

**Pennsylvania College of Technology – School of Health Sciences
Occupational Therapy Assistant Major**

Vision Statement

Pennsylvania's Premier Occupational Therapy Assistant Program

In concert with the Strategic Vision of Pennsylvania College of Technology (Pennsylvania's Premier Technical College) and the Centennial Vision of AOTA, the faculty and staff of the Occupational Therapy Assistant Major strive to educate OTA's who are drivers of change for the benefit of the OT Profession by:

- Taking leadership roles to influence best practice
- Communicating and demonstrating their commitment to the value of occupation to support health, participation, and wellness
- Committing to lifelong learning and enhanced information literacy
- Supporting best practice through use of evidence based and technological resources
- Promoting and advocating for occupational therapy practice in diverse practice areas

Mission and Values

OCCUPATIONAL THERAPY ASSISTANT PROGRAM MISSION STATEMENT

The OTA Program staff and faculty provide quality instruction:

- to facilitate the development of excellent Occupational Therapy Assistants
- to model best practice
- to promote the value of life-long learning.

OCCUPATIONAL THERAPY ASSISTANT PROGRAM VALUES:

These core values guide the OTA Program to accomplish our mission and achieve our vision:

Hands-on Education: We believe the best preparation is a learning environment emphasizing application of theory to real world situations. We provide experiential learning with state of the art equipment, mentored by skilled staff and faculty with diverse clinical experience, in addition to diverse fieldwork experiences, to enhance the development of clinical reasoning.

Accountability/Responsibility: Our student's development and potential for professional excellence is at the core of decision making. We believe they are active partners in the learning process. By taking individual responsibility and being self directed learners, students can excel personally, academically, and clinically.

Life-Long Learning: We believe that at the core of a successful career as an occupational therapy assistant, students need to develop and maintain a thirst for learning that is supported by competent information literacy. Clinical excellence, professional obligations, and advocacy depend on continual exploration, integration, and critique of information from multiple sources, an examination of relevant historical trends, and an appreciation for the future potential of the profession.

Collaboration: We believe a highly valued skill in any working environment is the ability to work as a member of a collegial team. To face complex challenges and provide quality client-centered care with creativity and innovation, students need to appreciate diversity of thought, perspectives, backgrounds and experience.

Community Partnerships: Partnering with OT Fieldwork Educators and other professional personnel and agencies allows our curriculum to be inclusive of current trends, and prepare our graduates for competent entry level practice. Through these collaborative relationships, students gain exposure to diverse applications for OT practice and the program can facilitate opportunities for promotion of best practice.

OTA Statement of Philosophy

"The content and process of a curriculum create a 'pair of glasses' through which occupational therapists view the needs of those they serve. A curriculum influences what graduates notice and address about people, their occupations and their environments. It also conveys an understanding of graduates' responsibility for learning and their profession's potential contribution to society." (Yerxa, A Keystone of a Curriculum, 366)

The philosophy set forth describes the "pair of glasses" that is used to view humankind, the role of occupational therapy in service delivery, and the manner in which students, and the service population learns.

Philosophical Perspective on Humankind:

The Occupational Therapy Assistant Major subscribes to the Philosophical Base of Occupational Therapy as adopted by the Representative Assembly of AOTA in 2011. In the implementation of the program, the faculty will strive to operationalize this philosophical base by focusing on the occupational nature of man.

Historically, occupational therapy views the individual from a holistic perspective: an essential unity of mind and body acting as part of a social system. This integrated perspective of human behavior is used to understand elements of motivation, occupational performance, and the effects of occupational performance on health, wellness, and life satisfaction. Behavior/function is viewed from the perspective of an open system model, where a change in any part of the process - the human system, the task, or the environment can facilitate adaptation. Through a holistic study of development through the lifespan, the student can gain insight into the interactive forces that contribute to the profile of individual adaptation. With these perspectives, the concepts and applications of purposeful activities and occupations can be combined with the technologies of modern day practice to provide the student with insightful and diversified perspectives for the provision of occupational therapy services.

Philosophical Perspective on the Role of OT in Service Delivery:

Occupational therapy is a profession that is essential to the promotion of health and wellness of humankind (Wood, 403). Health, from an occupational therapy perspective, is a "positive, dynamic state of well-beingness, reflecting adaptability, a good quality of life, and satisfaction in one's own activities" (Yerxa, Health and the Human Spirit for Occupation, 412). Occupational therapy practitioners guide their patients and clients in a process of healing and health promotion. Through the use of directed occupations the treatment process acts to restore function, prevent disability, reinforce principals of health, and maintain well-being.

