

Occupational therapy communication



Abstract

Occupational Therapy is a new and developing profession in the medical field. Along with all other professions Occupational Therapy is unique to itself. It includes a specific way it is conducted and how the professionals act within the profession. Occupational Therapists need to have an understanding of the discourse, communication, resources and the style manual within the profession. Occupational Therapists also need to know and understand the history that pertains to the Occupational Therapy profession. Communication skills within the field are important for communication between others within the medical field and patients to the Occupational Therapist.

Research Project**DISCOURSE**

Academic discourse for every professional field is different. All professional fields use the same way of finding information for their discourse. This information is used towards new ideas and new research. The use of communication is an important part of discourse. Through the use of informal and formal communication professions find new ideas for research. Informal communication is done through emails, phone conversations and letters. Many professionals will use email as a way to communicate their writings that need editing or other ideas. Formal communication is done through academic journals and books. Professionals use formal communication for the use of discovering new ideas and new information for research.

Professionals in the same field use the same discourse. Use of the same discourse consists of using the same communication language. Professionals also have the same understanding of their writings. Professionals within the same field of work are considered professional communities. These communities count on each other for new information. ¹

The profession of Occupational Therapy assists people in every day activities. Occupational Therapists help out the disabled and chronic ill patients. As an Occupational Therapist the core focus is on helping someone with their everyday activities that may be performed. As stated by Gelya Frank in the article Occupational Therapy & Occupational Science Interdisciplinary Interest Group: A Proposal to the National Association for Practice of Anthropology, “ Occupational therapy, therefore, is a profession whose focus is on enabling a person (i. e. individual client) or group of persons (i. e. group, community or an organization client) to access and participate in activities that are meaningful, purposeful and relevant to their lives, roles and sense of well being.”. (p 2) Occupational therapists are there for people who need assistance in being taught a task that might be difficult for them to do because of a disability.

Writing documented records in Occupational Therapy follows the demands of ethics and laws in formal writing. The documentation of a treatment or consultation of the patient needs to be professional and well organized. Patient's records are a private matter between the therapist and the patient. Records should be easily read. (p 3) There should be no use of negative words against the patient or the patient's disability.

Documentation in Occupational Therapy is thought to be one of the most difficult aspects of the profession. Documentation occurs after visiting with a patient, it must be clear and precise. Patients have the right to read their records from the Occupational Therapist. These records should be easily understood by patients. ³ (p 6) These documentations use keywords to point out important information from the Occupational Therapist.

Included with the documentation of the visits with the patient should include a written painted picture of the patient that is easily understood by others. Professional Occupational Therapist and the patient should be able to understand the visit through the painted picture. Also included in documentation of patients are goals set by the patient and Occupational Therapist, and the plan for treatment decided by the Occupational Therapist. After every treatment there should be an evaluation of how the Occupational Therapist feels the patient is doing in the treatment plan. ³ (p 5)

Not only should the documentation include the painted picture, but the documentation needs to have meaning. In Pierre's article, "Occupational Therapy as Documented in Patient's Records," one occupational therapist stated "There must be descriptions in running text in order to maintain a unique picture of a patient. Documentation must not be just a lot of words, but have content." ³ (p 5) The information included in documentations should be considered extremely important and an Occupational Therapist needs to spend time considering the information needed for the documentation and the context of the writing.

HISTORY

Moral treatment was used as a treatment for the mentally ill. Moral treatment started in the 18th and 19th century in Europe and North America. Treatment of mentally ill patients in the early 1990's included doing everyday tasks that included house work and other activities that were thought to help someone return to normal health. These everyday tasks were called occupations. An occupation is where occupational therapy received its name. Occupational Therapy is a therapy where patients do occupations to recover. These tasks included cleaning house, different craft projects and physical activities. (p31-31)

