

Comprehensive Treatment Planning in Early Intervention through the lens of Occupational Therapy



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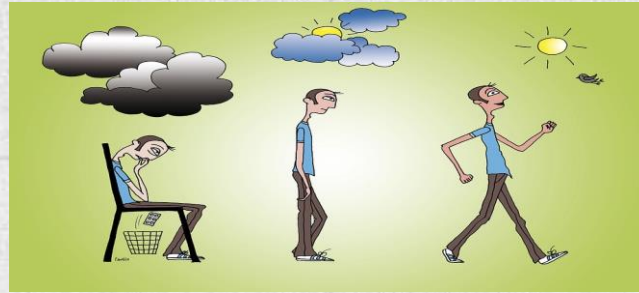
Objectives

OT's Roots in Mental Health Practice
Review of OT's Core Principles of Practice
Discuss specific Domains of practice and areas for
intervention
Laying the foundation for improved care



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Occupational Therapy (OT)



- Support individuals in occupations they need to, want to, and are expected to do in the activities of every day life.
- Focus on the person and environment to facilitate the processing and performance of everyday tasks as well as adapt the settings that one participates.



OT and Education

Must have Master's or Doctorate Level Degree

*Those that graduated prior to 2000 are grandfathered in to a Master's level education

Psychosocial life span development, cognition, anatomy, neuro-physiology, medical disability or change, social interaction, group dynamics, activity and environmental analysis



Brief History of OT

Where did occupational therapy begin?

What changes did WWII bring to the profession?



Flash forward to Now

- “.. occupational therapy is a core mental health profession in the U.S. Code of Federal Regulations and as a qualified mental health profession as defined by state statute and regulation”
- Bill and integrate both behavioral and physical health codes with appropriate diagnosis
- May provide preliminary “diagnosis” using standard terminology and taxonomy such as DSM or ICD, confirmed by prescribing physician and health care team

Please see Relevant Oregon Laws and Administrative Rules in the EASA OT Manual



Methods/Techniques

There are many incorporated into practice, some include...

PEO Model

Person Environment Occupation

MOHO

Model of Human Occupation

Sensory Integration

Harm Reduction

CBT

DBT

Attachment based treatment

Neurodevelopmental Therapy

Occupational Adaptation

Motor Learning



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MOHO

Model of Human Occupation

Volition: Thoughts, feelings, motivating factors that help us make our choices for action

Habituation: Recurring habits and Roles

Performance Capacity: Physical, Mental, Social skills needed for performance

-Kielhofner



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Framework

MOHO within a Recovery Model

Model of Human Occupation

- ❖ **Volition:** when people have autonomy and control over their lives they are better motivated to find values, interests, and purpose. The Recovery Model recognizes people have 'hopes, dreams, goals, and choices'
- ❖ **Habituation:** the Recovery Model encourages responsibility, with the emphasis upon community and social environments. This in turn facilitates individual having a daily routine that is purposeful, fulfilling, and structure which varies for each individual depending upon his or her stage of recovery
- ❖ **Brain-Body:** the Recovery Model facilitates development of skills to enhance confidence, self-esteem, concentration, and social interaction, leading to improvement in an individual's quality of life

(Wimberly & Peters, 2003, recovery in acute mental health, *OT News*, July, p 25)



