

Dr. Susan Blair, OTD, OTR/L, BCPR, BCG



5158 Moseley Drive, Clemmons, NC 27012
336 414 1416
susanblairnc@gmail.com

My career as an occupational therapist spans over 34 years and encompasses a variety of clinical service areas including acute care, inpatient rehabilitation, home health, skilled nursing/assisted living facilities, and pediatrics.

I am the Director of Student Affairs and Assistant Professor for the Baylor University OTD program, Waco, Texas. Prior to this appointment, I served as the Academic Fieldwork Coordinator and Assistant Professor for the Master of Science for Occupational Therapy Program at Pfeiffer University in Albemarle, NC. My clinical career has been at Novant Health Forsyth Medical Center, an 800-bed acute care facility as well as being a member of the system-wide float team for Novant Health. In addition, I served as the Education Coordinator for OT for an extensive period of years with responsibilities for annual competencies, workshop creation, onboarding competency completion, Case of the Year development, as well as mentorship of overall professional development of OT staff. I have successfully achieved AOTA Board Certification in both Physical Rehabilitation and Gerontology. I also serve as a guest lecturer and have collaborated on clinical research for several academic programs. I have published in a variety of publications and authored a textbook chapter as well as presented at the local, state, and national levels on evidence-based practice. I developed and have conducted a continuing education workshop approved by AOTA, for PESI Education, a national continuing education provider. The course is entitled Successful Rehab for Today's Older Adults. This six-hour course covers geriatric-specific assessment tools, provides functional intervention ideas, discusses the impact of frailty and chronic co-morbidity, and illustrates communication strategies for the older adult. I have extensive experience in remote learning and distance education through my doctorate degree fulfillment as well as in my current position during the COVID-19 pandemic.

I obtained my Occupational Therapy Post-Professional Doctoral degree from Chatham University and through that experience I have expanded my knowledge of educational theory, teaching methodology and research design. My education, teaching experience, and over 34 years of clinical practice prepared me to transition into an academic setting. I enjoy being creative and interactive with students and others throughout the learning process. My philosophy for teaching is to engage the class in meaningful and applicable learning experiences with emphasis on dynamic interaction often using humor.

Experience

2021-present Director of Student Affairs and Assistant Professor, OTD Program

Baylor University, Waco, Texas

2019-2021 Assistant Professor and Academic Fieldwork Coordinator

Pfeiffer University, Albemarle, NC

Highlights: During my tenure at Pfeiffer University I was responsible for fieldwork placement for up to 45 students for both Level 1 and 2. For my teaching responsibilities I served as the primary course faculty for Inquiry and Evidence Based Practice 1 and 2 research capstone courses as well as Foundations of Neuroscience, Assistive Technology, and Introduction to Occupational Therapy and Occupational Science. I was responsible for processing potential OT candidate applications in conjunction with Program Director and Operational Administrative Assistant. I functioned as the Student Organization Liaison and was also integrally involved in the onboarding of new students for orientation. I attained Blackboard Specialist status and function as the faculty mentor for new faculty course development. Finally, I played a significant role in our program's ACOTE Accreditation process by participating in ACOTE standard compliance and preparation for onsite visits.

1997 – 2019 Staff Occupational Therapist

Novant Health Physical Rehabilitation

- System Float Occupational Therapist 1999 – Present
- Clinical Staff Developer for Occupational Therapy 2002 - 2017
- Internal Float Occupational Therapist 1998-1999
- Staff Occupational Therapist 1995-1998
- Acute Coordinator for Occupational Therapy 1992-1995
- Special Programs Coordinator for Occupational Therapy 1991-1992
- Staff Occupational Therapist 1987-1991

Highlights: My Occupational Therapy career embraced over 32 years of clinical, educational, and supervisory experience. From 1999 until present, I held the position of system float occupational therapist. My responsibilities were to provide comprehensive occupational therapy services to the full continuum of patient care in both inpatient and outpatient areas. From 2002 until 2017, in addition to my role as system floater, I served as the OT Clinical Staff Developer for Novant Health's Triad Region. My primary responsibilities were initial and ongoing staff orientation, organizing educational opportunities, and providing initial and annual competency training for a staff of approximately 25 OTs. From 2002 until 2011, I was responsible for the student fieldwork program for Forsyth Medical Center. I resigned from Novant Health in June 2019 to pursue an academic career.

2012 – 2018 Occupational Therapist (PRN)

Genesis Healthcare Corporation

Highlights: I provided skilled nursing and home health occupational therapy services for geriatric clients. I also supervised occupational therapy assistants and provided program development and training for other rehabilitation staff.

