

OT OuTdoors

Occupational Therapy and Physical Therapy Services



"...because life doesn't happen in a clinic"

Volunteer Manual

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WHAT TO WEAR/BRING

1. Sturdy, comfortable, close-toed, shoes for safety and protection.
2. Please bring a cell phone that can be worn on your person at all times in case an emergency arises.
3. Clothes that are comfortable, appropriate, and suited to the weather.
4. Dress Code: Do not wear clothes that may flap about in the wind and frighten horse*
* No short shorts * no mid drifts * minimal jewelry* no holes in t-shirts, appropriate logos
* no visible undergarments * tanks must cover bra straps *no boxers visible* large tattoos must be covered
5. Keep extras handy for the unexpected (i.e. raincoat, jacket, suntan lotion, hat, etc.).
6. A watch will be helpful in keeping the program on schedule.
7. You may wish to bring a cool drink to sip when treatment sessions are finished and lunch depending on your shift.

REQUIREMENTS OF A VOLUNTEER

1. **RELIABILITY** - Regular attendance is an absolute must. If you cannot attend on a particular day, it is up to you to find a substitute for your shift and notify OT OuTdoors of the schedule change at least a day in advance, when possible.
2. **PUNCTUALITY** – Be on time. Late arrival can be frustrating to the clients and other volunteers who must wait for you.
3. **PHYSICAL FITNESS** - You must be able to walk for most of three hours, to assist clients while side-walking or to lead the horse, and have some strength in the arms.
4. **RELAXATION AND ENJOYMENT** – Come with a relaxed and positive attitude, an anxious person can make a client and/or horse tense.
5. **ALERTNESS AND ANTICIPATION** -You must always anticipate the unexpected emergency.
6. **LISTENING ABILITY** - You must be prepared to listen and accept directions from the therapist at all times. Talking during sessions must be kept to a minimum as it is distracting to our clients.
7. **RESPONSIBILITY** - The horse is the responsibility of the leader. The client is the responsibility of the side-walker. Both leader, and sidewalker are to follow the directions of the therapist.
8. **PATIENCE** – is an important skill to have when working with a team, especially when working with individuals with special needs.

REQUIREMENTS OF VOLUNTEER (continued)

9. HORSE KNOWLEDGE - Knowledge of horses is an advantage, but many volunteers have little previous experience with horses. OT OuTdoors is committed to teaching volunteers about horses as part of the entire program.

10. **SAFETY**- is our first priority, both client safety and your safety. Use good judgement and common sense when working with horses. If you have any questions please ask

SCHEDULING

1. Volunteers should be able to attend on the same treatment session day of every week to provide continuity and consistency with clients.

2. We ASSUME that each volunteer will be available on his/her weekly treatment session day, unless the volunteer calls to notify OT OuTdoors of any "unavailable" dates. This is ABSOLUTELY NECESSARY FOR TREATMENT SESSION PLANNING, and is very much appreciated.

3. Regular attendance is an absolute must. If you plan to take your regular day off eg.(vacation, doctor's app.) please arrange a substitute and let us know who will be covering your shift. least a day in advance, when possible.

GROOMING

Grooming is the daily attention necessary to the coat and feet of the horse. The skin is a vital organ, and grooming is as essential to a horse's good health as it is to his appearance to live. Grooming will occur before the first session and after the last session and in between sessions when needed.

Grooming Equipment

1. Hoof pick
2. Curry or metal shedder: for mud or shedding hair, not to be used on sensitive areas, like bone or face
3. Body brush
4. Dandy brush
5. Sponge: eyes, nose, mouth
6. Fly Spray: spray horses body and legs. For the horses face spray some in your hand and gently rub your hand around the outside of the horses eyes, forehead and ears. Do NOT spray the horses face.

