



# The Open Journal of Occupational Therapy

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Jan Davis, MS, OTR/L

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**Sponsor Profile:**  
**Jan Davis, MS, OTR/L**



The *Open Journal of Occupational Therapy* (OJOT) is pleased to recognize Jan Davis, MS, OTR/L, as the sponsor of the Summer 2018 issue. Ms. Davis is the founder and president of International Clinical Educators, Inc. (ICE), a learning center devoted to creating innovative educational resources for clinicians, faculty, and students in occupational therapy, physical therapy, and other allied health professions. Designed to inspire clinical excellence, ICE makes complex principles easy for students to understand through high-quality video-based resources that feature real patients and practitioners in a variety of treatment settings. ICE's educational resources are currently used in instructional design and research at colleges and universities throughout the United States, Canada, Australia, the United Kingdom, and Singapore.

Ms. Davis entered the field of occupational therapy over 40 years ago. After holding clinical and academic positions, a transformative and pivotal point occurred early in her career when she served as the director of occupational therapy at the Klinik Valens, a large rehabilitation center located in Switzerland. During this time, she had the honor of working alongside Dr. Wilhelm M. Zinn, medical director and president of the International Rehabilitation Medical Association (IRMA). Dr. Zinn, a pioneer in neurologic and orthopedic rehabilitation, established an international center of excellence where he hosted training courses taught by top rehabilitation experts from around the world. Ms. Davis learned from master clinicians with backgrounds in physical therapy, speech and language pathology, clinical psychology, and more. "I saw improvement in my patients I never thought was possible as the result of learning innovative handling skills from these instructors," she said. Ms. Davis applied everything she learned to the field of occupational therapy. "This experience changed my life and career," she said.

When Ms. Davis returned to the United States, she wanted to share her knowledge and experiences with her colleagues. "I wanted to pay it forward," she said. In 1983, she founded ICE. ICE initially provided high-quality live continuing education courses, each with a focus on practical treatment ideas that participants could immediately use in their practice. From 1983 to 2014, ICE provided over 450 live workshops and trained more than 30,000 practitioners. Some courses were led by the same master clinicians that Ms. Davis had learned from in Switzerland. Transitioning from patient care to clinical education meant that Ms. Davis could help more patients get the care they

deserved. “If I treated 100 patients in my career, I had an impact on 100 lives,” she said. “However, if I trained 100 therapists to help 100 patients in their careers, then my reach has grown exponentially.”

As the ICE Learning Center evolved from live continuing education workshops to video-based courses, Ms. Davis’s goal of inspiring clinical excellence went global. She produced three comprehensive video courses, each designed as an independent learning module emphasizing the same handling skills Ms. Davis taught in her workshops. The courses featured actual patients; therapists; and settings; including the ICU, acute care, skilled nursing, home health, and inpatient and outpatient rehabilitation settings. “I use ICE videos in class because they are realistic to clinical practice,” said Holly Grieves, MS, OTR/L, an assistant fieldwork coordinator and faculty clinical specialist at Western Michigan University. “I appreciate the diversity of clinical settings and patient diagnoses featured in the videos,” she said. Ms. Grieves also appreciates the videos of cotreatments and uses them to teach students about interprofessional education (IPE). More specifically, she uses the videos to demonstrate the case of a client who would benefit from both occupational therapy and physical therapy. After watching the video, the students must work together to create cotreatment ideas.

Clinical educators are tasked with the responsibility of designing educational content that meets the needs of all learners. The ICE video courses streamline the instructional design process. Each stand-alone course includes assessment and intervention strategies, a workbook, practice labs, and exams. Over 60 practice labs are available, complete with video demonstrations and workbook explanations. Faculty have the option to assign the entire course, focus on a specific segment, or create an independent study. “When we marry technology and education we can take teaching to a higher level,” said Ms. Davis. “It’s more than watching a video, it’s using technology to get the results we want while meeting core competencies with students. That’s what I find exciting.”

Today, the ICE Learning Center offers a collection of innovative educational resources designed specifically for college and university faculty to enhance the learning experience for students while simplifying the instruction design process for faculty. The versatility of video empowers the instructor to use them in a variety of ways. “The ICE video library is a critical tool in my toolbox of teaching strategies,” said Dr. Stacy Smallfield, OTR/L, assistant director and associate professor in the program of occupational therapy at Washington University in St. Louis. “I have used ICE videos to connect theory to practice, teach documentation and levels of assistance, apply new concepts to client care, assess student learning and more.” Dr. Smallfield believes video is a valuable teaching tool because it allows students to observe patient-therapist interactions and to gain a better understanding of how context influences the plan of care.

The latest addition to the ICE Learning Center is a video library that enables faculty to stream 200 short patient videos to enhance lectures, case studies, and practice labs. “The videos can be used and reused by different faculty in different classes throughout the curriculum,” said Ms. Davis. For example, the same video can be viewed in the classroom to illustrate therapeutic use of self, facilitate a group discussion on ethical reasoning, or as a means for live demonstration when teaching a new skill, such as a wheelchair transfer. “Using video of real patients helps bring the clinic into the classroom in a way that is meaningful,” said Dr. Amanda Giles, OTR/L, assistant professor of occupational therapy at the Medical University of South Carolina. Dr. Giles uses the ICE video library to practice goal-writing, activity analysis, SOAP notes, and problem-solving in the context of a real patient scenario. “My favorite videos include acute care settings because it is not possible to expose students to that environment any other way,” she said. Videos may also be embedded into a quiz or online discussion

board to measure student learning outcomes. In a “flipped” classroom setting, face-to-face time with students is maximized by assigning videos to watch outside of class.

According to Ms. Davis, one exciting use of the ICE video library is research that is being conducted by occupational therapy programs. One study by Murphy (2017), found a statistically significant difference in inductive reasoning using video-based case studies from the ICE Video Library as compared to standard text-based case studies. This and other exciting new studies provide research evidence to support the use of video in the occupational therapy curriculum.

The ICE faculty tool kit offers a comprehensive resource for educators. Ready-made lesson plans include learning objectives, specific ACOTE or CAPTE standards, learning activities, questions to stimulate class discussion, thoughtful assignments, and a list of related videos found in the ICE video library. The educational resources and questions provided make it easy to stimulate group discussions in class or online. Modifiable templates enable instructors to meet the individual needs of their students. “Faculty who really understand our platform build their courses around it,” said Ms. Davis.

The role of college and university faculty is to inspire clinical excellence while preparing the next generation of entry-level practitioners. Providing meaningful experiences that facilitate skills in critical thinking and clinical reasoning is essential. The ICE Learning Center uses high-quality video to make teaching and learning easier in the allied health professions. ICE provides educational resources that inspire clinical excellence to ensure all patients receive the care they deserve. “Every time you treat a patient, you should see a change in that patient. If you don’t, then you need to change what you are doing,” said Ms. Davis. “We must demand excellence in ourselves to create change in our patients.”

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***To learn more about the innovative educational resources available through International Clinical Educators, Inc., visit: <http://www.icelearningcenter.com>***

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### **References**

Murphy, L. (2017). The impact of an online video library and case-based learning in the development of student clinical reasoning. *American Journal of Occupational Therapy*, 71, 7111505130p1. doi:10.5014/ajot.2017.71S1-PO4155