William Tuke named and founded the ideas of Moral treatment. His ideas include treating mentally ill patients as if the patient is really mentally well. Through Williams's ideas of moral treatment he started the making of asylums for the mentally ill. These asylums were used for housing and caring of the mentally ill. (p427)

Figure one is a table of the principles of moral treatment. These moral treatment principles are the ideas from the article " The relevance of moral treatment to contemporary mental health care" according to Annie Borthwick et. Al. William was the founder of these principles for moral treatment. ⁵ (p431) ⁵(p431)

Through the ideas of moral treatment began the formation of Occupational Therapy. Many doctors had helped contribute to the creating and establishing of Occupational Therapy schools, hospitals, books and the fundamental ideas. ⁴ (p. 30)

In the early 20th century young doctors and nurses generated the idea of Occupational Therapy through using moral treatment as the foundation. There principal ideas included doing everyday tasks to help with the recovery of the mentally ill. This principal was similar to the principals of moral treatment. ⁴ (p27)

In 1917 a group of young doctors come together to plan a therapy process for people with metal illness. These young doctors formed the National Association for Occupational Therapy. ⁴ (p27)

William Rush Dunton, Jr. graduated from the University of Pennsylvania with a degree in medicine. He began his work with Occupational Therapy through the principles of moral treatment for the mentally ill. Dunton worked at the Sheppard Asylum. He used William Tukes ideas for moral treatment at the Sheppard Asylum. The Sheppard Asylum promoted William Dunton to be the director of Occupational Therapy for the mentally ill. Through his experiences William Dunton was a founder and leader of the National Association of Occupational Therapy. ⁴ (p34)

Adolf Meyer received his Masters in the area of neurology from a school in Switzerland where he was a native. He immigrated to Chicago after receiving his masters. Meyer believed in the connections someone's mind and body had. He also believed that it required thinking to do actions. He did not agree with Freud's ideas of the mind and body. He also believed everyone's life story affected and contributed to the person's attitudes and behavior. He believed that a mental illness was developed from flawed habits that were learned by the person. His care included changing the flawed habit that a

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mentally ill patient had. Through his treatments to his patients he made the work meaningful to them. His care included making sure the patient had good care, received enough rest, and socializing among others. ⁴ (p33)

Eleanor Clark Slagle attended Hull House which was part of the Chicago School of Civics and Philanthropy. She was enrolled in a course of amusements and occupations. This course work was founded by Meyer Meyer. Clark started programs like Meyers in Michigan and New York through out different mental health hospitals. During World War One Clark was asked by the Chicago Red Cross to help with the training of other Red Cross nurses on Occupational Therapy. The training included therapy for soldiers who would return from war from battle fatigue and injury. She developed programs for mentally ill people through Meyer ideas. These programs included walks, activates, exercise and small group meals. ⁴ (p36)

Clark and Meyer both provide their services on Occupational Therapy training. There services were provided at the John Hopkins University in the Henry Phipps Psychiatric Clinic. ⁴ (p36)

Herbert James Hall graduated in 1895 from Harvard Medical School as a general practitioner. Hall thought that working with crafts would help mental ill patients. He believed that through crafts patients could not fail. This gave patients the feeling of becoming successful and not failing. Crafts also diverted the minds of patients from their mental illness. Hall was also the founding father of The Boston School of Occupational Therapy in 1918.

Herbert also was an author of some of the first books in Occupational Therapy. ⁴ (p28)

Susan Elizabeth Tracy was a nursing student who attending and graduated from Massachusetts Homeopathic Hospital. While working at a hospital Tracy found that patients who participated in hospital activities improved faster than those who did not participate in hospital activities. Tracy used occupational treatment when she began practicing her own private nursing. Tracy started her own experimental study of occupations in a Jamaica Plain Hospital. Her courses are considered the first organized classes in Occupational Therapy education. Tracy believed that therapy needed to engage the patients in activities that captured their attention. These therapy activities also needed to hold some kind of meaning to the patients. ⁴ (p38)

