

OT Frames of Reference Cheat Sheet

15 frames of reference at a glance: core idea, key names, who they are used with, typical assessments and interventions.

Page 2 covers the 6 main OT models.

Frame	Key names	Core idea	Used for	Assessments	Interventions
Biomechanical	Kinesiology and orthopaedic roots	Movement depends on range of motion, strength and endurance	Hand injuries, fractures, burns, arthritis, positioning in CP	Goniometry, manual muscle testing, dynamometer	Graded exercise and activity, splinting, positioning
Rehabilitative	Physical medicine roots	Compensate when a limitation can't be fixed	Spinal cord injury, chronic or progressive conditions, older adults	ADL assessment, Barthel Index, FIM, home assessment	Adaptive equipment, new techniques, home modification
Developmental	Llorens; Mosey	Skills develop in a sequence; work from the current level upwards	Children with developmental delay; Mosey's adaptive skills in adults	Developmental scales, e.g. Peabody, Bayley	Activities just above the current developmental level
MOHO	Kielhofner and Burke (1980)	Motivation, habits, roles and capacity interact with the environment	Mental health, chronic illness, return to work	OPHI-II, MOHOST, OSA, Interest Checklist	Meaningful occupation, role and routine building
Psychodynamic	Freud; Fidler; Azima	Unconscious feelings show through activity and relationships	Mental health	Projective tests, e.g. Azima Battery	Creative and expressive activities, task groups
Behavioural	Pavlov; Skinner	Behaviour is learned and changed by its consequences	Learning disability, autism, habit change	Behavioural observation and recording	Reinforcement, shaping, chaining
Cognitive-behavioural	Beck; Ellis	Thoughts, feelings and behaviour influence each other	Anxiety, depression, chronic pain	Thought and activity diaries, COPM	Activity scheduling, graded exposure, problem solving
Cognitive disability (Allen)	Claudia Allen (1985)	Function depends on cognitive level	Dementia, serious mental illness, brain injury	Allen Cognitive Level Screen, Routine Task Inventory	Adapting tasks and environment to the person's level
Neurodevelopmental (NDT)	Bobath; Rood; Brunnstrom; PNF	Normalise tone and facilitate typical movement patterns	Cerebral palsy, stroke	Movement and postural analysis	Handling, facilitation, positioning
Motor learning / motor control	Fitts and Posner; Schmidt	Skills are learned through practice, feedback and task variation	Stroke, DCD, brain injury, sport injury	Task performance observation, timed tasks	Task-oriented practice, CO-OP, feedback schedules
Sensory integration	A. Jean Ayres	The brain organises sensation to produce adaptive responses	Sensory processing difficulties, autism	SIPT, EASI, Sensory Profile 2	Play-based, sensory-rich activities
Acquisitional	Mosey; Royeen and Duncan	Specific skills are learned through practice and reinforcement	Self-care, handwriting, life skills	Skill checklists, task analysis	Task analysis, chaining, repetition with feedback
Spatiotemporal adaptation	Gilfoyle, Grady and Moore	Development spirals as earlier patterns are adapted into new ones	Children with motor difficulties	Movement observation	Activities that build on earlier movement patterns
Occupational adaptation	Schkade and Schultz (1992)	People adapt to occupational challenges; therapy builds the adaptive process	Adults after illness or injury	Relative mastery (efficiency, effectiveness, satisfaction)	Occupational readiness and activity with self-evaluation
Visual perceptual	Warren; Todd	Perceptual skills can be developed or compensated for	Learning difficulties, brain injury	TVPS-4, Beery VMI	Perceptual activities, environmental adaptation

Mosey's 5 parts of a frame of reference

1. Theoretical base
2. Function–dysfunction continua
3. Behaviours indicative of function and dysfunction
4. Postulates regarding change
5. Postulates regarding intervention

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OT Models of Practice

Models are broad lenses for every client; frames of reference guide assessment and intervention for a specific problem. Most OTs pick one model and add frames as needed.

Model	Developed by	Key focus	Remember
MOHO	Kielhofner and Burke (1980)	Volition, habituation, performance capacity and environment	A large family of assessments
PEO	Law and colleagues (1996)	Performance comes from the fit between person, environment and occupation	Simple Venn diagram; any setting
CMOP-E	Canadian Association of OTs (Townsend and Polatajko, 2007)	Spirituality at the core; engagement as well as performance	Pairs with the COPM
PEOP	Christiansen and Baum	Person and environment factors support occupation, performance and wellbeing	Population and community practice
Ecology of Human Performance (EHP)	Dunn, Brown and McGuigan (1994)	Context shapes performance	5 intervention types: establish/restore, alter, adapt, prevent, create
Kawa	Michael Iwama (2006)	Life as a river: water, riverbed, rocks, driftwood and spaces	Culturally responsive, drawn by the client

Which frames for which setting

Setting	Frames and models often used
Pediatrics and schools	Developmental, sensory integration, biomechanical (positioning), NDT, motor learning, acquisitional, visual perceptual
Stroke and neurological rehab	Motor learning and task-oriented, NDT, biomechanical, rehabilitative, cognitive
Orthopaedics and hand therapy	Biomechanical, rehabilitative
Mental health	MOHO, psychodynamic, cognitive-behavioural, Allen, occupational adaptation
Older adults and dementia	Allen cognitive levels, rehabilitative, PEO, MOHO
Community and population health	PEOP, EHP, Kawa, CMOP-E

Exam clues

If the question mentions...	Think...
Range of motion, strength, endurance, splinting	Biomechanical
Permanent limitation, adaptive equipment, energy conservation	Rehabilitative
Volition, habituation, roles, OPHI-II, MOHOST	MOHO
Projective media, defence mechanisms, task groups	Psychodynamic
Reinforcement, chaining, token economy	Behavioural
Cognitive levels 1–6, ACLS, task simplification	Allen cognitive disability
Handling, key points of control, tone	NDT
Practice schedules, KR/KP feedback, CO-OP	Motor learning
Vestibular, proprioceptive, adaptive response, Ayres	Sensory integration
Relative mastery, press for mastery	Occupational adaptation
Rocks, driftwood, river	Kawa model
Spirituality at the core, COPM	CMOP-E
Establish, alter, adapt, prevent, create	EHP

Full guides with examples and quizzes: occupationaltherapyot.com/occupational-therapy-frames-of-reference/

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