Occupational Therapy Assistant Explained
Occupational therapy can best be described as the hidden gem of the medical world.

**Why?** Because most people have never heard of it. The truth is that working in the occupational therapy field as an occupational therapy assistant is an **incredibly diverse and rewarding profession**.
What Does An Occupational Therapy Assistant Do?

The primary goal of occupational therapy is to help clients who have injuries, illnesses, or disabilities learn how to perform everyday tasks as independently as possible. COTAs and OTRs work together in creative ways to help clients continue doing what matters to them.

Client
A patient is someone who’s in the care of the medical community. A client is someone who’s out in the world, receiving services and is free to come and go as he or she pleases.

COTA
OTAs earn their “C” when they’ve taken their certification examination and become certified occupational therapy assistants. COTAs carry out an intervention plan created in collaboration with an OTR.

OTR
Registered occupational therapist. They assess clients and develop intervention plans. OTAs work in collaboration with, and under the supervision of, an OTR to provide treatment for a client.
COTA & OTR: How They Work Together

OTRs assess clients and determine their needs; they then come up with an intervention plan and work with the COTA to implement it. While an OTR is ultimately responsible for intervention planning and tracking progress, a COTA spends the majority of her or his time actually working with the client and documenting. Here are some examples of how a COTA and OTR work together to change client lives.

GLOSSARY OF TERMS

100 BCE
The very first instance of civilizations using occupational therapy. Greek physician, Asclepiades uses therapeutic baths, massage, exercise, and music to treat patients.

Intervention plan
Registered occupational therapists develop intervention plans, which essentially describe the goals that clients want to work on and how the OTR or COTA will work with the client to meet the goals.
COTA & OTR: How They Work Together

You love taking your dog on walks — a common ADL — but after falling down the stairs, you’ve broken your foot, and can no longer walk your beloved Rosie. Under the supervision of an OTR, a COTA would work with you to find another way to spend time with your dog.

GLOSSARY OF TERMS

ADL
Activities of daily living. ADLs are all of the things you do every day like eating, applying makeup, shaving, showering, making a meal, etc.
Making dinner for your family is one of your favorite things. The chopping, cooking, sautéing — you love getting the whole family around the table and cooking a meal that they enjoy. As you’ve gotten older, your arthritis makes **fine motor skills** difficult — like holding the knife to chop vegetables with the ease you once enjoyed. You can’t grip the saucepan anymore and you’re feeling down because something you once enjoyed is so much more difficult. An OTA and OTR would work with you to modify how you cook — so you still can.

**GLOSSARY OF TERMS**

**Fine Motor Skills**
The smaller movements that occur in the wrists, hands, fingers, feet, and toes.
COTA & OTR: How They Work Together

You love rough housing with your grandkids, but recently it’s becoming difficult — your gross motor skills aren’t what they used to be. An OTR and OTA won’t just treat you; they’ll work with your whole family to come up with a plan of how you can all play — together.

GLOSSARY OF TERMS

Gross Motor Skill
The movement and coordination of the arms, legs, and other large body parts.
A big difference between physical therapy and occupational therapy is that physical therapy treats the patient’s actual impairment from a biomechanical perspective. Physical therapy tries to improve the impairment itself by increasing mobility, aligning bones and joints, or lessening pain. They might take a patient through a series of exercises to strengthen their impairment, in other words, to help get back what they lost. Occupational therapy, on the other hand, treats that same issue but by using occupation as the treatment approach to regaining occupation. How? Let’s revisit our previous examples.

**Impairment**
The impairment is something that interferes with performing a mental or physical task.

**Mobility**
The ability to move freely and easily. An example would be stretching the muscles around the affected area to increase your range of motion.

**Aligning bones and joints**
An example would be working on posture so bones and joints all work the way they’re supposed to.