1993– 2001 Occupational Therapist (PRN)

Home Health Professionals

Highlights: I provided pediatric occupational therapy services in the home setting for children from birth to 21 years of age.

Education

1985 - 1987 Medical University of South Carolina, Charleston, SC

Bachelor of Science in Occupational Therapy

Completed acute and mental health rotations with an additional burn specialty rotation

2017 – 2019 Chatham University, Pittsburgh, PA

Post Professional Doctorate in Occupational Therapy

Capstone: "Examining perceptions of frailty in older adults who participated in occupational therapy community education".

Certifications

2021 Blackboard Specialist Certification

Evergreen Certified Dementia Care Specialist (ECDCS) Certification

2014 AOTA Board Certification in Gerontology (Re-certified in 2019)

2013 AOTA Board Certification in Physical Rehabilitation (Re-certified in 2018)

2010 AOTA Fieldwork Educator Certification

2006 Bioness Certification

1999 Ergoscience Certification

Licenses

1987- North Carolina Occupational Therapy #596

1987- NBCOT #917797

Conference Presentations

- 2021** **Academy of Rehabilitation Medicine Virtual Annual Conference Poster:** Perception of frailty changes in rural and urban older adults after participating in occupational therapy-led community education.
- 2020** **North Carolina OT Annual Spring Conference Presentation:** Multigenerational Communication
- North Carolina OT Annual Fall Conference Presentation:** Use of an Online Learning Module for Student Observations during COVID
- AOTA Annual Conference Workshop and Poster:** Perceptions of Frailty (Accepted but conference cancellation because of COVID-19):
- 2019** **North Carolina OT Annual Fall Conference Presentation Short Course and Poster:** Perceptions of Frailty
- 2017** **AOTA Annual Conference Workshop:** Impact of Health Literacy on Post-operative Shoulder Surgery Education
- 2017** **North Carolina OT Annual Conference Presentation:** Creating Optimal OT Interventions for Older Clients in Today's World
- 2016** **AOTA Annual Conference Poster Presentation:** Lowe's Learning Lab: Grocery Shopping Skills Assessment with Neurologically Impaired Clients for a Real-Life Experience
- 2015** **AOTA Annual Conference Poster Presentation:** It's A Man's World-Gender Bias in Rehabilitation
- 2014** **NC OT Annual Conference:** It's A Man's World-Gender Bias in Rehabilitation
- 2013** **NC OT Annual Conference Presentation:** Advanced Board Certification-Is It for You?
- 2012** **NC OT Annual Conference Presentation:** Transformation of Acute Care
- 2005** **NC OT Annual Conference Presentation:** The Role of the Clinical Staff Developer in Rehab
- 2008** **NC OT Annual Conference Poster Presentation:** A New Academic Partnership: OT and Rehabilitation Studies Degree Students
- 1995** **AOTA Annual Conference Short Course:** Comprehensive Care of Trisomy 18 Infant
- 1995** **AOTA Annual Conference Short Course:** OT/PT Team Perspectives in a Multicultural NICU

Publications

- 2018** Adult Physical Conditions: Intervention Strategies for Occupational Therapy Assistants
Mahle & Ward, 2018 Author for Chapter 7 Range of Motion
Mahle & Ward, 2nd edition in progress. Update to Chapter 7 and Author for Chapter 41 Geriatrics.
- 2016** Archway Magazine, Fall 2016 Volume 17 (2) Shopping for therapy
- 2014** OT Practice, June 20th Look Up: An Art Project for In-patient Rehabilitation
- 1992** OT Forum, 1992: Improving Efficiency in Acute Rehabilitation
- 1990** OT Forum, 1990: Adaptive Positioning Equipment for the Traumatic Brain Injured Patient
- 1990** OT Forum, 1990: Utilizing the ADL Short Term Goal Evaluation with the TBI Patient

