



Michigan Occupational Therapy Association

The Voice of Occupational Therapy in Michigan

*Finding Balance*



*for a Healthy Practice*

**Michigan Occupational Therapy Association**

Annual Conference

Inaugural Virtual Conference

September 24-26, 2020

# Key Note Speaker



***BE A PART OF THE SOLUTION! Integrating health promotion into traditional OT practice! (and into our lives too!)***

Jill Hurley, OTRL / CHT

Jill Hurley OTR, CHT is a native of Lafayette, LA. She has been an Occupational Therapist since 1990. **She is the owner and founder of Healthē, Habits for Living which opened its doors in Lafayette, LA to its first clients in June 2008.** This unique practice setting focuses on individualized evaluation, assessment, and treatment of clients with obesity and other chronic diseases affecting their activities of daily living. This specialized treatment includes training, coaching and counseling individuals in appropriate and effective skills in exercise, basic non-medical nutrition and the mental/behavioral strategies needed to make lifestyle changes.

In addition to extensive continuing education courses (like the **Lifestyle and Weight Management Certification** from the American Council on Exercise, **Life Advisor training from the** Lifestyle Redesign Center at USC in Los Angeles), Jill's background includes Bachelors of Science in Psychology from **Louisiana State University** in 1987 and Bachelors of Science in Occupational Therapy from the **University of Southern California** in 1989. Jill has also been a Certified Hand Therapist since 1995. **In 2011 the Small Business Administration awarded Ms. Hurley the** Women in Business Champion for Louisiana, and in 2015 the Louisiana Senate selected Healthē Habits for Living as Small Business of the Week. Most recently, Ms. Hurley presented a Poster presentation at the AOTA 2018 National Conference. Currently, Jill is a member of the American Occupational Therapy Association, Louisiana Occupational Therapy Association, American Society of Metabolic and Bariatric Surgery, The Obesity Society, and Obesity Medicine Association. Jill enjoys skiing, running, hiking, cycling, sailing, travel and spending time with her husband, Mark, her family and friends, and her new puppy.

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# Exhibitors/Sponsors

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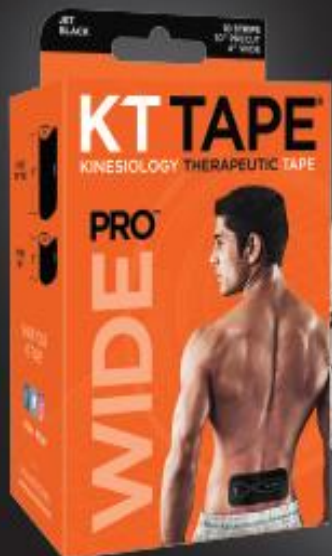
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# Conference Agenda

## **Thursday, September 24, 2020**

5:00 – 6:00 PM	<b>Exhibitors</b>
6:00 – 7:00 PM	<b>Awards Ceremony and Silent Auction (1 Contact Hour)</b>
7:00 – 9:00 PM	<b>MiOTA Board Dinner by Invitation Only</b>

## **Friday, September 25, 2020**

8:00 – 9:00 AM	<b>Exhibitors</b>
9:00 – 10:30 AM	<b>Keynote Speaker (1.5 Contact Hour)</b> <i>Jill Hurley, OTRL / CHT: Healthy Habits for Living</i>
10:30-11:00 PM	<b>Exhibit Hall Open</b>
11:00-12:00 PM	<b>Break Out Sessions (1 Contact Hour)</b>
12:00-1:00 PM	<b>SIS Sessions (1 Contact Hour)</b>
1:00-3:00 PM	<b>Break Out Sessions (2 Contact Hour)</b>
3:00-3:30 PM	<b>Exhibit Hall Open</b>
3:30-4:30 PM	<b>Poster Session (1 Contact Hour)</b>
4:30-5:00 PM	<b>Exhibit Hall Open</b>
5:00-6:00 PM	<b>Virtual Event</b>

## **Saturday, September 26, 2020**

8:00 – 9:00 AM	<b>Exhibitors</b>
9:00 – 10:30 AM	<b>Business Meeting (1.5 Contact Hour)</b>
10:30-11:00 PM	<b>Exhibit Hall Open</b>
11:00-12:00 PM	<b>Break Out Sessions (1 Contact Hour)</b>
12:00-1:00 PM	<b>SIS Sessions (1 Contact Hour)</b>
1:00-3:00 PM	<b>Break Out Sessions (2 Contact Hour)</b>
3:00-3:30 PM	<b>Exhibit Hall Open</b>
3:30-4:30 PM	<b>Poster Session (1 Contact Hour)</b>

**Synchronous**  
**Contact Hours**  
**Thursday 1-2**  
**Friday 6.5 – 8.5**  
**Saturday 6.5 – 8.5**  
**Asynchronous**  
**Contact Hours**  
**Friday 20 – 25.5**  
**Saturday 19 – 24.5**

**Virtual 5K**  
**Run, Walk, Roll**  
**Ends September 23,**  
**2020**

**Friday**  
**October 11<sup>th</sup>**  
**Virtual Event**  
**5 – 6:00 PM**

**Thursday**  
**September 24<sup>th</sup>**  
**Exhibit Hall (5-6 PM)**  
**Awards Ceremony &**  
**PAC Silent Auction**  
**(6-7 PM)**



# THURSDAY SESSIONS

**Thursday: 5-6 PM**

**Exhibitors**

AOTA

**Thursday: 5-6 PM**

## **AWARDS CEREMONY**

Nominate a MiOTA member for an award so they can be recognized their efforts and achievements

Awards will be announced at this event

Forms may be found on the MiOTA website: [https://www.miota.org/service\\_awards.php](https://www.miota.org/service_awards.php).

## **SILENT AUCTION**

All are invited

You must be a MiOTA member in good standing to

- Vote
- Fabricate
- Donate
- Bid
- Purchase

**FRIENDS OF OCCUPATIONAL THERAPY IN MICHIGAN PAC**

P.O. Box 19031, Kalamazoo, MI 49019

## **Friends of OT in Michigan PAC Mask Contest - 2020**

Masks have been one of the tools that we all have been using to stop the spread of Covid 19. OTs are amazingly creative and functional...so we decided to put that all together to raise funds for the Friends of OT in Michigan PAC, which supports our political presence in the state of Michigan.

There will be three Mask Activities during the MiOTA conference:

1. **People's Choice:** All members of MiOTA can vote on their favorite mask, and the one with the most votes gets the coveted People's Choice Award. Only one vote per MiOTA member, but you do not have to be attending conference to vote.
2. **Director's Award:** The volunteer leaders of MiOTA will vote to identify their favorite, which will win the Director's Award.

3. **Auction!** All masks will be auctioned off during the Conference. Members of MiOTA can bid as often and as high as you want to get your favorite. Auction bidding is only available to MiOTA Members and all proceeds will go to the Friends of OT in Michigan PAC.

**So, let your creativity run wild!**

#### **RULES for MASK DONATIONS**

1. All masks are being donated by the maker for auction to benefit the Friends of OT in Michigan PAC.
2. All masks must be designed and fabricated by a current MiOTA member.
3. Masks should be sized to be worn by an adult.
4. Mask-related items designed and fabricated by MiOTA members such as headbands and elastic-extendors can also be donated for the Mask Auction.
5. Masks should be hand or machine washable because the CDC recommends washing masks after each use masks should be washed after each use.
6. The maker will email two photos of the mask to Claudette Reid, PAC Chair at [reid.clauds@gmail.com](mailto:reid.clauds@gmail.com); one with the mask on a blank surface like a table top and the other a "Head and shoulders" photo of someone wearing the mask. The maker will also provide a short description of the mask (100 words max.) and the Name of the Mask.
7. The maker will complete an In-Kind Donation Form. This information is required by the State of Michigan for donations to Political Action Committees.
8. Photos, name of mask and description, and the name of the Maker will be placed on the MiOTA website and in the MiOTA Conference App. Photos and descriptions must be received by Tuesday, September 22, but the earlier you get them in, the more people will see your mask and can vote for it.  
**Note: DO NOT send the mask to MiOTA. Instead you will mail it to the bid winner after the silent auction.**
9. Masks donated by members of the MiOTA Board of Directors will not be included in the Director's Award contest.
10. Winners of the People's Choice and the Director's Award will be announced at the Awards Ceremony on Thursday, September 24.
11. The auction will happen throughout the MiOTA Virtual Conference. Following the Conference, the maker will be provided with the name and mailing address of the MiOTA member who was the high bidder for their mask, and \$8.40 for mailing the mask to the winner.

