



School of Occupational Therapy Newsletter
February 2015, Issue 17

REFLECTIONS





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Program Director, John White, Ph.D.

Greetings to you friends and alumni of Pacific University's School of Occupational Therapy!

It is with great excitement that I share the outcome of our successful three year-long accreditation evaluation process. The Accreditation Council for Occupational Therapy Education (ACOTE) granted a seven-year accreditation period (until 2021), the longest possible for a new program. Our Doctor of Occupational Therapy (OTD) degree is considered a new program. Pacific's is the seventh OTD entry-level program to be accredited and so we are at the forefront of what the AOTA Board of Directors has recommended, that is for the profession to consider transitioning to the OTD as the required entry-level degree by 2025 (see <http://www.aota.org/AboutAOTA/Get-Involved/BOD/OTD-FAQs.aspx> for a FAQ on that proposal). Another article in this issue of *Reflections* provides more specific information about the ACOTE report on our self-study.

FROM THE DIRECTOR

This new year will bring significant changes to the School of OT with our first OTD graduates, a search for the next program director, Advisory Board transitions, and more. The search for a new program director is progressing and well-qualified candidates will be interviewed this spring semester with the plan for her or him to assume duties on July 1, 2015. At that time I will transition into a faculty position. I look forward to continuing at Pacific to support our students through teaching and advising, and I expect to increase my research and service activities.

We also have a new Advisory Board Chair. Kelli Iranshad assumed her new role at the November, 2014 Board meeting, and brings her wealth of experiences as a Board member, alumna, and adjunct instructor to the position. We are excited to work with her and our strong Advisory Board group on a number of initiatives. An example of the Board's good work is the upcoming quarterly continuing education series (starts on February 11th). The series is co-sponsored by OTA0 and the School of OT and was a collaboration by board members Sarah Larsen and Sara Marcotte (Class of 2016) with OTA0 representatives to develop this series (see <https://otao.memberclicks.net/> for CE event registration on Ethics & Productivity).

We offer our heartfelt thanks to Sherry Hoff for her second term in the Advisory Board Chair role. Sherry was the Founding Board Chair when it was established in 2006. We wish Sherry well as she moves to Boise, Idaho and look forward to her continued interactions with the School.

Another change associated with our transition to the OTD is that graduation has moved from May to August. On August 8, we anticipate 32 members of the Class of 2015 to return to Hillsboro after being away from campus since April of 2014 for fieldwork, online courses, and their culminating Doctoral Experiential Internship. The week preceding graduation will include conference-style presentations of their capstone projects, exit sessions as part of program evaluation, a banquet to celebrate their achievements, and of course, commencement ceremonies.

In closing, one thing that we know will not change in the coming years, is the fantastic level of support from our many alumni, friends, students, faculty, staff, and practice partners that makes possible such an excellent education for our students. These partnerships also create the opportunities and foundation for the milestones and accomplishments that School of OT community members report in the pages that follow.

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School of OT Doctoral Program Receives a Positive Initial Accreditation Report

By Tiffany Boggis

The recent transition from a Master to a Doctoral level degree program at Pacific University School of OT brought the need for the Accreditation Council for Occupational Therapy Education (ACOTE) to accredit the new curriculum. Following a two and a half day visit from two ACOTE accreditation evaluators in September, the School received a preliminary Report of the On-Site Evaluation (ROSE). They submit this report to ACOTE for final determination on accreditation status of the program. The School received a very positive account of its program in the ROSE, meaning that no areas of non-compliance with ACOTE standards were identified. ACOTE offered one suggestion to improve instruction pertaining to the supervision of non-OT personnel (see below). The School enthusiastically awaits the final report from ACOTE in December. Strengths of the program as identified by the ROSE report included the following:

- 1) The university administration recognizes the occupational therapy program faculty as “trailblazers” in the college and university. The university seeks OT faculty for committees and the interprofessional educational component of the curriculum.
- 2) The administration recognizes the program director as an ambassador for the occupational therapy program; the faculty and fieldwork educators hail his transparency and commitment to building community partnerships; and the students acclaim him as approachable and dynamic in response to their perceived needs.
- 3) The faculty’s enthusiasm and commitment to occupational therapy education are evident in their responsiveness to students. They effectively incorporate a variety of learning strategies in course assignments to facilitate evidence-based practice and clinical reasoning skills in their students throughout the OT process. Students recognize the faculty as great scholars.
- 4) The academic fieldwork coordinator is commended for her processes and collaborative efforts to assure a transformational learning environment recognizing students’ strengths and supervisory needs. Fieldwork educators acclaim her commitment to student learning and her ongoing developmental activities to enhance the supervisory process for fieldwork education.

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5) The students are recognized for their commitment to the program's mission of developing community partnerships. They are distinguished by field-work educators as independent thinkers, resourceful, evidence-based clinicians who demonstrate strong clinical reasoning skills.

ACOTE offered suggestions related to broadening or enrichment of programs. They are listed in order of the Standards and may be accompanied by an explanation. No response from the program is required.

Standard B.7.7: The program ensures that the student develops strategies for effective, competency-based legal and ethical supervision of occupational therapy and non-occupational therapy personnel. While the program meets criteria of the standard, it is suggested that the program explore means to develop strategies, which would strengthen the student's understanding of supervision by non-occupational therapy personnel.



Sherry Hoff visits with Kevin & Angelique Gardner both alums from the Class of 97, in Galway, Ireland.

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Advisory Board

by Sherry Hoff

Life is all about transitions, and Occupational therapy is about helping others through those changes. I, Sherry Hoff, have taken my own advice to many of my patients and have started establishing myself in a position to age optimally. For me that means a move to be near family in Boise, Idaho. Thus I have resigned as Chair of the School of Occupational Therapy Advisory Board.

The new, and incredibly worthy, Chair is Kelli Iranshad, OTR/L. A graduate of the Class of 1997, Kelli is a familiar face among all of the subsequent classes through her continued participation in school coursework and activities.

As the Advisory Board matures the evident need for our action grows. The communication and interaction between school and community is a vital piece, as is the community of local OT's potential for contribution to the school. The Board is a direct link to each and poised for action.

As I leave the essential world of OT it will never leave me. I can see my role to advocate for the exciting growth of our profession through mentorship and modeling. I would encourage all of you reading this to take your profession seriously. To make it more of who you are and support all arenas through attendance and voluntary action. Each of you is an important voice.

PS: The internet is a wonderful thing, I can always be reached at sherry@cougar-creek.com

We wish you the best, Sherry! Thank you for your service and tireless efforts to promote occupational therapy.

Further changes on the board include Dona Schumacher class of '87, former vice chair and Jeff Roehm who rotated off in April 2014. Rebecca Pence is the new vice chair.

We need your help supervising Doctoral Experiential Internship students (and we will help you)

As our first students in the OTD entry-level program approach graduation, they will enter into one of the features of the curriculum that helps to distinguish the

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doctoral program from the Masters level curriculum. That is their Doctoral Experiential Internship (DEI). This Internship is required by the ACOTE accreditation standards and consists of a 16 week on-site placement. “The doctoral experiential component shall be an integral part of the program’s curriculum design and shall include an in-depth experience in one or more of the following: clinical practice skills, research skills, administration, leadership, program and policy development, advocacy, education, or theory development.” (<http://www.aota.org/-/media/Corporate/Files/EducationCareers/Accredit/Standards/2011-Standards-and-Interpretive-Guide-August-2013.pdf>). The DEI also is designed to provide service to the Internship facility through development of the Capstone project that could help the facility and/or experiential supervisor with program development, needs assessment, outcomes research, policy development, etc. An objective of the Internship is to help the OTD transition into practice with additional practice and/or leadership skills with a higher level of competence than can be reached in the typical 24 weeks of Level II fieldwork education.