In the context of occupational therapy practice, it is imperative to maintain a broad perspective of health and healing as complementary to and in relationship with reductionistic models of care. Studying disease, dysfunction, and social ills, as they affect the components of occupational function, is an important element in the examination of the human system. An occupational being is, however, more than the sum of these units. As a gestalt whole, an occupational being is a "complex, multileveled (biological, psychological, social, spiritual) open system who interacts with their environment by using occupation to make an adaptive response to its demands." Singular deductive components of that holistic perspective cannot guide the entire evaluation or treatment process. "Occupation cannot be reduced to a part and still be occupation, any more than water can be separated into hydrogen and oxygen and still be considered liquid and drinkable." (Yerxa, Health, 413)

An *occupational assessment* requires the practitioner to first gain information about what a person needs or wants to *do*. As the process continues, the values, roles, and habits of the individual are considered,

the cultural and environmental influences on their occupations are examined, and the skills and patterns that support their participation in activities are evaluated. Occupational therapy practitioners need to consider the individual's balance of his/her overall use of time, daily habits and routines and needs as an occupational being for creativity, competence and challenge (McLaughlin, 357). *Occupational assessment* does not focus exclusively on dysfunction or pathology. It is imperative that the process acts to facilitate and promote the strengths and potential of individuals. In this manner, occupational therapy practitioners work as facilitators of adaptive change, growth and development.

Occupational Therapy views individuals, their families or caretakers as active participants in goal setting and implementation of the intervention process. He/she/they can be a cause of health and wellness experiences as he/she/they make choices to direct the effects of disease and/or the environment. Occupational therapy thus is a modality for "lifestyle redesign" (Mandel et al, Introduction). By acting as a facilitator of goal directed occupations, occupational therapy practitioners can assist individuals and groups within the context of their expected performance to realize their individual potential. Herein, occupational therapy demonstrates its unique contributions to health service delivery.

Philosophical Perspective on Learning

"The things we have to learn before we can do them, we learn by doing them."
Aristotle

Learning requires first and foremost an environment that is perceived as void of unsafe risk. It is only in these conditions that higher ordered learning can be accomplished. Within this milieu the learner can then explore multisensory experience to gain competence and mastery of concepts.

Learning begins with the development of meaning. This nurtures attention and motivation. The process continues with the presentation and experimentation of ideas presented in multiple formats and manipulated through direct experience. Creativity, inventiveness and generalization of learning to multiple life situations occurs as a result of opportunities for application of learned information to real life events.

Students need to become flexible learners. They must be able to conceptualize, but more importantly to DO - to transfer their learning to clinical situations and to their lives. In order to become a "doer," the learner needs to accept the primary responsibility for their learning and view instruction as a process where an instructor as well as other group members act in roles as facilitators.

Students need to develop the skills to act as positive models within their role as an OTA in a service arena that is impacted by dramatic change and development. They must be insightful to the cultural/societal realities and dynamics of services directed by current medically-driven, reductionistic systems. They need to become autonomous critical thinkers who are insightful and faithful to the tenets of the art and science of occupational therapy. To maintain competence and abide by the dictates of The Occupational Therapy Code of Ethics (AOTA, 2010) they need to maintain a proactive stance to direct their service based on the most current trends of the field as defined by the American Occupational Therapy Association and supported by evidenced based research.

References:

American Occupational Therapy Association, Inc. (2010). Occupational therapy code of ethics and ethics standards. Bethesda, MD: AOTA.

American Occupational Therapy Association. (2011). The philosophical base of occupational therapy. *American Journal of Occupational Therapy*, 65 (Suppl.)

Mandel, D., Jackson, J., Zemke, R., Nelson, L., and Clark, F. (1999). *Lifestyle redesign: implementing the well elderly program*. Bethesda, MD: AOTA.

