"Peer-ing" Into a Future of Collaboration

A student's insights into her experience with interdisciplinary service learning

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“Peer-ing” Into a Future of Collaboration
A Student’s Insights Into Interdisciplinary Service Learning
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He just wanted to button the top button of his shirt with ease, be integrated into the community, and read again. She just wanted more availability as a caregiver. Jeff is a father, husband, and retired navy officer. He is 41 years old, 3-years poststroke. The left-hemisphere stroke meant he experienced a severe right visual field cut, and had difficulty with reading, finding words, and fine motor coordination due to spasticity and weakness in his right (nondominant hand). Suzanne, Jeff’s wife, caregiver, and the mother of their children, accompanied Jeff to each treatment session, held in a community speech therapy clinic at the local public university. Could a senior occupational therapy student and graduate speech-language pathology (SLP) student really work together to help enhance Jeff’s recovery and Suzanne’s quality of life? Are there any insights left to be gleaned from authentically and openly working side-by-side with different professionals? Based on this collaborative experience, which was part of a service-learning opportunity, I believe that collaboration not only leads to enhanced client outcomes, but also creates the potential for enhanced professional development. The following are some of the insights I gained from this experience, along with practical suggestions.
Insight #1: Build rapport with new professionals who are not in your profession. You could make a new friend and a partner for collaboration.

As I grew to know Erin, the SLP student, I became more excited about the next therapy session and how we could collaborate to address Jeff's goals. I met Erin at the community speech therapy clinic. As part of a "Life Span Lab" course I was given the opportunity to engage in this service-learning experience, which included four treatment sessions to meet the course objectives of adjusting treatment approaches and demands in response to physical condition, age, and occupational goals; to demonstrate clinical reasoning; to gain "tangible" lessons, and to use communication skills. After reviewing the list of clients being seen at the clinic, I chose to work with the man recovering from a stroke (Jeff). The sense of connection and respect between Erin and me fostered an open and honest relationship that allowed me to ask constructive questions and receive simple, direct feedback. This collaboration expanded the capacity for therapeutic creativity.

Practical suggestions: Purposefully acknowledge, say "hello" to, and introduce yourself to an individual from a different profession the next time you're at work.

Insight #2: Combine resources provided to the client.

Due to Jeff's naval background, checklists were highly motivating to him. However, providing separate checklists for speech and occupational therapy could have become overwhelming. Erin's suggestion to combine the two handouts helped simplify Jeff's home exercise programs, making the approach client-centered while maintaining the integrity of the two separate professions. The exercise programs were used to support meaningful occupational interventions, such as Jeff using his right hand to complete Sudoku (which had become a ritual for him) to work on grip and visual scanning; "high fiving" the therapists as a way to use the extensor muscles of his hand, which were very weak; and making cereal bars (he enjoyed cooking) to help restore safe and effective placement and coordination of his affected fingers through education, hands-on placement during this activity, and verbal cueing to visually scan.

Practical suggestion: Next time you collaborate, consider asking to combine handouts and other client information to simplify the information for the client and caregiver.

Insight #3: Communicate with openness and look for win-win-win solutions.

Working alongside Erin helped me begin to focus on three-way solutions. Instead of thinking of rehabilitation as being just between Jeff and me, Erin and me, or Erin and Jeff, therapy could be among all of us.

Working with Erin also allowed me notice details from multiple angles and to expand on my previous therapy assignments. For example, during one session I verified the research and effectiveness of constraint-induced movement therapy (CIMT), which emphasizes the value of using Jeff's affected hand. Both Jeff and Suzanne affirmed their willingness to purposefully involve Jeff's affected hand after remembering improvement from previous experience with CIMT. (Due to time and budget constraints, Jeff had been unable to continue CIMT.) Although we were unable to do specific CIMT during our time together, we did apply the principle of Jeff using his affected hand. I then asked Erin to use any available opportunity to encourage Jeff to use his right, affected hand in her sessions. To incorporate this suggestion, Erin chose an activity—making kabobs—that required Jeff to use his right hand while working on SLP goals of building a personally relevant vocabulary base and being able to verbally recall and sequence the order of a recipe.

Practical suggestions: Review all the goals written for the client, especially those created by a professional from another discipline. Challenge yourself to better serve the client by incorporating activities into your treatment sessions to help achieve all the goals, not just those that are specific to occupational therapy.

Insight #4: Listen (or speak) for meaning.

Late into my sessions with Jeff, I realized how important it was for Jeff to interact with his children. I learned this by taking note of the vocabulary Erin used to help Jeff progress when I sat in on a few minutes of one of their sessions. Unfortunately, I was unable to incorporate this detail into the occupational therapy intervention because I gained this insight during one of our final sessions.

Practical suggestions: Ask the SLP what content he or she is using to help the client relearn language skills. Often times the SLP will be working with a vocabulary that is meaningful to the client. This content could enhance occupational therapy intervention by providing insight into meaningful occupations. For example, if the SLP reports that the client is practicing vocabulary that includes his children's names, sports teams, and cooking ingredients, then you could integrate activities that relate to his children, their school teams, or cooking activities into your next session.

Insight #5: Acknowledge the ripple effect and follow up.