The DEI is not a fieldwork rotation and is not constrained by the guidelines and evaluation process that governs fieldwork. However, since the students are not yet licensed, students in clinical settings still need OT supervision in relation to licensure, billing, and facility requirements. DEI is also distinct from Level II Fieldwork in that the student collaborates with the on-site facility and supervisor along with his or her faculty advisor, to create specific learning objectives, by which success on the experience will be measured. These objectives and supervision requirements can be quite different from those that are dictated by the Level II fieldwork accreditation standards.

Supervision can be quite different for the DEI, in that supervisors serve as mentors for students. “The mentor does not have to be an occupational therapist. . . . Mentoring is defined as a relationship between two people in which one person (the mentor) is dedicated to the personal and professional growth of the other (the mentee).” (Standard C.2.4., ACOTE, 2011)

We strongly believe that the DEI will not only strengthen the learning outcomes and practice readiness for our graduates, but that the OTs who supervise our student Interns and the facilities in which the Internships take place will realize significant benefits and program improvements. We hope that you and your work facilities will be open to our requests for these Internship placements when called on by our faculty, students, or both. If you have a project that you think fits matches with the objectives of the experiential internship, please contact us, or if you have questions about how the internship might benefit your own professional development and the programs in your work

Sue Nelson passes the

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facility, please email me at whiteja@pacificu.edu. We feel that our profession, clients, and healthcare systems will benefit from this new approach to experiential education, we hope that you will too as you learn more about the Doctoral Experiential Internship.

Thank you and please contact us if you have ideas about how this program could serve you and your facility while providing a great learning opportunity for future practicing OTs.

Comparing the Doctoral Experiential Internship Level II Fieldwork?

	Doctoral Experiential Internship	Level II Fieldwork
Length	16 weeks	12 weeks
Objectives	Collaboratively set between mentor/supervisor and doctoral student intern with input from faculty advisor	Established by Fieldwork standards with some input from fieldwork site facility
Evaluation	Based on how well collaboratively-set objectives are met	AOTA's Fieldwork Performance Evaluation
Area of focus for skill development	One or more of the following: "clinical practice skills, research skills, administration, leadership, program and policy development, advocacy, education, or theory development." (ACOTE, 2011)	Practice skill development in traditional and emerging role settings
Time on site	DEI student may spend up to 20% of the internship off-site to work on other areas of the project (research, program development, preparing reports etc), that is 4 days per week averaged across the 16 week period	40 hours per week for 12 weeks
Supervision	Supervising mentor has expertise in content area, does not have to be an OT. Supervision time varies based on objectives. Clinical services within the internship warrant closer supervision.	Supervising fieldwork educator must be a licensed OT

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See (<http://www.aota.org/-/media/Corporate/Files/EducationCareers/Accredit/Standards/2011-Standards-and-Interpretive-Guide-August-2013.pdf>)

Audrey C. Kerseg Memorial Fellowship Fund update:

As you may know from our previous newsletters, the Audrey C. Kerseg Memorial Fellowship Fund is the only endowed fund at Pacific University that supports occupational therapy students. The fund was established by long-time friend and School of OT supporter Sue Nelson and her husband Dave. Thanks to their dedicated support and the donations of many alumni and friends of the School of OT, the fund has grown to be more than \$40,000. Since the first fellowship grant was made in 2009, a dozen School of OT students have received a total of \$12,000 in Fellowships to support international travel, research, and program development that have touched OT clients in Nicaragua, China, South Africa, Bangladesh, and the UK. We welcome your support for the Audrey C. Kerseg Memorial Fellowship Fund and hope you'll consider donating by clicking: <https://community.pacificu.edu/sslpage.aspx?pid=298>, enter the amount of donation, click "other" in the drop down menu and type in "Audrey C. Kerseg Memorial Fellowship Fund". If you prefer to donate to support the yearly operational budget of the School of OT, then click "School of Occupational Therapy" in the drop down menu. Either way you choose to support the School, you can know that you are contributing the development of excellence in education for future generations of OT practitioners. Thank you!