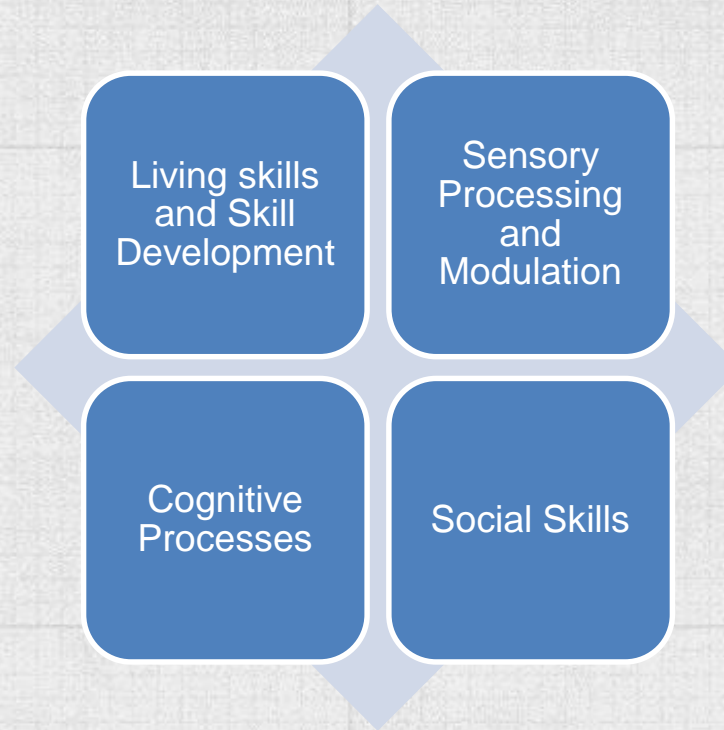
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Questions



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Areas of Intervention



For a comprehensive list of Occupations and Domains of Practice: EASA OT Manual



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OT Screening Tool

- **Personal Care**
- **Daily Structure**
- **Living environment**
- **Changing Scenery**
- **Organization**
- **Thinking skills**
- **Motivation**
- **Stress Management**
- **Sexual Health**
- **Interpersonal communication**
- **Interests**
- **Social Support**
- **Community Management**



Living Skills and Skill Development

- ❖ Explore each area: work, school, leisure activities, ADL's and IADL's
- ❖ What current skills do they have – emphasize these in relation to their present and future goals: motor, processing, general learned experience, strengths, values, interests
- ❖ Assess what changes may have taken place with the onset of illness
- ❖ Consider what can be altered in the environment of the interaction or experience to support continued participation and learning



Getting to know each other: Strengths and Interests

Interest Checklist: (over 21)

<http://www.cade.uic.edu/moho/resources/files/Modified%20Interest%20Checklist.pdf>

Adolescent Leisure Interest Profile under 21 (pages 96-101)

<https://www.cade.uic.edu/moho/resources/files/assessments/PIPs%20Manual.pdf>

Modified for adolescents/Adults, easy read picture format

<https://www.cade.uic.edu/moho/resources/files/InterestChecklistEasyReadVersionV1.1-2.pdf>



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Strengths Tools:

Strengths Assessment and Strengths Exploration tool

easacommunity.org- resources for professionals

Areas include: Daily Living Situation; Financial/Insurance; Social Supports; Health; Leisure/recreation; Spirituality

Strengths Assessment: What have I used in the past? What's going on today? What's available now? What do I want? Includes future priorities..

Strengths Exploration tool: New tool created by Center for Excellence. Contextualize individuals top personal strengths within their life history of experiences and interactions in a narrative format. Method is through storytelling of how strengths were acquired, developed, and how they continue to weave into present and future life domains. Includes future priorities..



Building Independence

- ❖ Assess home management, current relevance, immediate and future potential needs
- ❖ Gauge and measure the individual's readiness for increased independence
- ❖ Build supportive strategies to enable and sustain daily routine, habitual patterns at school, work or home

KEY: Match the current level of ability to the needs of the individual: imperative to create the right level of challenge for moving forward –build successes...if it's not working task needs to be broken down into more steps



Assessment Suggestion

Life Skills Inventory Independent Living Assessment Tool

Tool that covers 15 areas needed for independence that can be used to assess the current level, areas that need to be addressed when transitioning toward more independence and to assist in areas individuals may have anxiety about readiness for independence

http://www.sped.sbcsc.k12.in.us/PDF%20Files/tassessments/Independent%20Living/Life%20Skills%20Inventory_Independent%20Living.pdf

- ❖ Areas: Money Management/Consumer Awareness; Food Management; Personal Appearance and Hygiene; Health; Housekeeping; Housing; Transportation; Educational Planning; Job Seeking Skills; Job Maintenance Skills; Emergency and Safety Skills; Knowledge of Community Resources; Interpersonal Skills; Legal Skills; Pregnancy Prevention/Parenting and Child Care



