Purpose: To gain advanced clinical practice in the NICU and NICU follow-up setting and to advocate for occupational therapy via caregiver and healthcare practitioner education, specifically focusing on sensory processing.

The initial two weeks of this capstone experience were spent observing at two NICU sites: Mercy Medical Center (MMC) and Sanford Hospital. The additional 14 weeks were completed at ChildServe. ChildServe is a pediatric rehabilitation facility serving children birth through 50 years old. Time was split between an outpatient caseload and Developmental-Motor Clinical (NICU follow-up), which works in collaboration with the MMC NICU to screen, monitor, and provide referrals for high-risk children following NICU discharge. Capstone objectives were met through the following deliverables:

- 30 hours of NICU observation at two sites with reflection and comparison chart of sites
- 3+ hours of continuing education hours with reflection
- Creation of three educational handouts
- Development of a Quick Reference Guide
- Sensory Awareness Screen Questionnaire
- Developmental Clinical outcome tracking form
- Scholarly theory paper, literature matrix, and final presentation
- Activity log tracking hours and intervention and evaluation experience at all sites

OT IMPLICATIONS

- SDPs are common in children born prematurely following NICU discharge and occupational therapy offer a skills perspective in identifying sensory deficits and related concerns.
- Routine referral to and evaluation by occupational therapists is appropriate for this population and NICU follow-up settings are ideal opportunity for completing sensory-based screenings.
- Occupational therapists must continually advocate and foster education on sensory development to caregivers and healthcare practitioners for increased awareness and early recognition of deficits, appropriately refer to OT, and to encourage/implement sensory-based recommendations for the home-environment.