Author Extols Value of Work for Seniors

Six months ago RYAN MURRAY of the Daily Inter Lake – Northwest Montana's Mobile News Source, posted an article by Linda Hunt on her book "Work and the Older Person: Increasing Longevity and Well-Being." She co-wrote it with British professor, Caroline E. Wolfverson,

Hunt, 63, is a former Flathead Valley Community College professor and has dedicated her life to occupational therapy. She is extremely interested in prolonging careers and active lifestyles for senior citizens. "They say when you write a book, you pick a topic you're passionate about," she said. "I'm really passionate about work."

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She was raised in a workaholic household in St. Louis, Mo. Her family members worked well beyond retirement age and inspired her from an early age. Her mother helped her start a potholder business. After that came a greeting card business and then an official job at 16 years old. Now, as she approaches her own retirement age, Hunt has no intention of slowing down.

Hunt who teaches at Pacific University in Forest Grove, Ore., during the school year, and spends her summers in Whitefish, says working is about more than just making money.



“It’s about an identity, it’s about contributing to the community,” she said. “It keeps them social, you are more likely to take care of your hygiene, clothes and it just gets people going.”

One of America’s oldest workers interviewed by Hunt for her book lives in Anaconda. She retired at 62 but went back to work for the Office of Public Assistance, where she continues to work today. Tasks such as filling out forms and office work can be low-stress and fulfilling for someone past retirement age.

“Maybe they don’t come in at 8 a.m., but they might come in at 10 a.m. and work six hours,” Hunt said. “Older adults can use technology,

too. Its just about adapting to keep them working.”

Volunteerism is also important, Hunt said. The chapter in her book about volunteering was written by Wolverson, a professor at York St. John University in the United Kingdom. “It’s just as important as working,” Hunt said of volunteering. “These adults still feel like they have something to contribute and want to continue to work or help people.”

The book itself was written academically, so it might be a bit drier than if Hunt had written it for a general audience, but she maintains it would be a good resource for seniors or caregivers. It is available for purchase on Amazon.

OT FACULTY NOTABLE ACCOMPLISHMENTS

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A working fiend, Hunt hopes to inspire senior citizens to work or volunteer — activities that can keep the mind sharp and stave off dementia. “We find purpose in our lives through our occupations,” Hunt said. “It connects us to other human beings. We come into the world with no identity and it is up to the choices we make that help establish that.”

Occupational Therapy in Mental Health Practice

A committee composed of Genevieve deRenne, Sean Roush, Sara Pickett , Kelly Ricketts, Cat McGovern-Zlotek, Melodie Ethel-King, Kristy Fleming, Margo Traines, Torri Reichman, and Amber Black recently reviewed the rules for OT practice in mental health in Oregon. In collaboration with the licensing board the committee drafted the Occupational Therapy in Mental Health Practice rule which Sean Roush presented to the board at their meeting in August. The rule was approved by the board and has now been adopted. In addition to providing an overview of OT practice in mental health, the new rule explicitly allows OTs to assign a mental health diagnosis using the DSM with the provision that the diagnosis will be confirmed by the supervising physician. Diagnosing mental health conditions has been a grey area for OTs in Oregon due to the fact that OTs are identified as Qualified Mental Health Professionals (QMHP) in Oregon Administrative Rules and QMHPs do assign diagnosis but prior practice rules neither granted nor denied the ability to assign a DSM diagnosis. This new rule clears the way for more OTs to enter mental health practice by clearly aligning the OT practice rules with the QMHP rules. The full rule is below:

339-010-0007

Occupational Therapy in Mental Health Practice

Pursuant to ORS 675.210 defining the practice of Occupational Therapy, occupational therapists use analysis and purposeful activity with individuals across their lifespan who are limited by psycho-social dysfunctions or mental disabilities.

