

**OTA 150**  
**LIFE SPAN SKILLS I**

Prerequisites: Enrollment in the Occupational Therapy Assistant program

Corequisites: PSY 241 and OTA 170

This course is designed to use knowledge gained from PSY 241 as it applies to occupational therapy practice from birth to adolescence. Topics include review of normal growth and development, identification and discussion of common disabilities and delays, assessment, treatment planning, and intervention approaches used with these populations. Upon completion, students should be able to identify and use assessments, screenings, and interventions for infants through adolescents for selected disabilities and developmental delays in various settings.

Course Hours Per Week: Class, 2. Lab, 3. Semester Hours Credit, 3.

**LEARNING OUTCOMES:**

Upon completion of this course, the learner will be able to:

- A. Work effectively with the supervision of an OT/L.
  - 1. Observe an OT - OTA relationship in a pediatric practice.
  - 2. Successfully complete laboratory and clinical experience
  - 3. Interact effectively with at least one OT supervisor in a pediatric setting.
- B. Function as a member of a health care team.
  - 1. Demonstrate knowledge of OTA role in pediatric settings.
  - 2. Participate effectively in a multidisciplinary team activity regarding a pediatric client during a laboratory and clinical experience.
- C. Reconcile personal and professional goals with employer objectives and policies.
  - 1. Identify personal goals for laboratory and clinical experiences.
  - 2. Identify facility objectives and policies that are important in the laboratory and clinical experience.
  - 3. Determine relationships of these two entities and identify ways to positively incorporate them into an action plan.
- D. Maintain records consistent with Durham Tech requirements.
  - 1. Identify record requirements of fieldwork sites.
  - 2. Adhere to record keeping requirements during experiences.
  - 3. Turn in all assignments in a timely and efficient manner.
- E. Express ideas clearly in written reports.
  - 1. Complete pediatric case study.
  - 2. Complete screening activity write-up
  - 3. Complete pediatric skill development reports.
  - 4. Complete personal goals reports.
- F. Demonstrate a caring non-judgmental attitude.

1. Interact effectively with pediatric clients regardless of race, sex, physical abilities or appearance, cognitive abilities, behavioral or environmental conditions.
  2. Interact effectively with all caregivers of pediatric clients.
- G. Communicate with pediatric clients on their level.
1. Correctly interpret verbal and non-verbal behaviors of pediatric clients.
  2. Correctly interpret verbal and non-verbal behaviors of caregivers.
  3. Use appropriate verbal and non-verbal communication skills to share information with pediatric clients and caregivers.
  4. Modify and use assessment tools to determine effectiveness of communication skills with pediatric clients and their caregivers.
- H. Prepare for clinical assignments.
1. Complete pre-clinical checklist prior to laboratory and clinical experiences.
  2. Successfully complete practice sessions prior to participation in laboratory and clinical activities.
- I. Participate in developing pediatric treatment plans during laboratory and clinical experiences in different settings
- J. Assist in implementing occupational therapy intervention.
- K. Assist with data collection and evaluation for pediatric clients, under the supervision of an OT/L.
1. Assist with the assessment of pediatric clients during laboratory and clinical experiences.
  2. Collect and report objective data on pediatric clients.
- L. Educate others in the area of established service competency under the supervision of an OT/L.
1. Demonstrate at least one service competency
  2. Effectively instruct fellow students in at least one service competency.
- M. Administer standardized tests with pediatric clients under the supervision of an OT/L.
1. Demonstrate service competency for selected standardized tests.
  2. Administer standardized tests to pediatric clients during lab session.
  3. Provide report of the test results and the test administration process.
- N. Assist pediatric clients with self-care activities.
- O. Position and transport pediatric clients correctly and safely
- P. Apply knowledge of normal structure and function of the human body to pediatric clients.
- Q. Apply knowledge of normal human growth and development to pediatric clients.
1. Identify typical development in areas of motoric, psychological, sensory, cognitive and social performance.
  2. Identify atypical development in the areas of motoric, psychological, cognitive and social performance.
- R. Apply knowledge of health and illness to the pediatric client.
1. Complete report on a common diagnostic category in the pediatric population.
  2. Complete case study report on a pediatric client with a commonly encountered educational or medical diagnosis.
- S. Provide seating and positioning adaptation to facilitate functioning of pediatric clients during selected assessment and treatment activities.
- T. Use assistive technologies with pediatric clients.