Importance of Roles

Role Checklist

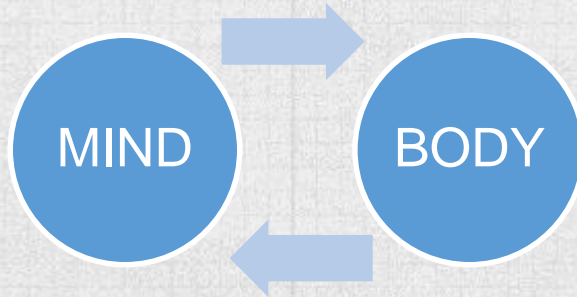
Supports individual in gaining understanding of what expectations are present of themselves and from others. Includes playful and purposeful roles, what value is placed, and whether balance is being maintained

<http://moho.uic.edu/resources/files/assessments/RoleChecklistWithInstructions.pdf>

Possible roles:

Student; Worker; Caregiver; Volunteer; Home maintainer; Friend; Family member; Spiritual/Religious participant; hobbyist/ amateur; Participant in organizations; Other



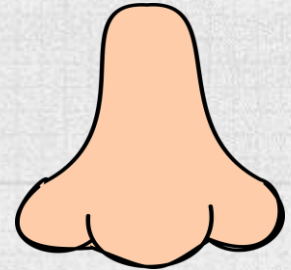


Sensory Processing & Modulation

- **How people interpret and respond to sensory information from the environment and what this means (internal and external experience)**
- **Greater understanding of the process in shaping our perspectives and understanding real versus perceived threats**
- **Help identify strategies to aid in individuals needs and environmental modifications**



Our Sensory System



6. Vestibular- sense of head movement and position in space, balance and coordination, changes in gravity
7. Proprioceptive - Sensations from muscles and joints to know where your body is in space without having to look at it.
8. Interoceptive- internal sensors that tell us what our internal body needs to stay regulated, sense of hunger, need to use the bathroom, heart rate