- (1) Occupational therapists address barriers to optimal functioning at the all levels with:
 - (a) Individuals (body functions, cognitive functions, values,

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beliefs, spirituality, motor skills, cognitive skills, and social skills);

- (b) Groups (collective individuals, e.g. families, workers, students, or community); and
 - (c) Populations (collective groups of individuals living in a similar locale, e.g., city, state, or country residents, people sharing same or like concerns).
- (2) Occupational Therapists perform evaluations and interventions that focus on enhancing existing skills, creating opportunities, promoting wellness, remediating or restoring skills, modifying or adapting the environment or activity, and preventing relapse.
 - (3) Occupational therapists use a recovery model to increase the ability of individuals, groups, and populations to be engaged with daily life activities that are meaningful; lead to productive daily roles, habits, and routines; and promote living as independently as possible.
 - (4) Services for individuals with mental illness are client centered and may be provided to individuals in the community, hospitals, correctional institutions, homes, schools or other educational programs, workplace, or any other setting.
 - (5) Occupational therapists may provide behavioral and mental health preliminary “diagnosis” using standard terminology and taxonomy such as DSM or ICD, through observation of symptoms and mental health assessment, confirmed by prescribing physician and health care team.

Student Happenings

By Aaron Proctor, OTD3

OTD 1

The new cohort has been off to a great start this semester. Students have been

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spending the last couple months getting to know each other and learning the basics of occupational therapy including activity analysis, interviewing skills, and theoretical framework. First semester courses included neuroscience, mental health, human movement, and foundational practice. Even though their schedules are demanding, OTD 1 students are enjoying their transition to the program and getting to know their way around campus.

New SOTA positions have been announced for this cohort. President for the class of 2017 is Maggie Sutherland. Her energy and excitement will be a wonderful addition to SOTA. Students will begin their Level IA Fieldwork in January 2015 and are excited to learn more about how to apply knowledge learned in coursework to clinical practice.

OTD 2

The OTD 2 cohort has returned to campus for another exciting year. Students have been heavily focused on community-based practice projects this semester. The primary goal for students is to provide sustainable relationships with local organizations in order for next year's cohort to build on their projects and ideas. Coursework has also included assignments about common physical disability interventions, insurance reimbursement standards, interdisciplinary care, COTA collaboration, and evidenced-based practice methods. Many students volunteered for the OTAO conference in October to raise funds for SOTA and student scholarships.

Students are currently involved in Level IC Fieldwork. Half of the cohort is working with elders at Rosewood Park, an assisted living and retirement community in Hillsboro. The other half is working with preschool-age children to develop volitional play habits with non-technological materials. All students returned to campus in January to begin their last semester of on-campus coursework and Level ID Fieldwork.

OTD 3

Over the summer, students completed three months of Level IIA Fieldwork around the United States. In the fall, half of the cohort returned to campus remotely to complete the new curriculum of online coursework. Students learned more details about leadership skills, professional advocacy, theory ap-

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plication, and case study development. The other half of the cohort completed Level IIB Fieldwork rotations in various settings including acute care, in-patient rehabilitation, community mental health, and pediatrics.

Students are excited to return in January where the two halves will switch so that all coursework and fieldwork will be finished by April 2015. At this time, students will begin working on their doctoral internships and capstone projects. The cohort is eager to enter the last two semesters of the program. Graduation of the first OTD class is in sight!

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PUBLICATIONS

Hunt, L. A. (2014). Keeping “employment” in mind during the clinical evaluation. *OT Practice*, Issue November 24.

Book Publication: Hunt, L.A., & Wolverson, C. E. (2014). *Work and the Older Person: Increasing Longevity and Wellbeing*. Thorofare, NJ:SLACK.

Hunt, L. (2014). From Where I Came: How Digital Narratives About Place Can Illuminate Everything. In J. Barlow & M. Yasuoka (eds.). *Interface: The Journal of Education, Community, and Values*, 13, 163-174). Forest Grove, OR: The Berglund Center for Internet Studies.

PRESENTATIONS

Building Community Capacity to Enhance the Well-being of Older Adults in Nicaragua: An Overview of Efforts from Ongoing International Collaborations: Alan DeLaTorre, Keren Brown Wilson, Margaret B. Neal, and Tiffany Boggis, Gerontology Society of America Annual Scientific Meeting, Washington D.C., Nov 2014 (Contributing author)

Share Your Expertise: Be a Conference Presenter: Boggis, T. & Black A. Occupational Therapy Association of Oregon Annual Conference, Wilsonville, Oregon, Oct 2014

An Innovative Integrated Educational Approach To Prepare Allied Health Students For Community Interprofessional Practice: Boggis, T.,

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Davis-Risen, S., Zuniga, R. & Reisch, B. Association of Schools of Allied Health Professions; Las Vegas, Oct 2014

Hunt, L. A., Daverman, K. M., & Pager, B. J. (2014). From Where I Came: Visiting the Place of One's Heritage. Hawaii Pacific Gerontology Society, Honolulu, HA. September 29-30, 2014.