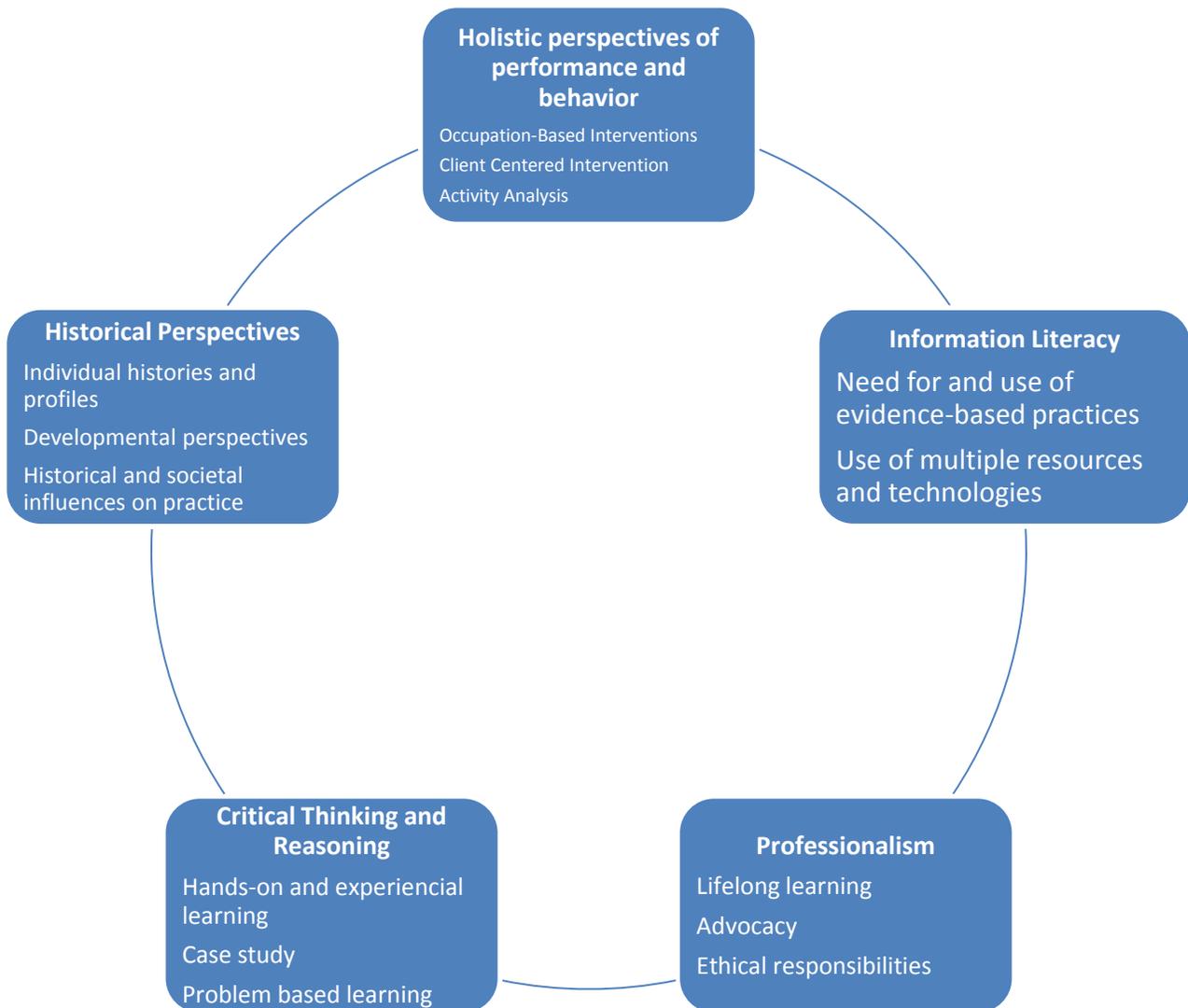
McLaughlin-Gray. (1998) Putting occupation into practice: Occupation as ends, occupation as means. *American Journal of Occupational Therapy*. 52:357.

Wood, Wendy. (1998). Nationally speaking: It is jump time for occupational therapy. *American Journal of Occupational Therapy*. 52: 403.

Yerxa, E. (1998). Health and the human spirit for occupation. *American Journal of Occupational Therapy*. 52: 412.

Yerxa, E. (1998). Occupation: the keystone of a curriculum for a self-defined person. *American Journal of Occupational Therapy*. 52: 366.

OCCUPATIONAL THERAPY ASSISTANT CURRICULUM DESIGN THREADS



OCCUPATIONAL THERAPY ASSISTANT MAJOR CURRICULUM DESIGN NARRATIVE

A central theme or paradigm of occupational therapy is the interdependent relationship of human occupation and health. This concept acts as the root of the Occupational Therapy Assistant Program's curriculum design. Man, through interaction with his environment has the ability to influence his own health. From this core idea, the curriculum examines individual adaptation and interactions with physical, social and societal environments.

The goals of occupational therapy relate to the development of adaptive and competent occupational performance and engagement in meaningful occupations that in turn supports health and leads to occupational identity. An individual's profile reflects volition, habituation, and performance capacity within their contexts/environments. The curriculum therefore seeks to provide a broad based knowledge in liberal arts, including physical science, social science, and communications in order to provide the student with this gestalt perspective of human behavior. Related content is sequenced to assure prerequisite or co-requisite content to support core content.