In early Occupational Therapy it was believed the patients needed to have the motivation to recover. Early Occupational Therapy was based on therapy through occupations. Occupations included crafts, activities, games, and any physical activities. Early occupational therapy found it important that the occupation would pertain to the patient's life. Occupational Therapy in the beginning also included the focus of how the occupation pertained to the patient's life and health. Also the focus was on how the occupation could be used as a therapy. Motivation had a strong importance on emphasizing the occupations. Many doctors felt encouragement through therapy was also needed by the doctor and family members. ⁴ (p43)

During the 1940's through the 1950's there was a strong urge that Occupational Therapy take medicine in to consideration. During this time many Occupational Therapists were forced to go in coalition with medicine. Occupational Therapy field moved to the use of medical terms when caring for a patient. Occupational Therapist had to use concepts that were taken from the practice of medicine. ⁴ (p55)

Starting in the early 1960's Occupational Therapy changed because of new technology and more information of the human body. Occupational Therapists were able to detect psychological problems of patients because of the new theories of the human body. During this time body functions and impairments were clarified. In the 1960's scientific terms were used in the occupational therapy work place. There was also a better understand the emotional issues with patients who were mentally ill. ⁴ (p54-55)

After the 1960's Occupational Therapist realized that through the medical intervention many of the original ideas of Occupational Therapy were lost. Many doctors of Occupational Therapy found that there was no connection between the activities used in therapy compared to the names given to them from the medical terminology. Occupational Therapy almost lost its identity by trying to identity if self with medicine. Because of misidentification Occupational Therapists have gone back to the use of occupations as treatments as it was at the development of Occupational Therapy. ⁴ (p54-55)

RESOURCES

There are many resources offered to Occupational Therapist. Resources include websites, academic journals, videos, newsletters, and memberships
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to many Occupational Therapy organizations. Websites include the Minnesota Occupational Therapy Association, the American Occupational Therapy Foundation, and National Board for Certification in Occupational Therapy. Academic journals include *American Journal of Occupational Therapy*, *Journal of American Medical Association* and other medical journals.

The Minnesota Occupational Therapy Association website gives members many opportunities and special options. A member of the Minnesota Occupational Therapy Association grants any Minnesotan Occupational Therapist access to many databases, libraries, videos, newsletters, and publications.

These other databases include American Medical Association, National Association of Home Care, Sensory Integration International, National Rehabilitation Information Center, and American Academy of Pediatrics. Government Agencies are also offered through being a member of the Minnesota Occupational Therapy Association Website. ⁶

These government agencies include Medicare, Medline, and Occupational Outlook Handbook. Publications are another Resource that Occupational Therapist can use for new information. ⁶

Minnesota Occupational Therapy Association website offers three publication links. These links include ADVANCE for Occupational Therapy Practitioners, Merck Manual of DX and The Neuroscience Center. Other Occupational Therapy sites provided by the Minnesota Occupational Therapy Association

include Occupational Therapy Internet World, Skills for the Job Living, and Occupational Therapist. com. ⁶

Becoming a member of the Minnesota Occupational Therapy Association includes other advantages. Members receive the Minnesota Occupational Therapy Association newsletter quarterly. Students who are part of Minnesota Occupational Therapy Association attending to school to become an Occupational Therapist have the option of becoming a member. Student members have the opportunity to apply for scholarships. Members receive discounted prices in any conferences that are held for Occupational Therapist in Minnesota. Through the use of the membership members have the opportunity to communicate with each other for new information and new research options. Members of the association have voting rights to decide how the association will be organized and operated. A member also includes being recognized for contributions for Occupational Therapy within Minnesota. These are the main benefits for joining the Minnesota Occupational Therapy Association. ⁶

Another option on the Minnesota Occupational Therapy Association web site includes employment opportunities. The site offers many job listings for the use of Occupational Therapist who are members of the Minnesota Occupational Therapy Association. Other Occupational Therapists and businesses have the option to post job listings on the web site. ⁶

The American Occupational Therapy Foundation is another resource for Occupational Therapist. This resource supplies Occupational Therapist with opportunities for research funding. Through the use of this web site it was <https://assignbuster.com/occupational-therapy-communication/>

hoped to build a better understanding of Occupational Therapy science.