Hunt, L. A., Frankamp, H., & Grosh, A. (2014). Volunteers with Cognitive Impairment Engage in Card Making for Improved Well-Being. European Network of Occupational Therapy Educators (ENOTHE). Nijmegen, The Netherlands. October 23-25, 2014.

Linda Hunt attended the European Network for Occupational Therapy Educators in October at Nijmegen, Netherlands. She presented volunteer programming for people with dementia.. This is a program started by Hannah Frankamp and Allison Grosh, which provided residents with dementia opportunities to make greeting cards for others to use. Hunt expanded on this programming by elaborating on how occupational therapists could implement this volunteer activity to all clients receiving occupational therapy in skilled nursing facilities. Here, occupational therapy intervention would focus on client engagement in volunteer activities that meet the rehabilitation needs of clients. This would be purposeful for clients while improving endurance and functional performance. Frankamp and Grosh demonstrated the importance of grading the purposeful activity for engagement by residents who have cognitive impairments. Participation brought purpose to the group of residents who became volunteers. They appreciated the socialization and took pride in providing a necessary item, greeting cards to others for use.

Roush, S., Parham, D., Downing, D., & Michael, P. (Nov. 2014). Poster. *Sensory Characteristics of Youth at Clinical High Risk for Psychosis*. International Early Psychosis Association Conference. Tokyo, Japan.

Roush, S. & Marcotte, S. (October 2014). Presentation: *ePortfolios: Professional Presence in the Digital World*. Occupational Therapy Association of Oregon State Conference. Wilsonville, OR.

Roush, S., Wimmer, S., Davison, D., Kneuer, T., Gottlob, M., & Read, H. (October 2014). Presentation: *Invest in Mental Wealth: Enrichment Across Practice Settings*. Occupational Therapy Association of Oregon State Conference. Wilsonville, OR.

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Bader, C. & Roush, S. (October 2014). Presentation: *Introduction to Motivational Interviewing (Part 1)*. Occupational Therapy Association of Oregon State Conference. Wilsonville, OR.

Graduate Certificate in Gerontology

The Graduate Certificate in Gerontology at Pacific University is now in its fifth year. Each year the new cohort has diverse professions represented. Best practice is collaborative and evidence-based. Clinicians who attend conferences may come away with inspirational ideas and new information. Yet, when they return to work, clinicians rarely put new information into practice. In contrast, the Gerontology program features in depth study and application. Plus, the courses require clinicians implement what they learn into their work practices. Learn more how you may improve practice and services for older adults. Get energized at work. Become a leader. Become a gerontologist. Visit <http://www.pacificu.edu/future-graduate-professional/colleges/college-health-professions/areas-study/gerontology>

Contact Linda Hunt, PhD, OTR/L, FAOTA for more information 503 352 7354.

OT against cancer

Lorna MacKinnon Day, OTR/L

It's been 20 years since I received my education in Occupational Therapy. I am still profoundly grateful for that degree, and for how it has impacted my life recently through a very difficult journey with childhood cancer.

I graduated from Pacific University grounded in the idea that meaningful work, play, and self-care were necessary elements to one's health and happiness. I am keenly aware of my own deep satisfaction of getting lost in an activity like kayaking, teaching, gardening, or connecting with someone in need.

When I was accepted into the program, I did not realize how unique and fitting it would be for me. Sometimes life's pursuits and accomplishments collide with later circumstances, and give strength in unexpected ways. Though I am unable to work right now, my education has served my family and me very well.