RULES AND TIPS OF GROOMING

1. No more than one person should groom the horse at a time.
2. Make it pleasant. Grooming is the start of the horse's work day.
3. Work efficiently, but not in a hurried, frenzied manner that may start the horse's day in a fidgety or unsure mood.
4. Work as close to the horse as possible. This gives him a sense of security.
5. Make a mental note of the horse's physical and mental condition. Report any injuries, etc. to the therapist.
6. Never hesitate to ask questions if you are unsure about how to do something, or about an observation you have made.

ORGANIZATION OF TREATMENT SESSIONS

- A. Horses need to be in the “cross ties” 30 minutes before the treatment session. All horses are to be groomed, tacked and ready 5 minutes before the treatment session starts. No more than one person should work around the horse at the same time.
- B. Leaders are responsible for bringing horses to the mounting area, and lining them up according to the mounting order.
- C. Before approaching a mounting ramp, check the following:
 - 1. saddle is far enough forward
 - 2. girth is tight
 - 3. stirrups are run down and of equal length
 - 4. lead rope is properly secured to HALTER
 - 5. reins are attached to bit or halter, as appropriate for each client
 - 6. horse appears comfortable, if horse appears uncomfortable or agitated, do not bring to mounting area
 - 7. when the client is mounted, follow the therapist's directions for your next move

LEADING HORSE TO MOUNTING RAMP AND MOUNTING

- a. A leader and one sidewalker are necessary.
- b. Before approaching the mounting ramp, again check to see that the girth is tight, stirrups are down, and the horse is comfortable.
- c. The leader is to stand directly in front of the horse and keep her head straight in front of her body (if you turn the head toward the ramp, the horse will swing his hind quarters away from the ramp). The leader may need to place one hand on each side of the halter to keep the horse's head straight.
- d. The sidewalker is to walk on the off side (right side) of the horse with a hand gently on the horse's side to encourage him to stay straight. If you lean on the horse, the horse will lean toward you, thereby moving away from the ramp.
- e. Proceed slowly, one step at a time, and HALT. Use voice commands: "Walk On" and "Whoa" until you reach the desired spot. This method teaches obedience and gives the horse less chance to swing away from the ramp as she approaches the far end.
- f. THIS METHOD WORKS: We must all learn to communicate properly and consistently with our horses. Reward them when they have approached the ramp correctly. They want to please us, but they must understand what it is we are asking.
- g. Unless otherwise requested, ONLY THE THERAPIST is to mount clients.

h. Never leave the mounting ramp until the Therapist asks you to "Walk On"

i. During the mounting procedure, THE LEADER IS RESPONSIBLE SOLELY FOR THE HORSE, and should not assist the client in any manner. A quiet, controlled horse during mounting is imperative for safety. Try to keep the horse's head still, without holding so tightly as to frustrate the horse.

j. During the mounting procedure, the SIDEWALKER IS RESPONSIBLE FOR ASSISTING THE CLIENT IN WHATEVER MANNER THE THERAPIST ASKS. Some clients need no help getting on, but safety requires a person be standing on-the off side of the horse to anticipate and to assist with any problems.

Note:

When entering or leaving the arena, the gate is to be opened and closed by someone other than the leader, the therapist will determine which sidewalker will open the gate.

When the session is nearing the end you will be instructed to lead the horse to a designated area for the client to dismount. This may be at the mounting ramp or in the tacking up area.

After the treatment session the horse is to be taken back for grooming and treatment. No more than one person should work around a horse at one time. Follow basic grooming routine.

