Impacting communities
Class of 1998 visit

Members of the Program in Occupational Therapy class of 1998 returned in April to visit and to reunite with classmate Kerri Morgan, PhD, OTR/L, ATP. Morgan is an instructor in occupational therapy and neurology.

Left to right (standing): Billie Boone, Amy (Hoger) Ramsey, Kerri Morgan, Holly (Morgenstern) Keller, Danielle (Coe) Carter and Deborah (Vander Veen) Steele.
Out and about
Christine Berg, PhD, OTR/L, FAOTA, connects students to the community through experiential learning

Seeing the medical campus through the OT lens
OT students conduct yearly assessments on the Medical Campus to improve safety, mobility and accessibility

Adolescent substance abuse recovery: next steps
Theresa Henry, MSOT, OTR/L, answers questions about the newest Community Practice service line

Living for the OT moment
Alumnus Todd Levy, MSOT ’02, OTR/L, CBIST, shares his experiences on the rehab team for the world’s first pediatric double hand transplant recipient
The Fall 2016 semester is off to a great start in the Program in Occupational Therapy. In August, we welcomed 87 new students from more than 25 states to the Program. The diverse and talented class comprises 59 MSOT and 28 OTD students, 80 female and seven male students, and three students from our 3-2 partner schools. The MSOT ’18 students joined our second-year OTD ’18 students to form our “Centennial” class (page 16). They were recognized with a special banner and photo at our annual Program picnic. We look forward to getting to know this extraordinary group of young professionals who will be leading our field into the next 100 years.

As educators, we understand how vital it is to our students to provide experiential learning opportunities within our communities. Christine Berg, PhD, OTR/L, FAOTA, oversees our clinical/community practice course sequence and is constantly seeking out new and innovative ways to connect our students to local agencies (page 6). The evolution of our Community Health course under Christine’s guidance enables us to support our students while supporting the health care needs of the underserved or un-served in our community.

In providing these experiences to our students, we also focus our OT lens on the medical campus. Faculty member Jessica Dashner, OTD, OTR/L, teaches the Environmental Factors Facilitating Performance and Participation class to first-year students (page 8). Each summer, our students partner with the Washington University School of Medicine (WUSM) Facilities department to assess our environment for potential barriers such as new construction, common areas, streets, signage and sidewalks.

Our Community Practice continues to expand its services by providing comprehensive recovery support for adolescents following substance abuse (page 10). Led by clinical specialist and Program alumna Theresa Henry, MSOT, OTR/L, the Adolescent Substance Abuse program offers unique occupational therapy expertise to help young people in recovery develop life skills and take next steps on their journey. The ultimate goal of next-step transition support is to help build the skills and confidence needed to manage their life in a healthy and meaningful way.

I am always excited to hear from you and catch up on where you are professionally and personally in your careers. Recently, alumnus Todd Levy, MSOT ’02, OTR/L, CBIST, wrote to me about his experiences on the rehab team for the world’s first pediatric double hand transplant recipient (page 12). We all can understand what Todd means when he says he lives for “OT” moment” with his clients; it’s what connects us as a profession and as practitioners.

As I mentioned, our Centennial celebrations are in the works but we cannot complete them without your participation. We have put together a short online survey to capture your memories for our event website and materials. The link to the survey is on page 18; please take a few moments to share with us your experiences in our Program. If you haven’t already, visit our website at ot.wustl.edu/alumni and update your contact information with us so we can keep you informed as the Centennial approaches.

Thank you for being a vital part of our Program and our mission to educate tomorrow’s leaders in occupational therapy and rehabilitation.

The best to you,

Carolyn Baum, PhD, OTR, FAOTA

Elias Michael Executive Director, Program in Occupational Therapy
Professor of Occupational Therapy, of Neurology and of Social Work
On July 1, the Program in Occupational Therapy welcomed Stacy Smallfield, DrOT, OTR/L, BCG, FAOTA, to its faculty as the assistant director of the entry-level doctoral degree program. Smallfield’s position combines academic coordination activities with teaching responsibilities to create a leadership role that oversees all elements of the OTD degree program, including recruiting, admissions, curriculum, instruction and program evaluation.

Smallfield earned a bachelor’s degree in psychology from Gustavus Adolphus College in 1995. She earned her master’s degree in occupational therapy from our Program in 1996, and her doctorate in occupational therapy from Nova Southeastern University in 2007. Her research interests are adult physical rehabilitation and gerontology, including low vision and assistive technology.

“This is an amazing opportunity to collaborate with top-ranked occupational therapy educators, scientists and clinicians to deliver exceptional learning experiences to students,” says Smallfield. “I look forward to growing the entry-level doctoral program and preparing future clinicians who are equipped to lead the way in an ever-changing health care environment.”

Program partners with Milliken Hand and Rehabilitation Center

On November 1, The Rehabilitation Institute of St. Louis (TRISL) will transition the hand therapy services it currently provides at the Milliken Hand and Rehabilitation Center to the Program in Occupational Therapy at Washington University. Under this new structure, the arrangement leverages the expertise of Washington University in orthopedics, plastic surgery and occupational therapy to provide exceptional care and convenience for patients. More than 20 therapists (pictured above) employed at Milliken will continue to provide services per the current practice; however, they will become employees of the Program in Occupational Therapy.