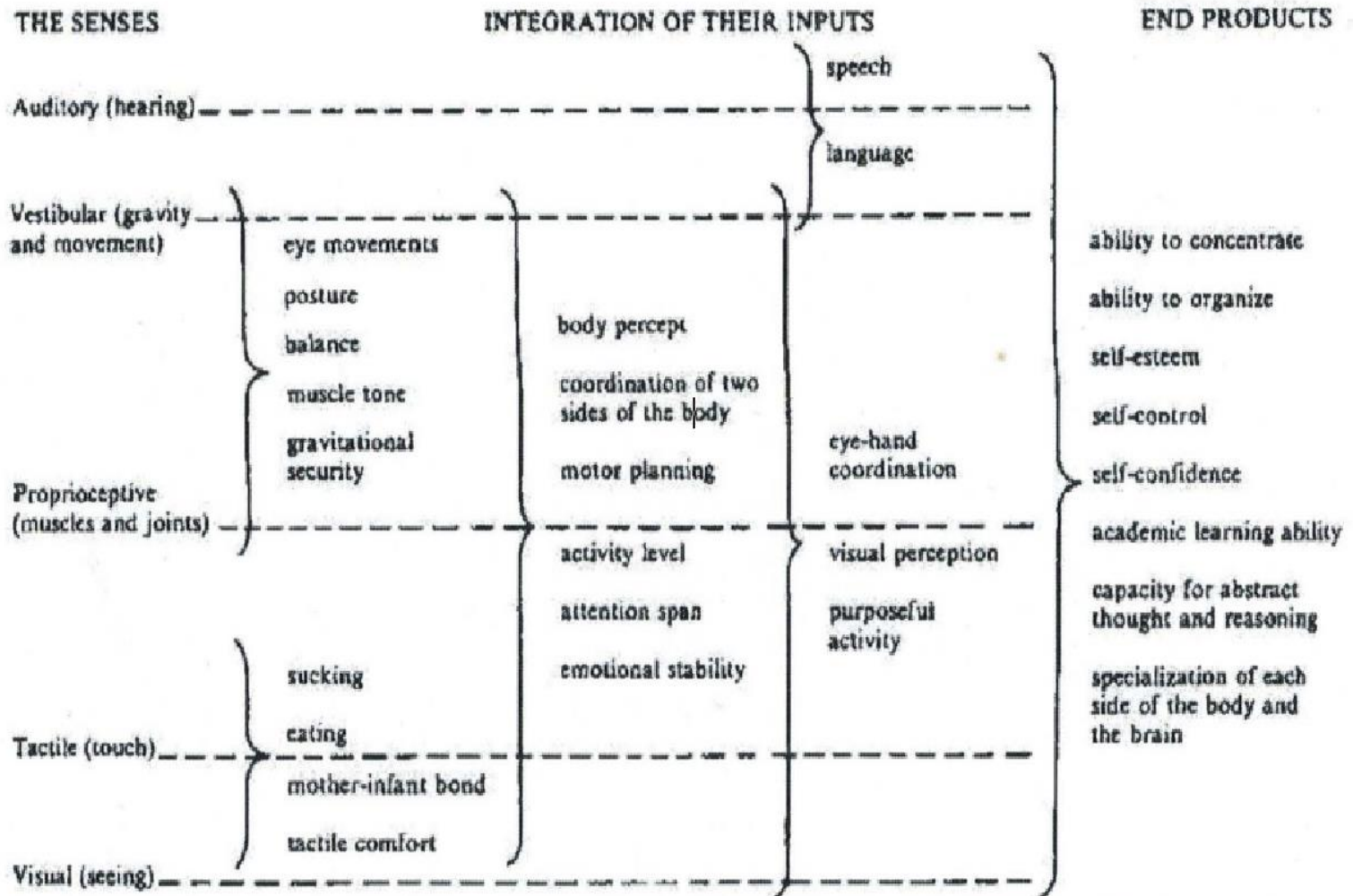
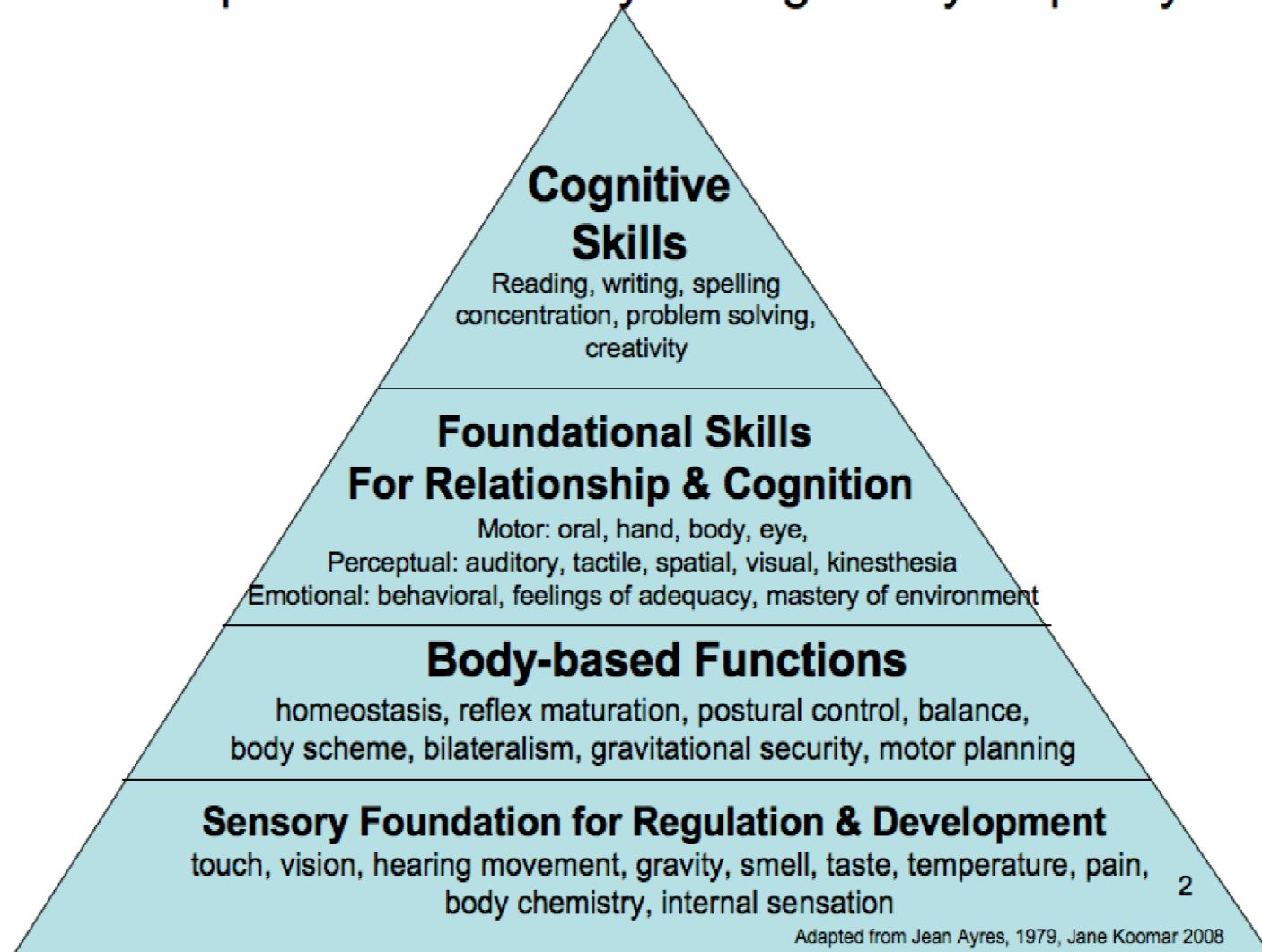


