



OCCUPATIONAL THERAPY ASSISTANT STUDENT HANDBOOK

Revised 6/11

INTRODUCTION

The OTA Student Handbook has been developed to assist you in your progression through the Occupational Therapy Assistant Program. This handbook is a supplement to the policies and procedures found in the Parkland College: Student Policies and Procedures Manual (2006) pertaining to:

Academic Exclusions
Academic Honesty
Academic Standards
ADA (Americans with Disabilities Act) Grievance Policy and Procedure
Admission Policy
Alcohol and Other Drug Use
Assemble, permit to peacefully
Assessment and course placement
Chronic Communicable Diseases
Computer/network usage
Concurrent enrollment at Parkland and the University of Illinois
Drop/withdrawal procedures policy
E-mail access and use
Financial Aid: satisfactory academic progress policy
Grade Appeal
Graduation
Harassment/discrimination-students
Refund Policies: Tuition and fees
Residence Classification
Sexual Assault
Smoking Policy
Student Grievance policy and procedure
Student Records
Transcripts
Student Rights and Responsibilities
Student Conduct Code

Understanding and compliance with the policies and procedures outlined in this booklet and the Student: Policy and Procedures Manual are necessary for successful completion of the program.

Students are to return this portion to the OTA Program Director

NAME: _____ DATE: _____

I have read, understood and will comply with the Policies and Procedures outlined in the Parkland College, Occupational Therapy Assistant Program Student Handbook and the Student: Policy and Procedures Manual.

SIGNATURE: _____

CONTENTS

Mission & Purpose.....	4
Philosophy.....	4
Occupational Therapy Assistant Curriculum	
Curriculum Design.....	12
OTA Program General Educational Objectives.....	23
Description of Course Scope	24
Course Sequence.....	26
Academic Policies	
Grading	27
Grade Appeals Process.....	27
Progression in the Program.....	27
General Classroom Conduct.....	29
General Classroom Policies.....	30
Attendance & Punctuality.....	30
Assignment Completion & Deadlines	31
Assessment & Examinations.....	31
Computer Skills & Competencies.....	32
Cell Phone/ Lap Top Policies.....	33
Teaching-Evaluative Methods.....	33
Academic Accommodation.....	34
Student-Faculty Advisement.....	35
Student-Faculty Evaluations.....	36
Student Advisory Board Representation	37
Student Withdrawal Policies and Procedures	37
Re-admission Policies and Procedures.....	38
Health Professions HIPAA Policy.....	40
Mandated Reporting	42
Fieldwork I Policies	43
Fieldwork II Policies.....	44
Fieldwork II Alternates	50
Ethics and Confidentiality.....	51
Insurance	52
Dress Code	52
Graduation.....	53
ASCOTA.....	53
Employment	53
Some General Good Advice	55

Occupational Therapy Assistant Program Mission and Purpose Statements

The Occupational Therapy Assistant Program is dedicated to providing a quality educational program that prepares highly competent occupational therapy assistants skilled at meeting occupational needs of clients from diverse backgrounds and rapidly changing service delivery systems. The program seeks to develop occupational therapy assistants who possess foundation skills in occupational therapy interventions, clinical reasoning, and interpersonal communication necessary for the practice of occupational therapy.

The primary purpose of the Occupational Therapy Assistant Program is to prepare students to function as effective entry-level Certified Occupational Therapy Assistants. This purpose is accomplished through a combination of sequential learning activities based upon a sound general educational framework and guided fieldwork experiences in diverse settings. The following purposes are of equal importance in fulfilling the mission of the Occupational Therapy Program. The program will prepare the student to:

- (1) Actively assume the ethical, self-disciplined roles and responsibilities of an entry-level Certified Occupational Therapy Assistant,
- (2) Demonstrate entry-level OTA competence in knowledge and performance in order to implement relevant OT interventions that promote person's engagement in occupation and enhance quality of life for individuals and populations,
- (3) Engage in effective clinical reasoning skills for clinical problem-solving and effective selection of interventions for individuals and populations,
- (4) Function as an advocate for occupational justice and the occupational rights of individuals, and populations,
- (5) Effectively collaborate, communicate and engage in working partnerships with occupational therapists and other service providers,
- (6) Actively engage in activities that promote personal and professional growth and behavior.

The Occupational Therapy Assistant Program's mission is consistent with the **Parkland College Mission and Purposes** and the **2006 Standards for an Accredited Educational Program for the Occupational Therapy Assistant**, Accreditation Council for Occupational Therapy Education (ACOTE), American Occupational Therapy Association, Inc. The program is committed to meeting or exceeding professional program accreditation standards.

PHILOSOPHY STATEMENT

The philosophy of the Parkland College Occupational Therapy Assistant Program is consistent with the *Philosophical Base of Occupational Therapy* (American Occupational Therapy Association [AOTA], 2005), and the *2009 Philosophy of Education, the Purpose and Value of Occupational Therapy Fieldwork Education* and is congruent with the *Mission and Purposes*,

and Statement of Values of Parkland College, and the Mission and Purposes of the OTA Program. The philosophy assumes incorporation of all tenets within these documents as well as those articulated in the *Occupational Therapy Code of Ethics and Ethics Standards* (AOTA, 2010), the *Guide to Occupational Therapy Practice* (Moyers & Dale, 2007), and the *Occupational Therapy Practice Framework*, Second Edition (AOTA, 2008). The Parkland College OTA Program Philosophy Statement is comprised of three parts outlining beliefs about people, occupational therapy and the educational process.