**Note: you can donate the cost of mailing your mask to the highest bidder by checking the box indicating this on the In-Kind Donation Form.**

Makers can use either:

- a. A Small Flat Rate Box, Outside dimensions: 8 11/16" x 5 7/16" x 1 3/4", Inside Dimensions: 8 5/8" x 5 3/8" x 1 5/8" -or
- b. A padded Flat Rate Envelope, 12 1/2" x 9 1/2"

The box or padded envelope is available at the US Post Office.

12. All makers will be acknowledged on the MiOTA Website for their creative and generous support of the Friends of OT in Michigan PAC and the political presence of OT in Michigan.

## **CDC Guidelines for Masks**

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/about-face-coverings.html>

### **About Masks**

COVID-19 spreads mainly from person to person through respiratory droplets produced when an infected person coughs, sneezes, talks, or raises their voice (e.g., while shouting, chanting, or singing). These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. Recent studies (<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html#recent-studies>) show that a significant portion of individuals with COVID-19 lack symptoms (are “asymptomatic”) and that even those who eventually develop symptoms (are “pre-symptomatic”) can transmit the virus to others before showing symptoms.

To reduce the spread of COVID-19, CDC recommends that people wear masks in public settings when around people outside of their household, especially when other social distancing measures are difficult to maintain.

### **Why it is important to wear a mask**

Masks may help prevent people who have COVID-19 from spreading the virus to others. Wearing a mask will help protect people around you, including those at higher risk of severe illness from COVID-19 and workers who frequently come into close contact with other people (e.g., in stores and restaurants). Masks are most likely to reduce the spread of COVID-19 when they are widely used by people in public settings. The spread of COVID-19 can be reduced when masks are used along with other preventive measures, including social distancing, frequent handwashing, and cleaning and disinfecting frequently touched surfaces.

The masks recommended here are not surgical masks or respirators. Currently, those are critical supplies that should be reserved for healthcare workers and other first responders. Masks are not personal protective equipment (PPE). They are not appropriate substitutes for PPE such as respirators (like N95 respirators) or medical facemasks (like surgical masks) in workplaces where respirators or facemasks are recommended or required to protect the wearer.

# FRIDAY SESSIONS

## Friday

8:00 AM - 9:30 AM

### KEYNOTE ADDRESS

Jill Hurley, OTRL, CHT

***BE A PART OF THE SOLUTION! Integrating health promotion into traditional OT practice! (and into our lives too!)***

The results of traditional treatment strategies for chronic diseases continue to be lacking as evidenced by skyrocketing health care costs, increasing levels of obesity, diabetes, heart disease and cancers. It is time for Occupational Therapists (OT's) to step in and address the causes of these issues. The comprehensive nature of OT suits us to train/educate/counsel/coach individuals as they make necessary changes to key lifestyle risk factors associated with chronic disease. As OT's we have the educational background in pathology, pathophysiology, psychology, neurology, kinesiology, and anatomy as it relates to activities of daily living. We are talented at motivating and facilitating hard work. AND we are able to match the skills to the demands of an activity, minimize barriers and give solutions to challenges associated with changing habits and routines. As role models to our clients it is important to consider applying our knowledge of healthy habits and routines to ourselves. We deserve self-care to support our lives in health promoting ways and to achieve occupational balance. Let's all be a part of the solution to the current healthcare crisis. The session objectives: 1) IS MY LIFESTYLE HEALTH PROMOTING OR HEALTH COMPROMISING, 2) HOW CAN I HELP MY PATIENTS IMPROVE THEIR HEALTH, 3) HOW CAN I BE A PART OF THE "SOLUTION?"

## Friday

11:00 AM – 12:00 PM

Jayne Yatzak, PhD, OTRL

### ***On Being Wicked***

AOTA Vision 2025 states that, as an inclusive profession occupational therapy maximizes health, well-being, and quality of life for all people, populations, and communities through effective solutions that facilitate participation in everyday living. Developing effective solutions for the complex, wicked problems that hinder participation in everyday living will require us to embrace our wickedness. I contend that the range and breadth of occupational therapy and our ability to appreciate and understand complexity, makes us inherently wicked. We are well positioned and uniquely able to solve wicked problems. Drawing from historical and contemporary literature I will present evidence from occupational therapy and outside the profession that will; (1) inspire you to go to work and do what occupational therapy

practitioners do best, (2) reaffirm your identity as an occupational therapy practitioner, and (3) help you embrace your own wickedness. Together, we will explore all the ways we have to be, W-I-C-K-E-D. References: Andersen L., & Reed, K. (2017). The history of occupational therapy: The first century. Thorofare, NJ: Slack Inc. Gillen, G. (2013). A fork in the road: An occupational hazard. American Journal of Occupational Therapy, 67, 641-652. Epstein, D. (2019). Range: Why generalists triumph in a specialized world. New York: Riverhead Books. Reilley, M. (1962). Occupational therapy can be one of the great ideas of 20th-century medicine. American Journal of Occupational Therapy. 16, 1-9.

**Friday**

**11:00 AM – 12:00 PM**

Monica Hubbert OTRL, CLT-LANA

***Lymphedema home management in your practice environment***

Providers of occupational therapy services have frequent encounters with individuals who have lymphedema or may be suspected of having lymphedema. These clients have robust home management programs designed by a lymphedema therapist during complete decongestive therapy. The continuity of home management programs outside of normal routines can involve providers not trained in lymphedema management. The purpose of this presentation is to provide exposure and confidence for providers in the successful carryover of complete decongestive therapy home management programs in a variety of contexts and environments. The content of this presentation will include a brief primer on lymphedema vs edema, the application of edema management, and lymphedema home management in various practice environments. Participants will observe demonstrations and have hands-on practice with lymphedema adaptive equipment and compensatory strategies. Learning Objective: Participants will gain knowledge of all components of lymphedema home management including self-manual lymphatic drainage, skin care, compression, and exercise.

**Friday**

**11:00 AM – 12:00 PM**

Emma Crammer, OT Student; Catherine Curvin, OT Student; Ashley Bunker, OT Student; Amnee Barakat, OT Student; and Daniella Garmo, OT Student

***An Exploration of the Impact of Hands-***

***On Experiential Learning on Confidence and Competence in Occupational Therapy Students***

We will introduce a partnership between the Eastern Michigan University (EMU) Occupational Therapy program and the University of Michigan Dental School. This partnership aimed to enhance the competence and confidence of occupational therapy students through a one-time experiential population-based intervention. Our literature review supports that experiential learning enhances students' confidence and clinical skills. We will present the foundational work that EMU did to prepare students as well as the findings of our research on how students felt the experience impacted them as practitioners. This is relevant to occupational therapy programs because it emphasizes the importance of hands-on learning and gives a framework for programs to collaborate with other fields.



**Friday**

**11:00 AM – 12:00 PM**

Alissa Baker, MS, OTRL; Jamie Stockdale, OT Student; Gabrielle Tremp, OT Student

***Solving Ethical Dilemmas***

The ethical dilemmas that most occupational therapy practitioners encounter are not the dramatic struggles of “good vs. evil” that we find in the media, but rather these dilemmas involve subtle distinctions that require careful thought and analysis. They include issues such as plagiarism, cultural competency, ethical practice, billing, productivity, and scope of practice. Proper resolution of ethical dilemmas is essential not only for the wellbeing of our clients, but also for external stakeholders and our profession. Use of an ethical decision-making model will assist practitioners in resolving ethical dilemmas. After participation in this case-based session, participants will be able to describe and apply the steps of the Morris Ethical Decision-Making Model in order to improve their ability to identify and respond to ethical dilemmas.

**Friday**

**11:00 AM – 12:00 PM**

Denise Justice, OTRL, FMIOTA

***Pre and Post Prosthetic Training - Pediatric Case Study Inclusive of Peripheral Nerve Injury***

Occupational therapists are crucial to the success of patients transitioning into the use of upper extremity prosthetics. Traumatic situations involve interventions ranging from physiological to psychological aspects that both the patient and family experience. The presentation will review standards of care and relate them to an actual patient. Attendees will be able to implement strategies to increase a patients’ independence with the use of an upper extremity prosthesis.