LEADING THE HORSE DURING TREATMENT SESSIONS

1. THE LEADER IS RESPONSIBLE SOLELY FOR THE **HORSE**. While the leader may be interested in what the client is doing, he/she MAY NOT FOR ONE SECOND take his/her mind off of what the horse is doing, or anticipating what the horse may do next. It is when a horse appears sleepy, relaxed, and/or bored that he will startle most easily. Take note of the environment, and anticipate any problems (i.e. loose paper, dogs, tractors, etc.). A horse that startles will throw his head up suddenly, and unbalance the client.
2. The horse should walk next to the leader with the leader's hand just under or behind his chin. If he does not stay next to you, use an encouraging leading rein, and continue to say "Walk On" in a kind asking tone. Do not drag the horse behind you. The horse will follow your body language. Walk with a purpose, upright posture and an assertive pace.
3. Hold your right hand on the lead rope just under or behind the horse's chin. Hold the extra lead in your left hand. NEVER wind the lead rein around your hand or fingers.
4. Always look where you are going and plan ahead. There should always be at least two horse lengths between you and the next horse for safety. Anyone needing to halt for safety and adjustments may do so, but must communicate the need to the therapist and then take the horse off the rail to make room for other horses.
5. Do not turn and face a horse who will not walk on, as this will encourage him to slow down and/or halt. Always lead facing forward.
6. When leading, try to make wide, rounded corners. It is difficult for most clients to maintain

balance on sharp turns. If you must turn sharply, warn the client first.

7. When leading, use "Walk On" in a kind, asking tone. Use "Whoa" in a definite tone of voice. Some clients will give voice commands clearly and loudly enough so that the horse will hear. In this case, the leader need not give any commands.
8. When the horse is halted, the leader should stand directly in front of the horse, facing the horse and the client. Though you may be interested in what the client is doing, remember that you are in charge of the horse!! Stay alert at all times.
9. The leader must listen to the therapist at all times. Unless otherwise instructed, never "Walk On" or halt until you hear the client or therapist give the command in whatever manner he/she can.
10. NEVER LET GO OF A HORSE on which there is a client. The safety of the client comes first.
11. Unless otherwise instructed, always lead from the near side (left side) of the horse.
12. The lead line should never lie on top of the client's reins. This might interfere with the client's use of the reins, it could cause the horse to feel pressure on that rein and turn them accidentally.
13. Remember to always leave space for the side-walkers especially when walking next to a fence and through gates.
14. NEVER CHAT WITH CLIENTS OR SIDEWALKERS DURING INSTRUCTION.
This is distracting to all, and takes your attention off of the horse.
15. Never reprimand or school a horse when a client is riding. Should a horse bite you or attempt to bite you remain calm and carry on.

SIDEWALKING DURING TREATMENT SESSIONS

1. THE SIDEWALKER IS RESPONSIBLE SOLELY FOR THE CLIENT.
2. The degree of difficulty a client has in maintaining balance will determine whether the client has one or two sidewalkers.
3. The job of the sidewalker is to assist the client in maintaining balance and assist therapist as needed.
4. The therapist will inform you of the requirements of your particular client. Listen carefully and follow all instructions, as the sidewalker is a very crucial part of therapy and ensuring the client's safety.
5. A client may not have to be assisted in balancing at all times, but may need a sidewalker in case of an emergency. Stay alert.
6. If asked to move any part of the client move slowly, some client's will be easily unbalanced by

a sudden or unexpected movement.

7. When sidewalking, position yourself close to the horse's side. The horse (and client) will feel more comfortable and relaxed to have you, next to them, rather than an arm's length away.



8. As a general rule, a forearm across the client's thigh gives a great deal of stability and confidence, while allowing the client to develop balance. Remember, the therapist will tell you how to assist the client.

9. The therapist has good reasons for her instructions. If you do not understand why you are assisting in a certain way, please ask.

10. If you feel that your client needs to halt for safety's sake, please tell the therapist.

PUTTING THE HORSE AWAY FINAL CHECK

1. The horse should be cool to the touch (feel chest), and be dry.

2. The horse should be well groomed.

3. The horse should walk quietly next to you on the way back to his pen or pasture. If he is anxious and pulling you along, say "Whoa" and give a slight tug on the lead rope.

4. The LEADER should enter through the gate first, with the horse slightly behind. DO NOT allow the horse to charge through the gate. Once in the stall, turn the horse's head toward the gate and remove the halter.

5. Close the gate, and hang the halter in the tack shed.

EMERGENCIES

1. Falls are very rare, but can and do happen. THE THERAPIST WILL TAKE CARE OF THE CLIENT.

2. As a leader, if a rider falls, your only concern is with the horse you are leading. Lead your horse in the same direction you are traveling. Lead them forward do not turn the horse. Never let go of your horse. A loose horse can cause a chain reaction of problems.

