



# The Learning Curve

*“Enhancing the Knowledge of DDDS Professionals”*

## Occupational Therapy Helps Individuals Live Life to its Fullest

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### Did you know that...

- **Nearly on third of people employed in the profession of occupational therapy work with children.**
- **The U.S. Bureau of Labor Statistics calls OT one of today's fastest growing careers.**
- **Nationwide, there are 324 college or University-base educational programs.**
- **Occupational therapists have at least a four-year bachelor's degree.**
- **Approximately 117,000 occupational therapists and assistants are licensed to practice.**



# DOTA

Delaware Occupational Therapy Association

<http://www.dotaonline.org/>

**AOTA** The American Occupational Therapy Association, Inc.

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Occupational Therapy (OT) enables people of all ages live life to its fullest by helping them promote health, prevent—or live better with—injury, illness, or disability. It is a practice deeply rooted in science and is evidence-based, meaning that the plan designed for each individual is supported by data, experience, and “best practices” that have been developed and proven over time.

Occupational therapists and OT assistants focus on “doing” whatever occupations or activities are meaningful to the individual. It is OT’s purpose to get beyond problems to the solutions that assure living life to its fullest. These solutions may be adaptations for how to do a task, changes to the surroundings, or helping individuals to alter their own behaviors.

When working with an OT practitioner, strategies and modifications are customized for each individual to resolve problems, improve function, and support everyday living activities. The goal is to maximize potential. Through these therapeutic approaches, OT helps individuals design their lives, develop needed skills, adjust their environments (e.g., home, school, or work) and build health-promoting habits and routines that will allow them to thrive.

By taking the full picture into account—a person’s psychological, physical, emotional, and social makeup as well as their environment—OT assists clients to do the following:

- Achieve goals
- Function at the highest possible level
- Concentrate on what matters most to them



in areas such as arm and hand use, thinking, or seeing, OT may be able to help.

Activities of Daily Living (ADLs) are tasks a person performs everyday to maintain their independence. These include: bathing, personal grooming, toileting, dressing, feeding, transfers, mobility and leisure activities, and functional communication (writing, typing, using the phone).

Other ADLs one might not consider, but which are important parts of life nonetheless, include home management and parenting.

- Maintain or rebuild their independence
- Participate in daily activities that they need or want to do.

Each year in April, occupational therapists, occupational therapy assistants, and students in practice, education, research, and science host a month long celebration showcasing the importance of OT.

OT helps people regain, develop and build skills that are important for independent living, health and happiness. Through the remediation of one's performance limitations and the incorporation of compensatory strategies and assistive technology, OT enables individuals to engage in the skills for the job of living. If one has trouble performing daily activities because of limitations

Many disabilities can affect how someone performs these skills. Occupational therapists often work with individuals on any or all of these activities so that they obtain or regain greater independence. Assistive technology, adaptive devices and compensatory strategies can be evaluated and utilized to assist one in reaching this goal.

Occupational therapists also work with individuals to assist them in regaining or obtaining greater independence in managing their home. Assistive technology and adaptive equipment can be incorporated to reach this goal. Utilization of compensation strategies may be beneficial in helping a person achieve greater independence.

Everyday activities are affected by how well we see. If vision is im-

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Occupational therapy enables people of all ages and abilities to engage in the activities that are meaningful to their lives.

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paired, then these daily activities may become more difficult. Often visual problems are only thought of as visual loss or blindness. There are additional visual components that may effect everyday tasks.

These include such things as:

- Acuity (ability to see clearly)
- Scanning / Pursuits (ability to move eyes side to side, up and down)
- Depth Perception
- Contrast Sensitivity
- Double Vision (ability to see singular items verses seeing double)
- Peripheral Vision
- Ability of the eyes to work together
- Visual Field (ability to see things all around)
- Color Perception (ability to see colors)



If required, occupational therapists may work in collaboration with behavioral optometrists in the assessment and treatment of visual impairments. They provide visual training exercises as well as suggest alternative solutions or techniques for areas of difficulty. There are potential adaptations that can be used to promote improvements in visual abilities and allow the person to become more independent. Occupational therapists may also make suggestions for changes in the environment which increase safety and independence.