“By aligning the services offered at Milliken solely within the Washington University family, we can create a system of care that will improve the entire experience for patients,” says Carolyn M. Baum, PhD, OTR/L, FAOTA, Elias Michael Executive Director of the Program in Occupational Therapy and professor of occupational therapy, of neurology and of social work. “Operational processes, such as registration and documentation, will be simplified as we use the same technology as the WU physicians. We can increase access to research and education for patients and students and most importantly, we can better support patients with their recovery and therapy goals.”

Occupational therapy at Washington University is delivered through the Program’s Community Practice, which provides services to a diverse population, ranging from early childhood to aging adults. Patients are seen in the setting that best meets their needs, including home, school, work or the clinic.

“We are pleased to extend our reach into the community and expand our clinical services for new populations,” says Patricia Nellis, MBA, OTR/L, director of clinical operations for the Program in Occupational Therapy. “Following plastic and/or orthopedic surgery, OT can help ensure patients recover fine-motor skills, restore function and improve their ability to perform daily tasks as quickly as possible. Hand injuries can significantly impact a person’s ability to function as desired—this partnership is an excellent opportunity to deliver exceptional care and empower patients so that they can get back to doing the things they love following a hand injury or disability.”

The Milliken Hand and Rehabilitation Center provides a comprehensive treatment approach to specialized hand and upper extremity rehabilitation. The occupational, physical and certified hand therapists within the current practice have more than 50 years of combined experience in treating patients with dysfunction due to amputation, arthritis, burns, congenital deformities, Dupuytren’s disease, repetitive use, sports injuries and trauma.

Milliken Hand and Rehabilitation Centers are located in Chesterfield at 14532 South Outer Forty Drive, and in the Center for Advanced Medicine located at 4921 Parkview Place on the Washington University School of Medicine campus.

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Out and About

BY MICHELE BERHORST

Impacting the community through experiential learning

Christine Berg, PhD, OTR/L, visits with a young client at Our Daycare, one of the facilities Beyond Housing works with in the Normandy School District.
Berg came to the Program in 1987 when her husband, John, was named assistant to the chancellor at Washington University. Her career up to that point had been that of a community-based occupational therapist (OT) working with adults and children with mental, developmental and physical disabilities. During the mid-1970s, these populations were being reintegrated into their communities from segregated health institutions and OTs like Berg were charged with helping them transition into their communities. Looking back, she notes one significant difference in how she would approach facilitating a similar transition now.

“At the time, OTs didn’t necessarily connect these populations to community agencies already in place that could have provided services to assist with this transition to community process. We stayed within the medical community,” recalls Berg. “Connecting people with community agencies that can support their health care needs is something we as OTs can do to foster a longer range continuum of care. These are extremely vital partnerships that contribute to overall public health and community participation.”

As an educator, Berg understands how vital these community partnerships can be to students interested in becoming clinical practitioners.

Evolution of the Community Health course

In the mid-2000s, the Program began to incorporate courses that covered how occupational therapy could be utilized to strengthen community health promotion and prevention programs for persons with disabilities and their networks. The Community Health and Occupational Therapy course examined community health and education practices in occupational therapy for groups, communities and populations. Under Berg’s guidance, the course evolved into a service-learning model where students were matched to community sites to use their developing community practice skills in real world context.

“The course was designed from the belief that the best practice to educate OTs offers students opportunities for authentic, in-context learning along with practice, reflection and mentoring,” explains Berg. “It’s a mutually beneficial relationship, as students benefit from service-learning in these settings and the community sites gain fresh new perspectives and strategies from OT needs assessments and program plans, which address the individual health challenges of the agencies.”

In 2013, this community health emphasis evolved into the Community Health and Participation clinical/community practice track offering with self-directed learning experiences under the guidance of a Program faculty member. “The clinical/community practice track was the result of a curriculum change to offer students the opportunity to work directly in the community on projects that impact populations in need of OT services such as people with low vision, mobility and chronic health conditions,” says Berg.

Mentored by Berg and an agency supervisor, students provided a capacity-building service to the organization by performing a needs assessment in a focused area, collaborating with staff, and developing and delivering a program. The intent was to provide the agency with materials and a process that they could implement to enhance their ongoing programs. At one point, Berg had multiple students at multiple agencies throughout the St. Louis area, and she evaluated the impact of these individual projects and the service delivery of the agency.

“I began to ask, ‘Are there agencies out there with projects that could support more than one student to increase the impact?’ Collaboratively, our students

The name “Christine Berg, PhD, OTR/L, FAOTA” is synonymous with the word “community” in the Program in Occupational Therapy. She teaches the Promoting Population Health through Community Partnerships course to master’s and doctoral students each year, oversees the clinical/community practice course sequence, establishes community-university alliances to benefit the underserved or un-served.
could further broaden the programming and services offered to the community through the agency,” says Berg. The result was Berg connecting with two local agencies – Beyond Housing and United 4 Children.

Directly impacting the community

Beyond Housing is a community development organization that works in the 24 municipalities that send children to the Normandy School District, which is among the poorest and most underserved districts in Missouri. They focus resources where they can have the greatest impact in all of the areas that make up a thriving community – education, housing, health, employment readiness and access and economic development. Beyond Housing partners with United 4 Children to implement Programs Achieving Quality (PAQ), an early learning quality improvement project in collaboration with early childhood centers located in the Normandy School District. Through PAQ, students are engaged in the Move2Learn initiative, which encourages physical activity with a focus on infants and toddlers. Student projects complement the Move2Learn program.