**Friday**

**11:00 AM – 12:00 PM**

Breanna Chycinski, MS OTRL; Kristin Willey, MHS OTRL

***Facilitating the Development of Leadership Skills in Fieldwork Students***

The American Occupational Therapy Association (AOTA) indicates that one purpose of the fieldwork experience is to allow students to develop advocacy, leadership, and managerial skills in a variety of practice settings. Leadership is a professional behavior attribute that appears to be scarce in occupational therapy (OT) fieldwork students. The purpose of this workshop is to define "leadership" within the fieldwork setting and to identify ways in which fieldwork educators can facilitate the development of leadership skills in Level I and Level II OT and OTA fieldwork students. Participants will collaborate with each other to develop specific implementation plans to incorporate into their current site-specific fieldwork programs. The primary objective of this workshop is for participants to: Define what leadership looks like in fieldwork experiences and identify ways to facilitate the development of leadership skills in fieldwork students.

**Friday**

**12:00 PM – 1:00 PM**

SIS

***Black Caucus***

**Friday**

**12:00 PM – 1:00 PM**

SIS

*Geriatrics, Home Health, Skilled Nursing*

**Friday**

**12:00 PM – 1:00 PM**

SIS

*Administrative, Entrepreneur, Private Practice*

**Friday**

**12:00 PM – 1:00 PM**

SIS

*Home Modification*

**Friday**

**12:00 PM – 1:00 PM**

SIS

*Pediatrics, Sensory, Developmental Disabilities, School Therapy*

**Friday**

**12:00 PM – 1:00 PM**

SIS

*Insurance, Telehealth*

**Friday**

**1:00 PM-3:00 PM**

Holly Grieves, OTD, OTRL; Julianne Chreston, OTD, OTRL; Nancy Vanderwiele Milligan, PhD, OTRL, FAOTA

***How hosting a doctoral capstone student can help you tackle that project you've been putting off***

This presentation will identify the doctoral capstone purpose and components, delineate the capstone team member roles, compare and contrast fieldwork to capstone experiences and highlight the benefits to the capstone host site. Several doctoral capstone experience examples will be explored and anticipate time lines will be discussed. Representatives from the three OTD programs in Michigan including Western Michigan University, Concordia University - Ann Arbor, and University of Michigan - Flint will share information about each of their curriculum's research, leadership and capstone preparation-focused coursework. The session will conclude with networking and brainstorming of potential capstone ideas.

**Friday**

**1:00 PM-3:00 PM**

Michelle Roldan, OT Student and Barbara Haber-Grinnell, COTAL

***Recognizing Danger: Understanding When Someone is in an Abusive Situation and What to Do***

The purpose of this presentation is to educate on the prevalence of domestic violence and sexual assault, identify signs and symptoms of abuse, barriers to leaving that survivors face, ways that occupational therapists can help survivors in abusive situations, and ways of preventing compassion fatigue and secondary traumatic stress. Content: Includes terms and statistics relating to sexual assault, domestic violence, child abuse, human trafficking, and elder abuse. It includes a breakdown of signs to look for in someone who is being abused, barriers that survivors face in trying to leave, and ways that we as occupational therapists can help (reporting, screenings, safety planning, and support). There is also a section explaining research done regarding occupational therapists and working with survivors of abuse within domestic violence shelters, and their role in this emerging field. Learning Objectives; 1. Establish foundational terms and statistics to understand the prevalence of domestic and sexual violence; 2. Identify key signs and symptoms of someone in an abusive relationship; 3. Identify barriers to survivors leaving that may influence the holistic approach occupational therapy utilizes; 4. Identify ways to help support, screen, and intervene individuals who may be in abusive situations; 5. Identify and utilize self-care strategies to avoid compassion fatigue and secondary traumatic stress; 6. Discover the role of OT with survivors of abuse in emerging field settings.

**Friday**

**1:00 PM-3:00 PM**

Cathleen Johnson, OTD, OTRL, FMiOTA

***Group Therapy: An Evidence-Based Therapeutic Mode of Service***

Group therapy treatment sessions within occupational therapy are valuable, evidence based mode of service delivery. This workshop will review the literature to support the benefits of group treatment sessions. Additionally, this workshop will introduce the importance of planning, implementation, and leadership of group treatment sessions. Various ideas will be identified for group treatment sessions including those for chronic conditions and post-acute rehabilitation. Participants will be able to articulate at least 3 therapeutic benefits of occupational therapy lead group by the end of this one-hour workshop.

**Friday**

**1:00 PM-3:00 PM**

Leana Tank, MS, OTRL; Lauren Janness, MS, OTRL

***Opportunities for Occupational Therapy to Support Residential Behavioral Health***

This presentation will last 2 hours and will provide an overview of Occupational Therapy and how OT can be used in creative and innovative ways to support individuals with mental illness and the teams who work with them. OT can be used to support participation in self-care, work, leisure and home management by identifying and removing barriers in the environment, educating individuals, addressing physical, cognitive and psychosocial barriers and addressing sensory needs. OT is an excellent partner for “integrated care” settings, as they are trained to

identify and address both physical and mental health barriers to well-being and participation. This presentation will highlight the many ways that OT can support CMH programs, group homes, clinics and care teams as well as providing attendees with a basic introduction to concepts of sensory processing and sensory based strategies for self-regulation and calming environments.

#### Friday

1:00 PM-3:00 PM

Kathleen A. Garvey, OTRL, CAPS; Heba Gad, M.D.

#### ***Dementia Health and Well-being: Medication, Adaptation and Modification***

Quality dementia care is a multidisciplinary endeavor. Providing integrated, appropriate care for people living with dementia throughout their journey requires collaboration across disciplines using a multifaceted approach. Care partners benefit from an understanding of the role and efficacy of commonly prescribed medication as well as environmental modification and adaptation to address expressions of unmet needs. Consideration of Allen Power's experiential model of dementia would suggest that focusing on supporting health and well-being rather than "fixing" behavioral and psychological symptoms of dementia (BPSD) could result in more efficacious and sustainable care environments. Relationship based care planning, using models like Positive Approach® to Care Six Pieces of the Puzzle or the DICE™ approach, can be helpful tools for guiding and prioritizing support measures to put into place.

#### Friday

1:00 PM-3:00 PM

Jen Willoughby Vogtmann, OTD, OTRL

#### ***Building Stress Resilience for Clinicians and Occupational Therapy Students***

Mindfulness-based intervention can enhance the effectiveness of current strategies used to increase self-awareness, emotional regulation, impulse control, and attentional stability using evidence-based strategies (Mindful Schools, p.3). This course will help you gain an understanding of the use of mindful-based intervention as a preparatory technique or in combination with current practice techniques to support all populations in the areas of self-regulation and engagement in occupation including your own practice. Highlights include results of a 7-week Mindfulness-Based Stress Reduction program in higher education. Participants will learn how to adapt strategies within their current settings to effectively meet the needs and improve outcomes with client populations.

After this session, participants will:

1. Identify and understand the benefits of mindfulness techniques.
2. Explain the role of mindfulness-based intervention on perceived stress pre- and post- intervention with entry level occupational therapy students.
3. Adapt a least one strategy for building mindfulness-based interventions into his or her occupational therapy practice.
4. Identify at least one strategy that can be applied to build stress resilience in their individual mindfulness practice.

**Friday**

**3:30-4:30 PM**

Sarah Johnson, MS, OTRL; Denise Justice, OTRL, FMiOTA

***It's All About Positioning. Methods to Minimize Peripheral Nerve Compression***

Improper positioning, prolonged stretch, or compression on various areas of the body can lead to nerve injuries. As therapists can our practices contribute to these situations? There is a potential for traditional treatment interventions, patient positioning at home/hospital, or use of adaptive equipment/devices/splints to compound nerve compression. Common practices for certain patient diagnoses or acuity levels may also increase the susceptibility for inadvertent pressure on peripheral nerves. Even transient compression on a nerve will contribute to pain and/or performance deficits ultimately affecting a patient's level of independence. Participants will: 1) learn the pathophysiology of peripheral nerve injuries (Power & Moore, 2020), 2) understand common devices that cause nerve pressure (Haninec, Mencl, Bačinský & Kaiser 2013), 3) describe common sites of nerve pressure (Doughty & Bowley, 2019), and 4) verbalize prevention techniques to minimize nerve compression (Doughty & Bowley, 2019).

