

In the Name of GOD



**OCCUPATIONAL THERAPY
IN EARLY INTERVENTION SERVICES
AND CHILD DEVELOPMENT CENTERS**

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Occupational Therapy

**Occupational therapy (OT) promotes
function and engagement in daily
habits and routines.**

... the “occupation” of life skills ...

Areas of Occupation

- ▣ Activities of Daily Living
- ▣ Rest and Sleep
- ▣ Work
- ▣ Play/Leisure
- ▣ Social Participation
- ▣ Education



OT Settings

▣ **Medical Settings:**

- NICU
- Pediatric outpatient center
- Hospital or clinic

▣ **Natural Environment:**

- Home
- Community settings

OT Services in CDC

- ❑ Early evaluation
- ❑ Early intervention
- ❑ Family training
- ❑ Assistive device services



Occupational Therapy Process

▣ Evaluation

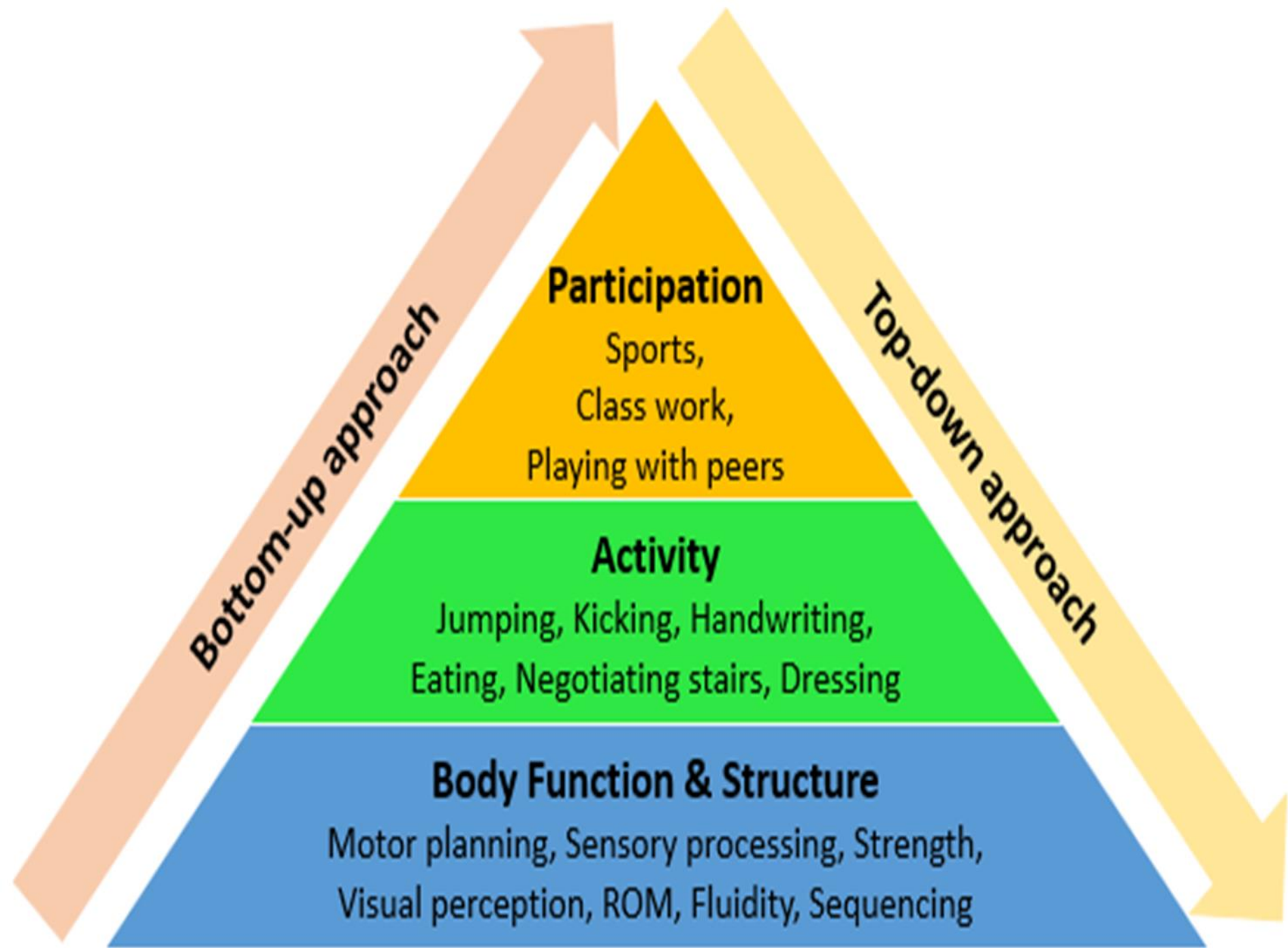
- Parent/family interview
- Formal and informal assessments

