

## Ep #104: Fusing Theory and Practice with Emma Pedersen and Sophia Choinicki



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**Heather Branscombe**

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Welcome to *Clinicians Creating Impact*, a show for physical therapists, occupational therapists, and speech-language pathologists looking to take the next step in their careers and make a real difference in the lives of their clients. If you're looking to improve the lives of neurodiverse children and families with neurological-based challenges, grow your own business, or simply show up to help clients, this is the show for you.

I'm Heather Branscombe, Therapist, Certified Coach, Clinical Director, and Owner of Abilities Neurological Rehabilitation. I have over 25 years of experience in both the public and private sectors, and I'm here to help you become the therapist you want to be, supporting people to work towards their dreams and live their best lives. You ready to dive in? Let's go.

Hi there, friends. I hope that you are doing well. I am recording this episode at the beginning of May, and if you are listening to this episode when it first comes out, I hope you are enjoying some of the solid spring weather that we have finally gotten as much as I have.

It has been a really fun time here at Abilities. We've had new people starting, we've had students in our organization, and it was really fun to talk to Emma and Sophia. Fun fact, Emma and Sophia actually worked with us as rehabilitation assistants and actually worked together before they both got into the Master's of Occupational Therapy program at UBC. They are now in their final days, about to graduate from that program, and it was really fun to talk about some of their learnings, or at least a small slice of their learnings, fusing theory to practice. And I can't wait to see where they get to into their clinical progression moving forward.

So with that, I'd like to introduce this episode with Emma Pedersen and Sophia Choinicki.

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Heather Branscombe: All right, welcome, Emma. Welcome, Sophia. I'm so glad that I get to chat with you today about this. So, as we were just chatting a little bit before this recording started, and we're recording this at the beginning of May, you guys are really at the end point of your OT student career and about to launch into the rest of your OT career. So, let's find out a little bit about what actually even got you interested into OT school. So Emma, do you want to start first?

Emma Pederson: Yeah, so when I was in high school, I had a friend who would always talk about OT, and I think she had a family friend that was an OT. So just hearing her talk about it all the time, I was always wondering what it was. And then I did my undergrad in Human Kinetics at UBC Okanagan, and that was when I was exposed to the sciences and the human body and things like that. And then right after that, I knew I always wanted to work in healthcare, so I actually got a job as a Rehab Assistant for three years, and that's when I actually saw OT in practice.

And it was amazing to work directly under an OT and just seeing the different ways they were able to adapt and modify certain techniques and support someone's goals. And I just found it so rewarding to help someone reach their goals, even if it was just a little change in their routine or whatever it was. And after that, I just knew OT was the career for me.

Heather Branscombe: So how about for you, Sophia?

Sophia Choinicki: Yeah, I grew up with an older sister with Cerebral Palsy, so growing up I was immersed in the world of Pediatric Therapy with speech, physio, OT, and I was a little sibling that was brought to all the appointments growing up. And I always thought as a kid, this is just play and it's fun. But then as I got older, I got more involved with the home programs, and I thought, this is really interesting. And again, I always thought, I think I'm going to work in healthcare.

My mom was also a nurse, so I think that was in my blood to be in healthcare. And then when I got into high school, I took a work experience course, and I

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was really fortunate to spend a week with a Speech Therapist, a week with a physio, and a week with an OT. And during my week with the OT, I thought, this is it. This is what I want to do.

And then from then on, I just was, I'm going to volunteer as much as I can. I did my Bachelor of Science in Psychology and fell in love with neuropsych. And I thought, I think OT is going to be a really good fit. And then after I finished my undergrad, again, I worked as a Rehab Assistant at Abilities too, and that solidified the choice even more. And I loved the holistic approach. You can be creative, you're a lifelong learner when you're an OT. And I just thought, this is what I'm going to do and however long it takes me to get there, I'll get there.

Heather Branscombe: Yeah, now you guys are here, which is amazing. That's so wonderful. So, you guys recently authored an article in the OT Now, and that's what really got me interested. Although I did say to you guys before we started recording, I am unnaturally proud of you guys. It's like I'm your parent, and I am clearly not your parent, but it was so fun to see that article, just talking about applying frameworks to clinical placements. So, can you talk a little bit about how did this article come about?

Sophia Choinicki: Yeah, so we were partners on one of our big final assignments, and it was our theory course. So we came up with the idea, we ended up actually making an online magazine, and it covered all the theories, all the frameworks. And then we handed it in, thought that was going to be the end and we're done with our theory course. And then our instructor reached out and she said, I think you guys could turn this into an OT Now article. I'm one of the editors on the Sense of Doing column. Let me know if you guys are interested. And then I guess from there, we brainstormed together on what we wanted to do and what we want the article to look like. And that's where the idea came from.

