



UCLA Occupational Therapy Internship

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UCLA

Introduction

Agency: UCLA Ronald Regan Medical Center
Department: The Stewart and Lynda Resnick Neuropsychiatric Hospital at UCLA
Location: 150 UCLA Medical Plaza
Los Angeles, California 90095
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Preceptor: Ursula Quinn, OTR/L



The Mission

- UCLA's mission is to deliver leading-edge patient care, research, and education
- Their vision is to heal humankind, one patient at a time, by improving health, alleviating suffering and delivering acts of kindness.

CICARE

- CICARE (pronounced "See-I-Care") is an acronym that serves as a set of guidelines for what is expected of every team member at UCLA Health.
 - *Connect* with the patient or family member using Mr./Ms. or their preferred name.
 - *Introduce* yourself and your role.
 - *Communicate* what you are going to do, how it will affect the patient, and other needed information.
 - *Ask* for and anticipate patient and/or family needs, questions, or concerns.
 - *Respond* to patient and/or family questions and requests with immediacy.
 - *Exit*, courteously explaining what will come next or when you will return.

The Program

The child and adolescent care program provides care for young patients with autism, schizophrenia and eating disorders. The Adolescent and Child Hospitalization Program serves teenagers and children who require inpatient treatment for a variety of psychiatric disorders, including conduct disorder, attention-deficit/hyperactivity disorder, schizophrenia and other psychotic disorders, autism and other developmental disorders, and other complex neurobehavioral disorders.¹ Occupational Therapist identifies patients' skills, interests, capabilities, perceptual-motor abilities, and general developmental level, and areas of strength and deficiencies. Occupational Therapists also assist in improving patient's skills that pertain to activities of daily living, and play or leisure situations.¹

Background

According to the U.S. Surgeon General, about 20% of American children suffer from a diagnosable mental illness during a given year. Further, nearly 5 million American children and adolescents suffer from a *serious* mental illness (one that significantly interferes with their day-to-day life).²

Children can suffer from the following mental illnesses:

- **Anxiety disorders:** Children with anxiety disorders respond to certain things or situations with fear and dread, as well as with physical signs of anxiety (nervousness), such as a rapid heartbeat and sweating.
- **Disruptive behavior disorders:** Children with these disorders tend to defy rules and often are disruptive in structured environments, such as school.
- **Eating disorders:** Eating disorders involve intense emotions and attitudes, as well as unusual behaviors, associated with weight and/or food.
- **Elimination disorders:** These disorders affect behavior related to the elimination of body wastes (feces and urine).
- **Affective (mood) disorders:** These disorders involve persistent feelings of sadness and/or rapidly changing moods.
- **Schizophrenia:** This is a serious disorder that involves distorted perceptions and thoughts.
- **Tic disorders:** These disorders cause a person to perform repeated, sudden, involuntary and often meaningless movements and sounds, called tics.