There is also a scholarship provided for any Occupational Therapy student.

The American Occupational Therapy Foundation provides awards for research in Occupational Therapy. The site provides recognition to Occupational Therapists that have shown renowned contributions for Occupational Therapy science. American Occupational Therapy Association helped to build the foundation needed to build the American Occupational Therapy Foundation. ⁷

National Board for Certification in Occupational Therapy, Inc. is a resource for graduated Occupational Therapist. Occupational Therapist must complete all required Field work along with the educational program to join the National Board for Certification in Occupational Therapy. The National Board for Certification in Occupational Therapy requires that Occupational Therapist pass there examination to be certified. This exam tests the skills, understanding and abilities of all Occupational Therapist. National Board for Certification in Occupational Therapy is a non-profit organization that administers the certifying of Occupational Therapist. Along with the Minnesota Occupational Therapy Association the American Occupational Therapy Foundation is a not-profit organization.

The American Journal of Occupational Therapy is one of the many academic journals that Occupational Therapist can use. Included in this journal are researched peer-read articles from professional Occupational Therapist. These articles include information that is theory-based and theoretical

research. Occupational Therapist can use this information towards new ideas; other research projects and there own patients.

The American Medical Association Journal offers information on general medical reviewed articles. There main objective is to promote the art of medicine and to help make public health better for all. These journals provide Occupational Therapist with the newest research available to them in medicine.

Other journals Occupational Therapists may refer to are journals based on pediatrics, autism, ADHD, learning disorders, psychology, and neurology. Depending on where an Occupational Therapist may work will determine which journals will be read. An Occupational Therapist working with children will read journals on pediatrics along with other medical and Occupational Therapy Journals.

These are the many resources offered to Occupational Therapists. These recourses include academic journals, web sites, and organizations.

Occupational Therapists have the option to join many organizations to better the understanding of Occupational Therapy science to others and to gain benefits for themselves. Through the use of these recourses Occupational Therapists communicate there new ideas and the new research information.

COMMUNICATION

To become a well developed and successful Occupational Therapist many qualities are needed. These qualities include great interpersonal, writing, grammar, public speaking, and computer skills. Some of these skills can be learned from other experienced Occupational Therapist and others are

learned with work experience. During an email interview with Nancy Klassen, member of Canadian Association of Occupational Therapists and an Occupational Therapist Registered(OTR) (written communication, March 2008), gave me a handful of information pertaining to the communication skills of Occupational Therapist. Through her experiences as an Occupational Therapist she has found that as an Occupational Therapist many qualities are needed. Through this paper many of her ideas will be shared with the readers.

Interpersonal skills are required for Occupational Therapist to communicate with others who are involved with the patients care and treatment plans. Communicating with others includes children's parents, specialists, educators, and childcare providers. An Occupational Therapist may need to have an informational meeting with parents and others involved in the client's life to educate and instruct on the best treatment plan care for the client. An Occupational Therapist must be able to communicate in a tactful, clear way to make others understand the information given to them on the treatment of the patient (Klassen, written communication).

Occupational Therapist will have opportunities to share research information with other co-workers. Communicating with other Occupational Therapist includes sharing new research information, medical information on clients, and discussions on client progression. As an Occupational Therapists who work in a team might have to give presentation on clients at team meetings (Klassen, written communication).

Occupational Therapist may need to prepare and give seminars or presentations. During these seminars Occupational Therapist may have the option of presenting new research information, new program ideas and other ideas that may pertain to assisting other Occupational Therapist (Klassen, written communication).

