

Fieldwork Site Profile (FS-PRO): Learning Opportunities and Resources

Please fill in and return to your affiliated university occupational therapy program.

Site and Contact Information

Name of site: Summit School

Name of program/sector: Occupational Therapy Dept.

Name of contact person: Clara Carpintero

Title of contact person: Occupational Therapy Dept. Head

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E-mail address*: ccarpintero@summit-school.com

Web site: www.summit-school.com

- Supporting material about the site and occupational therapy services attached
(e.g. pamphlet, brochure, fact sheet)

**of contact person*

If you have any questions or comments, please contact your university representative:



A member of the University Fieldwork Coordinators Committee (UFCC), a sub-committee of the Association of Canadian Occupational Therapy University Programs (ACOTUP)

(2005 revised edition)

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Copy and complete for individual location or program as appropriate.

Name of program / site: _____
(if different from page 1):

<p><i>Contact information if different from page one:</i></p>	<p><i>Location of occupational therapy services in the building:</i> Basement of the Broffman Building . Rooms 060, 062 and 069</p>
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Characteristics of Occupational Therapy Services:

1. Occupational therapy services are organized on: an O.T. department basis a program basis
 No O.T. on site other: _____

Description (e.g. the mission and vision of your organization, occupational therapy philosophy and role of occupational therapy within your organization):

Summit School Mission

We are committed to offering each student an environment where respect, mutual care and increased independence are key values.

We recognize each child's need for individual programming while being included in a group of students with similar cognitive and social abilities; optimal learning, individual friendships and the development of social networks are thus simultaneously encouraged.

We hold a holistic view of development. Our students are given learning opportunities so that they may reach their potential the best way that they can in the following developmental areas; academic, communication, emotional, physical, creative, social and vocational.

We encourage our students to become active and productive members of their respective communities.

We value ongoing and long term mutually supportive relationships with our students' families and caregivers.

We maintain a commitment for professional growth and continuing education, thereby ensuring the highest quality of services.

We sustain a high level of involvement in research and training programs at secondary, CEGEP, and university levels.

Philosophy of O.T. Department

In viewing the student as a whole, our goal is to maximize each student's emotional, physical, and functional potential within the school, home and community environments.

Throughout a person's life, he/she moves through different stages and assumes occupational roles within each life stage. These roles can be divided generally into 3 areas:

- Work :School Performance - Job Training.

- Self-care :Instrumental: home living and community living skills
- Play/Leisure

As occupational therapists, our task is to identify the skills and relationships necessary for the successful achievement of the roles in each area.

The occupational therapist works in conjunction with the rest of the school and the families considering the total student.

2. System(s) / services in which you practice:
- | | | |
|--|--|--|
| <input type="checkbox"/> Public sector | <input type="checkbox"/> Private practice | |
| <input type="checkbox"/> Rehabilitation centre | <input type="checkbox"/> Outpatient clinic | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> Long term care centre | <input type="checkbox"/> Home care | <input type="checkbox"/> Day hospital |
| <input type="checkbox"/> Insurance industry | <input type="checkbox"/> Community setting | <input checked="" type="checkbox"/> School |
| <input type="checkbox"/> Other: _____ | | |

3. Occupational therapy roles: Direct care Indirect care Consultation Research
 Administration Other: Staff training and Organization of school based in -services in O.T. related areas

4. Client life span: Children Adolescents ^{Young} Adults Older adults

Characteristics of Occupational Therapy Services (continued):

5. Client conditions: Mental health Physical health Combined Other

Please list common client issues :

Intellectual Disabilities:

- Down's Syndrome, Fragile X and other syndromes associated with Intellectual Disabilities.
- Autism Spectrum Disorder
- Associated ADD and ADHD
- Associated Severe Lanagugue Disorders
- Associated Neurological Conditions: CP, brain trauma. prematurity
- Associated Behaviour Problems
- Associated Psycho-social Dysfunction

6. Occupational therapy focus:

Please describe common areas of practice, interventions and programs :

Please refer to atached document: "Description of Occupational Therapy Services "

7. Hours of operations: 8:a.m. to 5:00 p.m

8. Total number of occupational therapists working at/for your site:

Full Time: 3 Part Time: 2 (4.2 full time positions)

9. Support personnel (e.g. OTAide, rehab assistant)? yes no If yes, how many: _____

Learning Opportunities and Resources for Students:

1. Access to a library (either on or off-site) : yes no
2. Internet access: yes no
3. Other learning opportunities and resources for students (*please list*):