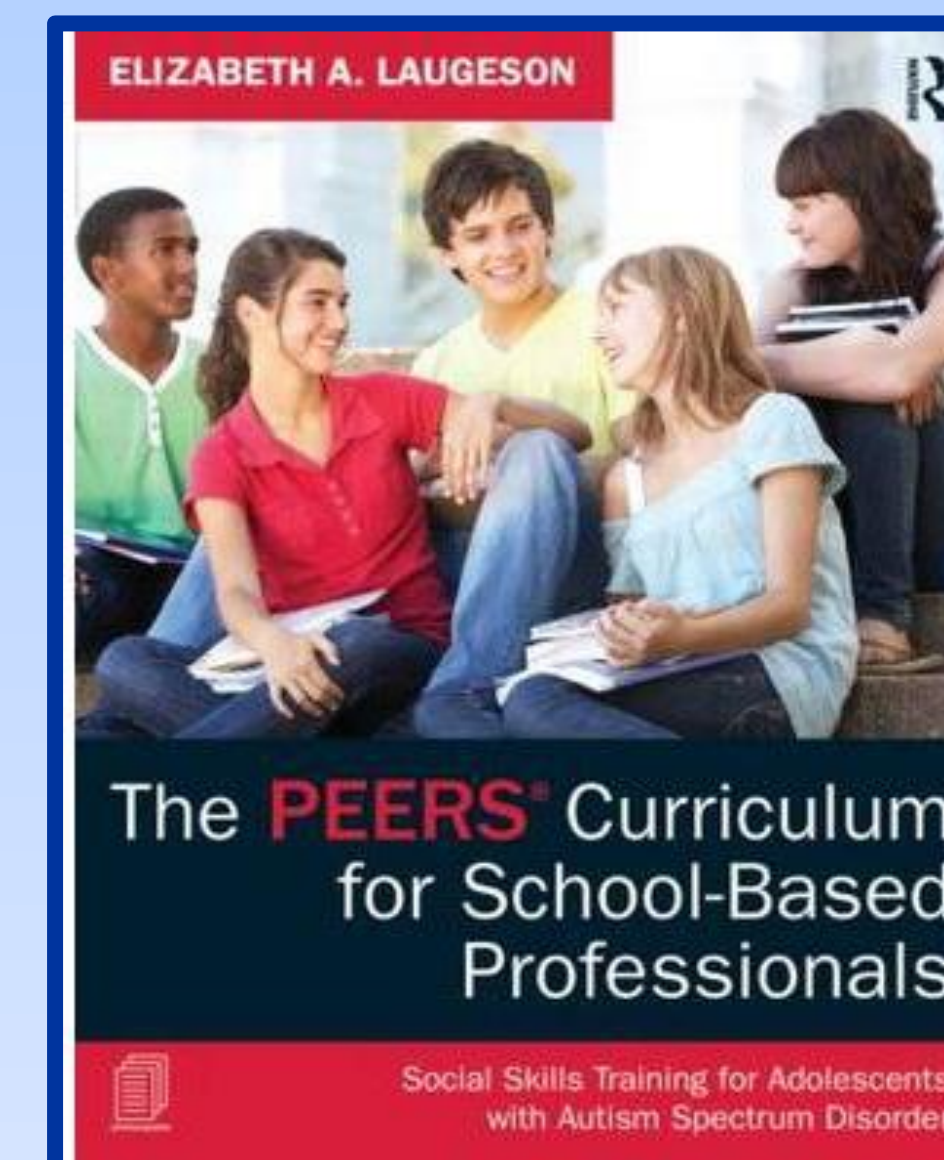
Children's symptoms vary depending on the type of mental illness, but some of the general symptoms include²:

- Changes in school performance, such as poor grades despite good efforts
- Abuse of drugs and/or alcohol
- Inability to cope with daily problems and activities
- Changes in sleeping and/or eating habits
- Defying authority, skipping school, stealing, or damaging property
- Intense fear of gaining weight
- Long-lasting negative moods, often accompanied thoughts of death
- Frequent outbursts of anger
- Loss of interest in friends and activities they usually enjoy
- Significant increase in time spent alone
- Excessive worrying or anxiety
- Hyperactivity
- Persistent nightmares or night terrors
- Persistent disobedience or aggressive behavior
- Frequent temper tantrums
- Hearing voices or seeing things that are not there (hallucinations)