Heather Branscombe: That's amazing. You could really see your perspective about applying theory to practice, and I could hear myself as a student, even though I'm a Physical Therapist by background, but I could hear my own thoughts being resonated when you guys were talking about what it's like to actually apply theory to practice in real time in your placements.

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So I just want to mention, I think it really resonates to all clinicians as we are thinking about applying to theory to practice. So whether you are a student in a discipline, whether you are transitioning to a new area of practice or just looking at new frameworks or new ideas. So I think that was really helpful. So I'm interested, maybe Emma, if you want to start, what has your experience as an OT student taught you about bridging theory and practice?

Emma Pederson: Yeah, so when we actually started writing this article, it was right after our first placement, and my first one was in an acute hospital setting. So very fast-paced, a lot going on, especially for my first placement. So, writing this, obviously we just had this theory class too, learning about all these theories, and I was on placement thinking about where is that gap, you know? The theories that we learned in class weren't really being seen on placement. I wasn't really seeing those concepts that we learned just because everything was so fast-paced, high energy.

And with placements over time, I was starting to notice that gap being bridged a bit with different preceptors and different experiences. So in more of a slow-paced setting like home health or outpatient, I did have preceptors actually sit down with me and go through the different models and theories and apply it to different patients and clients that we were seeing. And it was really helpful to have that overall big picture before going into a session with a client and being able to apply those different concepts.

Heather Branscombe: Yeah, that's awesome. What was your experience, Sophia?

Sophia Choinicki: Yeah, similar to Emma's. So my first placement was in home health, so it was slower-paced, but I guess in home health I had to ask my preceptor what theories are you using? Are you using any theories? It wasn't necessarily talked about in conversation, I guess. I had to get it out of my preceptor. And it was a lot of the Person-Environment-Occupation theory, which we really didn't talk a lot about in school. We were more talking about the newer theories.

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And so it was also a theory we didn't really, was briefly mentioned. And then again, when I went to acute rehab, which was also quite fast-paced. For myself, I was noticing our initial assessment form was laid out how the theories are and what you want to look for. But again, it wasn't explicitly talked about.

And then in my mental health placement, my preceptor did a really good job of bringing theory and frameworks in and sitting down with me. And we went through all the frameworks together and would be, you're entering the relationship with your client, and then you're going to go to this stage, this stage, this stage. And then as well, she brought in all these other mental health theories too to help bridge the gap.

But I feel now that we're on our fifth placement, it was really placement dependent on if theory's brought up, who your preceptor is, if they want to talk about theory. But I feel like Emma said, when we first started writing the article, when we first went on placement, we were, nothing we just learned for the last four months is being talked about actually in practice.

Heather Branscombe: That's what I resonated with because I remember being a student and then going to my first practice and being, this sounds so much easier in school. And then now, some of the things that we would talk about of pain and how much you pushed or didn't push in pain, really didn't show up in that same way in a fast-paced acute clinical environment as well. So I'm interested, it sounds like you've been really thinking about this, how you use framework and practice as you go to different practices and you're both on your last clinical placement about to graduate very soon. How do you see yourself using theory frameworks in practice moving forward?

Emma Pederson: I think for myself, and we also talked about it in the article a bit, is that reflection is key, I think. Self-reflection, ongoing reflection during practice. Especially after a session maybe you'll have with a client is really important. Also for myself, we also talked about it in the article too, using tools like reflective journaling or guided questions just to integrate that theory from all the models.



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Sophia Choinicki: Yeah, and for myself, one thing that my mental health placement that she did, she actually had the frameworks, they were made really pretty, they were printed out really nicely, and she actually had them in her office on a little bulletin board. So when we were chatting about different situations, she'd just pull it down and she'd be, okay, this is where we are with the client right now. This is where we're headed. And I just liked that it was there and she could see it and she could take it off the wall and we could chat about it together.

So even in the future, I'm thinking if I take a student one day, knowing how I felt as a student and seeing how helpful that was for me, that's something that I would like to do for when I have a student. And then even for myself just being, oh, okay, this is the framework or theory that is guiding me right now and this is where I am. And just seeing it visually was also really helpful. And same as Emma, even in school, we do have to do reflections during placement, and I think that's been helpful for me. So it's something I think I want to continue when I'm a practitioner, just remembering even a weekly little journal about just a reflection on the week, I think.

Heather Branscombe: Yeah, and that's what I was really interested in and why I thought this was something to talk about on this podcast because this podcast is all about using tools of mindfulness to help us to increase our impact again, both personally and professionally. And so that was my takeaway looking at that, that frameworks are really an opportunity to have thinking tools and to help to organize and to be mindful of how you show up in practice and what you want to do.