Suzanne, Jeff's wife, stated it on day 1—she wanted more availability as a caregiver, and this was one of the top three priorities she and Jeff self-selected while using an approach based on the principles of the Canadian Occupational Performance Measure (COPM). Building on of Suzanne's idea, I located contact information for local vocational rehabilitation specialists, and found self-care tips for caregivers. During each session I'd ask Suzanne about the
outcome of connecting with Vocational Rehabilitation staff. At least three times she said that she was unable to make the call. I kept following up, and by the last session, Suzanne had called. With the staff's assistance, Jeff started as a volunteer at a golf course (golfing had been one of his hobbies before the stroke). A later e-mail from Suzanne provided me more specific (and rewarding) feedback:

Jeff is still volunteering and loving it! It is just what the doctor ordered. Thank you for steering us in the right direction, and yes even a little pushing; I needed it! I think it has helped Jeff along in his recovery. He is speaking more! He also has a renewed and improved self-confidence. We can never thank you enough for giving me that little extra push, by following up and asking me, a couple of times I think, if I had followed up [with the work-related OT vocational rehab specialist]. It was that which made me take action; I didn't want to have to tell you one more time that I hadn't.

Clearly, Suzanne's role as caregiver has been positively altered, as has Jeff's role and participation as a community member.

Practical suggestions: Question and consider the interests of the caregivers. Take time to provide an interested caregiver with an extra nudge or tip that can ripple into a higher quality of life for the entire family. Then, remember to follow-up on previous suggestions, even if it means three or four follow-ups with a line such as, "Mrs. Johnson, what did you find out about ______? Or, "Have you contacted ______?"

SPEECH-LANGUAGE PATHOLOGY INSIGHTS
When asked about her own learning experiences as the consulting SLP student, Erin offered the following:

Time is much more efficient when you can work on goals from both sides—it's best to work on goals from occupational therapy and SLP at the same time to help the client generalize. Motivation can be achieved when more than one person is working on goals and encouraging homework practice. Two heads are always better than one. By working together, the clinicians can evaluate progress and barriers, and come up with ideas that will focus on identified areas of concern. This collaboration will encourage the client to continue work at home—not just in the therapy room. This experience has encouraged me to think about therapy in a new light. It has broadened my horizons by seeing that therapy can be done "outside the box" and encompass more than just one profession's goals. Not only is this more efficient, it is also much more effective and motivating for the client.

Students are not the only individuals learning. In this case, even the supervising therapist at the local speech clinic, Kathy Miklas, CCC/SLP, received and shared new insight. When asked in an e-mail to share her comments, she wrote,

Each time I work with a person from a different profession, I learn more about what I know and how much information there is always to learn in order to better serve my clients. For example, although I had heard of constraint-induced therapy, working with you reminded me of it, and of the theory behind it. I appreciated you incorporating research-based techniques, because we talk to our students all the time about using evidence-based practice. I think it was good for Erin to hear someone from another profession talk about the same principles. Having worked in many different settings, I have had the opportunity to learn from many different professionals (psychologists, occupational therapists, physical therapists, recreation therapists, social workers, regular and special education professionals, etc.). When I watched you interact with Erin, Jeff, and Suzanne, it reminded me of some of the techniques and ideas that I had learned throughout the years, but had forgotten that I knew. I really appreciated your focus on functional, daily living therapy and practice for Jeff, so that Erin had the opportunity to see how other professionals integrate functional activities into their therapy, as we try to do. I had the opportunity, in working with you, to refresh my memory of that information that I
had learned in my previous associations with occupational therapists.

ONE LAST COLLABORATION
Erin, Jeff, and I combined his goals of increasing fine motor coordination and extensor strengthening, and being able to verbally recall and sequence the order of a recipe. As part of a collaborative therapy session, Jeff was responsible for making cereal bars (see Figure 1 on p. 15). Verbally identifying supplies, explaining the steps, and clarifying actions helped him practice and develop his speech skills. Physically opening the marshmallow, cereal, and butter packaging allowed him to use his right hand and begin practicing coordination, which could later be converted into coordination for buttoning his shirt. Manually pressing down the cereal mix allowed him to stretch his weaker extensor muscles (i.e., extensor digitorum, extensor indicus, extensor digiti minimi), which were the biggest challenges to coordination. Occupational therapy cues to look to his right side, and hand-over-hand assistance, helped increase his safety and awareness. When asked about his cooking experiences, Jeff said that he had previously burned his right hand (although not seriously) when he misplaced it near hot food because of decreased sensation and right visual neglect. Occupational therapy interventions of visual cuing, paired with hand-over-hand assistance while Jeff held a bowl and spoon to mix hot marshmallows and butter, helped increase his coordination and provided education on safety during future cooking endeavors.

The time had come to move on. I thanked Jeff and Suzanne for allowing me to be part of their journey. We departed on an extra happy note because another of Jeff's goals, finding work in the community, had come to fruition. Jeff now helps clean carts at the golf course, which is fitting because he loves to golf. Suzanne beamed with a new joy at having her own goal met as part of therapy, too. She thanked me for "looking at the whole view of Jeff" and not just his hand. Collaborating with Erin allowed me to widen the scope of influence of occupational therapy for myself, along with Jeff and his family.

FINAL THOUGHTS
Although we came together with different views of one client's experience, collaboration allowed us to look forward with an expanded vision for him and maximize the therapeutic efforts of one man's journey to recovery. I challenge others to look beyond stigmas, stereotypes, and egos to unite for the purpose of service. Together, with patience, communication, and openness, everyone does achieve more.

Reference

Monika Lukasiewicz is a student pursuing her master's of occupational therapy degree at the College of Saint Mary in Omaha, Nebraska. After a personality test introduced her to occupational therapy, she became humbled to be part of a profession that is both an art and a science that incorporates such deep meaning and practical interactions. She serves as the president of the College of Saint Mary's Student Occupational Therapy Association (SOTA). Her personal forms of OT involve meals, movies, and conversation with important and inspiring people in her life; playing volleyball; doing yoga; and writing.