**Friday**

**3:30-4:30 PM**

Jeannie Kunz, MS, OTRL, BCP

***Mandatory Reporters: What Every Occupational Therapist Must Know***

A mandatory reporter is a person, who because of his/her profession, is legally or ethically required by law to report suspected cases of client abuse across the lifespan. Michigan has two divisions: Child Protective Services and Adult Protective Services. In this presentation, we will review and discuss definitions of abuse, types of abuse, ethical obligations, legal obligations, and ethical obligations. Mandatory reporting is important in many forms of occupational therapy practice, including telemedicine models, to protect many vulnerable populations.

## **FRIDAY POSTER SESSIONS**

**Each hour block contains 3 poster presentations followed by Q&A**



## FRIDAY 3:30-4:30 PM

### POSTER BLOCK A

Friday

3:30-4:30 PM

Jessica Goethals, OT Student; Olivia Keeley, OT Student; Justyna Leja, OT Student; Anna Riccius, OT Student; Kelly Machnik, OT Student

#### ***Eating Disorders and Occupational Therapy Interventions: A Scoping Review***

BACKGROUND: Eating disorders are a significant problem globally (National Eating Disorder Association [NEDA], 2018). A prominent number of individuals are affected physically and mentally (NEDA, 2018). The treatment process could be refined and improved when considering the following: mortality rate, suicide rate, long recovery process, and impact on quality of life (Fichter & Quadflieg, 2016; Herzog et al., 2000; Steinhausen, 2002; Treasure et al., 2001; De la Rie et al., 2005). AIM: The aim of this scoping review is to gather information regarding the distinct role of occupational therapy in the treatment of individuals experiencing eating disorders, specifically what strategies, interventions, and treatment plans, if any, they are using. METHODS: Five databases will be searched for articles written in English that include keywords and subject terms related to eating disorders including bulimia, anorexia, binge eating, and occupational therapy RESULTS: Research in progress. IMPLICATIONS FOR PRACTICE: Researchers hope to find information that can be presented to occupational therapists to provide a comprehensive understanding of how to best treat individuals experiencing eating disorders with a primarily mental health cause.

Kailee Moran, BS, CTRS; Jaclyn Oldenburg, OT Student; Mallory VanRegenmorter, OT Student; Kate Williams, BS, CTRS, OT Student; Kelly Machnik, MS, OTRL

#### ***Exploring the Potential for Occupational Therapy Within Outpatient Mental Health Settings***

Background/Significance: Mental illness and substance use disorders are common in the United States and can significantly inhibit occupational participation (National Institute of Mental Health, 2010; Mayo Clinic, 2019). Aim: Evaluate existing outpatient behavioral health services and determine if occupational therapists can make a distinct contribution. Methods/Materials: Survey provided to licensed outpatient behavioral health providers in the United States utilizing a convenience sampling method. Analysis: Descriptive patterns will be determined using bar charts and summarizing statistics based on nominal or ordinal measurement scales. Results: Pending Conclusion: Hypothesize that the results will highlight a distinct value for occupational therapists in the outpatient behavioral health setting. Limitations: Participants were asked to provide data about their caseload prior to the global pandemic; forgetfulness may distort results. Implications to practice: Education about occupational therapy to outpatient behavioral health providers and highlight the profession's distinct value, opening opportunities for occupational therapy in this essential practice setting.

Rachel Batten, OT Student; Nada Metti, Occupational Therapy Student; Kalyn Justice, Occupational Therapy Student; Angela Swindell, Occupational Therapy Student

#### ***A Survey of Occupational Therapy Educators On Sexuality Content***

Sexuality plays a crucial role in our lives through our feelings, behaviors, personalities, and occupations. Participation in meaningful occupations is shown to have a direct correlation with increased health and overall well-being. Although sexuality is a fundamental human occupation, previous research shows that practitioners and clients rarely address these issues within occupational therapy practice. Our study aims to identify trends and attitudes regarding teaching topics related to sexuality in occupational therapy programs to provide insight on current educational practices on this vital topic. This presentation discusses the results of our survey of 80 educators employed by accredited entry-level OT programs in the United States. This improved understanding will likely encourage future research and educational practices focusing on increasing the delivery of content related to sexuality within OT education to prepare occupational therapy practitioners to address occupations associated with the expression of sexuality with clients.

## **POSTER BLOCK B**

**Friday**

**3:30-4:30 PM**

Nancy Hock, Ph.D., OTRL, CHT; Debra Lindstrom, Ph.D., OTRL

### ***Pinch Force Required for Adults Over 50 Years of Age to Open Several Types of Food for Containers***

Background: Many older adults have difficulty opening food packages, and even though they comprise the fastest growing segment of our population, the development of easy to open food packaging has been overlooked by the food industry (Costa & Jongen, 2010; Hensel, 2012). The ability to use pinch is required to open food packages, but there is limited evidence regarding how much pinch force is required for different types of food packaging. Methods: This study used sensor technology to identify the force required to open several types of food packages which are typically used by older adults. Individuals over the age of 50 opened 15 different food packages and the average force in pounds required to open each type was obtained. Results: The average force employed differed by sex with many food products and ranged from 2.83 lbs. to 16.03 lbs. Limited correlation was found between the force used to open food packages and hand strength. Conclusion: This information is useful both for healthcare professionals working with older adults and individuals with pathology of the hand, and for the food packaging industry.

Debra Lindstrom, Ph.D., OTRL; Yvonne Jackson, EdD, DPT, PT

### ***Inter-professional Education--Should we start at the very beginning?***

Trying to minimize healthcare errors and unnecessary duplication of clients' time, national organizations exist to develop inter-professional (IPE) competencies in professionals and pre-licensure healthcare students. The goal of this program was to influence the IPE competencies of knowing one's own role and the role of other professionals and communicating effectively with the team and the HM. A total of 94 OT, PT and PA students were assigned into 16 small inter-professional groups to "learn" from their assigned Health Mentor (eight community members with a chronic health condition). Students and the HM met once for lunch on campus and one other time (in person or virtually). HM and students assessed each discipline of students on inter-professional communication and knowledge of their own field and as well as

a quiz on team members' roles. Students overall viewed the time with the Health Mentors positively, but student scheduling logistics were very difficult.

Taylor Dendel, OT Student; Emma Gietek, OT Student

***Effectiveness of Tablet-Based Handwriting Interventions for Improving Fine Motor Skills in Early Learners***

As technology becomes more prevalent in the classroom, research is needed regarding the efficacy of technology-based interventions. Limited studies have addressed the role of technology, specifically tablet-based, in improving fine motor skills in early learners. This poster provides a review of current evidence regarding the effectiveness of tablet-based handwriting interventions for improving fine motor skills. The three articles identified included both Level II and Level III evidence. Findings indicated that tablet-based interventions led to significant improvements in fine motor skills, letter production, and handwriting legibility. Limitations included small sample size and inconsistent duration of treatment across studies. Nonetheless, the results of these studies suggest use of tablet-based handwriting to improve fine motor skills is warranted. Future research is needed using standardized protocols to test this approach. Also, a better understanding of the underlying factors related to improvement needs to be established.

**POSTER BLOCK C**

**Friday**

**3:30-4:30 PM**

Elizabeth Gendernalik, OTD, OTRL

***Assessing cognitive functioning of sex trafficking survivors utilizing the Montreal Cognitive Assessment***

Sex trafficking is the fastest growing business in the United States. Due to the extreme trauma that begins at a young age, sex trafficking survivors' cognitive functioning skills are developmentally impacted. This study's purpose was to assess cognitive functioning of survivors of sex trafficking. The Montreal Cognitive Assessment (MoCA) was utilized to assess global and domain-specific cognitive functioning. Descriptive statistics were derived from the results from the MoCA. Eighty percent of participants demonstrated mild cognitive impairment. The most difficult domain-specific areas were visuospatial or visuo-constructional, executive functioning, attention, verbal fluency, and delayed recall. Mild cognitive impairments domain-specific deficits can impact an individual's ability to complete their daily occupations. Limitations for this study include a small sample size. This study provides greater implications for occupational therapists to provide client centered, rehabilitative care for sex trafficking survivors for improved occupational performance.