As an Occupational Therapist writing is a skill that will be used to write reports. Reports will be presented to other Occupational Therapist, social workers, schools, children's hospitals, physicians, and the client's parents. Other written material includes progress notes, and letter writing. During a clients treatment time with an Occupational Therapist progress notes or progress charts need to be taken. These reports are taken right after the treatment session with the Occupational Therapist. These reports are put in to the personal file of the patients. Evaluations may also be done on a patient. Evaluations are used for placement of a patient in school or other education programs that best fit the ability of the patient (Klassen, written communication).

Proposals, handouts, and request are another type of documentation Occupational Therapist may have to write. An Occupational Therapist may have new ideas for research or treatment plans, which would require a proposal. Handouts are given to teachers, social workers, parent's of the client, and others who may want to be educated on the treatment plan and the disability of the client. Handouts can include pamphlets, brochures, and medical research papers. Through the knowledge of an Occupational Therapist there maybe the need to request funding for a research program

from the government and other non-profit companies that may support new research in Occupational Therapy (Klassen, written communication).

Along with the requirement of writing proposals, progress reports, and handouts Occupational Therapist are required to have great grammar skills and spelling skills. Occupational Therapist Nancy Klassen thought it was important to have a vast vocabulary. Through the writings Occupational Therapist need to use vocabulary as an essential factor towards the credibility an Occupational Therapist may have. Grammar and a vast vocabulary are important to help with the explanation on treatment plans and other medical terminology that maybe used for the patients disability (Klassen, written communication).

Presentations may need to be presented from Occupational Therapist requires public speaking skills. An Occupational Therapist needs to be able to give information to a group of other Occupational Therapist, parents, physicians, social workers, and educators. The wide range of knowledge from the listeners' can not limit an Occupational Therapist on the information that is given to the group during the presentation. Presentations include presenting new ideas and new research to other Occupational Therapist. Another form of presentations includes delivering information on a treatment plan to the family and educators who interact with a patient (Klassen, written communication).

Many Occupational Therapists communicate using telephone or email. Through the use of a computer email is an easy way to communicate with people within the same office or on a patient's treatment. Occupational

Therapist may need to get a hold of educators for a patient. The World Wide Web seems to be an easy and speedy way for interactions between different people (Klassen, written communication).

Klassen, ORT, believes that social skills are the most important part of an Occupational Therapist. She felt that social skills can lead an Occupational Therapist to successfulness. Another aspect Klassen, OTR, felt Occupational Therapist must have the ability to teach the information in a meaningful and clear manner to others (Klassen, written communication).

Through emailing Klassen, OTR, these are the ideas that she felt Occupational Therapist must posses to become successful in the medical field as an Occupational Therapist (Klassen, written communication).

STYLE

Each profession provides a style manual for that occupation. This means there are many different style manuals. Occupational Therapists use the American Medical Association Manual of Style (AMA). AMA is on its 10th edition which was newly updated in 2007. American Psychological Association (APA) is a commonly used manual within colleges and high schools. APA is on its 5th edition which was updated as of 2003. Looking through these two different style manuals I found many differences.

Some of the major differences included the use of terms, numbers, and the reference list. AMA is a medical manual which serves for a person who is in the medical field where as APA is used for psychologist and literature workers along with a few other professions. AMA seemed to focus more of the manuals attention on using measurements, numbers, statistic,

typography, medical indexes, and manuscript preparation. APA focused more on the design, grammar, and gender ¹² .

AMA references are important within a research paper. Reference list provides readers with acknowledgements, where additional information on the topic can be found, and providing more support for a researcher's paper. A reference list needs to be complete and in the correct format so all medical profession can understand the meaning of the reference page. Thoroughness of the reference page can aid another researcher to farther there knowledge on the topic read in the research paper. Within in the reference list misspelling of last names, Journal names, internet sites, along with incorrect page numbers. AMA style manual also suggest reading the primary source when writing a research paper where a writer may take a secondary source from another paper ¹¹ .