(*e.g. interprofessional contacts, field trips, resource binders*):

- Contact with members of the interdisciplinary team (meetings, observation)
- Attendance to Para-med meetings: A bi- monthly meeting addressing topics of interest to therapists and nurses. The meetings include review of continuing education conferences/courses, discussions of rare conditions affecting our population, journal articles, new approaches, parent's personal accounts, issues related to staff well being (stress management) and stage student's case presentations . The meeting is open to all school staff.
- Attendance to intake/evaluation (possible candidadates to the school) meetings.
- School library
- O.T. Dept. library
- Access to the school's many professional journals and to O.T. dept journals
- Site visits

4. Please state your general learning and performance expectations of students (other than the ones from the University) to assist them in preparing for fieldwork education at your site.

Prior to coming to the placement:

- Review of conditions related to our clientel
- Review of normal development
- Review of treatment approaches in pediatrics

Student Objectives/Contract (must be signed by the McGill OT student and OT supervisor)

Level 3: Consolidation

Within the first week of placement:

- The student will be oriented to the OT department and the school.
- The student will observe OT intervention: supervisor's and/or O.T. staff's cases.
- The student will take part in a class observation.
- The student will develop personal objectives according to the CBPE
- The student will review the Case Study child's history (school and O.T.) and will provide a clinical impression following a form.
- The student will write a personal journal/"log" on daily basis. The log should be presented to the supervisor, for feedback, at the end of the day.

Within the second week of their placement:

- The student will set up his or her own treatment schedule.
- The student will participate in co-treatment/treatment with 4 children and two- three groups.
- The student will arrange meetings with the professionals involved in the Case Study. The student will also arrange meetings with professionals involved with the children in her/his caseload as needed.
- The student will review the following assessments: Vulpe/Talbot, TVPS, MVPT, VMI, Peabody

Motor Scales, DeGangi Berk, PEEEX and PEERAMID, BOT2 .

- The student will start working on the Case Study which should include recent evidence based documentation (related to the child's diagnosis, assessment tools used and treatment approaches chosen)
- The student will start using evaluation tools.
- The student will plan both long and short-term goals for the children on their caseload
- The student will review a child's history (school and O.T) and will provide a clinical impression following a form.
- The student will present the "log" to the supervisor on daily basis
- The student will present preliminary ideas for the project.

Within the third week of their placement:

- The student will treat a caseload of 4 cases 2-3 sessions per week.
- The student will follow 2-3 different groups 1X week
- The student will complete a protocol evaluation independently.
- The student will present a draft of the Case Study to the supervisor
- The student will have administered 3 assessment tools.
- The student will arrange and carry out one consultation meeting with a teacher.
- The student will review a child's history, school, O.T., and will provide a clinical impression following a form.
- The student will present a draft of the "project" to the supervisor.
- The student will present the "log" on a daily basis.
- The student will complete a midterm self-evaluation.

Within the fourth and fifth week of their placement:

- The student will continue with treatment and progress notes for the 4 children and 2 groups in her/his caseload.
- The student will plan and implement a treatment session that will be attend by the supervisor.
- The student will present her/his case presentation during a para-med meeting.
- The student will present her/his project during an O.T. meeting.
- The student will complete 2 reports and the Case Study (with recommendations).
- The student will attend a home visit (if possible).
- The student will arrange and carry out a consultation meeting with teachers.
- The student will present the "log" on a daily basis.
- The student will leave a Summary of Intervention, for each individual and group case followed, including recommendations.

Specific Goal expectations throughout the five week placement of U3 O.T. Students at Summit School:

- The student will complete a log of their observation/feelings/questions/objectives on a daily basis.
- The student will meet with their supervisor on a weekly basis:
 - General feedback on journal/log,
 - Review of case history,
 - Review of cases,
 - Review of goals, assignments.
- The student will develop a project to be applicable to the Summit School population and will

present it to the O.T. Dept.

- The student will participate in independent reading of various conditions and syndromes according to the need.
- The student will have "clinical reasoning" discussions (case history review) with supervisor(s)
- The student will do a "Case Presentation" (from caseload) to the multidisciplinary team.
- The student will provide a weekly schedule to the supervisor (to be handed in on Monday)

Administrative Resources:

1. Orientation session offered upon students arrival:

yes no, it will be available on (specify date): _____

2. Space and resources available to students (phone, desk, computer, work station, etc.):

- Table and chair
- Access to: Phone, computer, photocopier, scanner, laminator, camera, videocamera, if needed.