Figure 1-2. Material from *Sensory Integration and the Child* copyright © 1979 by Western Psychological Services. Reprinted by permission of the publisher, Western Psychological Services, 12031 Wilshire Boulevard, Los Angeles, CA 90025.

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Developmental Hierarchy of Regulatory Capacity



Central Nervous System

Sensory Patterns

As assessed on the Adult/Adolescent Sensory Profile: OT only
Sensory processing and Effects on Functional Performance



Adolescent/Adult Sensory Profile®

[Catana Brown, PhD, OTR, FAOTA](#), [Winnie Dunn, PhD, OTR, FAOTA](#)

-Low Registration: Individuals tend to miss or take longer to respond to stimuli that others notice.

-Sensation Seeking: Individuals create additional stimuli or look for environments that provide stimuli.

-Sensory Sensitivity: Individuals respond readily to sensory stimuli.

-Sensation Avoiding: Individuals overwhelmed or bothered by sensory stimuli.

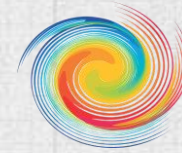
➤ Please see EASA OT Manual for further explanation of Models of Practice



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Key Considerations



- ❖ Sensory Sensitivity or Avoidance can often be mislabeled as being intentional in behavior with other motivations
- ❖ An individual may not show every characteristic in each category, you look for overall
- ❖ Sensitivity to touch or other outcomes may be an emotional component not sensory related
- ❖ There is no right or wrong sensory profile-smaller vs larger windows of comfort. We all have periods of not feeling regulated and characteristics can show up one day and not the next depending on life circumstances and stress



Emotional Regulation

- ❖ Increased comfort internally results in increased energy and readiness to receive therapy, participate in ADL's, IADL's, education, and manage future potential needs
- ❖ There is carryover from one day to another



A look at our Nervous System

Optimal Arousal Zone: ventral vagal “Social Engagement” Response

State where emotions can be tolerated and information integrated, seek and initiate social contact; arousal, relaxation balance of neurological system

Hyperarousal Zone: Sympathetic “Fight or Flight” Response

High activation, increased sensations, emotional reactivity, hyper-vigilant, disorganized cognitive processing, intrusive imagery