“The partnership between Washington University, Beyond Housing and United 4 Children is an innovative way to work toward ensuring children develop on target physically, which directly impacts their continued progress in other areas of development. By creating a team approach between child care professionals, volunteers, child development coaches and even families, we are fostering an environment that is truly providing the holistic approach to supporting children that is so important,” says Elisa Zieg, MA, program development officer of United 4 Children. “One infant teacher had a child who struggled to sit on his own, even though developmentally that was a skill he should have. By working with

“Currently, one student is looking at fostering movement through reading books. Reading books is considered a sedentary activity, so how can we build movement into this common early childhood routine? Another student is exploring communication outreach to parents on building routines at home to get kids moving,” says Berg. “Other projects involve designing lesson plans that include environmental support such as space, materials and portable equipment. By facilitating physical activity in early childhood programs, we can help children establish lifelong habits of physical activity that could reduce obesity and promote healthy development.”

The agency collaboration is having positive results all around.

“Having Jaya in my classroom showed my teachers how to keep infants/toddlers moving constructively. She demonstrated great gross motor activities to use, along with lesson plans for future use!”

- Tina Mosley, director of Our Daycare

“Having Jaya in my classroom showed my teachers how to keep infants/toddlers moving constructively. She demonstrated great gross motor activities to use, along with lesson plans for future use!”

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the children’s brains and bodies are being developed and shaped in healthy ways … and they don’t even know it because it’s fun!"

Looking ahead

Berg is continually seeking new ways to engage students who are passionate about community. For years, she has been personally involved in the Civic Scholar Program through the Gephardt Institute for Civic and Community Engagement at Washington University. When an OT student approached her about wanting to look at a broader regional issue, Berg began developing the Civic Engagement track, modeled after the Gephardt program.

“After hearing him describe his interest in preventing gun violence, it just didn’t fit within one agency so I began to explore who I could connect him with in the community. This track allows students to look across several agencies at the big issues in our community such as poverty, racial disparity and homelessness, and how we as OT can participate in finding solutions,” says Berg. “He is learning about the issues, his role as a therapist and how gun violence impacts the OT profession and the clients we serve. It’s a broader way to learn about community health.”

Berg sees even more community opportunities for students by collaborating interprofessionally on projects with other Washington University programs and departments. During the summer, Berg worked with senior lecturer Jennifer Ingram of the Sam Fox School of Design & Visual Arts. “We have eight teams consisting of one OT student, one fashion design student and a person with a disability to design clothing that fits their lifestyle and accessibility needs. The students meet with their client three times to discuss wardrobe needs and activities, design universal options and sketch clothing with fabric choices for them,” says Berg. “Currently, there is no store-based retail market for clothing for people with disabilities, only specialty websites. That’s the kind of ‘out of the box’ thinking our profession can explore. Potential community partners to foster participation for our clients could be lawyers, architects, engineers and even fashion designers. The possibilities are endless … so stay tuned!”

Teaching kindness

When Matthew Dickey Boys’ & Girls’ Club contacted Dr. Berg to request programming to summer campers, a group of first-year students volunteered to develop and deliver a week-long hour class on kindness to address the issue of bullying. We asked the students to reflect on the experience, and how it impacted them as future clinicians and the children they taught.

“This experience gave me a clear view of what it is like to work with young children in the classroom. I was impressed at the level of openness amongst the kids when it came to sharing what they thought about their peers. The kindness activity was a great way for kids to gain confidence in themselves through self-reflection and peer observation.” – Haley Barlow, MSOT/S ’17

“It was a great experience to work with the young kids who are at the age where they are beginning to develop their identity and recognize what makes them special. This kindness activity was an opportunity for the kids to not only share about themselves, but also to listen to their peers and to appreciate both the similarities and differences among each other.” – Linda Lee, MSOT/S ’17

“As a young black woman, it is very important to me to spur growth in the black community. I realize targeting youth as they are coming into their identity and further develop their social skills is essential to that growth. Participating in this class gave me the opportunity to do just that while fostering my interest in leading groups and public speaking. I was also able to get out of my comfort zone by servicing an age group I’m not used to working with.” – Alexis Raybon, MSOT/S ’17

“I’m grateful for this opportunity to collaborate with my peers, Dr. Berg and the Mathews-Dickey Boys’ & Girls’ Club. The entire process taught me so much – from researching and designing the kindness classes to facilitating the experience with two age groups. It was exciting to see that our OT training has given us skills to bridge health and community, and I’m excited to explore more opportunities to do so in the future.” – Grace Mackowiak, MSOT/S ’17

“Working with the children was a great opportunity to apply what I have learned in the classroom to a real-life situation in the community. It was inspiring to see how well the message of kindness was received by the kids, and really helped to underscore the unique and very important role OTs have to play in improving the lives of those in their community.” – Tim Pemberton, MSOT/S ’17

“Taking the skills that we’ve learned into the community was a tremendous, rewarding experience. The kids I directly worked with were so excited to share about themselves and others while spreading compliments and positive affirmations. One child expressed that the class made him feel ‘important.’ Seeing what we could do in the community as students ignited more excitement for my future career in OT.” – Kristen Gramann, MSOT/S ’17
Environmental barriers impact an individual’s ability to conduct daily life. Knowing there are obstacles ahead can truly impact a person’s willingness and ability to participate.

