

## **OCTA 231:**

### **Clinical Techniques I**

3 Credits: 2 lecture hours and 2 lab hours

## Community College of Baltimore County Common Course Outline

### Description

**OCTA 231 – Clinical Techniques I:** Introduces students to the topic of pediatrics with emphasis on developmental disabilities, psychosocial and physical dysfunction. Students discuss the impact of a child with special needs on the family, the importance of play, mobility and an integrative public education system. Through lecture, laboratory work and practicums experience, students focus on the techniques used in dealing with a pediatric patient and their family. This course contains 2 hours of lecture, 2 hours of laboratory and 24 hours of Level I fieldwork.

**Pre-requisites:** OCTA 201 and OCTA 220 with a grade of “C” or higher

### Overall Course Objectives

Upon completion of this course, students will be able to:

1. name the frames of reference common to pediatrics;
2. compare the differences between the medical model and educational model and the liability issues and various roles of the occupational therapy practitioner in each setting;
3. describe the changing dynamics of occupation from early infancy through to young adulthood;
4. identify cultural and societal factors impacting the family unit that may support or impede the therapy process;
5. apply a working understanding of normal gross motor, fine motor and oral motor development in lab and on Level I fieldwork;
6. identify appropriate treatment activities for the pediatric population;
7. apply treatment strategies that are occupational based, to remediate or compensate for cognitive, visual and psychosocial/behavioral deficits interfering with occupational performance;
8. identify activities to support occupational performance in pediatrics;
9. practice various compensatory strategies for children unable to fully participate in age-appropriate occupations;
10. identify typical pediatric diagnoses treated by occupational therapy assistants;
11. demonstrate emerging handling and positioning techniques for the motor impaired child;
12. identify common re-assessment tools used in pediatrics and how these re-assessments contribute to developing occupational based intervention plans and strategies;
13. describe sensorimotor approaches used in pediatrics;
14. identify common writing activities used with children with handwriting problems;
15. describe the role of occupational therapy with children in the school system;

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For more information, see your professor’s syllabus.

16. differentiate the Individual Educational Plan (IEP) and Individual Family Service Plan (IFSP) and the federal laws that govern the delivery of OT services in the school setting;
17. define “family-centered care”;
18. complete Subjective, Observation, Assessment, and Plan (SOAP) notes on children seen during the Level I fieldwork;
19. explain when to use the consultative process in a school setting;
20. practice intervention skills specific to facilitation of oral motor skills for eating;
21. describe the implications of genetic conditions, disability, trauma, and injury on the performance of occupations in children and the impact on their families;
22. construct a safe environment for the pediatric client and young adult; and
23. apply evidence-based research to support pediatric treatment activities.

### **Major Topics**

- I. The Scope of Pediatric Occupational Therapy
  - a. Theories and Frames of Reference
  - b. Practice Framework
  - c. Client-Centered/Family-Centered Practice
  - d. Various Pediatric Treatment Environments
- II. Normal Development
  - a. Gross Motor
  - b. Fine Motor
  - c. Oral Motor
- III. Abnormal Development
  - a. Gross Motor
  - b. Fine Motor
  - c. Oral Motor
- IV. Family Centered Care
  - a. Impact of Special Needs Child on Family Dynamics
  - b. Diversity and Culture of Family
- V. School System and Early Intervention Programs
  - a. IEP and IFSP
  - b. Laws Governing the Educational System
  - c. Working with Parents and Teachers
- VI. Learning Disabilities/Writing/Sensory Integration Issues in School
  - a. Learning Disabilities/ADHD
  - b. Sensory Integration Theory
  - c. Treatment Using Sensory Integration Activities
  - d. Treatment Using Non-Sensory Integration Activities
  - e. Handwriting Issues and Treatment Strategies
- VII. Children with Autism Spectrum Disorder (ASD)
  - a. Clinical Signs of ASD
  - b. Treatment Strategies for ASD
- VIII. Children with Neuromotor Deficits
  - a. Neurodevelopmental Treatment
  - b. Handling and Positioning

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- c. Treatment to Facilitate Gross Motor and Fine Motor Skills
  - d. Adaptive Equipment
- IX. Common Pediatric Diagnoses
  - a. Intellectual and Development Disabilities
  - b. Spina Bifida
  - c. Seizures
  - d. Juvenile Rheumatoid Arthritis
  - e. Other Genetic Disorders
- X. Reassessment Tools
  - a. Pediatric Assessment and Screening Tools
- XI. Young Adult with Intellectual and Developmental Disabilities
  - a. Community Issues
  - b. Community Resources

### **Course Requirements**

Grading will be determined by the individual faculty member, but shall include the following, at minimum:

- 2 exams
- Final exam
- 2 SOAP notes
- Reassessment write-up
- 2 treatment plan write-ups
- Level I Fieldwork

### **Other Course Information**

All courses in the Occupational Therapy Assistant program must be passed with an overall grade of a 75% or higher. Below 75% is considered failing in this program.

A course grade is composed of an average of grades received on tests, quizzes, papers, or projects. Examination grades (tests, quizzes) must average 75% before grades for papers, projects or presentations are factored into the overall course grade.

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