Hypoarousal Zone: Parasympathetic dorsal vagal “Immobilization” Response

Relative absence of sensation, numbing of emotions, disabled cognitive processing, intrusive imagery

(Adapted from Ogden, Minton, & Pain 2006, p 27, 32; Corrigan, Fisher, & Nutt, 2010, p.2 by Arber, worthit2bme, 2017)



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Overstimulation and Unsuitable Sensory Stimulation

- Creates a stress response within our body and brain. Goal is to increase balance in our nervous system.
- Over regulation: Too much information from one or more of the body's sense experience is going to our brain and not being filtered out. It gets registered as bigger than it is. Strategies are to calm the N.S.
- Under regulation: the brain responds less than typical. Information cup is half full. Strategies are alerting to increase the information so the feeling is increased in fullness.



Online Resources

Sensory processing challenges screen done by health provider for youth

<https://www.sensorysmarts.com/StudentSPD.pdf>

Teen Sensory Processing Disorder Symptoms 13-17

<http://spdsupport.org/resources/teen-spd-symptoms.shtml>

Sensory Processing Disorder Symptoms 18+

<http://spdsupport.org/resources/adult-spd-symptoms.shtml>



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What are some examples of a sensory experience?

Let's Get to know Jonathon!



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Attachment and the Sensory System

- ❖ Correlation between sensory, attachment, and distress, work with one domain may improve all
 - **Sensory Informed Care + Avoidant Attachment**
sensory work may feel more comfortable, less threatening than emotional support or work
 - **Sensory Sensitivity + Insecure Attachment + passive coping strategies**
*Instruct in active sensory related strategies



(AJOT, 2016)

“Attachment in Schizophrenia”

- Insecure attachment predicts impaired recovery from negative symptoms
 - heightened stress sensitivity and dissociation demonstrate particular sensitivity to interpersonal stress

Avoidance attachment 48-71% compared to 27% in the norm group

(Harder, pg 2)



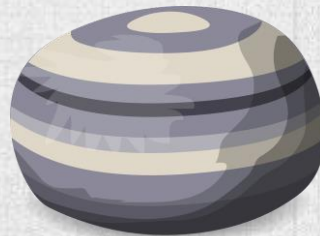
Access to Sensory Tools

- Provide opportunities for exploration and practice to build into daily practice
 - Independently and together
- Sensory Room, calming/alerting tool kit, mobile push cart, bowl on your desk



Sensory Room

Suggestions to be used prior, during, or at the end of therapy



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Possible Environmental Adaptations school, home and work (depending on assessment results)

- ensure a quiet sanctuary like space in each environment they have access to if overwhelmed
- deliberate rest breaks at set times throughout the day for movement, could be a helpful task in the classroom i.e. cleaning boards, desks, book organization
- allow the use of headphones or ear plugs
- items to chew on i.e. pens, straw, hard candy, “cinnamon gum” in a study demonstrated increased focus and learning (Increased LOA, attention, and memory of 25-50% after 15 min.) (ELT, 2016)
- flexibility with attending or timing with loud school situations i.e. assembly’s, passing periods
- increase weight of backpack for passing periods for grounding, weighted blanket/lap pad for studying



Continued...

- specific fidgets for class: rubber band, bracelet, ring, stress ball, elastic cording
- have bulbs changed in classroom if buzzing, deliberate seating positioning for comfort in each class
- add rugs and curtains to decrease sound
- explore soft “seamless clothing” (i.e. Target)
- aromatherapy: calming: lavender, geranium, strawberry, vanilla
alerting: peppermint, tangerine, grapefruit, rosemary, pine
- wear baseball cap or sweatshirt to decrease fluorescent lighting impact
- use a slanted writing or reading surface to change glare
- use colored paper behind papers to change visual input
- wear weights around ankles under pants to increase calming and focus
- have teacher hand homework assignments in written format at end of class versus verbal instruction