Kathleen Garvey, OTRL, CAPS

***Shifting the Dementia Care Culture: Positive Approach Model for Empowered Partners and Quality of Care***

People living with dementia need particular changes in their environment to engage in every day, meaningful occupations for sustained well-being. To create these supportive environments, care partners, paid staff, families or volunteers need dementia awareness,

knowledge and skills training to recognize brain changes and unmet needs prior to distress and problematic expressions. UMRC Towsley Village Dementia Care Assisted Living partnered with Teepa Snow's Positive Approach to Care (PAC)™ to shift the culture of care. With 2016 Michigan Health Endowment Fund grant support, a comprehensive training program is evolving as a community resource to improve people living with dementia's quality of life and their relationships with others. Within one year of introducing the training, behavioral health hospitalizations were reduced by 75%. OT served as trainer and interventionist, reinforcing new support habits and routines for staff and family, identifying environmental occupational affordances and barriers, and modifying/adapting meaningful and engaging activities informed by staff and residents' personal history, preferences and skills.

Briana Lear, OT Student; Haley Thibeault, OT Student

***Emotion-Focused Interventions for Improving Social Skills in Adults Post-Traumatic Brain Injury***

This research project consisted of a thorough review of three studies that compared the efficacy of emotion focused intervention training programs in increasing social skills in adults post-Traumatic Brain Injury (TBI). Databases such as, Google Scholar, Science Direct, PubMed, and Clinical Key All participants were adults, ages 25-64 years old, they must have had a moderate severe to severe traumatic brain injury, and they must be post discharge from acute care. Binder et al. utilized an intervention entitled Facial Affect Recognition, which showed significant improvements in static ( $p=.02$ ) and dynamic ( $p<.001$ ) when compared to a control cognitive rehabilitation group. Neumann et al. looked at STORIES and FACES interventions as compared to a traditional cognitive rehabilitation approach, showing significant improvements with the FACES ( $p=.031$ ) intervention. The FACES intervention focuses on recognizing emotions from facial expressions and the STORIES intervention focuses on inferring emotions from contextual information. Westerhof-Evers et al. assessed the Treatment for Social cognition and Emotion Regulation (T-ScEmo) intervention compared to a traditional cognitive rehabilitation program. This intervention showed significant results for empathy ( $p=.05$ ), societal participation skills ( $p=.05$ ), and relationship quality ( $p=.05$ ). Through the analysis, it can be concluded that emotion-focused interventions are effective for increasing social skills in adults post-TBI.

**POSTER BLOCK D**

**Friday**

**3:30-4:30 PM**

Alexandrea Veale, OT Student

***Changes in reimbursement models in healthcare have placed an emphasis on patient safety and quality of care***

Given there has been greater emphasis on inter-professional collaboration between practitioners to address those goals. To best prepare students for these changes, accrediting councils of professional programs have included educational standards around inter-professional education (IPE). The aim of this study was to develop a sustainable IPE event between OT and Speech and Language Pathology students and to assess its efficacy in improving the participant's beliefs, values and attitudes around inter-professional collaboration. We will describe the event and its learning objectives. We focused on two of four

primary core competencies: roles/responsibilities and inter-professional communication. We used a mixed methodology to assess efficacy. We used the Inter-Professional Socialization and Valuing Scale 21, to assess this pre and post event. We also present qualitative experiences of the student participants.

Renuka Roche, PhD, MS, OTRL; Kaitlin Graf, OT Student; Joseph A. Roche, BPT, PhD  
***A qualitative study of current rehab practices for muscular dystrophies: Views and experiences of rehab professionals***

Individuals with adult-onset muscular dystrophies (MD) do not die from the disease but have progressive loss of occupational performance (OP) and quality of life. Previously, we found that adults with MDs had significant loss of OP, but they did not access rehab services. Therefore, we wanted to understand the perspective of rehab professionals including OTs on rehab access, available resources and intervention philosophies for this population. We did semi-structured interviews with rehab professionals (n=12). Four overarching themes emerged: the role of OT, the use of adaptive equipment, inconsistencies regarding muscle use in MD intervention, and the paucity of resources for practitioners, clients and their families. There is no consistent pathway for referral and access to rehab services. OTs are underutilized despite the OP deficits. The lack of guidelines makes outcomes inconsistent. OTs may need to train clients in “muscle protection” to maintain muscle bulk for gene therapies to be successful.

Mishka Sajjadi, OT Student; Sarah Baker, OT Student; Joseph A. Roche, BPT, PhD; Renuka Roche, PhD, MS, OTRL

***The Lack of Occupational Performance Measures in Clinical Trials for Muscular Dystrophies: An Opportunity for Advocacy***

Muscular Dystrophy (MD) has a profound and ever-changing impact on an individual's occupational performance and engagement. Many experimental therapies are being developed for individuals with MD. The purpose of this systematic review of literature through PUBMED, ClinicalTrials.gov and Google Scholar, was to assess the endpoints for success in these intervention trials. We found that the majority of the trials used walking as a primary outcome measure. Many potentially successful trials were deemed unsuccessful because clients did not necessarily have improvement in walking distance. As OTs, we understand that successful engagement in activities of daily life requires performance beyond walking alone. Our examination of the available literature suggests there is a greater need for incorporating functional outcome measures as primary outcomes. Our findings are a call to action for OTs to be more actively involved in the development and implementation of clinical trials for MD.

**Friday**  
**4:30-5:00 PM**  
***Exhibit Hall***

**Friday**  
**5:00-6:00 PM**  
***Virtual Event***



Participation in this event will allow you an opportunity to get to know other OT's in the State of Michigan. There will be a virtual game which will create some healthy competition with opportunities to earn prizes, bragging rights, etc. GAME ON!!!!

## SATURDAY SESSIONS

**Saturday**

**9:00 AM – 10:30 AM**

### ***Business Meeting***

The status of the MiOTA organization will be reviewed.

This session offers CONTACT HOURS and all are invited to attend.

**Saturday:**

**11:00 AM – 12:00 PM**

Sarah Renner, ORTL, Student

### ***Prevalence, Knowledge, and Attitudes of Complementary Health Approaches and Integrative Health (CHAIH) Practices Among Occupational Therapists***

As the literature regarding the integration of CHAIH in OT practice continues to develop, many of the publications still have substantial limitations and further support the notion that there is a considerable gap in the current literature. With the increasing popularity and application of these CHAIH interventions among children and adults across the United States, it is critical that we analyze and define this gap that could impede the progression of our field; we must be able to offer evidence-based CHAIH interventions to consumers that are progressively integrating the use of these practices in their lives. An exploratory, cross-sectional survey design was used to explore the prevalence, knowledge, and attitudes concerning the professional integration of CHAIH amid OT practitioners (n = 4,420). This novel, comprehensive database establishes a foundation for OTs to strategize how to close the gaps in practice and the research that drives our profession and health care system. The learning objectives for the proposed presentation include: (1) to develop a broader understanding of the relevant literature, including any noteworthy gaps, surrounding OT and CHAIH; (2) to detail the prevalence of CHAIH use in OT practice across the United States; (3) to discuss which CHAIH therapies are most commonly integrated into practice; and (4) to interpret the difference between OTs that do integrate CHAIH in practice versus those who do not when self-rating their knowledge and attitude about CHAIH.

**Saturday:**

**11:00 AM – 12:00 PM**

Kirsten Matthews, MA, OTRL, CLT

***Considering & Identifying Pain in Pediatric Populations***

Pain in children is an often overlooked area that can impact a child's physical, cognitive and psychosocial participation in Activities of Daily Living. Understanding pain and how it may manifest in children can help therapists to provide appropriate supports and care for children to maximize their participation in meaningful activities. Participants will gain knowledge in: 1. Understand what pain is/types of pain; 2. Learn types of issues may contribute to a higher risk of pain; 3. Understand and utilize tools to help identify pain in children, including differences in pain and identification of pain across different developmental ages; 4. Gain a general understanding of ways pain can be managed and their strengths/weaknesses; 5. Have an understanding of tools that can be used to evaluate and monitor pain in children.

**Saturday:**

**11:00 AM – 12:00 PM**

Colette Brzezinski, MS, OTRL

***Let's Get to Work: Occupational Therapy and Productive Activity Post Neurologic Injury***

The positive psychosocial effects of participation in productive activity are well-documented, as are the negative effects associated with barriers to successful productive societal contributions. Research indicates that individuals with neurologic diagnoses experience low return to work rates following injury, increasing their risk for negative psychosocial impacts of decreased involvement in productive activity. Cognitive skills and medical status are cited as significant predictors of return to work and job maintenance in this population. Occupational therapy is uniquely positioned to aid individuals in addressing these barriers to work through both remediation of deficits and provision of compensatory strategies. Research has indicated higher return to work rates and decreased leave days as a result of occupational therapy services. This presentation aims to provide attendees with strategies to evaluate and treat client return-to-work goals following neurologic injuries while adhering to funding limitations.