▣ Intervention

- Collaboration with family & team

▣ Outcomes

- Documentation



Evaluation

"CHILDREN MUSCLE TESTING"

LEFT		Function To Be Tested	RIGHT		Comments
		Date			
INFANTS (0-12 M)					
PRONE		Swimming (19-32 w)			
		Rolling Prone to Supine (28-36 w)			
		Reciprocal Crawling (30-37 w)			
		Modified Four-Point Kneeling (34-46 w)			
		Reciprocal Creeping (34-44 w)			
SUPINE		Hands to Feet (18-24 w)			
		Rolling Supine to Prone (25-36 w)			
SITTING		Pull to Sit (13-27 w)			
		Sitting with Propped Arms (10-25 w)			
		Sitting without Arm Support (21-27 w)			
STANDING		Dynamic Sitting (25-32 w)			
		Supported Standing (18-30 w)			
		Pull to Stand, Stand with Support (32-40 w)			
		Side Step Cruising (36-56 w)			
		Controlled Lowering with Support (36-45 w)			
		Stands without Support (42-56 w)			
		Stands from Modified Squat (46-60 w)			
		Walks alone (47-57 w)			
TODDLERS & PRESCHOOL CHILDREN (1-4 Y)					
		Low Kneel to High Kneel (15-24 m)			
		High Kneel to Half-Kneeling (18-27 m)			
		Side Step (18-30 m)			
		Standing on One Foot (2;5-3;5 y)			
		Jumping from Two Feet (3-4 y)			
		Jumping off a Step (3-4 y)			
		Toe-Walking (3-4 y)			
		Heel-Walking (4-5 y)			
		Tandem-Walking (5+ y)			
		Upstairs Walking (24-29 m)			
		Downstairs Walking (36-42 m)			
		Ball Throwing-Overhead (2-4 y)			
		Ball Throwing-One Handed (43-53 m)			
		Prehension-Palmar Supinator (12-18 m)			
		Prehension-Digital Pronate (2-3 y)			
		Static Tripod (3;5-4 y)			
		Dynamic Tripod (4;5-6 y)			

Key:
F: Functional (Normal for age or slight impairment or delay)
WF: Weak functional (Moderate impairment or delay)
NF: Nonfunctional (Severe impairment or delay)
0: No function (Can't do activity)
N/A: Not Applicable

WeeFIM® (3-8 years) - Score Sheet

Name: _____ Date of birth: ____/____/____ Age: ____ months
 Date of assessment: ____/____/____ diagnosis: _____
 Method of administration: Direct observation Interview with: _____