“It comes down to a quality of life issue. Someone with a mobility, vision or hearing impairment shouldn’t have to work so hard navigating obstacles just to get to where they want to go that they can’t enjoy an activity or fully participate in the community,” explains Jessica Dashner, OTD, OTR/L, who teaches the Environmental Factors Facilitating Performance and Participation class to first-year students. The two-semester course gives students an in-depth understanding of the psychological, cognitive, social, political, physical and cultural elements of the environment that influence occupational performance, participation and health. Assessment and intervention strategies that promote health and maximize participation in daily activities are examined in home, school, workplace and other community settings.

During the course’s second semester, Dashner gives students the opportunity to practice and demonstrate the skills acquired in the classroom out in the community through group consultation projects. Students divide into smaller groups and venture out in the community to conduct assessments to determine accessibility and usability around the greater St. Louis area. Each group has a mentor from the Program in Occupational Therapy that facilitates the groups learning. This year, Carla Walker OTD, OTR/L, ATP, and Kim Walker OTD, OTR/L, ATP, were each involved in working with two groups.
“Every year, I have a group of students do a playground accessibility project. I also have a group of students come up with their own building or environmental themes to assess. This year, they wanted to examine the accessibility of local coffee shops,” explains Dashner. “These hands-on activities take students through the process of identifying a problem in the community and deciding how best to address it. They determine which assessments to use and how to administer them, what equipment is needed and if they need additional training before assessing the spaces. It helps them learn to interact with community partners, business owners, architects and other disciplines to improve safety, mobility and ultimately participation.”

One of the community partners the students work with each summer is on the medical campus. The Washington University School of Medicine’s (WUSM) Facilities department has projects for the students to assess such as new construction, common areas, streets, signage and sidewalks. The relationship began several years ago when faculty member Susy Stark, PhD, OTR/L, FAOTA, served on an ADA committee with Ron Olech, senior project engineering manager. This past summer, the students were asked to examine the accessibility of the newly-opened Scott McKinley Research Building and sidewalks on the medical school campus.

The Scott McKinley Research Building project was a continuation of the assessments conducted the previous year when the building was still under construction. Students examined last year’s recommendations to determine if they were implemented and provided new, additional recommendations to improve the building’s usability beyond the ADA Standards for Accessible Design. The group utilized the Community Health Environment Checklists (CHEC), which examines the physical and social environment, including features important to persons with disabilities. The CHEC answers the question, “Can a person with a disability get in, participate and leave?” The assessment is divided into multiple sections to determine the building’s usability for those with mobility, vision and hearing impairments.

Prior to their visit, the students met with Christner architect Pavel Ivanchuk, who worked on the building’s design. Lauren Leonard, senior project engineering manager, gave the group a guided tour of the building and answered questions they had prior to their assessments. “It was a great experience to assess and explore the McKinley Building while keeping those who may have a disability in mind. As occupational therapy students, we are trained to see how specific building designs and structures can affect a person’s ability to function while at their workplace, or while visiting a building,” says Caroline Hathaway, MSOT/S ’17. “It was great to put all that we had learned about how environmental factors can facilitate performance and participation in the daily lives of others into a real world context.”

The group assigned to sidewalk assessment met with Allan Miller, project manager, civil and landscape, to gather information regarding budgeting concerns, plans that have already been implemented, and the specific interests of WUSM regarding sidewalk access and aesthetics. The students measured the angles of curb cut slopes and the widths of sidewalk cracks and upheavals, and took photos of various environmental hazards. After comparing their data with the ADA Accessibility Guidelines, students used a wheelchair to test out the sidewalks themselves.

“We knew going in that numbers indicating accessibility and the experience of accessibility are two entirely different things,” explains Anne Murphy-Hagen, OTD/S ‘18, who found navigating the sidewalks in a manual wheelchair through certain spots challenging. “It kind of felt like a sensory overload. I had to concentrate on all the variables in front of me—the sidewalk terrain, whether I would be able to fit through the spaces between the light post and the fence, etc. It made it difficult to scan the blocks ahead for hazards. The result was I ended up finding myself in situations that would have been best avoided.”

Both groups presented their findings to Dashner and to Steve Sobo, PE, FMP, SFP, director of capital projects for WUSM. The information students provide to Sobo and his team are incorporated not only into current projects, but into clear guidelines for the design standards of WUSM buildings moving forward. The information is also used to enhance way-finding strategies, updates to interior and exterior signage guidelines and modifications to the School of Medicine’s public realm standards. The partnership demonstrates how such collaborations with occupational therapy can be mutually beneficial to the stakeholders and the community as a whole.

“We have benefited greatly from working with the OT students on these assessments. They also provide orientation to my staff on universal design guidelines. This included hands-on opportunities in operating wheelchairs and understanding what it is like to have visual or hearing impairments and trying to navigate our campus,” shares Sobo. “Safety and mobility are top priorities and we really appreciate the support we receive from these annual surveys of our campus.”
Tell us a little bit about yourself and your background.

I have 25 years of experience working in a variety of settings, including acute rehabilitation, long-term pediatric rehabilitation, school-based therapy and in-home services. Before coming to WashU, I served as a related services administrator at Special School District of St. Louis County, where I coordinated occupational therapy (OT), physical therapy (PT), adapted physical education and assistive technology services.