Organizing the Self and Building a Successful Routine

Morning: want activating to get out of bed

Take a cooler shower, dry yourself off briskly with towel, walk barefoot

Strong smells in the home or in lotion

Eat breakfast, crunchy or tangy foods like citrus

Wake up CD with songs that help pace your routine or have a certain rhythm

Give yourself a massage squeezing your arms and legs, push hands together

Stretching, exercise, quick walk or have a regular planned meet up time with friend

Post it's placed next to bed or on bathroom mirror with steps to follow to get ready

Evening: want a calming and soothing transition toward sleep

Consistent study, reading, or work time to finish your responsibilities

Put items from the day in the same place i.e. keys, work bag

The night before pick out clothing, setup breakfast or pack lunch

Prepare all items you will take with you the next day

Use large central calendar or planner to check the next day, if a family- color code each individual

Place sticky note to outline the next day appointments/plans the night before on bathroom mirror

Sleep: Use heavy blankets

Take a warm bath

Create a visual schedule or structured routine to follow nightly

Use meditation or calming music i.e. environmental sounds

Rub on lotion with a relaxing scent

Decrease visual stimulation in the sleep space add plants as able

Use warm or dim lighting versus overhead lighting



(modified from Boggett-Carsjens, 2014)

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Improved Sensory Regulation

- Better Identification and Expression of Basic Needs (thirst, touch)
- Greater cognitive organization
- Improved verbal communication
- Improved problem solving
- Greater expression of feelings
- Greater self observation
- Increased social engagement
- Greater empathy
- Greater awareness of the minds of others



(Warner, 2009)

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Questions



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Cognitive Processing

❖ **Specific Mental Functions**

Perception, sequencing, complex movement, attention, executive function, judgement, concept formation, time management, problem solving, decision making, memory, language, regulation of emotion, thought

❖ **Global Mental Functions**

Consciousness, orientation, temperament, personality, energy, sleep, level of arousal, drive, impulse control, motivation, appetite, alertness, rest

➤ **Mental function integral to all activity and participation**



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Assessment suggestions:

Executive skills questionnaire for children and adolescence:

-response inhibition, emotional control, sustained attention, organization, flexibility, goal-directed persistence, working memory, task initiation, planning/prioritization, time management, metacognition, stress management

http://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=2&ved=0ahUKEwjA_vSdwJ3UAhWEilQKHVgjB8wQFgg0MAE&url=http%3A%2F%2Fwww.pattan.net%2Fpresentation%2Fdownload%2Findex.php%3Fpresentation_id%3D791%26download_id%3D2488%26file_name%3DTBI%2520Handout%26content_type%3Dpdf&usq=AFQjCNENwbFAEJ12gREgNhmN-5tKyRIVOA&sig2=K4oknNTHv0kmzkbWgllssw

Executive skills questionnaire for Teens

https://iris.peabody.vanderbilt.edu/wp-content/uploads/modules/ss/pdfs/ss_01_link_Executive_Skills_Questionair_Teen.pdf

➤ For a list of other potential assessments please see the EASA OT Manual

SLU Mental Status Exam

<https://www.slu.edu/medicine/internal-medicine/geriatric-medicine/aging-successfully/assessment-tools/mental-status-exam.php>



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Adapting for Executive Skills

- 1. Change the actual social or physical environment
- 2. Grade the task or change the nature of the task
- 3. Change the interaction around the experience or task
- 4. Consider incentives to learn practice and use these skills

What does learning a new skill feel like?

What is the best learning style?

Index of Learning Styles: we process information in different ways: active/reflective; sensing/intuitive; visual/verbal; sequential/global :

<https://www.engr.ncsu.edu/learningstyles/ilsweb.html>



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Social Skills

Interpersonal skills: Eye contact, posture, socially appropriate, initiating and sustaining , responsive and engages