**Saturday:**

**11:00 AM – 12:00 PM**

Sarah Johnson, MS, OTRL

***Complex Regional Pain Syndrome: Interventions to Increase Occupational Performance***

Patients diagnosed with complex regional pain syndrome (CRPS)/reflex sympathetic dystrophy (RSD) often experience intense pain, swelling, and limited range of motion which creates a barrier to engagement in activities of daily living thus impeding independence. According to the Reflex Sympathetic Dystrophy Association, treatment "must be individualized." Occupational therapists foster a valuable, patient centered, contribution to the treatment of patients with these debilitating disorders. Participants will learn: 1) relevant history of CRPS (Alkali, Al-Majed, & Al-Tahan, 2020), 2) identify the symptoms (Misidou & Papagoras, 2019) 3) describe the appropriate therapeutic interventions to increase functional performance (Quintal, Poire-

Hamel, Bourbonnais & Dyer, 2018), and 4) describe the importance of inter-professional collaboration (Franklin & Austin, 2012 & Rome, 2016).

**Saturday:**

**11:00 AM – 12:00 PM**

Alissa Baker, MS, OTRL; Kayleigh Binder, OT Student; Dionysian Josts, OT Student

***Building Better Client-Therapist Interactions using The Intentional Relationship Model***

Most occupational therapy practitioners would be quick to agree that therapeutic use of self is an essential skill to apply in practice. Yet, many practitioners report feeling inadequate in their ability to manage the emotional and behavioral challenges of their patients and <33% of practitioners think there is sufficient knowledge within the field (Taylor et al., 2009). The Intentional Relationship Model (IRM) fills this gap by providing practical knowledge about how to manage the interpersonal aspects of therapy in order to promote the client's involvement in occupations. This interactive session will empower participants to more effectively build and maintain therapeutic relationships with their clients by exploring and applying the IRM and its corresponding modes of interaction. After this session, participants will be able to describe the elements of the IRM, identify their preferred mode(s) of interaction, and list the strengths and cautions of each mode.

**Saturday:**

**11:00 AM – 12:00 PM**

Juliane H. Chreston OTD OTRL

***Applying Concepts of Crossfit™ to Design Engaging Interventions***

Today's consumer demands that healthcare providers both be familiar with community-focused health and wellness trends and, when care is needed, design personal and engaging interventions. Occupational therapists strive to provide interventions that will be meaningful and engaging, as well as support carryover outside of therapy sessions. This workshop will: 1) explore characteristics of intervention design that support therapeutic alliance; 2) familiarize OTs with Crossfit™, a popular fitness program, and 3) explore Crossfit™ concepts that have application for OT intervention planning. Participants will have the opportunity to design a variety of both preparatory/therapeutic exercise routines and occupation-based interventions specific to the settings and populations they serve. They will also gain insight into a potential community resource for future referral for clients seeking community-based support and accountability for lifestyle alteration.

**Saturday:**

**12:00 PM – 1:00 PM**

SIS

***Students***

**Saturday:**

**12:00 PM – 1:00 PM**

SIS

## ***Mental Health***

**Saturday:**

**12:00 PM – 1:00 PM**

SIS

***Adult Rehabilitation, Physical Disabilities, Acute Care***

**Saturday:**

**12:00 PM – 1:00 PM**

SIS

***Hand Therapy***

**Saturday:**

**12:00 PM – 1:00 PM**

SIS

***Work and Industry***

**Saturday:**

**12:00 PM – 1:00 PM**

SIS

***Educators; Researchers***

**Saturday**

**1:00-3:00 PM**

Holly Grieves, OTD, OTRL; Anne Crites, OTRL; Kimberly Banfill, MOT, OTRL; Julie Jacob, MSOT, OTRL

### ***MOTEC Fieldwork 101***

Fieldwork students (OT and OTA) are the future of our profession. Any clinician, regardless of level of experience, can supervise a Level I Fieldwork student, and practitioners with one year of experience since initial NBCOT certification can supervise Level II Fieldwork students (ACOTE, 2018). This session will discuss the benefits of being a fieldwork educator and the tools needed to establish and run a fieldwork program in any type of practice setting. Members from the Michigan Occupational Therapy Education Consortium (MOTEC) from various academic programs across the state (OT and OTA) will be present to answer any questions related to fieldwork education.

**Saturday**

**1:00-3:00 PM**

James Stark PT MSPT

### ***Pain: Concepts and applications***

This course will provide an overview of current understanding of the science relating to pain and examples of applications of that framework specific to Upper extremity and spinal pain. Key concepts covered will include: 1. Current pain models- Biopsychosocial/complex system/psychologically informed practice/pain triangle; 2. Definitions of pain and pain

mechanisms; 3. How and why to assess mechanisms; 4. Meaning response and the power of language and story; 5. How to get started in more effective pain management using psychologically informed and behavioral tools; 6. Clinical application examples for spinal pain and upper extremity pain.

**Saturday**

**1:00-3:00 PM**

Donna Case, PhD, OTL

***Best Practice in Schools***

School based practice is changing rapidly as cost cutting and evidence-based demands intersect with school practice. School based occupational therapy practitioners straddle both the medical and educational model. Technology is changing and impacting student's means of expressing themselves in written and verbal communication. This session will be a come and share session where the presenter and participants can share some of their favorite treatment ideas and successes or problem areas that need a solution. Be prepared to share and problem solve. 1. Participants will experience a variety of tools and resources for successful school-based practice. 2. Participants will identify constraints of school-based practice. 3. Participants will identify resources for questions, problems and opportunities.

**Saturday**

**1:00-3:00 PM**

Kristin Willey, MHS, OTRL; Kelly Machnik, MS, OTRL; Alisha Cheyne, OT Student; Gabrielle Martino, OT Student; Madison Muir, OT Student; Elizabeth VonAchen; OT Student; Natalie Wallace, OT Student

***Occupational Therapy Fieldwork in the Criminal Justice System***

This presentation will discuss a successful model for occupational therapy fieldwork within prisons. Faculty discuss the collaborative process for site development. Fieldwork students share experiences of their placement (biases; direct assessment of clients; and the implementation of client-centered interventions). Related student research also presented. Learning Objectives: 1. Understand OT's role in community-based settings; 2. List benefits of student learning in correctional facilities. Relevance: Incarcerated individuals experience occupational deprivation which directly impacts their daily routines, personal relationships, and life roles. This deprivation leads to unhealthy choices during their incarceration (Molineux & Whiteford, 1999). OTs can help bring occupational purpose back into their lives by educating them on healthy habits and routines that can be implemented while in prison (Whiteford, 1997). Offenders released from prison are likely to be re-incarcerated due to lacking the skills needed to successfully reintegrate into society (Eggers, Munoz, Sciulli & Crist, 2006). OTs can educate inmates through prison programming so that they can be successful upon community re-integration.



**Saturday**

**1:00-3:00 PM**

Claudette Stork Reid, OTL; Renée Lyon, MS, OTRL

***Work Shouldn't Hurt: Work-Related Injuries for OTs and how to Reduce Your Risk***

Occupational therapists champion prevention of injury with their clients, teaching them the techniques that allow them to be safe while performing essential activities for their life roles. But how often do we consider the cause and prevention of work-related injuries for those of us who provide OT? This course will review research related to patterns of injury in our profession and provide suggestions for reducing your risk of injury. Learning Objectives of the presentation are: - Identify high frequency injuries and the activities causing them for OTs - Recognize the difference in patterns of injury for five different work settings - Discuss the culture and values that impact injury of OT professionals on the job - Review resources to reduce your risk of injury - Identify areas for future investigation.