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After graduation, I spent my first 7 years as a pediatric therapist. I then took several years off to stay home with my two kids, Natalie and Samuel. My little Sam was a bit of a sparkplug, so I didn't get back to work as quickly as anticipated. In 2010, just months into finally working at a wonderful private therapy clinic in Portland, Sam was diagnosed with bone cancer. He was 9 years old, just starting third grade.

That was over 4 years ago. Today, Sam continues to fight a very difficult battle with Ewing's Sarcoma. He has lost his left leg below the knee and part of his right foot. He's endured a total of 11 surgeries and over two years of intense chemotherapy. Today, because of a cutting edge immunotherapy trial in Dallas Texas, we have a glimmer of hope that he will be with us for many more years. A vaccine was made out of his own cancer tissue to teach his immune system to attack it. Fortunately, more promising treatments for Ewing's Sarcoma are now within reach.

Needless to say, we've had to adapt in order to live well. In fact, living well is what our family has chosen to pursue with more intensity than we ever had before.

Two years ago, a doctor at MD Anderson said to me "the cancer will come back and there's nothing you can do about it." This was devastating news. But I don't do "nothing" very well. His comment launched me into intense lifestyle change, mostly in regards to our diet. In all my reading about overcoming cancer's prognosis through nutrition, I noticed a consistent theme; meaningful activity is part of the lifestyle needed to fight cancer. I wasn't surprised at this idea, but I was delighted to see how recognized the value of meaningful occupation is to one's health, even against such a beast as cancer. The concept isn't limited to *coping* with cancer; it's a tool in the fight against cancer. Meaningful activity! That was one area I felt equipped to tackle.

We've had to be creative, take risks, and make extra efforts to find meaningful activity for Sam and our family. As a youngster, Sam was a fast on his feet, competitive and highly active. He remembers the days when he was picked first for the games at recess, and still feels the pain of ultimately being picked last. He had many months of watching from the sidelines while on crutches without a leg. Football, soccer, basketball and track are no longer part of Sam's extracurricular activities. He has had to grieve through this process of letting go. We all have.

Four months after his amputation, we were with some other families at a lake

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near the coast. Sam got into a kayak and started racing (because everything is a competition for my 10 year old boy). He was a natural and he beat his friends! It was the first time in many months that he'd had the ability to compete in something physical. So of course, we invested in a couple of kayaks! Since that time, Sam has found the thrill of learning to snowboard, surf, skateboard and swim. He's also discovered that he enjoys drama...of course, he's always managed to capture an audience. We've met some generous celebrities, athletes and inspiring people who've brought unexpected joy into our lives when we most needed a good distraction. Yes, it's all happened because of cancer, but also because we make every effort to Live Well.

When Sam finds joy in an activity I often think, "This is OT!" I've witnessed him be the last one out of the water at a surfing clinic, snowboard until his legs couldn't hold him up, and swim with riveted attention alongside a paralympic athlete. When he's engaged in that way, I know that his stress decreases, his serotonin increases, his body gets stronger, his spirit thrives and his cancer is a defeated enemy. THAT, is occupational therapy!

Though it's been difficult for me to have to put my profession aside for such a long time, my education is part of my identity. I am grateful for my informed and holistic view of health and wellness. I have become a resource, and Sam has become an inspiration to many others fighting the disease.

Sam has a tendency to make appearances on the news....here is our most recent story: www.kptv.com/clip/10918681/portland-teen-with-rare-cancer-taking-part-in.

We are rooting for you Sam and hoping for swift discovery of a cure.

TurboPUP

by Hannah Kolehmainen

Kristina Guerrero, Class of 2012, founder and CEO of TurboPUP company practices as an OT and recently appeared on Shark Tank. She highlighted 'Complete K9 Meal Bars' to revolutionize travel and adventure between pup and person! This Air Force Veteran and founder, also known as *Turbo*, crafted TurboPUP bars using 100% American-sourced, human grade, all natural, grain-free premium ingredients. They are a compact, lightweight, complete meal replacement for your four-legged sidekick whenever you're on the go!