1. Develop at least one play-oriented activity using assistive technology for use with a pediatric client.
  2. Develop and use at least one educationally-oriented activity for use with a pediatric client.
- U. Use therapeutic media techniques with pediatric clients.
1. Within selected intervention approaches, use at least two therapeutic media in developing and implementing a treatment program in a case study.
  2. Within a selected intervention approaches, use at least two therapeutic media with a pediatric client.
- V. Practice behavior optimization techniques with pediatric clients.
- W. Identify obstacles/barriers to effective learning for pediatric clients.
- X. Use contextual information to provide optimal assessment and treatment experiences for pediatric clients

## **OUTLINE OF INSTRUCTION:**

- I. Establish baseline knowledge, skills, and attitudes related to pediatric population
- II. Review typical development:
  - A. By age groups
    - 1) Infants
    - 2) Toddlers
    - 3) Children
    - 4) Youths
    - 5) Adolescents
  - B. With respect to performance skills, client factors, and contextual considerations
    - 1) Sensory motor performance components
    - 2) Cognitive integrative and cognitive components
    - 3) Psychological skills and psychological components
    - 4) Environmental considerations
      - a. Family
      - b. Culture
      - c. Setting
      - d. Temporal structure
  - C. With respect to areas of occupation
    - 1) Self-care activities
    - 2) Educational activities
    - 3) Play activities
    - 4) Social participation
- III. Identify atypical development
  - A. With respect to performance skills, client factors, and contextual considerations
    - 1) Motor performance skills and associated client factors and body structures
    - 2) Processing performance skills and associated client factors and body structures

- 3) Interactional performance skills and associated client factors and body structures
  - 4) Performance patterns
  - 5) Multiple component conditions
  - 6) Contexts issues:
    - a. Familial – personal
    - b. Cultural
    - c. Spiritual
    - d. Physical
    - e. Temporal
  - B. With respect to areas of occupation
    - 1) ADLs & IADLs
    - 2) Education
    - 3) Work
    - 4) Play
    - 5) Leisure
    - 6) Social Participation
  - C. In relationship to diagnoses (medical and educational categories)
- IV. Explore the role of family in working with the pediatric population
- A. Family systems theory
  - B. Family life cycle
  - C. Family ecology
  - D. Dysfunctional families & environments
  - E. Disabled child in the family system
  - F. Laws and reimbursement system
- V. OT assessment & intervention
- A. Approaches/frames of reference
    - 1) Developmental
    - 2) Perceptual Motor
    - 3) Biomechanical
    - 4) Human Occupation
    - 5) Neurodevelopmental
    - 6) Behavioral
    - 7) Sensory Integrative
  - B. OT assessment tools - OTA use
    - 1) Physical growth
    - 2) Reflex and motor development and function
    - 3) Cognitive and sensory development and function
    - 4) Affective and emotional development and function
    - 5) Self-care abilities and performance
    - 6) Social or interaction/communication abilities
    - 7) Multidimensional development
  - C. OT treatment planning
    - 1) Using assessment data to build a plan
    - 2) Assisting the OT in plan development

- 3) Helping to set priorities
  - 4) Identifying caregivers' roles and responsibilities
  - 5) Helping determine intervention strategies
  - 6) Assisting in development of IEPs and goal setting
- D. OTA intervention considerations
- 1) Principles
  - 2) Activities
  - 3) Settings
  - 4) Strategies
  - 5) Models
  - 6) OT relationships
- VI. Investigate a variety of pediatric programs
- A. Medical settings
  - B. Educational settings
  - C. Community settings
  - D. Home setting

### **REQUIRED TEXTBOOKS AND MATERIALS:**

Case-Smith, J. Occupational Therapy for Children. (4<sup>th</sup> ed.). St. Louis, Mosby, 2001.

Ayres, A. J. Sensory Integration and the child. 25<sup>th</sup> Anniversary Edition. Western Psychological Series, 2005.

### **STATEMENT FOR STUDENTS WITH DISABILITIES:**

Students who require academic accommodations due to any physical, psychological, or learning disability are encouraged to request assistance from a disability services counselor within the first two weeks of class. Likewise, students who potentially require emergency medical attention due to any chronic health condition are encouraged to disclose this information to a disability services counselor within the first two weeks of class. Counselors can be contacted by calling 686-3652 or by visiting the Student Development Office in the Phail Wynn Jr. Student Services Center, room 1309.