

CONNECTION IS THE INTERVENTION

How OTs Drive Team-based Care

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LEARNING OBJECTIVES

1. Describe the unique role of occupational therapy in interdisciplinary care.
2. Identify common barriers and opportunities for collaboration between service lines.
3. Apply practical strategies to foster effective team-based care.
4. Reflect on personal practices and identify areas to strengthen collaborative approaches.



INTRODUCTION

Collaboration in healthcare is more than a best practice — it is the intervention.

As OTs, we know that no single discipline can fully address the complex needs of the clients and families we serve.

True progress happens when professionals connect, communicate, and co-create solutions that are grounded in meaningful daily life.



WHY COLLABORATION MATTERS

Improves quality, consistency, and outcomes

Reduces redundancy and gaps in services

Supports family-centered and holistic care

THE OT'S UNIQUE ROLE

Occupation
as the Core
Lens

Holistic
Perspective

Bridging
Environments

THE OT'S UNIQUE ROLE

Adaptation &
Problem-
Solving

Facilitators
of
Participation

Family-
Centered
Focus

THE OT'S UNIQUE ROLE

**OTs are
Collaboration
Specialists**

BARRIERS TO COLLABORATION



**SCHEDULING AND
TIME CONSTRAINTS**



**COMMUNICATION
BREAKDOWNS**

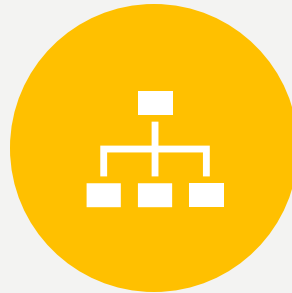


**PROFESSIONAL
SILOS**

BARRIERS TO COLLABORATION



SYSTEMIC AND
ORGANIZATIONAL
BARRIERS



HIERARCHICAL
STRUCTURES



LACK OF TRAINING IN
INTERPROFESSIONAL
COLLABORATION

BARRIERS TO COLLABORATION



FAMILY AND CULTURAL
CONSIDERATIONS



RESOURCE LIMITATIONS



Barriers to collaboration are real and multifaceted

BUT recognizing them allows us to proactively design solutions — from improving communication systems, to building a team culture of respect, to making collaboration as intentional as direct therapy.



STRATEGIES TO FOSTER CONNECTION

I. Regular Interdisciplinary Team Meetings

- **What it is:** Scheduled opportunities for open communication and planning.
- **Why it works:** Builds trust, clarifies roles, and prevents duplication or gaps in care.
- **Try this:** Create a consistent team huddle (e.g., weekly or biweekly) with a rotating facilitator and shared agenda.

STRATEGIES TO FOSTER CONNECTION

2. Cross-Training or Shadowing

- **What it is:** Professionals observe or train across disciplines.
- **Why it works:** Enhances understanding of each role and fosters empathy.
- **Try this:** Arrange for OTs to shadow SLPs or PTs for a session or vice versa, and debrief after.





STRATEGIES TO FOSTER CONNECTION

3. Shared Goal Setting

- **What it is:** Teams align around client and family-centered goals.
- **Why it works:** It ensures all professionals are working toward the same outcomes.
- **Try this:** Co-create treatment goals in team meetings with input from all providers (OTs, SLPs, PTs, educators, etc.) and the family.



STRATEGIES TO FOSTER CONNECTION

4. Shared Documentation Tools

- **What it is:** Collaborative use of a shared communication log or electronic record.
- **Why it works:** Improves continuity of care and transparency across disciplines.
- **Try this:** Use a shared care note template or family-facing summary that each provider contributes to.

STRATEGIES TO FOSTER CONNECTION

5. Co-Treatment or Integrated Sessions

- **What it is:** Providers deliver services together for specific goals.
- **Why it works:** Promotes a holistic approach and models teamwork in action.
- **Try this:** Plan a session that blends OT strategies with speech goals for improved regulation and communication.



STRATEGIES TO FOSTER CONNECTION

6. Family-Centered Collaboration

- **What it is:** Involving the family in decision-making and care planning.
- **Why it works:** Families are the common thread between all disciplines and offer vital insights.
- **Try this:** Include caregivers in team meetings, and designate one team member as the “family liaison.”