**Lessening pain**
An example would be showing a patient how to massage an area that hurts to relieve or lessen pain.

**1918**
Following World War I, many soldiers returned home with new physical disabilities and there weren’t enough healthcare professionals to meet demand. Occupational therapy was developed to help soldiers adjust to their injuries and return to productive occupation.
The Dog Walker With A Broken Foot

PT: When the cast comes off, a physical therapist would show you how to walk again: taking steps, strengthening your foot and leg, massaging pain points.

OT: While still recovering, you could meet with an OTR and COTA and get to the core of why you love walking your dog. Is it the walking that’s important? Is it engaging with Rosie in the outdoors? They would work with you to accomplish your goal.
The Home Chef With Arthritis

PT: A physical therapist would work on pain management and strength in your hands. They would take you through stretches and exercises to work on your fine motor skills so you can — again — grip your cooking tools.

OT: With occupational therapy, we’ll adapt how you cook so you can continue to cook. An OTA might adapt your cutting knife so you could hold it easier, or add something to the handle of your saucepan so you can grip it again. An OT will look at how you set up your kitchen and go about your cooking tasks and make adaptations to both the set-up and the actual tasks involved with cooking. With the help of OT, you will be able to cook now and into the future.
The Grandpa Who Can’t Keep Up

**PT:** A physical therapist will assess you to see what specific areas are causing you pain or where you are losing strength and mobility and then create a treatment plan for you. Maybe they would take you through various stretches and exercises or show you a way to soothe your tired muscles.

**OT:** An OTR and COTA will sit down with you and ask what matters most to you and work with you to come up with ways to adapt play. Many play activities can be done in alternative ways or in alternative settings. The ideas and possibilities are endless with occupational therapy.
A common misconception with occupational therapy is that COTAs only work with the elderly, but that’s not true. Occupational therapy focuses on several main practice areas, but with an ever changing healthcare climate, new areas of practice are emerging. Discover the current main practice areas:

1. Children and Youth
From babies to high schoolers, as a COTA in the children and youth practice area, you might work with children who have autism, sensory processing disorders, physical limitations, or learning challenges.

2. Productive Aging
The most well-known segment of occupational therapy. In the productive aging practice area, occupational therapy helps the elderly maintain as much independence as possible. This may involve helping a client adapt to the use of a wheelchair or walker or teaching them new ways to do everyday tasks such as bathing, cleaning, or cooking. You may also visit clients in their homes and make adaptations so they can continue to live independently.

3. Health and Wellness
Persons working in health and wellness work with clients who have chronic diseases, such as chronic pain, mental illness, diabetes. In this practice area, occupational therapy helps clients of all ages improve and stay mobile, maintain healthy levels of activity, reduce long-term limitations, and promote overall client health.
The Practice Areas Of Occupational Therapy

4. Mental Health
In a mental health environment, COTAs and OTRs work with clients to develop essential life skills through roles and routines that help them overcome mental health challenges.

5. Rehabilitation and Disability
In the rehabilitation and disability practice area, you may help clients who have had an injury or illness regain independence to do what they want and need to do.

6. Work and Industry
In the work and industry practice area, occupational therapy helps clients return to work after an injury or illness. This may include special adaptation to a work environment, adapting tasks, or implementing strategies to help prevent injuries. You could also work with adults who have developmental disabilities and provide them with the skills necessary to find satisfying work.
Become An OTA With St. Catherine University

St. Kate’s, the affectionate nickname of St. Catherine University, wrote the book on occupational therapy assistant education — literally. We’re one of the only universities in the country to offer all levels of occupational therapy education. St. Catherine University has been educating students to become OTAs for over 50 years.

“If you are a compassionate person and feel compelled to help others, then this is the perfect career for you.”

— Brenda, St. Kate Online OTA graduate

Think OTA sounds like the right career for you? Learn more about St. Catherine University’s online OTA program and contact an admissions advisor today.

The occupational therapy assistant program is accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association, located at 4720 Montgomery Lane, Suite 200, Bethesda, MD 20814-3449. ACOTE’s telephone number, C/O AOTA, is (301)652-AOTA and its web address is www.acoteonline.org.
Glossary Of Occupational Therapy Terms

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