Teaching Experience

- 2021 Primary Faculty for Pfeiffer University MSOT Program**
Spring: Foundations of Neuroscience, Assistive Technology in OT, Inquiry and Evidence Based Practice 1, Level 1 Mental Health Fieldwork
Summer: Inquiry and Evidence Based Practice 2, Level 1 Adult/Geriatric Fieldwork.
- 2020 Primary Faculty for Pfeiffer University MSOT Program**
Summer: Introduction to Occupational Therapy and Occupational Science
Fall: Secondary Faculty for Movement, Participation and Occupation. Secondary Faculty for Gross Anatomy and Kinesiology.
Supportive Aging: Provided **two online virtual webinars** on Frailty in the Older Adult for Supportive Aging, LLC.
- 2019 Exercise Science and Leadership, Pfeiffer University.** Presented on Occupational Therapy role and program.
Hospice of Stanly County: Presented in-service to Hospice volunteers on depression in the elderly, signs of stroke and reducing risk, and aging and memory.
Care Fest at Stanly County Senior Center. Presented frailty prevention study information.
Health and the Aging Population. Presented on Occupational Therapy role and program.
- 2018 Cabarrus College of Health Sciences, COTA/OTA to OT Program (Guest Lecturer).** Responsible for creating course content, establishing objectives, and developing competency testing.
- 2018/19 Successful Rehab for Today's Older Adults (VYNE Education/PESI Education)** This one day, six-hour AOTA approved continuing education course presents a

unique approach to creating an optimal therapeutic environment in today's geriatric rehabilitation setting. I teach rehab professionals (OT/PT/SP/RN) how to help older adults return to the active lifestyle they wish.

Awards and Recognition

- 2016** Recognition of Clinical Research, Winston Salem State University
- 2016/21** AOTA: Board for Board Advanced and Certification Specialty
- I completed my service to the AOTA Board Certification Review Committee in January after the program was re-vamped. I had been the Board Member representative for Gerontology beginning July 2016
- 2014/15** NCOTA SIS Physical Dysfunction Co-Chair 2014-2015
- 2013/14** NCOTA SIS Physical Dysfunction Chair 2013-2014
- 2014** Appreciation of Participation in Virtual Simulation Educational Experience for OT/PT/Nursing Students, Winston Salem State University
- 2011** Recognition for Support of MSOT Program, Winston Salem State University
- 1991** Outstanding Clinician in Physical Dysfunction, NC OT Association

Academic Research Collaboration

2021 Pfeiffer University MSOT Program: Effectiveness of Self-Selected Functional Activities in Regaining Occupational Engagement in Post-Covid-19 Adults. (Responsible for study design, implementation, student supervision, data collection and outcome analysis). **Study Description:** Occupational therapy focuses on using therapeutic techniques to help individuals improve and maintain the essential skills needed to participate in everyday activities. According to the American Occupational Therapy Association Ethics Commission, occupational therapy is beneficial when it pertains to infectious diseases and re-engagement (AOTA, 2020). The COVID-19 pandemic has adversely affected many individual's everyday engagement in occupations. For the purpose of this study, occupations are not specific to traditional work roles but are defined as "the everyday activities that people do as individuals, in families and with communities to occupy time and bring meaning and purpose to life. Occupations include things people need to, want to, and are expected to do (World Health Organization, 2020). COVID-19 has disproportionately affected those individuals over the age of 65 and consequently much of the current literature is focused on this portion of population. However, there is a gap in the literature for evidence-based research on populations other than older adults. According to University of

California at Davis, it is estimated that one-quarter to one-third of COVID-19 patients become “long haulers, as many patients call themselves” (UC-Davis, 2021). Furthermore, four studies published since February 2021 show that 27% to nearly 33% of patients who had COVID-19 but did not need to be hospitalized later developed some form of long-haul COVID (UC-Davis, 2021). Long haulers are described as those individuals who have not fully recovered from COVID-19 weeks or even months after initially experiencing symptoms (Harvard Health, 2021). Some individuals “experience symptoms for weeks or months, while others feel better for weeks, then relapse with old or new symptoms” (Harvard Health, 2021). Symptoms associated with post-COVID recovery include tightness in the chest, shortness of breath, headaches, muscle aches, diarrhea, and most common, fatigue. Research shows that this group feels tired, unable to exert themselves or exercise and simple tasks such as self-care and walking are very difficult to perform. Additionally, many patients who experience prolonged COVID recovery report “brain fog, difficulty concentrating or feel like they aren’t as sharp as they used to be (Cleveland Clinic, 2021)”. Therefore, the purpose of this study is to analyze the descriptive responses of adults ages 18-64 who have tested positive for COVID-19 and ascertain how they recovered their ability to participate and complete in functional activities that the study will classify as occupational engagement. **The purpose of this study is to examine:** Effectiveness of Self-Selected Functional Activities in Regaining Occupational Engagement in Post-Covid-19 Adults. **Findings:** In progress study.