3. Policies and procedures information available:

yes, location: OT Student's Manual in OT Dept. office

no, it will be available on (specify date): _____

4. Health and safety policy in place:

yes no, it will be available on (specify date): OT Student's Manual in OT Dept. office

5. Emergency procedures information available:

yes, location: OT Student's Manual in OT Dept. office

no, it will be available on (specify date): _____

6. Contingency plan available (for absent fieldwork educator during placement):

no, it will be available on (specify date): _____

yes. Please outline its major characteristics:

Supervisory Contingency Plan:

In the case of an O.T. student supervisor's absenteeism:

- Short term absence: (less than a week):

The fieldwork clinical coordinator will ask another member of the O.T. Dept. to supervise the student.

- Long term absence (more than one week)

The fieldwork clinical coordinator will re-assign the student to one O.T. The University Fieldwork Coordinator must be notified as soon as possible thereafter.

Administrative Resources (continued):

7. Continuing education plan in place for occupational therapists on site:

- no, it will be available on (specify date): _____
- yes. Please outline its major characteristics:

Please outline your site's continuing education policy or describe how occupational therapists remain current in issues that impact their professional practice. Also, describe use of evidence based practice:

Continuing Education:

Each O.T. is expected to attend a minimum of one conference, workshop or seminar per year. A binder with the course/conference/workshop notes should be placed in the O.T. library

The school reimburses 75% of conference fees.

Amenities Available to Students:

- 1. Cafeteria: yes no
- 2. Kitchen facilities: microwave oven refrigerator other: Full kitchen, vending machine , coffee corner, "cafe" shop _____
- 3. Locker: yes no
- 4. Bicycle rack: yes no
- 5. Parking: yes, cost: free _____ no
- 6. Public transportation available: yes no
- 7. Other (please list):

Site: _____

(e.g. accommodation for students)

Bathroom with shower.

Site Requirements for Students:

1. Immunization: yes no If yes, specify in box below.
2. Criminal / police record check: yes no If yes, specify in box below.
3. Dress code: yes no If yes, specify in box below.
4. A car is required during placement hours: yes no
 If yes, describe the site "gas reimbursement" policy for OT students, in the box below.

Please specify additional information and/or requirements (e.g. mask fit testing):

A police check must be completed prior to starting their placement at Summit School

Dress code: comfortable yet professional outfit.

Message to Students:

Please add anything else you would like students to know or prepare for prior to starting a placement at your site.

SUMMIT SCHOOL

Summit School is a private school in the public interest, which serves 460 students (2007-2008 school year) from 4 to 21 years old with mild to severe intellectual disabilities including a variety of syndromes, Autism Spectrum Disorder, emotional and behavioral disturbances and minimal physical impairments.

The school is located in Ville St Laurent, in the Montreal Island. The facilities comprise of classrooms, resource rooms, administrative services, and therapy areas.

The school runs three satellite classes in a regular high schools and a job training class in a downtown Montreal office building to promote integration.

The school is divided in six teams, Primary, Academic, Functional Academic, Functional, Vocational and Job Integration; where the students are placed according to their age and level of functioning. Each team has from 10 to 12 classes. Each Class has from 10 to 12 students with a teacher and a teacher assistant per class.

In addition to the teachers and the teacher's assistants the inter-disciplinary team at Summit School comprises Occupational and Physical therapists, Speech and Language Pathologists, Psychologists, Social Workers, Educational consultants, Computer specialists, Behavioral Technicians and Creative Art Specialists.

O.T. DEPARTMENT AT SUMMIT SCHOOL

The Occupational Therapy Department at Summit school consists, presently, of FIVE occupational therapists (4.2 full time positions) that are part of the inter-disciplinary and "Para-med" (therapists, nurses and phys. ed. teachers) teams called "Support Staff".

The O.T. Dept. provides direct or indirect services to all the students in the school. Each therapist carries a caseload of 10 to 12 classes. The occupational therapist is responsible for meeting the needs of all the

students in those classes. The intervention is done through consultation with teachers, parents and support staff and through treatment on an individual or group basis. This intervention directly addresses the occupational roles of the students at school, home and in the community.

Every new student in the school is screened by an occupational therapist as part of the initial interdisciplinary screening process (intake/evaluation). The occupational therapist is required to develop Individualized Therapeutic Plans (ITPs) for the students who are followed at individual/ group basis. The occupational therapist is actively involved in planning the students' IEP (Individualized Educational Plan) and carry out classroom programs (in conjunction with teachers) in O.T. related areas.