I’m a Missouri Substance Abuse Prevention associate, I serve on the executive board of the Alliance for Healthy Communities and also participate in the St. Louis Coalition for Addictions.

Let’s talk about this program. What impact have you observed in adolescents who are in this high risk population?

Adolescent substance abuse affects all aspects of a person’s well-being, including relationships with others and the ability to engage in the activities and tasks that individuals want and need to do. Many life skills may be impacted following substance abuse, such as attention to basic self-care (including sleep and nutrition), learning the tasks and skills necessary to live independently, acquiring the skills to prepare for success in work or school, managing moods and emotions, social interactions, executive functioning skills (memory, organization, problem-solving, planning), stress management and relationships with friends and family.

So many adolescents in recovery find it hard to regain some of these life skills on their own, due to limited self-confidence or knowledge they missed out learning as a result of the addiction. I see a very clear role for occupational therapy to support adolescents, young adults and their families, and am passionate about sharing my experience to provide them with the personalized assistance and coaching they need to take their next steps.
Addiction impacts everyone differently. I witnessed the overwhelming interruption to life functioning that my son experienced, as well as other adolescents I encountered during the treatment and recovery process. I would hear the distress in parents’ stories, as they would describe the persistent stagnation in life skills, despite their young person’s current sobriety. It was painfully disappointing to see the gap in community resources to support newly sober teens as they attempt to transition into productive living.

**What kind of gap?**

Becoming sober is only the beginning of the recovery journey for anyone struggling with substance abuse. Individuals involved in substance use typically have a variety of co-existing or underlying (physical, mental health, social/emotional) issues that complicated their disease process. They miss out on so many of life’s skill development opportunities while they are “mentally unavailable.” There is often a lot of shame, uncertainty, fear and anxiety when they become sober and realize the many things they don’t know how to do in order to live independently, particularly as compared to same-age peers who have moved forward in their lives. Many recovery programs are designed primarily to address sobriety needs. While they may offer after-care recommendations, treatment programs have very limited resources to provide comprehensive transition support.

**What makes this program unique?**

There’s nothing like it available. Inpatient and intensive outpatient substance treatment programs are designed to address sobriety, within a limited timeframe, which may be quite short. The staff members in substance rehab settings are not normally equipped to address the broad range of occupational performance deficits that we see in this population. Occupational therapists have unique expertise in life skills training, task analysis and adaptation, and environmental assessment. At Washington University Community Practice, we are able to work with the client directly in their community settings, where they most need to implement learning and practice strategies. OT has the opportunity to come alongside the client and serve as a “coach” as the young person explores and develops necessary life skills needed to live productively on their own. OT is also a covered service on most insurance plans.

**What are your hopes for this program?**

As the client population grows, I will add targeted group experiences to help adolescents further grow in skill development, alongside peers who are faced with similar challenges. These groups may include specific life skills of interest, such as cooking, vocational exploration or technology/study skills. In addition to supporting young people in recovery, and the community partners that support their daily needs, I work with the entire family. Our story started with the pain of parents in distress. I remember all too clearly how the stresses of early recovery impact entire family dynamics. I offer groups that support parents and/or siblings in their understanding of recovery dynamics and reestablishing healthy family relationships.

**Every client is unique, but tell me about some of the things you work on with a client as part of the treatment plan.**

This program is designed to offer a comprehensive assessment of occupational performance needs, as well as underlying factors that may be impacting functioning. We discuss current strengths and barriers to success, and develop a targeted action plan. Initial focus is on self-awareness, and implementation of instructional strategies to meet client-determined goals. Specific intervention modules are designed to address gaps in skills related to health/wellness, self-regulation, emotional resiliency, instrumental activities of daily living (home management, budget/finance, community access), leisure activities, educational supports, pre-vocational training, interpersonal relationship dynamics (social perceptions), resource identification and self-management tools and strategies.

**What do you most want people to know about this program?**

Sobriety is the first step in the recovery process. When an individual is ready for their next step, community-based occupational therapy is positioned to be a comprehensive wrap-around support to meet each client right where they are at in their recovery journey. The service gives these young people the very best opportunity to feel confident and competent in their ability to take care of themselves and remain sober.
Living for the OT Moment

BY MICHELE BERHORST

As a child, Todd Levy, MSOT ’02, OTR/L, CBIST, wanted to be a veterinarian. “It’s rarely a straightforward path to occupational therapy,” he laughs. “My mother taught kindergarten for 30 years and from time to time, I would help her in the classroom. That had a lot to do with shifting my interest in healing and rehabilitation from animals to humans to eventually pediatrics.”
Levy's OT path started as an undergraduate at Washington University in St. Louis when a fraternity brother introduced him to Bob Amli, PhD, and his Developmental Neuropsychobiology Laboratory in the Program of Occupational Therapy.

“At the time, I was interested in child psychology, neuroscience and physical therapy. I was able to do an independent study with Dr. Amli, and working in his lab gave me an opportunity to explore all my interests,” Levy remembers.

“When I finished my bachelor's degree in psychology a year early, I wanted to stay on campus. It was ‘the decade of the brain’ and exciting things were happening at WashU.”

Levy continued on in Amli’s lab as a research assistant for the next two years, working on animal models of neonatal hypoxia ischemia. He studied the injury’s effect on learning, memory and behavior, and explored neuroprotective agents to mitigate those effects. There, Levy met the OT faculty and students and learned about the profession in addition to behavioral neuroscience.