2020 Pfeiffer University MSOT Program: “Perceptions of Frailty in Urban and Rural Older Adults who Participate in Occupational Therapy-led Community” (Responsible for study design, implementation, data collection and outcome analysis). **Study Description:** A follow-up study based on an evidence-based study by me (Dr. Susan Blair) (2019), that hypothesized that participation in occupational therapy-led education would positively affect the perceptions of frailty in community-dwelling older adults. This study examined how perceptions of frailty of older adults living in **urban communities** changed when they participated in a six-part occupational therapy-led community education program. Analysis of the results revealed that participation did positively affect perceptions of frailty in community dwelling older adults. In addition, the repeated-measures analysis of participants’ pre- and post-intervention Edmonton Frail Scale, Timed Up and Go Test, and grip strength test measures revealed reduction in frailty risk identification, improvement in walking speed, and increased grip strength. This 2020 study focused on community dwelling older adults living **in rural communities**. Frailty can increase the likelihood of hospital readmission, require transition from home to assisted care, decrease life satisfaction, and reduce one’s lifespan (Greenwald, J.L., & Jack, B.W., 2009). In the United States, 15% of older adults meet the criteria for frailty and that percentage increases sharply as the age division rises. The presence of a chronic co-morbidity such as diabetes or congestive heart failure increased the risk of developing frailty (Bandeem-Roche, et al., 2015). Evidence showed that a lack of knowledge about frailty risk consequently affected some individuals disproportionately including the oldest old, women, those in racial and ethnic minorities, rural dwelling individuals, older adults with less education, and persons of lower income. (Bandeem-Roche et al., 2015). Rural Americans are a population group that experiences significant health disparities. Rural risk factors for health disparities include geographic isolation, lower socioeconomic status, higher rates of health risk behaviors, limited access to healthcare specialists and subspecialists, and limited job opportunities (ruralhealthinfo.org, 2019). Health disparities are differences in health status when compared to the population overall, often characterized by indicators such as higher incidence of disease and/or disability, increased mortality rates, lower life expectancies, and higher rates of pain and suffering (ruralhealthinfo.org, 2019). This inequality is intensified as rural residents are less likely to have

employer-provided health insurance coverage, and if they are poor, often are not covered by Medicaid (ruralhealthinfo.org, 2019). Furthermore, there existed an association between frailty and survival when examined through a systematic review that identified a lack of health education as detrimental to the longevity of older adults (Shamliyan et al., 2013). **The purpose of this study was to examine:** Examine the differences between frailty perception of urban and rural older adults who participate in Occupational Therapy community education. **Findings:** The African American rural population sample had higher perception of frailty than the urban sample (Pre & Post) (Accessibility to Health Care, Health Literacy) Literature supports this finding. In regard to mobility, the Timed Get up and Go (TUG) scores for the rural African American population identified that this group was the slowest ambulation group and they were higher in the Fall risk rate despite the fact that all did have improvement in their post intervention TUG Scores. Interestingly, this same population had the highest grip strength & all participants had grip strength WNL perhaps because of the higher incidence of manual labor jobs. Rural African American population sample had higher health literacy issues and poverty which corresponds with literature. This group needed more assistance with reading, responding to the survey questions. The data analysis revealed similar worries about aging and frailty across urban and rural groups but with significantly less resources available for the rural African American population placing them at higher risk for not aging well.

2019 Chatham University Post Professional Doctoral Capstone: *Examining Perceptions of Frailty in Older Adults Participating in Occupational therapy Community Education.* (Responsible for study design, implementation, data collection and outcome analysis). **Study Description:** The United States population is aging, and adults age 65+ are expected to reach 50 million by the year 2030 per census reports (Bandeem-Roche et al., 2015). There is a portion of our elderly who become frail or are at risk for growing frail. Frailty can increase the likelihood of hospital readmission, require the transition from home to assisted care, decrease life satisfaction, and reduce lifespan. This capstone examined how perceptions of frailty of twenty older adults changed when they participate in a six-part occupational therapy-led community education program. A mixed method design was utilized to collect both quantitative and descriptive qualitative data in the form of pre- and post-intervention measures which revealed that occupational therapy-led education did increase the community dwelling older adult's knowledge of frailty and frailty prevention. Changes in perception of frailty, impact of frailty on functional performance, and themes of frailty identification were analyzed. Improvement was noted in 62% of the participant's perception of frailty responses. The quantitative component was repeated-measures analysis of participants' Edmonton Frail Scale, Timed Up and Go Test, and grip strength test measures that revealed reduction in frailty risk identification, improvement in walking speed, and increased grip strength. Results are discussed and recommendations were given for practice, policy, and education. **The purpose of this study was to examine:** The following evidence-based practice question guided the study: Does participation in occupational therapy-led education (I) affect the perceptions of frailty (O) in community-dwelling older adults (P). **Findings:** Analysis of the results revealed that participation did positively affect perceptions of frailty in community dwelling older adults. In addition, the repeated-measures analysis of participants' pre- and post-intervention Edmonton Frail Scale, Timed Up and Go Test, and grip strength test measures revealed reduction in frailty risk identification, improvement in walking speed, and increased grip strength.