The reference list within an AMA style manual research paper should be number. Arabic number system should be used when doing the reference list. The reference list goes in order of from when the reference is used. This means that the first reference used would the first reference on the resource page. This does not involve using last name as an alphabetical order reference list. It is strictly by when it is used ¹¹ .

APA's style manual is used to identify reference used within the paper. The reference list is only used to cite any sources used within the paper. As an author, of an APA format paper, there is a need to check over the reference list and cited sources to make sure both appear with in the paper. The citations with in a paper along with the reference list needs to be correct and <https://assignbuster.com/occupational-therapy-communication/>

the same for each reference. If there is a misspelled word or an incorrect writing within a manuscript the author of the paper is at cost for the mistake.

The reference list needs to be in alphabetical order. Alphabetical order starts with the first author's last name in a reference. If there are multiple authors with the same last name the next letter to use is the first initial of the first name of the author's ¹². Abbreviations may be used within an AMA style manual paper. If many abbreviations are being used within one paper it may become confusing for people reading the paper. Abbreviations are acceptable if one word will be used multiple times within the same paper. This will save space within the paper as well. Some instructors may put a limit on how many abbreviations may be used within one paper ¹¹.

Ideal use of abbreviations includes numerous terms. Academic degrees along with certificates and some kind of honor can be abbreviated within a paper. Within the United States military titles are another form that can be abbreviated with in an AMA style manual paper. A few other potential words that can be abbreviated include days of the week, addresses, states, countries, and titles of people ¹¹.

Within an APA paper many instructors prefer that abbreviations are used sparingly. APA instructors feel abbreviations affect the flow of a paper if too many are used. Abbreviations in a paper include measurements, time, and, chemical compounds. APA does accept abbreviations that are often used. An example from the *Publication Manual of the American Psychological Association* included " IQ, REM, ESP, AIDS..." ¹²⁽¹⁰⁵⁾.

APA style allows the use of numbers to be kept as numerals and not written out in certain situations. APA style believes it is easier to follow numerals than written out numbers. A few instances where numbers can be kept as numerals include a mixed fraction, measure of time, temperature measurements, and a measurement of a currency ¹² .

Numbers that should be written out according to the APA style include the beginning of a sentence. This also includes if it is a title, or a heading. Other written out numbers include one when it is used as a pronoun within a sentence, and when a number is being used to rank items or people ¹¹ .

APA style's rule towards the use of number includes written and numerals. If a number is below 10 it should be written out. If a number is above 10 it can be written out as a number. Within a paper numerals and written numbers can be combined. An example of this would be 6 million. The six is in a form of a numeral, but the million is written out ¹¹ .

AMA and APA style manuals have identical formats. Both of these styles include a title page for the article, an abstract, the paper, and then a resource page. Within the paper it is where the differences of these two different style manuals come into play. A paper written in the style manual AMA includes subheadings that are in all capitalized letters whereas an APA style manual does not. In APA the first letter of the subheading is the only letter capitalized. The resource page for the style manuals is also very different. Each style manual has their own way to cite and reference articles ^{11, 12} .

CONCLUSION

Occupational Therapy is a great medical field that is used to help patients improve skills that maybe hard for them. It is also a challenging profession that requires the knowledge of many skills that will be used when working. Occupational Therapists discourse is important towards the building and developing of new research within the profession. Discourse is done through the use of different communication with other Occupational Therapist and other medical doctors. Occupational Therapy is a newer field that started in the early 1900's. During the beginning Occupational Therapy was used for solders and mentally the ill. Through history Occupational Therapy has changed its way of caring and understand the use of occupations for patients. Now Occupational Therapy is used to assistant many other people who have disabilities. Many resources can be used by Occupational Therapist to gain more knowledge for the profession. There are many resources Occupational Therapist can use. Resources include websites, academic journals, and Occupational Therapy associations. Occupational Therapists need to have a vast understanding and use of communication skills. A