3. As a sidewalker, you may need to assist the client off the horse should the client fall toward you. The sidewalker wraps his arms around the clients waist, an asks the rider to clear his feet from the stirrup. The second sidewalker should help with the stirrups. The leader, speaks calmly to the horse.
4. Do not panic if there is a fall. STAY CALM. The therapist is trained to handle the situation.
5. As a sidewalker, speak calmly to your client in any emergency. As the leader, speak calmly to your horse.
6. If the horse becomes excited and the rider is handling the situation, sidewalkers should place an arm over the rider's thigh to further secure the rider.
7. If a horse should get loose in the ring, every leader should stop and stand in front of his horse.
8. In case of injury to a fallen rider, the therapist may ask all other riders to leave the ring quietly or to move to one end of the arena placing one person in charge.
10. The therapist may ask a sidewalker to call 911. It is imperative that you have your cell phone on your person should you need to call 911. Contact information, address, directions and phone number are posted in the shed on the red piece of paper.

HORSE BEHAVIOR

An abdominal pain or digestive disturbance. There are varying degrees of severity ranging from temporary upset to death. The causes include parasites, moldy hay or feed, improper watering practices insufficient water intake and a twist in the intestine, symptoms of colic include: Increased heart rate, increased body temperature, sweating, pawing, rolling, biting or kicking belly, disturbance in eating and drinking patterns, and failure to defecate normally. Colic is an Emergency, call your vet immediately.

HORSE PSYCHOLOGY AND BEHAVIOR

HORSE COMMUNICATION

Horses constantly engage in communicative behavior. Observe your horse constantly and know what is normal behavior for that horse. The following are some general examples of horse communication.

A. Ears:

1. Laid flat back (pinned back)
 - a. the horse is unhappy, frightened, uncomfortable and/or feeling threatened.
2. Forward
 - a. the head may come up and the body tenses
 - b. the horse is "looking hard" at something and his attention has been diverted from the task at hand
 - c. the horse may be getting ready to spook
3. Moving forward/backward independently
 - a. the horse is tuned in, listening to the handler, and attentive to his task
4. Flat out to the sides with little movement
 - a. the horse is not paying attention and could startle easily
5. One forward/one backward with tense body
 - a. the horse is confused and/or anxious about what is happening to him or around him

B. Tail:

1. Swishing
 - a. Unless the horse is swatting flies, excessive swishing of the tail is an indicator that the horse is experiencing discomfort or stress.
 - b. may occur during patient transfers or weight shifts
 - c. may occur when a horse is not feeling well or burned out
2. Clamped down
 - a. the horse feels threatened and the fright/flight response may be imminent
3. Lifted
 - a. the horse is preparing to defecate; mares may possibly be in season which may mean they are not paying attention
4. Held consistently off center
 - a. may indicate spinal discomfort or misalignment

C. Eyes:

Horses eyes can be read much like the human eye, and it is desirable for the horse professional and the therapy staff to know what is a typical "working eye" for any given horse.

1. Desirable eye
 - a. horse is attentive, calm and relaxed
2. Wild eye
 - a. the horse is frightened and not tuned into the therapy session
3. Half shut
 - a. the horse is "switched off" and not paying attention

D. Breathing:

Noticeable changes in respiration and generally caused by stress.

1. Flaring nostrils - accompanied by snorting
2. Tense/ridgid body - fear, alarm, impending flight

Basic Handling and Safety

Have the halter and lead in hand before opening the stall door, then open slowly and partially, leaving enough room for you to fit through.

Never wrap the lead rope, halter shank, or reins around your hand, wrist, or body.

When approaching a horse in the pasture or stall, speak quietly to alert him of your presence. Horses respond best to slow, deliberate movements and a calm voice.

Try to have the horse facing you before opening the stall door.