**Saturday**

**1:00-3:00 PM**

Steven Eberth, OTD, OTRL, CDP; Richard Cooper, OTR, Ph.D., Professor Emeritus

***Therapeutic Magic: Advancing an Engaging Approach to Therapy***

Development of the "Therapeutic Magic" training program occurred at Western Michigan University (WMU) to train occupational therapy students to use magic as a viable therapeutic modality. We will present evidence-based concepts of therapeutic magic, teach advanced illusions to integrate into treatment, documentation, and discuss magic program development and therapist skill assessment through large and small group activities. Participants will receive materials to use in their own practice to establish a magic program. Documentation of magic as a therapeutic activity has existed since World War I and in occupational therapy literature since 1940, and it has evidence that it can improve psychological and physical wellbeing (Wiseman & Watt, 2018). Over time, the approach was developed and endorsed by the American Occupational Therapy Association in 1982 and known as Project Magic (Hart & Walton, 2010). Today, we now have a validated instrument to evaluate the use of magic by health professionals (Spencer et al., 2019). Learning Objective: 1. Participants will discover and learn evidence-based concepts, and advanced illusions for treatment in occupational therapy; 2. Participants will learn magic program development and assessment, documentation and goal writing through case studies.

**Saturday**

**3:30-4:30 PM**

Julie Dorsey, OTD, OTRL, CEAS, FAOTA; Caitlin Synovec, OTD, OTRL, BCMH; and Lizabeth Metzger, MS, OTRL

***The Occupational Therapy Practice Framework, 4<sup>th</sup> Edition: Understanding and Applying the Revised Document***

The Occupational Therapy Practice Framework 4th edition (OTPF-4, called the Framework) articulates the profession's distinct domain and outlines the process through which occupational therapy service delivery occurs within this domain. This document has been instrumental in guiding the profession, advocating for the role of OT with various populations

and across practice settings, and has continued to evolve to ensure the OT is suited to anticipate and meet society's changing needs. The Framework was recently revised by the Commission on Practice (COP) and approved by the Representative Assembly in spring 2020. Members of the COP will provide an overview of the significant changes to the Framework and the revision process. The expanded and new tables will be highlighted in detail as they apply the concepts of the Framework. Course objectives: 1. Describe the major changes to the OTPF-4 and discuss the implications for practice, education, research, and advocacy. 2. Apply the OTPF-4 to practice with a focus on supporting and advancing the profession.

## SATURDAY POSTER SESSIONS

Each hour block contains 3  
poster presentations followed  
by Q&A

**SATURDAY 3:30-4:30 PM**

### POSTER BLOCK A

Saturday

3:30-4:30 PM

Luke Baker, OT Student

#### ***Broadening School-Based Recess is Important Too***

Recess is an important part of the school day that enhances children's academic performance, enables opportunities necessary for typical development, and supports physical and psychological health and well-being. Despite occupational therapy's broad perspective and recommended practice, the documented practice of school-based occupational therapists is narrow and rarely addresses recess. School-based occupational therapists have an opportunity to intervene and maximize the potential benefits of recess and the time devoted to it.

Literature regarding the potential role and intervention of occupational therapy regarding recess was reviewed and will be presented in this poster. Results indicate that occupational therapists can expand school-based practice by developing, implementing, and advocating for evidence-based programs that are designed to educate recess supervisors, enable engagement

in recess activities, and create a positive recess experience for all students. One such program, The Refreshing Recess Program, will be covered in detail.

Brittany Sholts, OT Student; Annemarie Kelly, JD, LLM; Renuka Roche, PhD, MS, OTRL

***The Unique Value of OT in Special Needs Planning***

Special needs planning (SNP), a term used by financial planning professionals, is the comprehensive planning of the financial and legal affairs of an individual with disabilities by their family. The goal of this process is to utilize all resources, legislations and opportunities to ensure that the individual with disabilities is able to live a productive and meaningful life. However, many clients and their families are not aware of this planning process. OTs are professionals who have the best understanding of changing occupational needs across the lifespan. They are in a unique position to assist families and financial experts in this planning process for the best possible outcomes. However, financial experts currently are not aware of what OT can bring to the table and OTs are not aware of what SNP entails. We will present information regarding SNP, legislations, available resources, and how OTs can be involved.

Trudy Pine, OT Student; John Quinn, OT Student; Ally Douglass, OT Student; Renuka Roche, PhD, MS, OTRL

***Neurological soft signs in children with developmental coordination disorder***

Children with developmental coordination disorder (DCD) have significant impairment of motor function, which affects ADLs, and academic functioning. Movement assessment battery for children (MABC) is considered the gold standard in terms of determining the DCD diagnosis. However, a clinician cannot identify neurological soft signs (NSS) using this tool. NSS are clinically detectable abnormalities that include poor motor coordination, and involuntary movements. The presence of NSS in this population can be assessed using Revised Physical and Neurological Examination Soft Signs scale (PANESS). If unique patterns of NSS are associated with DCD, it may help a clinician differentiate it from other development conditions. In this study, we compared the performance of children with DCD with that of children with autism, ADHD and neurotypical children. We also compared the performance of children with DCD on PANESS and MABC. We will present these results and the interventional implications of NSS.

**POSTER BLOCK B**

**Saturday**

**3:30-4:30 PM**

Kathie Martin, OTRL, CBIS; Amy Hayes, OTRL

***Functional Accommodations for Employees with a TBI***

Focus of this poster presentation is to provide education on a Hierarchy of Cognitive Functions and accommodations/strategies often needed in a work environment for individuals who have sustained a Traumatic Brain Injury. Definitions, signs and symptoms, and strategies are identified within each level of the hierarchy. Case scenarios are used to provide real life examples of implementing strategies and accommodations into daily work routines. Objectives of this presentation: 1. Identify strategies which enhance the success of vocational based goals

for individuals who sustained a TBI. 2. Identify accommodations often implemented to maximize success when returning back to work after a TBI.

Cara E Masselink, PhD, OTRL, ATP;

***Changes in Wheelchair Recommendations from 2007-2017***

Significance: Power mobility device (PMD) expenditures rose in the early 2000s and Medicare made subsequent changes potentially impacting access. Aim: To understand how the demographics of people and the type of wheelchair equipment recommended has changed between 2007 and 2017. Methods: A quantitative, retrospective chart review examined letters of medical necessity which detailed 4,525 full wheelchair recommendations. Results: Recommendations for standard power mobility devices and general cushions increased the most. People without Medicare were more likely to be recommended complex manual wheelchairs (n = 291, 76.0%) and power mobility devices (n = 89, 33%). Conclusion: This study did reveal changes in the recommendations made for full wheelchairs over an 11-year time period. Limitations: Documentation from a single site, and descriptive analysis that prohibited causal interpretation. Implications: The results support policy changes with implications for the proposed bill, H.R. 2408 Ensuring Access to Quality Complex Rehabilitation Technology Act of 2019.

Breezy Barcelo, OT Student; Meghan DeBacker, OT Student

***The Effectiveness of DIR/Floortime on Social-Emotional Development for Children with Autism Spectrum Disorder***

Children with ASD often have challenges related to social-emotional development, in particular, this population can struggle with social participation. DIR/Floortime™ is a play-based intervention that leads the way to emotional development, which is foundational for future child development. This project involved a review of evidence for DIR/Floortime, an emerging intervention designed to address social-emotional development. A range of core databases were searched resulting in nine studies. The three most promising studies were reviewed in depth including one systematic review and two randomized controlled trials. Overall an increase in communication, relatability, and responsiveness with the caregiver was found using DIR/Floortime™ as compared to a control group is an effective way to improve social-emotional development in children with ASD. Additional high-quality research is needed for DIR/Floortime™ to become more widely recognized as evidence-based practice.

**POSTER BLOCK C**

**Saturday**

**3:30-4:30 PM**

Amanda K. Weersma, COTAL, OT Student; Sam McKenna, OT Student

***Neurocognitive Habilitation Therapy in Occupational Therapy for Self-Regulation in Children Who Have Experienced Trauma***

Complex trauma results from repeated exposure to traumatic events within an unpredictable environment in conjunction with absent protective caregiving 5. Research shows exposure to early and complex trauma affects brain development and causes physiological changes in brain

anatomy 1,10. The regions affected interfere with executive functioning, emotional regulation, and self-regulation processes in children 2. Neurocognitive habilitation programs work to address these emotional needs, regulate sensory information, improve executive functioning skills, and help children self-regulate more independently 4,9. Results show that these programs can be an effective occupational therapy treatment option for children ages 3-13 years in diverse settings and formats, including at school, clinic, individual, and group sessions. They cultivate tangible strategies that allow children to have self-regulation strategies regardless of the environment they are in. Neurocognitive habilitation therapy is an effective treatment method for improving self-regulation and executive functioning deficits in children exposed to complex trauma.