STRATEGIES TO FOSTER CONNECTION

8. Professional Development Workshops

- **What it is:** Trainings focused on communication, team-building, or collaborative or integrative care.
- **Why it works:** Builds shared language and skills across disciplines.
- **Try this:** Host an in-service on “Effective Interdisciplinary Communication” or “Collaborative Goal Writing.”



STRATEGIES TO FOSTER CONNECTION

9. Additional Considerations

- Leads of specialties
- Identifying responsibilities
resources for all specialties
- Shared language
 - EXAMPLE: Mands versus prompts

APPLICATION

1

Self Inventory
and Reflection

2

Team
Collaboration
Structure

3

How Might this
Help you in
your practice?

CLOSING & TAKEAWAYS



Collaboration *is* the Intervention



OTs are essential team connectors and advocates



Barriers Are Real,
But Not
Insurmountable

CLOSING & TAKEAWAYS



Communication is the
Foundation



Family and Patient Voices Are
Central



Small Shifts Make Big Impact



Practical strategies to bring
back to your teams

CALL TO ACTION

- **Reflect & Apply**

- *Think about one concrete way you can strengthen collaboration in your current setting this week*
- *Identify one professional strength you bring to your team—share it with a colleague tomorrow.*

- **Commit to Action**

- *Commit to having one intentional collaboration conversation with a colleague from another discipline within the next month.*
- *Take one tool or strategy from today and implement it in your next team meeting.*

- **Advocate for OT's Role**

- *Highlight occupational therapy's unique perspective in at least one interdisciplinary discussion.*
- *Be the bridge—bring an occupation-centered lens to your team's planning and interventions.*

- **Reminders**

- *Collaboration isn't extra—it is the intervention. Let's treat it with the same value we give direct treatment.*
- *Remember: strong collaboration leads to stronger outcomes. Be intentional, be consistent, and keep connection at the center of care.*



BE CURIOUS,
NOT JUDGMENTAL.

Ted Lasso | @hayliesdailies

QUESTIONS?



**MOVE
& BLOOM**

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REFERENCES

- Hall, P. (2005). Interprofessional teamwork: Professional cultures as barriers. **Journal of Interprofessional Care**, 19(2), 188–196.
- Scherer, D., & White, L. (2012). Interdisciplinary collaboration: The importance of effective communication. **Journal of Pediatric Nursing**, 27(6), 613–622.
- MacDonald, C. L., & Bergin, R. (2014). Collaborative teamwork in the pediatric therapy setting. **Pediatric Clinics of North America**, 61(6), 1121–1136.
- World Health Organization. (2010). **Framework for action on interprofessional education and collaborative practice.**
- Bodenheimer, T., & Sinsky, C. (2014). From triple to quadruple aim: Care of the patient requires care of the provider. **Annals of Family Medicine**, 12(6), 573–576.
- American Occupational Therapy Association (AOTA). (2020). **Occupational therapy practice framework: Domain and process (4th ed.).** **American Journal of Occupational Therapy**, 74(Suppl. 2), 7412410010.
- Case-Smith, J., & O'Brien, J. C. (2015). **Occupational therapy for children and adolescents* (7th ed.).* St. Louis, MO: Elsevier.
- Browne, R. H. (2012). Occupational therapy and the multidisciplinary team in pediatric settings. **Journal of Occupational Therapy, Schools, & Early Intervention**, 5(4), 309–316.
- King, G., Law, M., & Petrenchik, T. (2013). Family-centered practice in pediatric rehabilitation: A review of the evidence. **Disability and Rehabilitation**, 35(10), 847–857.
- Sackett, D. L., Straus, S. E., Richardson, W. S., Rosenberg, W. C., & Haynes, R. B. (2000). **Evidence-based medicine: How to practice and teach EBM* (2nd ed.).* Edinburgh: Churchill Livingstone.
- Zarrett, N., & Lerner, R. M. (2008). Ways that youth can contribute to their communities: The role of youth programs. **Youth & Society**, 40(4), 474–497.