Approach the horse slightly to one side. Approaching the horse directly in front is more threatening and may not allow the horse time to see you.

Never approach a horse from behind. IF you need to walk around the back of a horse keep a hand on the horse's rump to let them know you are there.

Never run up to a horse, take precautions with bags, water bottles, quick movements and unexpected things that can spook a horse.

Secure the horse with halter and lead line while in the stall.

Close the stall door behind you.

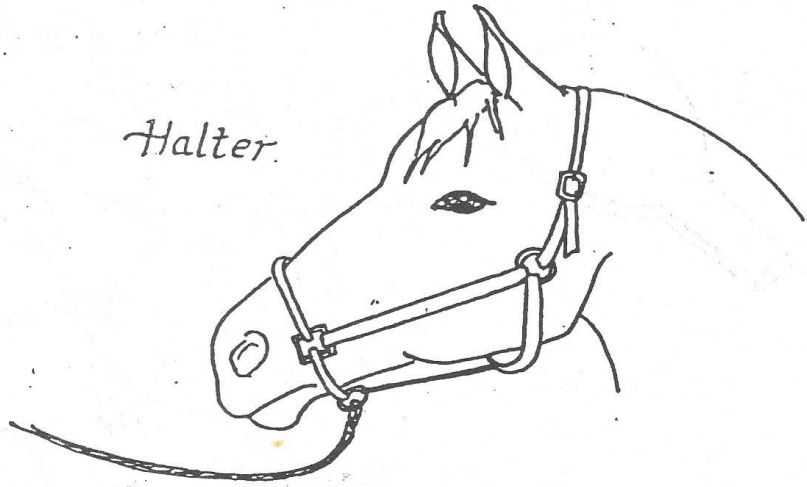
Look both ways before taking the horse from the stall to aisle.

Should a horse bite you remain calm. Never reprimand a horse when there is a client riding.

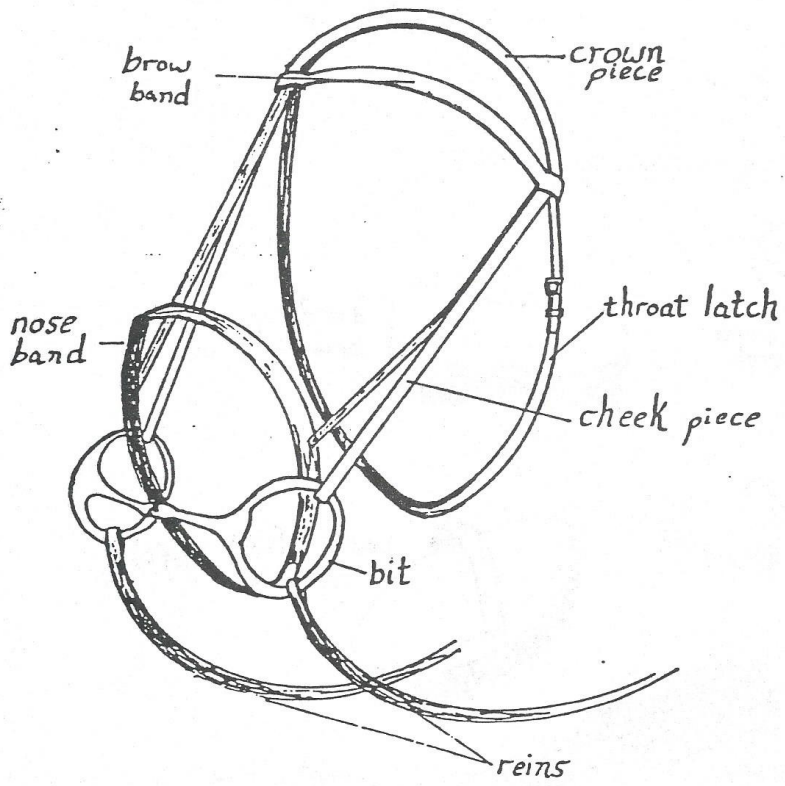
Be aware of idiosyncrasies of individual horse, i.e., some horses do not stand in cross ties without pulling back and must be ground tied or held by a groom/assistant.

