress was a great success and welcomed over 360 therapists from around the world. Beatriz Inés Piso (chair of the local organising committee), Sarah Ewald (past president IFSHT), Birgitta Rosén (program co-chair) and their teams provided a hugely successful scientific program with 92 invited presentations, 48 free papers and 35 e-posters. The silent auction received more than 300 donated items and raised over \$7,000 toward the IFSHT Travel Grant Fund.
- 11th IFSHT Triennial Congress, May 20-24, 2019 in Berlin, Germany: Preparations are well underway for the 11th IFSHT Triennial Congress. Natascha Weihs is the chair of the local organising committee DAHTH, Beate Jung and Dorit Aaron are co-chairs of the scientific program and Intercongress is the appointed Professional Congress

Organising Committee. Save the date and plan to join us in Berlin! Stay updated on information about the Congress at <http://ifssh-ifsht2019.com>.

### EDUCATION

IFSHT continues to provide educational resources to hand therapists worldwide through its quarterly contribution to the *IFSSH Ezine*. Our website provides a listing of postgraduate hand therapy courses that are offered around the world along with a list of national and international education events at <http://www.ifsht.org/page/education>.

### AWARDS

The inaugural Cristina Allegri Innovation Award was presented at the Congress in Buenos Aires to Birgitta Rosén from Sweden in recognition of her new methods for early sensory re-learning following nerve repairs. She has provided an in-depth summary of this work in the August 2016 *IFSSH Ezine* (Issue Number 23).

Five therapists were fully supported by the Evelyn Mackin Award to attend the Congress in Buenos Aires. The therapists attended from Chile, Mexico, Ecuador, Nepal and the Philippines. Another 16 therapists were supported to attend the Congress by the IFSSH/IFSHT Triennial Congress Travel Grant. The supported therapists came from Australia, Brazil, Colombia, Czech Republic, Estonia, Iran, Kenya, South Africa, Spain, the United Kingdom and Venezuela.

### FUNDRAISING

Earlier this year, IFSHT created a **memorial fund** to honor Paul van Lede, one of the great teachers in hand therapy. We continue to encourage donations to support our activities, and are particularly keen to use these and other donated funds to provide global educational opportunities in hand therapy.

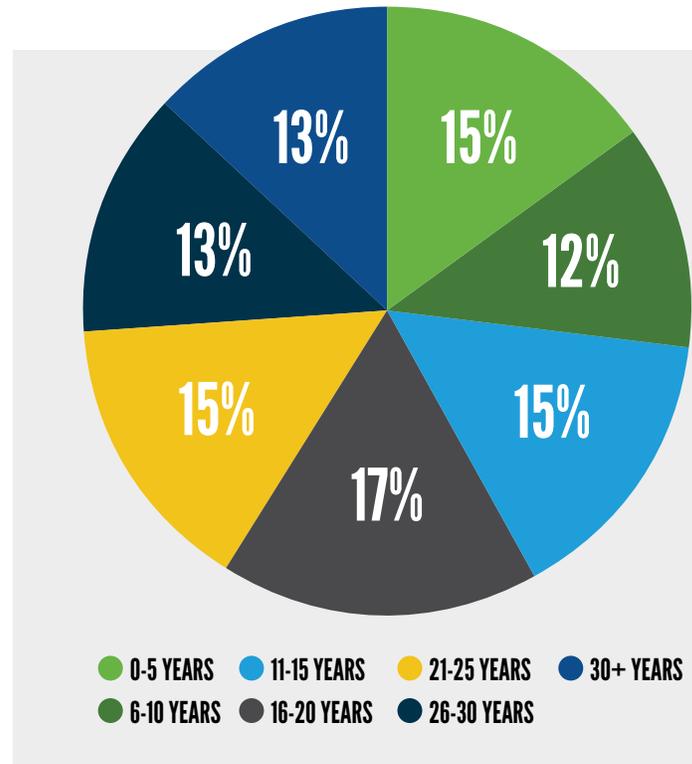
### GRANTS

At our recent executive committee meeting in Hong Kong, it was decided that IFSHT would increase funds available for the international teaching grant to \$1,500. This initiative supports volunteer therapists when they travel to under-developed parts of the world to promote the development of hand therapy and improve the quality of rehabilitation provided to those persons requiring hand therapy. We look forward to receiving applications for this grant! Download an application form at <http://www.ifsht.org/page/international-teaching-grants-0>.