### Transportation Safety Tips

(University of Michigan Transportation Research Institute)

In April 2000, the US standard, *WC-19 Wheelchairs Used as Seats in Motor Vehicles*, was approved by the American National Standards Institute / Rehabilitation Engineering and Assistive Technology Society of North America



(ANSI/RESNA (<http://www.ansi.org/> <http://www.resna.org>). This voluntary industry standard was approved more than 9 years ago but there is a lot more work to do to get the word

out about it. Read the [Ride Safe Brochure](#) and learn more about how to travel safely when sitting in a wheelchair on a bus or van. Look at [the up-to-date list of WC19-compliant wheelchairs and seating systems](#).



### Additional Transportation Tips:

- ◆ Read and follow all manufacturers' instructions.
- ◆ It is best to ride with the wheelchair backrest positioned at an angle of 30 degrees or less to the vertical. If a greater recline angle is needed, the shoulder [belt anchor point](#) should be moved rearward along the vehicle sidewall so the [belt](#) maintains contact with the rider's shoulder and chest.
- ◆ Maximize the clear space around the rider to reduce the possibility of contact with vehicle components and other passengers in a crash. Cover components that are close to the rider with dense padding.
- ◆ Check the wheelchair tie down and occupant-restraint system (WTORS) equipment regularly and replace worn or broken components. Keep the anchorage track free of debris.
- ◆ If a WTORS and wheelchair have been involved in a vehicle crash, check with the manufacturers to determine if the equipment needs to be repaired or replaced.
- ◆ Remove hard trays to reduce the chance of rider injury.
- ◆ A properly positioned headrest can help protect the neck in a rear impact.
- ◆ If it is necessary, use a head and neck support during travel.

Secure medical and other equipment to the wheelchair or vehicle to prevent it from breaking loose and causing injuries in a crash.

### Bed/Positioning Safety Tips

Since most people spend about a third of their lives in bed, it is important to ensure that the time spent there is comfortable. Comfort and sleeping well are essential, because for some people, this may mean the difference between their being able or unable to carry out activities independently.

For those with disabilities, the simple task of getting out of bed or transferring from a bed to a wheelchair can be challenging. Because each individual is unique, they have different needs. Therefore, an occupational therapist or physio-

therapist may assign a specific method for positioning a person in bed or transferring that individual from a bed to a wheelchair. There are also several different types of equipment available that can be used to assist in transfers which require instruction and practice. Devices range from mechanical lifts to a transfer board.



For people having difficulty getting into or out of bed, there is specially designed equipment which can be of assistance, such as: bed raisers, grab handles, leg lifters and lifting poles. Some of this equipment can be used independently; other items require the assistance of a second person or caregiver. Still other types of equipment are available to increase safety while in bed. For example, side rails can prevent people from rolling out of bed accidentally, and there is padding for rails and head and foot boards to reduce the risk of injury on hard metal frames.

There are several web resources with illustrations on proper techniques with regard to moving patients. (see the list below) However, one must be aware that the number one health concern among nurses is back pain and injury due to moving patients. So, before embarking on client transfers please consult an OT or any one of a number of approved guides on the subject.

### Resources

Rehabilitation Engineering & Assistive Technology Society of North America  
1700 N. Moore St, Suite 1540  
Arlington, VA 22209-1903  
tel: (703) 524-6686 | fax: (703) 524-6630

Brochures are available from:  
Univ. of Michigan Transp. Research Institute  
Email: [www.umtridoc@umich.edu](mailto:www.umtridoc@umich.edu)  
Phone: (734) 764-2171  
[http://www.travelsafer.org/RideSafe\\_Web.pdf](http://www.travelsafer.org/RideSafe_Web.pdf)

### Bed Positioning / Transferring

Book: [The Comfort of Home: An Illustrated Step-by-Step Guide for Caregivers](#), by Maria M. Meyer with Paula Derr, RN, Care Trust Pub., LLC, 2002.

<http://www.als-mds.org/publications/everdaylifeals/ch7/>

<http://wishard.kramesonline.com/HealthSheets/3,S,82598>