“Because I had such a variety of interests, I realized becoming a clinical practitioner would allow me to apply my skills to help people directly and still keep a foot in neuroscience research.” – Todd Levy, MSOT ’02, OTR/L, CBIST

“Because I had such a variety of interests, I realized becoming a clinical practitioner would allow me to apply my skills to help people directly and still keep a foot in neuroscience research.” – Todd Levy, MSOT ’02, OTR/L, CBIST

“Something simple, like showing a family how to apply a functional split that allows a child to open a hand to grasp a ball, can create that moment. Seeing their faces light up because they didn’t know it was possible makes it so rewarding for me,” shares Levy, who truly enjoys working with children. “I’m constantly amazed and inspired how kids see the world when they’re sick or going through some kind of extraordinary difficult life event. They see the magic and wonder in little things and it makes even the most challenging day lighter and enjoyable. I get to act silly and revel in these moments of levity on a daily basis.”

A definite highlight of Levy’s career is the case of eight-year-old Zion Harvey, who became the world’s first pediatric double hand recipient in 2015. Following a case of sepsis as a toddler, Harvey’s hands and legs were amputated. Two years later, he received a kidney transplant from his mother. Like other children and adults who have lost extremities, Harvey tried prosthetics. While he did great with lower extremity prosthetics, Harvey wasn’t satisfied with the upper extremity prosthetics and abandoned them. His family took him to Shriners Hospitals for Children in Philadelphia where Chief of Staff Scott Kozin, MD, was struck by Harvey’s personality. “There were many factors that made Zion the ideal candidate. Besides his personality, he was already taking immunosuppressive agents for the kidney transplant, and such medications are necessary to prevent rejection of new limbs,” explains Levy. “He also had the incredible support of his mother, Pattie.” Harvey’s surgical team included a variety of professionals from CHOP, the University of Pennsylvania and Shriners Hospital. L. Scott Levin, MD, chairman of the Department of Orthopedic Surgery and professor of surgery (Division of Plastic Surgery) at Penn Medicine, and

Play ball!

Levy and Harvey play a game of football in the therapy room. One of Harvey’s goals was to catch and throw a ball with his new hands.
director of the Hand Transplantation Program at CHOP, led the 40-member multidisciplinary team through the 10-hour operation. Just six days following surgery, Levy and his OT colleagues were there to remove Harvey’s dressings and begin the therapy process.

“I must admit I was pretty nervous,” Levy remembers. “As we removed the bandages, Zion looked up at us and said, ‘So… you guys want to play a game or something?’ I smiled, breathed a sigh of relief and replied, ‘Yes, yes we do!’ That is very typical of Zion – when the clinical situation is intense and challenging, he knows how to bring a smile to your face.”

The rehab team consisted of four primary occupational therapists – Levy, Deborah Humpl, OTR/L, Michelle Hsia, MS, OTR/L, and Kelly Ferry, MOTR/L – who spent countless hours with Harvey during the two months he was hospitalized.

“There were constant assessments of skin, edema, range of motion and Zion’s adjustment to his hands. We evaluated his progress and changed our treatment plan and rehab strategies as he progressed. The goal was for Zion to use the donor hands as if they were his own. We used both biomechanical and neurological approaches, but it was important to use some occupational strategies as well. This allowed Zion to engage in activities and so he felt some success as he was going through the more remedial rehab process,” says Levy.

In addition to providing therapy, the OT team was the eyes and ears of the larger surgical and medical team. Every day, the OTs met with them early in the morning and late in the evening to update the surgeons and the transplant doctors on Harvey’s progress. They also shared pictures and videos documenting his achievements. Benjamin Chang, MD, co-director of the Hand Transplant Program and attending surgeon in CHOP’s Division of Plastic and Reconstructive Surgery, was one of the minds behind the surgery. He worked closely with the OT team throughout the process of rehabilitation.

Following hospitalization, Harvey transitioned to a day program closer to home at The Kennedy Krieger Institute and continued to make excellent progress with his therapists. Eventually, Harvey transitioned to outpatient care so he could return to school. The CHOP surgical and rehab teams continue to follow up with him on a regular basis to track his progress and guide his ongoing therapy.

Looking to the future, Levy is hopeful that research and technology to improve the sense of touch and sense of position of injured limbs, artificial limbs and transplanted limbs will revolutionize rehabilitation for children like Harvey, and for children with hemiparesis. “I work with many patients who can’t sense the position of an extremity. Without sensation, the brain doesn’t develop a full body schema. Such an altered body schema seems to limit a child’s intrinsic motivation to use the affected hand.”

Levy’s advice for those considering the OT profession is rooted in his own path toward it. “Our field is so diverse, it’s important to pursue your own unique interests and experiences to shape your career and practice. Neuroscience, engineering, fitness, whatever interests you – use that as an occupational therapy tool. Surround yourself with mentors from within the field and outside the field. Study cognition, work with neuropsychologists, physical therapists, speech-language pathologists and other health-care professionals because you are going to learn a lot from them,” says Levy. “Being a part of a multidisciplinary health-care team is becoming commonplace for OTs, so understanding what the other professions bring to the table only enables everyone to give the best care possible to the client and their family.”
In May 2016, Timothy Wolf, PhD, OTR/L, FAOTA, became the Program in Occupational Therapy’s first Rehabilitation and Participation Science (RAPS) PhD degree graduate. The accomplishment marks a new chapter in Wolf’s rehabilitation science research career which began when he came to Washington University as a clinical doctoral student in occupational therapy in 2003. When the Master of Science in Clinical Investigation (MSCI) program was established a year later, he was a member of its first graduating class. Wolf joined the faculty of the Program in Occupational Therapy in 2007.

