Coaching Critical Moments: An Occupation-based Coaching Education and Training Program

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BACKGROUND
Occupation-based coaching (OBC) is a therapeutic approach in occupational therapy (OT) working with clients and their caregivers to achieve the best occupational performance with family goals (Kraevansky, 2019; Graham & Pedgley, 2010; Graham et al., 2009; Rush & Sheldon, 2008a). Literature reveals that OBC improves knowledge and competence in caregivers and clients to improve participation, occupational performance, competence, and well-being within the family dynamic (Foster et al., 2013).

The mindset of OBC approaches therapy with a focus on individual strengths within a family dynamic and supports family roles of caregiver decision-making and caregiver-client OT practitioner interaction (Rush & Sheldon, 2008b; Foster et al., 2013). This method focuses more on supporting the family by working in collaboration to support the client’s learning and development and the caregiver’s leadership role to build on strengths and resources within the family unit (Foster et al., 2013). OBC allows OT practitioners to guide caregivers into mastering skills that can be generalized in the natural environments of the family unit and adapted into other experiences within a child’s life to facilitate occupational participation (Simpson, 2015). The frequency with which OBC presents as the client receiving therapeutic interaction throughout the entire week at home, not just within the weekly clinic visits, by directly incorporating intervention into family routines throughout the week (Little et al., 2019; Little et al., 2018).

When looking at OBC in pediatrics OT, it incorporates family routine, child occupational performance, and OT practitioner expertise on development to implement therapy interventions that support the entire family and promote child participation in family goals and routines (Kraevansky, 2019; Little et al., 2019; Little et al., 2018). Coaching can benefit not just the child, but the entire family. OBC has been a part of OT for almost fifteen years, and it is still commonly misunderstood and not widely adopted within OT. Based on the limited knowledge of OBC in pediatric OT, there is also limited implementation of OBC in practice. Although there is some literature to support the effectiveness of OBC in OT, there is little information regarding the implementation of OBC into practice (Kraevansky, 2019; Graham et al., 2013).

METHODS
Methods have been a part of OT for almost fifteen years, being within the family dynamic (Foster et al., 2013). COACHING CRITICAL MOMENTS PROGRAM CONTENTS

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The learning modules are the educational component of the CCM program to teach OT practitioners about OBC.

CCM Learning Objectives

The learner will be able to define OBC

The learner will be able to combine understanding important coaching information from various scholars

The learner will be able to use guidelines and materials for coaching

The learner will be able to view important coaching documents

The learner will be able to complete a hands-on learning and training experience through simulation

DISSCUSSION

Strengths

• Offers virtual, self-paced format: providing learning materials that are easy to navigate and interactive to learn at their own pace

• Provides interactive lessons: four interactive learning modules to allow for attention-grabbing and memory-committing interaction

• Provides practice experience: simulated learning experience to allow participants to practice OBC through a scripted experience. This allows for a hands-on learning experience to utilize newly learned skills

• Employs adult learning principles: informed by adult learning theory and implements various methods of learning throughout the material. These methods include visual, interactive, and auditory components that appeal to various learning styles of adults

• Applies OT Theory: Person-environment-occupation-performance (PEOP) model is used as the foundation of the CCM program. Using PEOP allows for a distinct understanding of motivators and barriers involved in learning

Limitations

• Limited observation availability: assessing the needs and strengths of pediatric OT practitioners through observation was limited and delayed several times due to social distancing regulations. There were not many chances to interact with pediatric OT practitioners in a face-to-face setting for interviewing and observing, which led to shortened time spent face-to-face with OT practitioners

• Limited options for settings: There were limited opportunities to witness OT practitioners doing authentic, high-quality coaching in face-to-face settings.

• Lack of participation: There was a lack in participation of parents and caregivers in the virtual coaching setting, causing limited gained knowledge of interest of parents for future coaching sessions. This may also lead to a lack in family participants of coaching with OT practitioners if the parents are not interested in OBC, in the future.

Future Implications

Future research is necessary to understand the affects the CCM program will have in pediatric occupational therapy. It is envisioned that this program will have immediate outcomes for OT practitioners to understand OBC and recognize how OBC can promote parental self-efficacy and child occupational performance. Once the program is disseminated to the public, there will need to be an evaluation of the implementation of OBC after completing Coaching Critical Moments program. Further research will also be needed to determine if parents will demonstrate improved self-efficacy and if children will demonstrate improvements in occupational participation as a result of the occupation-based coaching provided by the pediatric OT practitioner, following the CCM program.