Area	Score	Age norm	Comments
SELF CARE / SPHINCTER CONTROL			
1. Eating			
2. Grooming			
3. Bathing			
4. Dressing- Upper Body			
5. Dressing- Lower Body			
6. Toileting			
7. Bladder Management			
8. Bowel Management			
Self-Care Subtotal			
MOBILITY			
9. Transfer: Chair/Wheelchair			
10. Transfer: Toilet			
11. Transfer: Tub/Shower			
12. Locomotion: Walk/Wheelchair/Crawl			Mode: W - Walk C - Wheelchair L - Crawl B - Both
13. Locomotion: Stairs			
Mobility subtotal			
Motor Total			
COGNITION			
14. Comprehension			Mode: A - Auditory V - Visual C - Both
15. Expression			Mode: V - Vocal N - Non-vocal B - Both
16. Social interaction			
17. Problem solving			
18. Memory			
Cognition Total			
WeeFIM® TOTAL			

WeeFIM® LEVELS

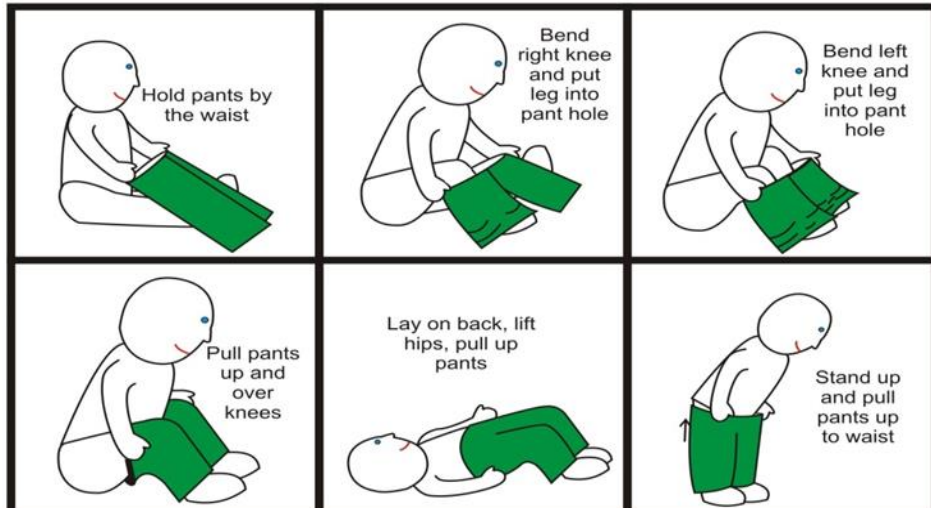
No Helper - Independence
 7 Complete Independence (no device, timely, safety)
 6 Modified Independence (device, not timely, or not safely)
Helper - Modified Dependence
 5 Supervision (subject performs 100% of the effort)
 4 Minimal Assistance (subject performs 75% or more)
 3 Moderate Assistance (subject performs 50% to 74%)
Helper - Complete Dependence
 2 Maximal Assistance (subject performs 25% to 49%)
 1 Total Assistance (subject performs less than 25%)

Intervention

- ▣ **Play as Means**
- ▣ **Play as End**



Intervention



Outcomes

“What we want to see for our child/family
as a result of early intervention”

“Reza will be able to sit without support in order to play
with his brother for ... minutes after ... sessions.”

“Mina will complete self-feeding with ...% assist and ...%
verbal cues or ...% of meal for increased functional
independence in daily life.”

Role of Occupational Therapy

- ▣ To build the family's capacity to care for their child and promote their growth and development in natural environments where families live, work, and play.
- ▣ OTs support children and families to be successful in their everyday routines.

Role of Occupational Therapy

- ▣ OTs respect the unique interests, culture, needs, and priorities of the child / family and build on their strengths and abilities.
- ▣ OTs support and build the capacity of the family to care for their child.

Role of Occupational Therapy

- ▣ OTs modify activities or the environment so the child can participate.
- ▣ OTs use assistive devices to improve participation in occupations.

AOTA Guide to OT Practice



“Supporting
Health and
Participation in
Life Through
Engagement in
Occupation.”



Occupational
Therapy
Living Life
To Its Fullest™