Wolf is currently an associate professor and chair of the Department of Occupational Therapy at the School of Health Professions at the University of Missouri in Columbia. His Performance, Participation and Neurorehabilitation Laboratory is organized to generate knowledge to guide intervention to improve participation and work after neurological injury.

“People with neurological injuries have chronic impairments that they carry with them indefinitely. My goal is to help them develop the skills to live their lives,” says Wolf, whose approach is, “Let’s get you back doing what you want to do with what you’ve got as opposed to continued only addressing the deficits from a remediation perspective. Engagement in activity is central to health is shared with Wolf’s RAPS PhD mentor, Carolyn Baum, PhD, OTR, FAOTA.

Wolf returned to the Program’s classroom as a RAPS PhD student in 2011, and credits the courses on environment and measurement as having the greatest impact on his skills and approach to research. “The core courses were very different than those in the clinical doctoral (OTD) program, and gave me a firmer understanding of the evolution of how we view participation and how different health care professionals view it.” Since completing the RAPS PhD degree program, Wolf’s approach to forming research questions and pursuing them has changed. “As I develop new protocols, I am now taking a broader look at how we can get people engaged in the community and the environment,” he shares.

Wolf balances his scientific research with a commitment to the profession. A recipient of the American Occupational Therapy Association (AOTA)’s Roster of Fellows Award, Wolf was elected to AOTA’s Board of Directors in 2013 and was head of AOTA’s volunteer leadership committee in spring 2016. More recently, he has worked with AOTA and colleagues who study cognition to introduce the concepts of functional cognition to the Centers for Medicare – Medicaid Services.

The recipient of multiple grants related to participation and neurorehabilitation studies, including from the National Institutes of Health (National Center for Medical Rehabilitation and Research) and the National Institute on Disability and Rehabilitation Research (NIDRR), Wolf anticipates having his PhD degree will have a positive effect as an investigator and on future funding. “I will be pursuing larger scale grants with greater confidence as I navigate through different mechanisms and review committees. I’m pleased with the trajectory my career is on and what I will be able contribute to the science and literature of occupational therapy.”
Meet the Centennial Class of 2018

The Program in Occupational Therapy at Washington University School of Medicine celebrates its 100th anniversary in 2018. As one of the original reconstructive aide programs developed to address the needs of soldiers returning from World War I, our Program is honored to be part of the rich history of the occupational therapy profession.

In August, the MSOT’18 students joined the second-year OTD’18 students to form our “Centennial” class. They were recognized at the annual Program picnic (pictured below) with a banner for this special photo. Over the next two years, we plan on engaging them in our Centennial celebration events as they represent the future clinicians, scientists, educators and leaders of our profession. We hope you will have the opportunity during this time to meet these bright and talented students in person.

Each year, we prepare a directory for our students which includes short narratives from the incoming class sharing why they chose a career in occupational therapy and Washington University. Here are just a sample of their answers to help you get to know our Centennial class a little better.
I have dreamed of being an occupational therapist since I was a teenager working in special needs ministry at my church in Kazakhstan. I would love to work internationally with people with disabilities and their families someday. When I visited Washington University, I realized it was the best school to prepare me for my future.

I am excited about a career in occupational therapy as it aims to give patients the best quality of life possible. Regaining basic skills is the foundation for evolving goals and opportunities. I chose Washington University because of its incredible reputation and the warm welcome I received during my first visit.

I chose to pursue a career in occupational therapy after working with transition-aged youths with intellectual/developmental disabilities as an undergraduate. I chose Washington University because I am confident it will prepare me to become the best OT I can be through its academic curriculum and emphasis on research.

I have always had an interest in the health care field and found occupational therapy especially fascinating. It concentrates on the overall quality of life, not just if an individual has a physical impairment. I chose Washington University because of its high reputation for OT and overall academics.

Occupational therapy is my dream profession because it will enable me to help people by gaining a better understanding of human anatomy, physiology and psychology. Washington University appealed to me because it has one of the best OT programs in the nation and their mission lines up with my personal values.

Occupational therapy encompasses many aspects that I value – a multidisciplinary approach to learning, a holistic view of health, one-on-one interaction and care, and the ability to work in a variety of environments. I chose Washington University for its top-tier education and research that will help me put my values into practice.
Share your experiences!

A major component of the our Centennial plans involves alumni participation. Specifically, we want to hear about your experiences in the Program to share with other alumni, current students and future students. We are working on event materials and a website for the Centennial and have put together a short survey to capture your memories:

http://bit.ly/OT100survey

Centennial Class Ambassador Ashley Stoffel, OTD ’06, OTR/L, was one of the first alumni to complete the survey. Stoffel is a clinical assistant professor in occupational therapy at the College of Applied Health Sciences at the University of Illinois at Chicago. She is actively engaged at the local, state and national level in Early Intervention and Early Childhood workgroups, resource development and presentations. Stoffel works at Aspire Kids in the Chicago suburbs as an occupational therapist and the manager of clinical mentorship and professional development. Our history is not complete without the voices of our alumni. Please take a few minutes to complete our survey today!