The Occupational Therapy department is very actively involved in all the aspects of school life by participating in many committees, developing new programs, organizing school wide events, participating in in-services and attending different school activities. In this way, the occupational therapy staff is very versatile and flexible in adapting specific O.T. responsibilities to the daily life of the school.

- Pre-placement information package sent to student (e.g. reading list or material, schedule): yes no

Signatures:

Profile completed by: Clara Carpintero M.Ed., O.T., O.T. Dept head in conjunction with the members of the O.T. Dept

Clara Carpintero M.Ed., O.T. date: May 22nd, 2008
O.T. Dept. Head (Name and title)

My organization wishes to offer placements to occupational therapy students from:

- my affiliated University
- Canadian universities
- International O.T. programs

For fieldwork education purposes, I hereby authorize my affiliated university occupational therapy program to forward the information included in the FS-PRO to students and fieldwork coordinators from other occupational therapy programs.

I shall ensure that students will be supervised by qualified occupational therapists who have a minimum of one year of professional experience, and hold credentials with their provincial regulatory body.

Signature: Clara Carpintero date: May 22nd/08

SUMMIT SCHOOL/ ECOLE LE SOMMET

OCCUPATIONAL THERAPY DEPARTMENT

DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES

May 2008

The following is a brief description of the types of specialized services and programs that are presently offered by the Occupational Therapy Department of Summit School.

- Approach = Client Centered
- Frame of reference = Developmental and Functional

I. CONSULTATION:

Providing consultation to the teachers (including satellite classes), support staff, home, community regarding the following programming areas:

- a. Sensory-motor needs and functions
- b. Fine Motor Skills
- c. Cognitive Skills (Basic Concepts)
- d. Visual Perception Skills (Including Vision functions and Perceptual-motor skills)
- e. Handwriting Skills
- f. Play Skills
- g. Social Skills
- h. Activities of Daily Living: *Personal*: feeding, dressing, hygiene, toileting.
Instrumental: Home living skills, community living skills : travel training, shopping, etc.
- i. Leisure time skills. Hobby groups recreational activities in the community.
- j. Vocational training-supported employment in the community.
(work skills – work habits)
- k. Adaptations (A.D.L., Sensory-motor, Fine motor, Computer, Job training)

II. EVALUATIONS:

O.T. Evaluation Instruments - Summit School

- **Developmental Skills Evaluations:**

- Fine motor skills assessment checklist for teachers
- Vulpe Assessment Battery
- Talbot Assessment Battery
- Quick Neurological Screening Test
- Meeting Street School Screening Test (M.S.S.S.T.)
- McCarthy Scales of Children's Abilities
- Peabody Developmental Scales
- Pediatric Extended Examination at Three (Peet)
- Pediatric Examination of Educational Readiness (PEER)
- Pediatric Early Elementary Examination (PEEX 2)
- Visual Perception – Visual Motor
- Developmental Test of Visual Motor Integration (Beery)
- Motor Free Visual Perception Test (MFVPT)
- Test of Visual-Perceptual Skills (non-motor) (TVPS)(Gardner- Colarusso)
- Developmental Test of Visual Perception II (DTVP2)
- Bruininks-Oseretsky Test of Motor Proficiency – BOT2
- Peabody Developmental Motor Scales – PDMS-2

- **Auditory Perception:**

- Test of Auditory-Perceptual Skills (Gardner- TAPS)

- **Sensory-Motor Evaluations:**

- Clinical Signs
- Southern California Sensory Integration Test (S.C.S.I.T) (Parts of the : Design copy, Clinical signs)
- De Gangi Berk Test of Sensory Integration
- Sensory Profile- W. Dunn PhD O.T.R. (for children 3-11 years and for teenagers and adults)

- **Psycho-Social Evaluations:**

- Play assessment checklist

- **Pre-Academic and Academic Skills Evaluation:**

- Pediatric Extended Examination at Three (Peet) Dr. Melvin D. Levine, MD, FAAP
- Pediatric Examination of Educational readiness (Peer) Dr. Melvin D. Levine, MD, FAAP
- Pediatric Early Elementary Examination (Peex 2) Dr. Melvin D. Levine, MD, FAAP
- Pediatric Examination of Educational Readiness at Middle School. (Peeramid 2) Dr. Melvin D. Levine, MD, FAAP

- **Activities of Daily Living (Personal and Instrumental):**

- Summit School Activities of Daily Living Check List (including Oral Function in Feeding)
- Summit School Home Living Skills Check List