2017 Winston Salem State University MSOT Program: *Impact of Health Literacy on Post-operative Shoulder Surgery Education.* (Responsible for study design, implementation, student supervision, data collection and outcome analysis). **Study Description:** Health literacy (HL) is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services

needed to make appropriate health decisions, and is related to positive health outcomes (Baker, 2006). HL affects people's ability to navigate the healthcare system and engage in self- management of disease and post-disease processes. Orthopedic patients who have undergone surgical shoulder repairs have a short-term length of stay in acute care. Following a shoulder operation at Novant Health, patients receive a home program (HP) from their occupational therapist (OT) to help them navigate the post-surgical recovery process with specific instructions and precautions. The HP is reviewed during one session before the patient is discharged. **The purpose of this study was to examine:** RQ1: How does HL level of orthopedic patients with post-surgical shoulder surgeries impact their understanding of HP instructions? RQ2: Is there a difference in the level of adherence among patients who received the original HP (HP1) versus patients who received the revised HP (HP2) **Findings:** Findings contribute to growing evidence of HL and understanding how these HL levels impact comprehension of health- related information in the acute care setting. For OT practitioners, findings emphasize the importance of developing HPs that are written and taught at a level the patient can understand to promote successful execution of HP in their daily lives.

2016 Winston Salem State University MSOT Program: *Lowes Food Life Learning Lab: Grocery Shopping Skills Assessment with Neurologically Impaired Clients-Real Life Experience.* (Responsible for study design, implementation, student supervision, data collection and outcome analysis). **Study Description:** The goal of the in-patient rehab center was to determine optimal use of the simulated environment for more effective treatment of clients and to develop some basic protocol for use of the space. With a large contingent to in-patient clients diagnosed with neurological conditions, this population became the focus for developing a program. OT practitioners at Novant Forsyth Medical Center wanted to investigate the benefits, best practice scenario and establish protocols for using the Lowes Food (LLL) for patients with neurological impairments that exhibited mild– minimal cognitive deficits and would potentially be returning to the community to engage in this IADL. The program developed aimed to examine if a simulated grocery environment is as beneficial in re-learning and implementing the habits and routine of grocery shopping behavior like that needed for success in the real-life counterpart among this population. The targeted client population included in-patient eighteen (18) years an older with acquired non–progressive neurological condition such as traumatic brain injury (TBI) or CVA. **Findings:** The data analysis indicated that the Lowes Food (LLL) offered a unique simulated environment to improve cognitive skills in those who have neurological impairments. By determining the benefits of the lab in relation to cognitive skills, therapists could this predictive information to patients, their families, and other therapists. The lab gave patients the opportunity to work on two instrumental activities of daily living addressed in the Occupational Therapy Practice Framework: shopping and financial management, which demonstrates its relevance in occupational therapy practice.

2015 Winston Salem State University MSOT Program: *An Investigation of the Efficacy of Finger Fitness (TM) on Hand Stiffness and Patient Engagement in Therapy.* (Responsible for study design, implementation, student supervision, data collection and outcome analysis). **Study Description:** This study aimed to examine whether use of the intervention program Finger Fitness™ would improve the functional outcome of individuals with hand stiffness who were receiving in-patient rehabilitation. The study involved the use of a CD with exercise programs based on demonstrated hand movements set to music. **Findings:** The outcome data supported the efficacy of the Finger Fitness™ Program for improving compliance with exercises to reduce stiff hands but cautioned that clients would require supervision for adherence to program for significant progress to occur.

2013 Winston Salem State University MSOT Program: *Impact of Simulated IPE Experience on Collaborative Practice in Clinical Settings.* (Participated in study design, implementation, student experience, data collection and outcome analysis). **Study Description:** This study aimed to examine effectiveness of multidisciplinary patient experience simulation for occupational therapy, physical therapy, and nursing students. **Findings:** The outcome data supported the efficacy of the simulated IPE experience for optimizing development of professional identity and clinical decision- making confidence as well as building cooperative relationships in a controlled environment.

References Available on Request