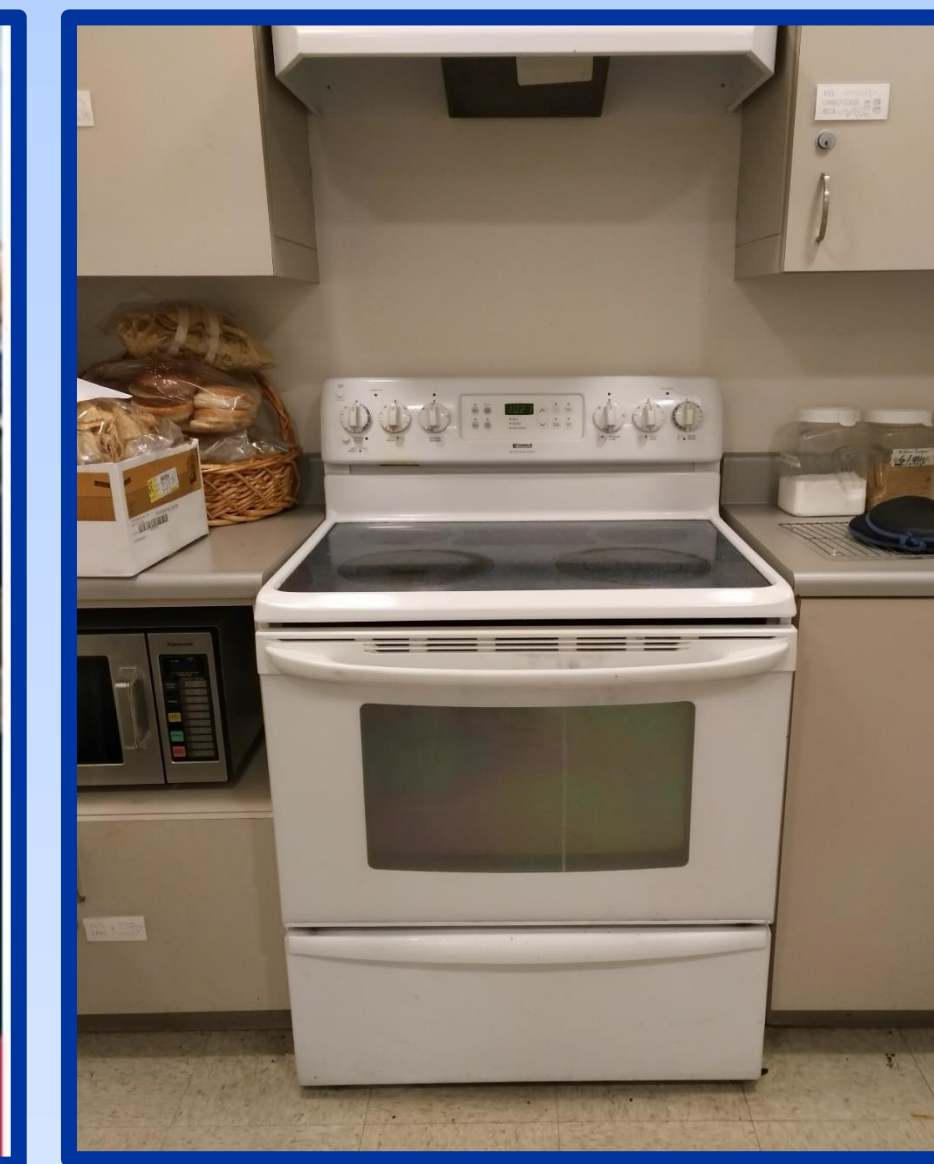
Objectives

Assist the occupational therapist in the intervention and treatment of the pediatric population, and become familiar with different topics affecting the population.

1. I aim to attend and aid during at least 10 sessions with the pediatric population.
 - Assist in the prep of each session by gathering materials necessary; during session, and the post session clean up.
2. Aid in the distribution and collection of at least 50 surveys, organizing data and/or surveys regarding the pediatric population.
 - Organize data to see results based of self-reported surveys.
3. Assist in administrative tasks as needed.



PEERS guide book for teens with developmental and autism.



The kitchen for cooking group.

Results

This internship helped me become more familiar with the pediatric population, and the interventions that are successful in treatment. Throughout the duration of the internship I was also able to further develop observation, recording and interpretation skills in order to aid with patient intervention.

It also helped me enhance career awareness, become familiar with the role of an occupational therapist in a hospital setting and ultimately confirm my aspirations of becoming an occupational therapist.

Activities

During the course of my internship I was able to participate in many different therapies given to the patients.

Objective #1 Cooking Group

- Cooking group is an activity where patients are taught the fundamentals of planning and preparing nutritionally balanced meals. Cooking group provides a setting where patients are assisted to decrease anxieties associated for nutritional food management.¹
- I was able to attend 14 cooking groups. My main task besides prepping for the group was supervising that all patients were working in a safe and productive manner.



Art Group

- Art group is a group where all patients are encouraged to participate in. Through a variety of techniques such as painting, drawing, calligraphy, etc., the patient may experience an increase level of comfort in creative self-expression.¹
- During my internship I was also able to attend 8 different art therapy sessions where my main focus was to provide them with the materials necessary for creating art and making sure they were being safe with all equipment being utilized.

Objective #2 Surveys

- Through out the internship I also organized over 250 bullying surveys collected and organized the data into different categories in order to be further analyzed and eventually presented.

Objective #3 Other Tasks

- Another project I worked on was transcribing the worksheets for the PEERS curriculum so that are able to be used in classes with teens and parents.
- I also had other tasks such as making copies, taking note of supplies in the kitchen, cleaning out the cooking group refrigerator, and helping take in orders of art supplies.

References

1. <https://www.uclahealth.org/resnick/child-and-adolescent-services>
2. <http://www.webmd.com/anxiety-panic/mental-health-illness-in-children#1>

