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SOTOF Role Play with a person with a stroke

Role play: notes for person role playing the therapist

MRS HARRIS

Referral information:

Mrs. Harris is a 71-year-old lady. She was admitted to hospital after experiencing a CVA. She was referred to occupational therapy on admission for an ADL assessment and a cognitive and perceptual assessment. She is a retired school dinner-lady and lives with her 69-year-old husband in a three bedroom terraced house.

Following an initial interview, you decide to administer the Structured Observational Test of Function (SOTOF)

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SOTOF Workshop Role-play: notes for person role-playing patient

by Alison Laver-Fawcett

MRS HARRIS

Background to case:

Mrs. Geraldine Ivy Harris is a 71-year-old lady. She was admitted to hospital after experiencing a CVA. She was referred to occupational therapy on admission for an ADL assessment and a cognitive and perceptual assessment. She is a retired school dinner-lady and lives with her 69-year-old husband in a three bedroom terraced house.

According to Mrs Harris' medical notes, on admission she has some left sided weakness, flaccidity and clumsy movements. She also has mild dysarthria and a left visual field deficit. Eye movements are normal. Tactile, proprioceptive and pain sensation are normal. She is orientated for time and place.

Mrs Harris is compliant and motivated to answer questions and attempt assessment tasks. She is a bit nervous initially but overall, as she lacks some insight and judgement.

When role-playing this woman exhibit the following deficits on the SOTOF:

Note: You will probably find it easiest to look at these instructions before each sub-test, rather than trying to remember the role-play for the whole test. You may have these notes in front of you if necessary (e.g., on your lap so you can glance down) but DO NOT let the therapist or observers see your instructions!

Do all the SOTOF test items as requested EXCEPT:

Screening test:

- > Be orientated for person, but slow to give name and have difficulty articulating words
- Be slow to name object
- Do not copy movement with left arm the first time asked, just copy with your right arm because of left visual field loss and unilateral neglect
- > Be slow to copy movement with left arm if prompted to try with left arm
- Struggle to copy movement with left arm because of weakness on left side and some flaccidity in left arm
- Pick up cup in right hand first, do not pass to the left hand until prompted to do so
- If asked to hold cup in left hand, have clumsy manipulation of cup in left
- If asked: your dominant hand is RIGHT



Mrs Harris role-play

Task 1: Eating

- Throughout the task be slow to name and describe use of objects and name colours, and have difficulty articulating words
- > Do not attempt to use left hand to identify object through touch until prompted.
- > Only scan from midline to right of table and only name objects in the centre and right-side visual fields
- Have difficulty judging the distance to spoon and hesitancy putting spoon in the bowl
- > Reach for and use spoon with RIGHT hand
- Leave some food on left side of bowl
- If asked if you have finished say 'Yes'
- > If asked if any food is left in the bowl say 'No'
- > If prompted to turn head and see that food is remaining on left side of bowl seem surprised and then eat remaining food
- When asked to put spoon on left of the bowl, hesitate and then put on the right side of the bowl – seem uncertain whether this is correct
- Hesitate with rest of spatial positioning tasks

Task 2: Washing hands

As before

- Throughout the task be slow to name and describe use of objects and name colours, and have difficulty articulating words
- > Do not attempt to use left hand to identify object through touch until prompted.

Specific to this task

- Only scan from midline to right of table and only name objects in the centre and right-side visual fields i.e., IGNORE the towel placed to the left of the bowl. If prompted and your attention is brought to the towel seem surprised it is there.
- Have difficulty judging distance to soap
- > Reach for and use soap with RIGHT hand
- For miming, demonstration and actual performance: do not wash (soap nor rinse) left hand unless prompted to do so
- ➤ If prompted to wash left hand, have clumsy manipulation of soap between both hands, let soap slip out
- > After washing hands leave hands wet, do not reach for towel
- If prompted to dry hands scan to right side and then ask for a towel
- > Only reach for the towel on the left if you are prompted that it is there
- > Do not dry left hand unless prompted to do so
- When asked to put soap on left of the bowl, hesitate and then put on the right side of the bowl – seem uncertain whether this is correct
- > Hesitate with rest of spatial positioning tasks