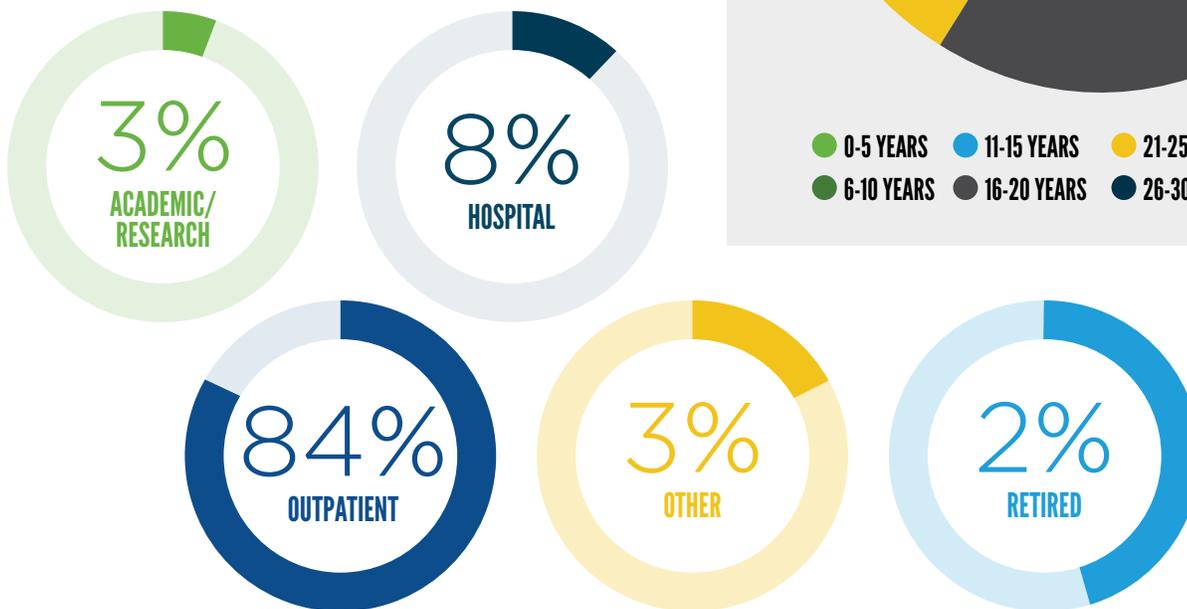
# ASHT BY THE NUMBERS

## Years of Hand Therapy Experience

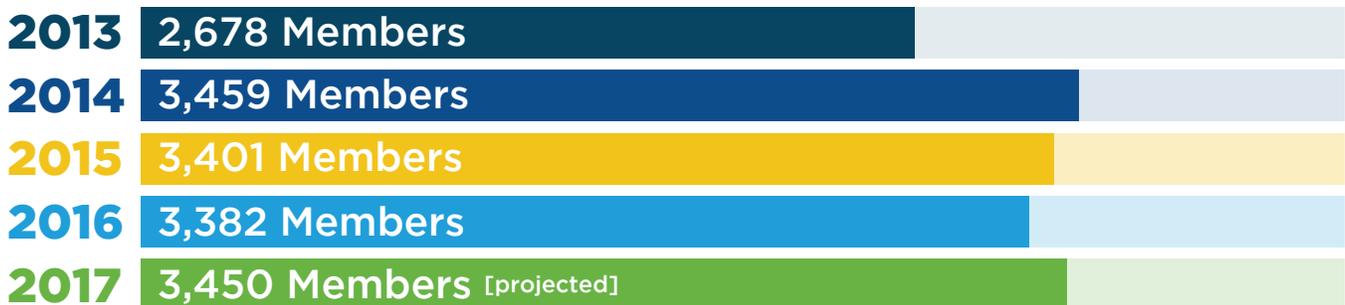
Just over one quarter (26%) of ASHT members have practiced for 26 years or more. Nearly one third (32%) of members have been in practice between 16 and 25 years, while 27% have 6 to 15 years of hand therapy experience. Almost 1 in 5 members (15%) have practiced five years or fewer.



## Practice Setting



## Total ASHT Membership





*Kristin Valdes, OTD, OTR, CHT*

## INCOMING PRESIDENT'S MESSAGE

“Continuity gives us roots; change gives us branches, letting us stretch and grow and reach new heights.”

— PAULINE R. KEZER

**A**SHT's roots were established 40 years ago and the vision of our founding members created a society dedicated to the practice of hand therapy. Times are changing much faster than they did 40 years ago. Technological advances are a part of daily hand therapy practice now with most therapists using electronic documentation systems and computers in practice. Some changes are good and other changes can be perceived as threats to our practice.

Because of the rapid changes and threats that the profession of hand therapy faces, it has never been more important to be a member of ASHT. This past year our profession has faced challenges that we thought were resolved years ago. Shouldn't hand therapists have the right to fabricate custom orthotic devices for our patients? We were the first professional organization to recognize the threat and work with our parent organizations to strategize a plan to address the threat.

We still do not know the outcome of that plan at the time I am writing this letter.

In response to the rapidly changing legislation that affects our practice, ASHT has invested in a Legislative Action Center. This resource allows hand therapists to contact their legislators to voice their concerns on proposed policy changes. We are currently facing the prospect that private insurers may not consider OT and PT services an essential coverage benefit. Our voices must be heard to effect change.

I am honored to be serving as ASHT's President. The volunteers of ASHT have created wonderful resources for our members. I hope to see our society reach and grow to new heights to the benefit of the patient population that we serve. The ASHT Board of Directors will strive to chart a course that leads to continued growth of our Society.

# SUPPORTER ACKNOWLEDGEMENT

ASHT GRATEFULLY ACKNOWLEDGES THE INDIVIDUALS AND ORGANIZATIONS WHOSE 2016-2017\* CONTRIBUTIONS FURTHER THE MISSION OF OUR ORGANIZATION AND THE WORK OF THE HAND THERAPY PROFESSION. WITHOUT YOU, OUR WORK WOULD NOT BE POSSIBLE.

*\*January 1, 2016—September 25, 2017*

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