Ashley Stoffel, OTD ’06, OTR/L

What do you think made your WUOT experience different from those of students at other universities?

The faculty was so responsive and available to students. Being taught by experts and leaders in the field made me feel that I was learning the top research in occupational therapy as well as providing networking opportunities.

What is your best memory of your time at WUOT?

The relationships I made with classmates and faculty mentors created many great memories, and several of these relationships have continued today. One of my favorite memories was through Pi Theta Epsilon when we partnered with a community agency who worked with underserved Latino families. Several students and faculty joined together to provide programming for children around healthy eating and living while their parents had separate educational sessions provided by the community agency. Previously, the children had just been in babysitting with volunteers. With our OT knowledge and faculty support, we provided much needed programming for these children. The agency reported that some families in the community started dropping off their children just for our programming! It was great to see our "OT family" – first-year, second-year and third-year OTD students as well as faculty – come together to support the community and make a positive change.

What skills/life lessons proved to be most valuable to you that you acquired in your time at WUOT?

I appreciated that we were taught how to find answers for ourselves and to develop our OT clinical reasoning. Other programs seemed to teach skills and hands-on (what to do) with a client, but at WUOT, I felt that we were given so many opportunities to think critically about the content, question and evaluate the evidence, and apply our own experiences and what we were learning to OT practice. The opportunity to learn how to continue learning about OT theory, evidence and practice has been invaluable throughout my career.

Occupational Therapy 1918

Stopping by

Alumna Lynn Streeter, MS, OT, (middle) was in St. Louis in April for a conference and stopped by to visit with faculty member Kathy Kniepmann, OTD, MPH, EdM, OTR/L (left). She received a tour from doctoral student Koob Moua, OTD/5’17 (right). Streeter earned her bachelor’s of science in occupational therapy from Washington University in 1977, and her master’s of science in administrative leadership and adult education from University of Wisconsin-Milwaukee. She is currently the director of strategic planning and business development at Froedtert Health in Milwaukee, Wisconsin.
Class Notes

Below are the Class Notes we received in 2016.

1985
Claire (Skaggs) Smith, BSOT
Claire works as a pediatric therapist at Children’s Therapy Works in Sarasota, Fla. She spends her free time on the water fishing in her power boat or paddling in her kayak.

1976
Cindy (Yewell) Bonskowski, BSOT
Cindy loves being a grandmother. Her first grandchild was born in December 2015, and her second is due March 2017. She is currently employed by RehabPro and lives in Argyle, Texas.

Got news?
Are you a Program alum with news to share? Or do you want to learn what your fellow alumni are up to these days? If you would like to submit Class Notes or update your contact information, visit ot.wustl.edu/alumni and click the arrow button to use the online form. Class Notes can include career advancements, relocations, awards and honors, marriage or birth announcements and more.

The original sign from our building at 4567 Scott Avenue now resides in our lobby beside our auditorium where many classes are held.

Expand your OT knowledgebase next year...
Join us for a continuing education course in 2017.

As evidenced by our commitment to excellence through research, innovation and extraordinary clinical care, the Program in Occupational Therapy promotes an atmosphere of lifelong learning for students, team members, clients and community providers. As one of the leading occupational therapy programs in the country, our faculty and team members are dedicated to using the latest developments and advances in occupational therapy and understanding the science behind them. We are committed to sharing their expertise and experience with others through the continuing education program.

Our professional programming brings together learning across multiple disciplines to help participants strengthen their skills which allows them to provide the highest level of care for clients and families amid a constantly evolving health care landscape.

Visit ot.wustl.edu/continuinged for 2017 course schedule.

The Program in Occupational Therapy at Washington University in St. Louis is an AOTA Approved Provider of continuing education.

The assignment of AOTA CEUs does not imply endorsement of specific course content, products, or clinical procedures by AOTA.

• Live courses
• Distance learning
• Evening workshops

Visit ot.wustl.edu/continuinged for 2017 course schedule.
Student happenings

Students learn about safe transfers using a gait belt during a Case Based Learning II live client event on Jan. 26.

Sam Talisman, OTD/S '17 (right), administers the Action Research Arm Test to a client (left) in the student-run stroke clinic.

Kelsey Tammeling, MSOT/S '17 (right), administers a grip test at the Health Happening Fair on Feb. 5.

Students weigh backpacks and provide safety tips to avoid pain and injury that can come from heavy backpacks and bags on Oct. 3.

Students take a selfie at Lambert International Airport in St. Louis as they head out for the annual Guatemala service learning trip in May.
Sensory support

Danielle Prince, OTD/S ’19 (left), and Carly Morrissey, MSOT/S ’18 (right), practice positioning infants using a Dandle-foo. Both students volunteered to be part of the Sensory Support Team in the Occupational Therapy NICU Laboratory. More than 30 OT student volunteers will provide guided sensory stimulation to the infants in the NICU when the parent or other caregiver cannot be present.
The Program in Occupational Therapy is accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA), located at 4720 Montgomery Lane, Suite 200, Bethesda, MD 20814-3449. ACOTE’s telephone number, c/o AOTA, is (301) 652-AOTA and its web address is www.acoteonline.org.