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Whether you're on a day hike, camping for the weekend, or on an extended trip, TurboPUP bars are designed to provide complete nutrition for any occasion. In fact, TurboPUP has caused such a sensation, the National Association of Search and Rescue has named TurboPUP its official dog food! Way to go Turbo!

Alumni Publication:

Libby Jackson, Class of 2011, co-published an article titled "Dogs as Pets, Visitors, Therapists and Assistants" in the November/December 2014 issue of the Home Healthcare Nurse Journal. The article outlined the integral role dogs play in the recovery of patients through companionship, animal-assisted therapy, and as assistance dogs. It defines and differentiates these 3 categories and provides resources for home healthcare and hospice clinicians who may want to include dogs in the plan of care for select patients by tapping into the human-animal bond.

Dogs have served as healers, staying by our side with short- and long-term physical and psychiatric ailments. They keep us company when we are alone, snuggle into us when we are cold, and care nothing about how contagious we might be. American children are more likely to have a pet than a father in the home (American Humane Association, 2014). Home health clinicians recognize that pets are meaningful to patients and can serve as a source of motivation to recover. In some cases, patients may consider their dog to be their only living "relative."

Home healthcare providers explore the role of animals in their patient's recovery: Dogs can provide a distraction from the long recovery process; second, home healthcare and hospice providers can employ a trained canine co-therapist in the treatment process; and finally, practitioners may refer a person with a disability for an assistance dog to increase independence.

Having a family dog might be just the motivation a patient needs to improve their current health status. Intervention goals may include activities related to pet care. Patients can also benefit from Volunteer Visiting Human-Dog Teams for brief recreational visits also called animal-assisted activities (AAA). Patients involved in AAA have decreased depression and more social interaction.

In contrast to AAA, animal-assisted therapy (AAT) is a modality that is de-

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signed to promote improvement in physical, social, emotional, and/or cognitive functioning of the patient. The professional human-dog team is an integral part of the treatment process. AAT is directed and/or delivered by a licensed healthcare professional with specialized expertise and within the scope of practice of his or her profession. There may be contraindications such as among patients who are immune-compromised.

Organizations such as Animal Assisted Intervention International (AII) provides standards, conferences, and an active web-based community.

Assistance dog is an umbrella term that refers to three different subcategories including guide dogs, hearing dogs, and service dogs (such as seizure alert dogs, psychiatric service dogs, and diabetic alert dogs). Guide, hearing, and service dogs are trained and permanently placed with people with disabilities to perform a variety of tasks to mitigate physical, medical, and psychiatric disabilities. All assistance dogs are trained to be calm, polite, and unobtrusive in public.

Assistance Dogs International (ADI) has a member directory organized by regions, with all of the critical information to reach the appropriate organization.

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Alumni reunion: Seeking Class Champions for Reunions (1990-25th; 1995-20th; 2005-10th; 2010-5th)

In the first weekend of October, Pacific University and the School of OT will host the 2015 Alumni Reunion. We are seeking members of each of the identified classes above to help us communicate with classmates about the Reunion and come together for activities that typically take place on both the old (remember the basement of Walter Hall and the Portables?), and the new

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Hillsboro Campuses. We will work with the Office of Alumni Relations to help plan meaningful events for you and your classmates (e.g., wine-tasting in the Tualatin Valley wineries, class-oriented dinners, tailgate parties at the homecoming game, tours of old and new facilities, and ??). We have found that the classes that have the biggest turnouts for the reunions and thus the most fun, often have two classmates sharing the class champion role and with Facebook and email support, can bring the majority of the class in touch with each other for planning.

If you are interested in serving as a class reunion champion or want to nominate a classmate, please contact us at ot@pacificu.edu. Let's make this a record year for alumni turnout!



Diona Wikum, Class of 2015, with her daughter

Just thought you would want to know our little girl arrived 9 days early! She is healthy and beautiful! 6 lbs. 18.5 in. long! Quite a dainty little girl!

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Welcome baby Thatcher Larsen!

Jon-Erik and Sarah Larsen, Class of 2003, welcome baby Thatcher Larsen. He is 7 lbs 4 ozs and 20 inches.

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