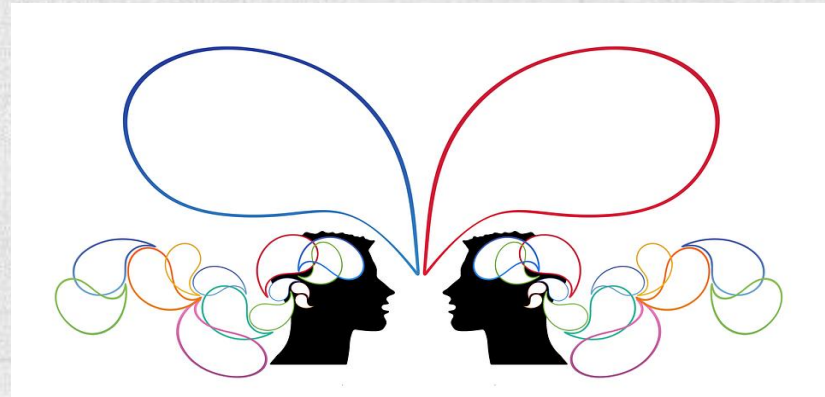
Social Supports: Family dynamics, friends, neighbors, peers, work colleagues, expectations and involvement.

Nonverbal Communication

Verbal Communication

Assertive Communication

Saying No



Goal examples might include : preventing isolation with activity involvement, modify the number of people in a room, provide opportunities in a structured environment to share information, target using different phases of the conversation in different settings (i.e. phrases to keep the conversation going).



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Communication Tips

- ❖ Encourage practice in equal balance of talking during conversation
- ❖ Asking open-ended questions not yes or no will make it easier
- ❖ It's okay to talk of being nervous in conversation, best is to be real and genuine
- ❖ Start general and gage relationship on how much personal information is shared, discuss how to do this in different settings
 - scenarios may include strangers, neighbors, friends, and co-workers

LOS ANGELES TIMES

PEANUTS CLASSICS By Charles M. Schulz



Nonverbal Communication

Emotional State

Attitude toward the listener

Knowledge of the topic

Honesty

Posture

Movement and Gestures

Physical Distance

Eye Contact

Facial Expression

Volume of Voice

Tone of Voice

Tips:

- Ask for feedback
- videotape yourself
- practice with a mirror
- Observe others
- Try in real interactions:
 - start small and slowly increase eye contact, smiling and review the reactions of others



Verbal Communication

- ❖ Conversation connects us and is also needed to participate in many activities and relationships

Explore and Practice:

Phrases for greeting others and initiating the conversation

Phrases for keeping a conversation going

Phrases for ending a conversation- explore the feelings associated with the end of a conversation.

Hi!

Wow! What happened next?

That's very interesting.

How are you today?

Did you see the game last night?

I wish I could stay and talk, but I've got a class I have to get to.



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Phrases for greeting others and initiating the conversation

What's up? How are things? How are you doing? What do you have going on today? What did you do this weekend?

Practice keeping a conversation going

Explore who, what, when, where, and why questions; give positive feedback; ask open-ended questions; comment on a topic that is common to both of you; have some talking points prepared- a couple interesting stories or read up on current events

Phrases for ending a conversation

- Say something complimentary but sincere as you leave like:
I have to go to an appointment/make a call, really nice to see you.
Thanks for keeping me company, better head out before ____.
Have to go but I'll definitely take a look at that book you mentioned.
Aww, Until we meet again I won't have seen you.



Self-Advocacy

Build skills for self-advocacy in being assertive and able to say no

Make a request starting with understanding the other person's feelings

Be willing to consider new information

Describe situations and how you feel about it

Describe what you would like to happen

"Own" your point of view

Saying No

Practice assertive body language

Wait for the whole question

Before you speak decide what your position is

Say other statements if it's too hard "I need time to think" to help break the cycle of saying yes

Try not to apologize, defend yourself or make excuses for saying "no" when not necessary



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(anxietyBC, 2016)

RESOURCES

- ❖ Literature Summary of Resources in appendix B of the EASA OT manual documents used to guide occupational practice in mental health
- ❖ Sensory Processing Information for Adult Mental Health
www.ot-innovations.com
- ❖ AOTA Mental Health Special Interest Section
- ❖ Attend monthly Non-OT consultation Call: First Tuesday of every month 9-10 am
- ❖ Consultation as needed: Kneuer@ohsu.edu



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