Samantha Holzschu, OT Student; Jane Buerkel, OT Student

***Influence of Video Modeling on Functional Development for Children with Autism Spectrum Disorder (ASD)***

Background: 1 in 54 children are diagnosed with ASD (Maenner et al., 2016). Video-modeling has been used as an occupational therapy intervention to facilitate social communication, functional and behavioral skills in children with ASD (Bellini et al., 2007). Methods: The databases ProQuest and PubMed were used to gather articles related to video modeling, motor, and Autism Spectrum Disorder. Results: Video-modeling was shown to be the most effective for children with ASD in completing functional skills compared to social-communication and behavioral skills (Bellini et al., 2007). 100% of independent toileting skills were maintained when video-modeling was used as an intervention (McLay et al., 2015). Significant decreased plaque index scores were noted when video-modeling was used as an intervention for oral hygiene. (Poppo et al., 2016). Conclusion: Occupational therapists can use video-modeling as an effective intervention for children with ASD to replicate and retain motor tasks such as toileting and oral hygiene.

Alexa Thibault, OT Student; Dana Jacobson, OT Student

***How positioning in the Neonatal Intensive Care Unit affects development of preterm infants***

Roughly 15 million babies are born preterm annually (WHO, 2018). These infants miss part of, or the entire third trimester in the uterus environment, which is crucial for their development (Waitzman, 2007). Using Clinical Key and Scopus databases, we selected three evidence-based research articles that looked at different positioning supports and techniques used in the neonatal intensive care units (NICU). These articles compared their outcome amongst different positions in neurological and neurodevelopmental effects of preterm infants. Positioning of preterm infants should incorporate a flexed posture and movement patterns toward the center of the body to simulate the supportive uterine environment and therefore, promoting healthy, current and future, development. This information is useful for healthcare professionals, especially those working in the NICU as well as families that experience preterm infant birth.

**POSTER BLOCK D**

**Saturday**

**3:30-4:30 PM**

Lauren Montague, OT Student

***Effectiveness of Motor-Imagery on Improving Upper Extremity Function Post-Stroke***

Approximately 85% of individuals who experience a stroke have residual upper extremity limitations that affect their ability to engage in valued occupations and ultimately their quality of life (Wolf et al., 2006). Patients who suffer from stroke may rely solely on their unaffected upper extremity to perform tasks which lead to further decline in muscle strength and range of motion (Kim et al., 2015). Occupational therapists have the unique opportunity to facilitate upper extremity rehabilitation for patients who have been affected by stroke. Neural plasticity plays a vital role in regaining motor function, due to the same area of the brain being utilized when physically and mentally performing a task (Li et al., 2018). Motor imagery is a mental exercise that uses an internal stimulus to produce motor sensations without performing the physical action of the task, this accelerates regaining neural connections needed for upper extremity function (Kim et al., 2015).

Victoria Lehman, Occupational Therapy Student; Morgan Koehler, Occupational Therapy Student

***An Evaluation of the Effectiveness of Three Caregiver Training Programs on Quality of Life and Burden for Family Caregivers of People with Dementia or Dementia- Related Disorders***

Caregivers of those living with dementia are at a higher risk for emotional distress, negative mental and physical health outcomes (Alzheimer's Association, 2018). Helping to promote caregiver wellness and quality of life is within the scope of occupational therapy practice. This Critically Appraised Topic sought to explore the effectiveness of the Family Caregiver Training Program, Environmental Skill-Building Program (ESP), and telephone-based, Cognitive-Behavioral Therapy on burden and quality of life for caregivers of people with dementia. Methods: Acquisition of papers included searches from ProQuest, PubMed, and Clinical Key databases. Three level one studies were included in the appraisal. Limitations included variability in sensitivity of outcome measures. Results: Of the three researched, the ESP yielded the most change in affect ( $p=.034$ ), subjective ( $p=.027$ ), and objective burden ( $p=.026$ ). Conclusion: expert led, home-based, environmental skills programs are the most effective for improving quality of life for caregivers of those diagnosed with dementia or dementia-related disorders.

Arianna Stark-Norton, OT Student; Natalina Miller, OT Student

***Best Occupational Therapy Interventions to Prevent Hospital Readmissions***

The average cost of 30-day acute-care readmission is over \$14,000 for general diagnoses in the United States (HCUP, 2019). Occupational therapy can influence the likelihood of readmission as it places focus on an individual's functional status and social needs (Rogers et al., 2016). Methods: The databases PubMed Central, Scopus, ProQuest, and PsychARTICLES were used to gather articles related to hospital readmission, occupational therapy, predictors of readmission, geriatrics, and readmission spending. Results: 87% of inpatient rehabilitation admissions result in readmission to an acute care hospital within 30-days (Shih et al., 2016). Older adults who had been readmitted to the hospital showed an increase in ADL dependence and often experienced cognitive deficits as well (Jönsson et al., 2017). Occupational therapy was the only category where increased spending resulted in decreased readmission for patients with heart failure,



pneumonia, and acute myocardial infarctions (Rogers et al., 2016). Conclusion: Occupational therapy interventions focused on increasing functional abilities in inpatient settings have shown to decrease acute hospital readmission rates.



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# SESSIONS AT A GLANCE

## Friday Session Schedule

FRIDAY 6.5 Synchronous	Room 1	Room 2	Room 3	Room 4	Room 5	Room
8:00 – 9:00 AM	Exhibitors	Exhibitors	Exhibitors	Exhibitors	Exhibitors	Exhibitors
9:00-10:30 AM Contact Hour - 1.5	Key Note Hurley					
10:30 – 11:00 AM	A&A Driving	Penumbra	Exhibitors	Exhibitors	Exhibitors	Exhibitors
11:00-12:00 PM Contact Hour - 1	Yatzak	Hubbert	Cramer	A. Baker Ethics	Justice	B. Chycinski
12:00 – 1:00 PM Contact Hour – 1	SIS *Black Caucus	SIS *Geriatrics *Home Health *Skilled Nursing	SIS *Administration *Private Practice *Entrepreneur	SIS *Home Modifications	SIS *Pediatrics *Sensory *Developmental Disabilities *School Therapy	SIS *Insurance *Telehealth
1:00-3:00 PM Contact Hour - 2	Grieves (capstone)	Roldan (abuse)	Johnson, C	Tank	Garvey / Gad	Vogtmann
3:00 – 3:30 PM	Exhibitors	Exhibitors	Exhibitors	Exhibitors	Exhibitors	Exhibitors
3:30-4:30 PM Contact Hours - 1	Session Justice/Johnson	Session Kunz, J	Posters (3) *Goethals *Moran *Batten	Posters (3) *Hock *Lindstrom *Dendel	Posters (3) *Gendernaik *Garvey *Lear	Posters (3) *Veale *Roche *Sajjadi
4:30-6:00 PM		Exhibitors	Exhibitors	Exhibitors	Exhibitors	Exhibitors
5:00-6:00 PM Happy Hour	Virtual Activity					

## Saturday Session Schedule

SATURDAY (6.5) Synchronous	Room 1	Room 2	Room 3	Room 4	Room 5	Room 6
8:00 – 9:00 AM	Exhibitors	Exhibitors	Exhibitors	Exhibitors	Exhibitors	Exhibitors
9:00-10:30 AM Contact Hour - 1.5	Business Meeting					
10:30 – 11:00 AM	Exhibitors	Exhibitors	Exhibitors	Exhibitors	Exhibitors	Exhibitors
11:00-12:00 PM Contact Hour - 1	Renner (Prevalence)	Matthews	Brezekinski	Johnson, S	Baker, A IRM	Chreston
12:00 – 1:00 PM Contact Hour – 1	SIS *Students	SIS *Mental Health	SIS *Adult Rehab *Physical Disabilities *Acute Care	SIS *Hands	SIS * Work & Industry	SIS *Educators *Research
1:00-3:00 PM Contact Hour - 2	Grieves (MOTEC)	Stark (pain)	Case	Wiley	Reid	Eberth
3:00 – 3:30 PM	Exhibitors	Exhibitors	Exhibitors	Exhibitors	Exhibitors	Exhibitors
3:30-4:30 PM Contact Hours - 1	Session Dorsey OTPF-4		Posters (3) *L. Baker *Sholts *Pine	Posters (3) *Martin *Masselink *Barcelo	Posters (3) *Weersma *Holzschu *Thibault	Posters (3) *Montague *Lehman *Stark-Norton

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