And then, so that's what it sounds like you were saying, Sophia, of how do I want to show up? What is driving that session? And then I hear from you, Emma, of then after that session, how did it go? How did that go for me? How do I think it went for the client? And using some of those. Again, you use those tools as well with some other, whether that's general mindfulness, guided questions, whatever works for you to help you to be thoughtful about how you're showing up. Again, for yourself and for your clients. That's amazing.

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And again, one of the things that you guys, we've been in conversation just for the listeners. One of the things that you guys wrote that I thought was really great was you talked about in the end theory is there to support, not complicate our work. I love that. And with practice, it becomes more intuitive. The key is giving yourself grace, staying curious and making time for reflection.

Even the more seasoned clinicians that may not have the laminated frameworks on there. They it might be burned in their brain. It may be an older theory or framework as you were mentioning, but knowing, that thought of giving yourself grace, staying curious and making time for reflection, I think is really important.

So, what nugget of piece of advice - you are clinicians, here you are. You are about to start. I like to think that we are clinicians are born as soon as you start your professional thing and you're in this place of solidifying your identity as a clinician and as you go. But saying that, what nugget of information do you want your fellow clinicians to walk away with?

Emma Pederson: Yeah, I think the main nugget of information is that theory doesn't have to be perfect to be useful. Like you were mentioning before, Heather. Even when it's not discussed with your preceptor in practice, it's often shaping all your decisions you're making in healthcare. And also, I think as students, the main thing is to stay curious and be open and reflective.

Heather Branscombe: Amazing. Sophia, is there anything else you want to add?

Sophia Choinicki: Yeah, I would say advice for students is to when you go into that first placement, I know it's super overwhelming. There's a lot going on and theory might not come up. But again, it's okay to ask your preceptor, are you using a framework right now? Are you using a theory? Because again, it might be intuitive to them. It might not come up, but ask because most likely they are using something and they will tell you and explain it to you, but you might have to ask.

So again, being curious, don't be scared to ask those questions. And then again, for clinicians who are taking on students, I would say to be mindful that we are



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learning so much theory in school and when we're coming in, I think for me and Emma, it just would have been nice if what we learned in school is also being talked about on placement.

Heather Branscombe: Right, to help to build that bridge.

Emma Pederson: Yes. Exactly.

Heather Branscombe: The article and the title of your article, which is supporting a fusion of theory and practice, reflections during fieldwork. I'm going to link that so people can take that and Google it, but it will also be linked in our show notes. If there are clinicians that want to connect with you in the future, what's the best way for them to connect with you?

Emma Pederson: I think for both of us, we will have our LinkedIn posted on your website and along with our emails too.

Heather Branscombe: Yes. Okay.

Sophia Choinicki: I'm totally open to LinkedIn messages or email. Anything, yeah, is fine.

Emma Pederson: Honestly anything.

Heather Branscombe: Amazing. Or you could contact me because I've stalked them as well, so in the most professional way, so I'm more than happy to keep you in touch. All right. Well, again, thank you both for taking the time and good luck on the rest of your professional career.

Emma Pederson: Thank you.

Sophia Choinicki: Thank you.

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Thank you so much for listening to this episode today. Because you've already got here, I think that you might be interested in this, and you may already know

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this, but this podcast is actually a passion project of mine because I really want all clinicians the ability to use this kind of toolset and tips as a way to magnify their impact, even if they never either work with us or alongside us at Abilities.

I consider myself so lucky to be able to do this and to share this as part of my workweek. This really is part of the fun of my work. And you can help me to make this more meaningful by helping to spread the message to other clinicians just like you.

So let's work together and make that happen, shall we? You can do that in a couple of ways. One, you can follow, rate, and review this podcast to help feed the algorithm so when a clinician just like you is searching for something just like this, this podcast will come up.

And second, if you can share this podcast, or even better, a favorite episode with a colleague, that would be amazing. Now, if you've heard this before and you've meant to do it, and maybe you haven't even done it yet, I say this all the time, it really is okay. But let this be the sign. Today is the day that you can help other clinicians just like you.

Now, if this was your first episode, thank you so much for listening, and hopefully, as you listen more, you can decide who of your clinical friends would love to hear more of this kind of information to help them at work as well.

Thank you so much in advance for your action here and I hope you have an amazing day. Talk to you soon.

Thanks for joining me this week on the *Clinicians Creating Impact* podcast. Want to learn more about the work I'm doing with Abilities Rehabilitation? Head on over to [abilitiesrehabilitation.com](http://abilitiesrehabilitation.com). See you next week.