- **Vocational Skills Evaluation:**

- Summit School Basic Work Skills Evaluation
- Adolescent & Adult Psycho Educational Profile (AAPEP)

- **Motor Skills Evaluation:**

- Bruininks-Oseretsky Test of Motor Proficiency – BOT2
- Peabody Developmental Motor Scales – PDMS-
- Upper Extremity Function (including sensory perception ref. Regie Bothm; range of motion measurement and grip strength measurement.)
- Shriners Hospital Upper Extremity Evaluation (SHUEE)

- **Handwriting Evaluation**

- Handwriting without Tears. The Print tool. Evaluate and Remediate. Jan Z. Olsen, OTR & Emily F. Knapton, OTR/L

III. INDIVIDUALIZED/GROUP TREATMENT

Providing one to one or small group treatment in the following:

a. Sensory-Motor Function:

Following the principals of Sensory Integration framework the Tx is geared to promote the development of sensory-motor skills such as: - body awareness, body concept, body in space, postural control, bilateral integration, laterality and directionality balance and equilibrium reactions, and motor planning. Sensory-motor stimulation is also provided in an attempt to regulate sensory-motor responses in children with specific sensory modulation difficulties.

b. Basic Cognitive and Perceptual Skills Development:

- To offer additional input to children (with greater delays or greater attention difficulties than others in the classroom) in developing basic concepts (shape, size, color, space).
- To develop initial visual discrimination skills
- To provide input in the development of memory functions
- To develop basic Organizational skills: task approach and task organization

c. Play skills:

- To facilitate the development of play skills according to the developmental stages.
- To develop social / interactive skills
- To facilitate communication skills.

d. Perceptual-Motor Training:

- To provide training in Visual scanning and visual tracking
- To provide training in areas of visual perception: eye-hand coordination, spatial relationships, form constancy, visual memory, visual sequential memory and visual closure.
- To provide training in areas of auditory perception such as auditory sequential memory.
- To provide input in Visual-Motor integration.

e. Fine Motor Skills:

- To develop fine motor function and in hand-manipulation skills.
- To remediate fine motor difficulties related to poor grasp patterns, abnormal muscle tone, poor muscle strength, poor bilateral control, poor motor planning and coordination difficulties.
- To develop organizational skills related to task organization and task approach.

g. Handwriting Skills:

- To facilitate the development of pre-writing and writing skills.
 - To provide specific writing training to children with fine motor coordination difficulties.
 - To provide writing strategies / alternatives / adaptations to children with specific fine motor coordination deficits.
 - To train in the use of the computer as writing tool.
 - Handwriting programs currently used: Handwriting Without Tears and ABC Boum

f. Activities of Daily Living:

- Training in personal self-care: dressing, feeding, hygiene skills and instrumental self-care: home living and community living skills.

h. Vocational Training:

- To promote the development of basic work habits and basic work skills required for work placement.
- To provide remediation / adaptation to students presenting fine motor, perceptual-motor and task organization difficulties affecting their performance in work related training.

IV. EQUIPMENT ORDERING:

- Purchasing new educational materials (early learning) excluding academic materials.
- Purchasing specialized equipment e.g. adapted utensils, sensory-motor, Velcro, non-slip mat, etc.
- Distributing and reallocating the equipment.
- Ordering / purchasing certain Leisure and Arts & Crafts materials.

V. ADAPTED EQUIPMENT:

Designing / fabricating / providing special adapted equipment. This includes splints, A.D.L. equipment, school furniture, and work skills templates.

VI. IN-SERVICE EDUCATION:

Providing in-service education on any of the above mentioned specialty areas to staff and to students from other disciplines.

VII. STUDENT SUPERVISION:

Providing supervision to occupational therapy students.

VIII. VOLUNTEER SUPERVISION:

Providing training and supervision to volunteers working in O.T. related programs.

IX. CASE CONFERENCE:

Held in conjunction with the other para-medical staff and case related personnel discussing problem cases.

XI. MULTIDISCIPLINARY MEETINGS:

Para-medical / Support Staff / Team Meetings, etc..

XII. O.T. STAFF EDUCATION:

Conferences / visits / meetings with other outside professionals and settings to update knowledge base i.e. McGill University, Universite de Montreal, and special schools.

XIII. PARENT GROUPS / SIBLINGS GROUPS:

Participation in areas related to O.T.

XIV. EVENT PLANNING:

Development and organization of school wide events in O.T. related areas. For example "Look Your Best Day" (LYBD).

XV. RESEARCH PROJECTS:

Participation in different research projects in O.T. related areas and in areas related to the school population.