To have an effect on the future, as is the goal of therapeutic intervention, one needs to examine and appreciate the past. Through a historical account, the values and behaviors of individuals as well as societies can be understood and respected. First year courses are designed to explore individual occupational profiles across the lifespan as change and adaptation guide the normal developmental process. OCT 100 introduces concepts of occupational performance as a perspective of human behavior. Normal development is studied in OCT 122 as the student grows to appreciate the changes in occupational performance as a process. The history of the profession is also introduced in OCT100 to assist the student in gaining insight into the social changes that affect the individual, society, and health care systems.

The occupational therapy process serves as a model for organization of service. It also acts as a tool for pedagogy which reflects the developmental learning abilities of the student. The student begins the program by developing observation skills which are applied to the examination of individual profiles as well as to activities. OCT 100 and 101 introduces activity analysis and the professional language as published in the Occupational Therapy Framework. This language and more advanced skills of observation and analysis of normal development and behavior are reviewed in OCT 122, 124 and 121. As more foundations are developed by co-requisite science and psychology courses the student can begin to structure these observations to become more astute in the process of assessment. More intermediate skills of activity analysis are practiced through more detailed deduction, induction and analysis.

Goal setting requires advanced analysis and synthesis. The student needs to understand priorities and causal relationships to answer the needs of the individual in client-centered interventions. Clinical reasoning develops through this more advanced stage. Second year courses seek to develop applications of the OT process, activity analysis, and clinical reasoning to OT practice. OCT 201, OCT 205, OCT 206, OCT 203, OCT 204, OCT 224, OCT 226, and OCT 221 examine clinical conditions and focus on symptoms of dysfunction as they relate to the medical diagnosis, client factors, performance skills, and the patient/clients occupational experience. The student gains a broader perspective of application of the OT Domain and Process with practice through case study and problem based learning strategies in OCT205, OCT224, OCT226 and OCT228, which are often integrated with Level I Fieldwork experiences and assignments.

The curriculum does not solely exist as a linear chain reflecting an increased knowledge base. General systems theory is applied. The spiraling continuum of development begins with foundations which are called forth as knowledge expands and becomes more complex. The student must draw from a foundation of knowledge in the physical sciences, communications, psychology, adaptive occupational behavior, and activity analysis to develop the ability to apply these concepts to maladaptive conditions.

Students study normal occupational behavior, development, and concepts of wellness in the first year classes. In addition, fundamental clinical skills and professional obligations are introduced that are the foundation for more advanced clinical skills and developing skills in the third semester. Fourth semester courses provide a bridge to Level II fieldwork. In OCT224 advanced clinical reasoning, problem solving, and documentation are practiced to ready the student for entry-level professional competencies. In OCT228 and OCT229 students experience management and professional issues related to advocacy, entry level practice, certification, and ethical responsibilities.

Level I FW is integrated as a full day observation in OCT124 co-requisite with OCT 122 (developmental disabilities settings) in OCT 206 co-requisite with OCT 205 (physical dysfunction settings) and OCT227 co-requisite with OCT226 (psychosocial disability settings). These experiences, delivered within community settings supervised by a clinical educator, together with other class activities in community settings supervised by a faculty member, expose the students to a variety of opportunities to apply classroom learning at all levels of the curriculum. These experiences, in addition to the multiple opportunities for hands on simulated learning in laboratory components of the curriculum, enable the student to observe, experiment, and practice clinical skills prior to Level II Fieldwork.

The curriculum also examines the OT profession as a part of the total health care system, including perspectives of practice in non-traditional or emerging areas of service delivery. The role of occupational therapy is explored historically, with this knowledge acting as a base by which the student can comprehend present models of practice and anticipate future directions and advocate for change.

The directions of the profession that are guided by practice are explored. Students are encouraged to observe practice as dynamic and to assume professional responsibility for these trends of change. Students need to be insightful to and responsive to the catalysts which may act on the profession. Applications of these concepts are introduced in OCT 100, 205, and 226 as the philosophical roots and history of the profession are explored in relation to varied practice areas and models. These objectives advance to include applied levels of study in OCT 224 and 228.

The directions of the profession that are guided by academia and scholarship are also explored. Student assignments are developed to foster the development of information literacy and lifelong learning. Students are encouraged to explore multiple resources, and to be critical in using the best possible evidence to support their clinical decision making. They develop insight into the importance of advocacy of the patient and of the profession in a climate of challenges and change.

Through all the change inherent in the profession however, students cannot lose sight of the core paradigm of occupation. This philosophical core is realized by the skilled application of activity analysis to develop, restore, or maintain occupational function and well being. Occupational therapy gains identity and autonomy through application of these skills and concepts. It is through the use of holistic activity analysis, and its application to treatment that enhances productive and meaningful occupation, that the occupational therapy assistant realizes his or her greatest strength and asset to the profession.