Task 3: Pouring and drinking

As before

- Throughout the task be slow to name and describe use of objects and name colours, and have difficulty articulating words
- > Do not attempt to use left hand to identify object through touch until prompted

Specific to this task

- When asked to put the cup to the left of the jug, place it in-front of the
- ➤ Have difficulty judging distance to pick up jug and cup
- > Pour jug and reach for cup with RIGHT hand, i.e., place cup with right hand, then pick up jug with right hand and pour - do not stabilize cup with left hand
- ➤ Have difficulty judging distance when pouring, have problems lining up jug over cup – if you have actual water in the jug spill a little
- > Hesitate with rest spatial positioning tasks and then reverse in front and behind – get these items wrong this time

Task 4: Dressing

As before

- Throughout the task be slow to name and describe use of objects and name colours, and have difficulty articulating words
- > Does not attempt to use left hand to identify object by touch until prompted

Specific to this task

- When asked to put button to left of garment put in ON the garment
- Use right arm / hand to reach for, pick up and try to organise garment
- Have problems orientating the garment for dressing have the jacket / cardigan turned the wrong way – i.e., front to back
- If prompted, claim it does not matter if clothes are turned inside out or incorrectly front to back and be slow to re-orientate garment correctly if prompted
- > Have problems finding correct holes on jacket / cardigan, at first attempt try to put right arm through neck-hole
- Place right arm through left sleeve
- Do not dress left arm until prompted to do so
- > Once prompted to dress left arm move slowly and struggle owing to weakness and flaccidity
- Once prompted to dress left side, use both arms but have poor bilateral co-ordination
- > Do not pull jacket / cardigan down fully on left side
- > Get jacket / cardigan stuck over left shoulder
- Misjudge distances when holding jacket / cardigan for fastening buttons
- Have clumsy movements bilaterally when manipulating fastenings



SOTOF Workshop Role-play: notes for scoring Deficits

MRS HARRIS

Deficits exhibited by Mrs Harris role-play:

At the end of the role-play, once the therapists have finished scoring, check that the following deficits were identified and recorded on the Neuropsychological checklist:

Screening test

- ✓ Language: expression dysarthria
- ✓ Motor: Abnormal tone flaccidity
- ✓ Motor: Fine motor co-ordination / dexterity
- √ Vision: possible left visual field loss
- ✓ Body scheme: possible unilateral neglect of left side

Task 1: Eating

- ✓ Language: expression dysarthria
- ✓ Motor: Abnormal tone flaccidity
- ✓ Motor: Fine motor co-ordination / dexterity
- ✓ Vision: possible visual scanning
- ✓ Vision: visual field loss
- ✓ Vision: neglect
- ✓ Body scheme: possible unilateral neglect of left side
- ✓ Body scheme: *possible* right / left discrimination
- ✓ Spatial relations: possible position in space
- ✓ Spatial relations: *possible* distance perception

Task 2: Washing

- ✓ Language: expression dysarthria
- ✓ Motor: bilateral integration
- ✓ Motor: fine motor co-ordination / dexterity
- ✓ Vision: confirmed visual scanning
- ✓ Vision: visual field loss
- ✓ Vision: neglect
- ✓ Body scheme: confirmed unilateral neglect of left side
- ✓ Body scheme: possible right / left discrimination (but less likely as can put items to right side on command and has left visual field loss and neglect)
- ✓ Spatial relations: likely position in space
- ✓ Spatial relations: *likely* distance perception



Role-play: notes for scoring Deficits

MRS HARRIS

Task 3: Pouring and Drinking

- ✓ Language: expression dysarthria
- ✓ Motor: bilateral integration
- ✓ Vision: visual scanning
- ✓ Body scheme: unilateral neglect of left side ✓ Spatial relations: confirmed position in space
- ✓ Spatial relations: spatial relations
- ✓ Spatial relations: *confirmed* distance perception

Task 4: Dressing

- ✓ Language: expression dysarthria
- ✓ Motor: Abnormal tone flaccidity and decreased strength
- ✓ Motor: Fine motor co-ordination / dexterity
- ✓ Motor: bilateral integration
- ✓ Apraxia: dressing apraxia
- ✓ Body scheme: confirmed unilateral neglect of left side
- ✓ Body scheme: possible right / left discrimination (but less likely as can put items to right side on command and has left visual field loss and neglect)