Thank you all for your efforts towards following this treatment session routine, which enables clients to benefit from a calm, organized, efficient, and fun program.

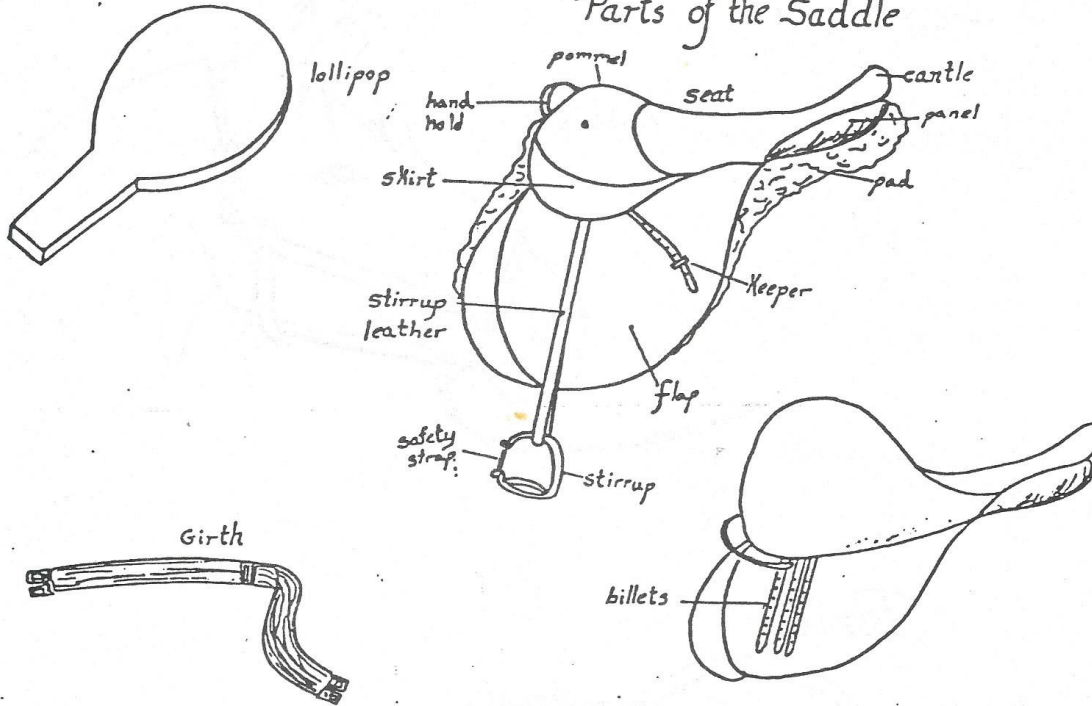
Halter



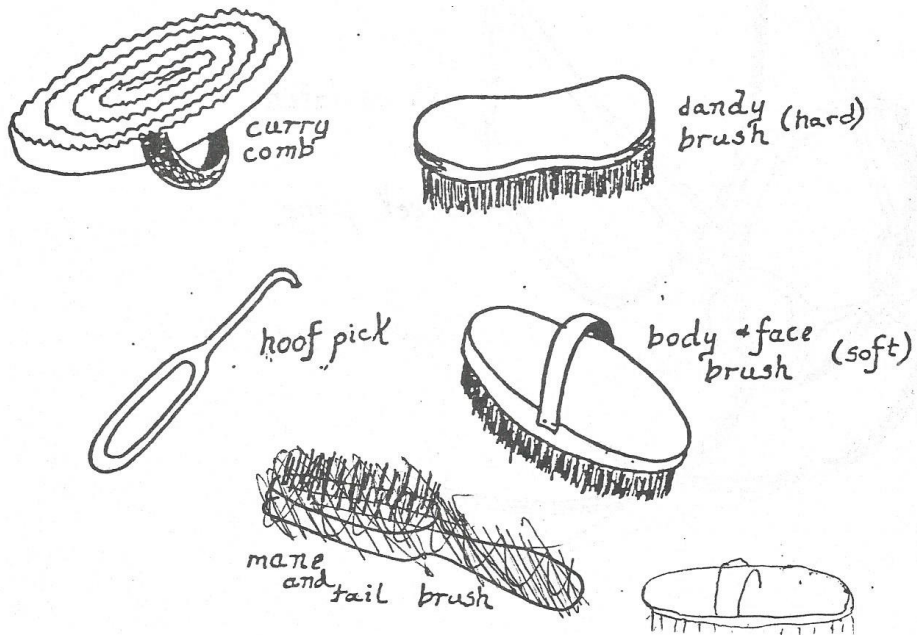
Bridle

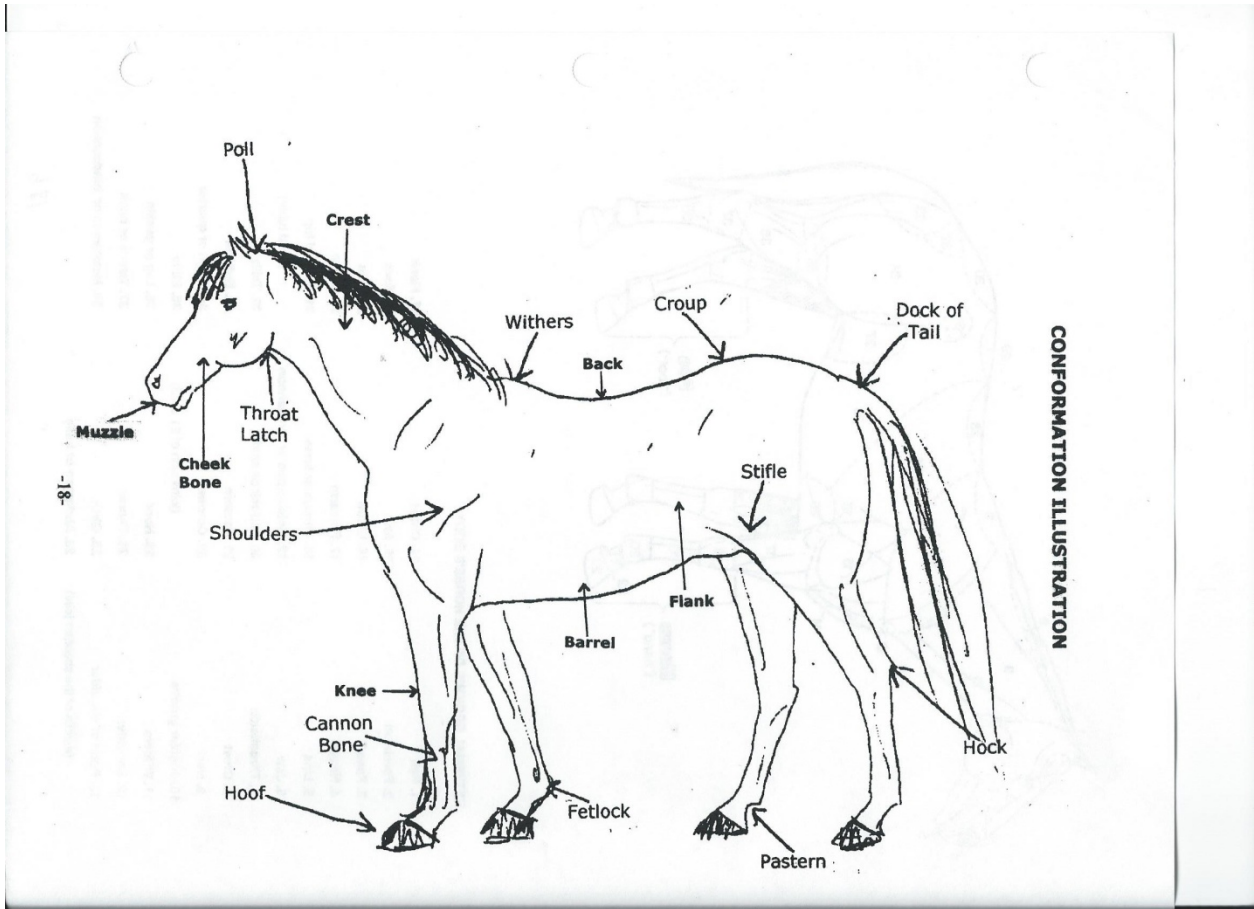


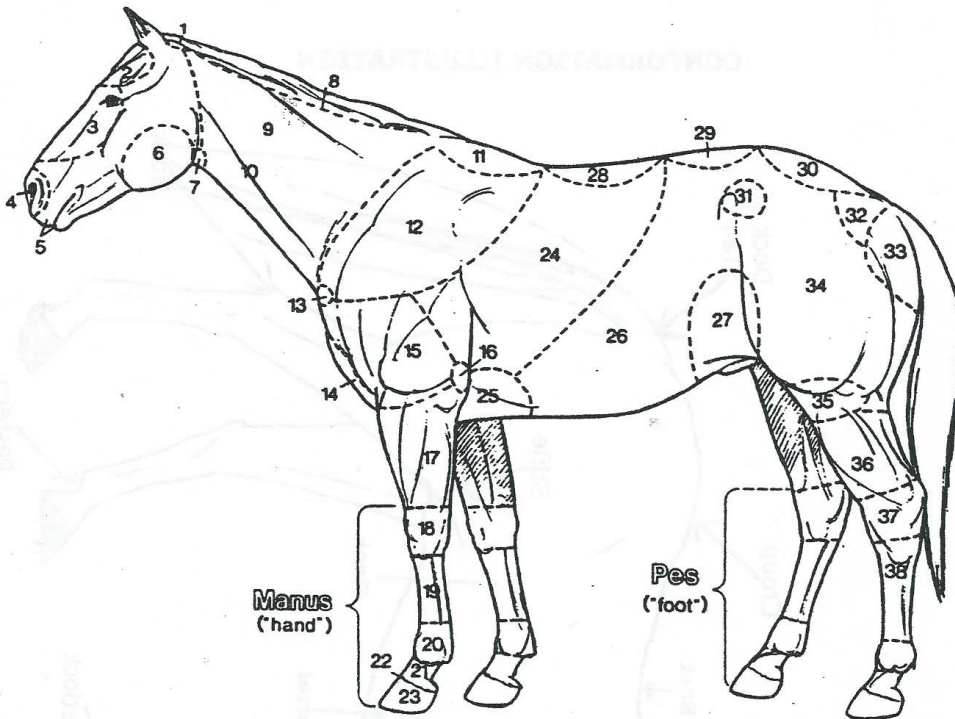
Parts of the Saddle



Grooming Tools







EXTERNAL REGIONS OF THE HORSE'S BODY

- | | | |
|---|--|-----------------------------------|
| 1. Poll | 14. Chest | 27. Flank |
| 2. Forehead | 15. Arm | 28. Back |
| 3. Face | 16. Elbow | 29. Loin |
| 4. Nostril | 17. Forearm | 30. Croup |
| 5. Lips | 18. Carpus or knee | 31. Point of hip
(coxal tuber) |
| 6. Jaw | 19. Metacarpus or forecannon | 32. Tailhead |
| 7. Throatlatch | 20. Fetlock or ankle | 33. Buttock |
| 8. Crest | 21. Pastern | 34. Thigh or quarter |
| 9. Neck | 22. Coronet
(joins skin of 21 & 23) | 35. Stifle |
| 10. Jugular groove | 23. Hoof | 36. Leg or gaskin |
| 11. Withers | 24. Thorax | 37. Tarsus or hock |
| 12. Shoulder | 25. Girth | 38. Metatarsus or hindcannon |
| 13. Point of shoulder
(middle of the shoulder joint) | 26. Abdomen or belly | |

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