Each **person** is a unique, complex being with innate dignity and worth comprised of interdependent, dynamic cognitive-psycho-physiological and spiritual processes which evolve and change across the life span. People have an innate drive to explore and master the environment, comprised of objects, occupational forms/tasks, social organizations and cultures (Nelson, 1997; Kielhofner, 2008), which both influence and are influenced by person-task-environment transactions (Baum & Christiansen, 2005; Holm, Rogers, & Stone, 2003). Humans are occupational beings.

Occupations are comprised of goal-directed actions that have meaning and purpose that are integral to a person's daily habits, routines, role identity and behavior (Occupational Therapy Practice Framework, 2008). Occupations provide form, function and meaning to each person's life (Peloquin, 1997; Rowles, 2000). Optimum integrity and function are contingent upon each person's capacity for life long adaptation to internal and external changes as reflected in their occupational choices, behavior, roles and achievements. People can accept, reject, and modify their occupational tasks and environments and have the potential to create, destroy, or modify linkages between themselves and their engagement in the environment (Brown, 2009; Dunn, Brown, & McGuigan, 1994). Each person's capacity for intellect, choice and action are associated with specific corresponding rights and responsibilities through which each person assumes accountability for his or her behavior and health.

The program's **philosophy of occupational therapy** is congruent with the descriptions of the profession's domain and process as presented in the *Occupational Therapy Practice Framework* (AOTA, 2008) and the *Guide to Occupational Therapy Practice* (Moyers & Dale, 2007). Occupational therapy interventions are directed towards maximizing clients' potential for health and wellness through the profession's unique focus on the dynamic relationship of human health and occupational behavior. Occupational therapy uses the dynamic interaction between the therapist, the client, and valued occupations, activities and contexts to promote a person's participation and satisfaction in life (AOTA, 2008). Occupational therapy is based on the belief that purposeful activity and occupations, with their organizing qualities, may be used to influence human performance and the effects of disease and disability, and to elicit maximal adaptation (Moyers, 1999; Crepeau, Cohn, & Schell, 2009). Occupational therapists and occupational therapy assistants collaborate to provide specialized client-centered, planned interventions through the therapeutic use of self, the use of preparatory activities, purposeful activities, occupation-based activities and client-caregiver education activities (AOTA, 2009). There are five primary occupational therapy intervention strategies;

- (1) **Establish/restore:** Interventions focus on correction and change in client factors, performance skills, habits, routines and roles through use primarily preparatory techniques/modalities and purposeful activities to restore occupational performance.
- (2) **Adapt/modify:** Interventions emphasize changing procedures, objects, tasks, environments,

and interactions within occupational performance skills, roles, contexts and areas.

(3) **Alter:** Interventions are selected to find “best fit” to afford access to and pursuit of occupational choices and interests.

(4) **Prevent:** Interventions emphasize facilitation and support of new learning in a person’s life skills and the promotion of on-going lifestyle changes through the use of occupational strategies which promote wellness, satisfaction, and life-long learning.

(5) **Create:** Focus is on enhancing occupational performance and pursuits in different social and physical environments (Brown, 2009; Dunn, Brown, & McGuigan, 1994):

We believe that in order to provide effective evaluation and treatment that OT and OTA practitioners should consider each of these levels of intervention for recipients of occupational therapy. We believe that OT personnel function as advocates for occupational justice for individuals and populations. We value that these principles as essential to actualize our unique professional role and responsibilities as practitioners in occupational therapy, as elucidated in the *Philosophical Base of Occupational Therapy* (1997).

The **educational philosophy** of the OTA Program corresponds with those concepts articulated in “The Cross Papers” (Cross, 1997; 1998), stating that “productive learning is a shared responsibility, collectively engaged by students, faculty, administrators, [and] employers” (Cross, 1998, p. 6). The OTA Program curriculum design and pedagogy supports the “Seven Principles for Good Practice in Undergraduate Education” (Chickering & Gamson, 1991) which state:

1. Good practice encourages student-faculty contact.
2. Good practice encourages cooperation among students.
3. Good practice encourages active learning.
4. Good practice gives prompt feedback.
5. Good practice emphasizes time on task.
6. Good practice communicates high expectations.
7. Good practice respects diverse talents and ways of knowing (p.7-8).

The OTA Program’s philosophy of education is a synthesis of current learning theories and several nationally-recognized instructional approaches used to facilitate excellence in teaching and learning at community colleges. The OTA faculty participate regularly in the seminars and workshops presented by the Center for Excellence in Teaching and Learning to maintain engagement in the “best practice” in teaching.

We believe that the development of an OTA **learning community** is essential for our students’ learning, for their growth as professionals, and for our functioning as a vital living experience. The OTA curriculum design is a well integrated curriculum model that supports a learning community that links faculty and students, OTA courses to each other, and the academic setting to community contexts. According to MacGregor, Smith, Matthews, Gabelnick, (2002), learning communities intentionally link courses into integrated curriculums that foster a coherent collaborative learning environment that has a shared sense of purpose and group identity, encourages active and collaborative learning, and creates a transactional approach to teaching and

learning. The OTA faculty intentionally promotes the development of a learning community within each class of students and between the first and second year students and faculty. Learning is viewed as an individually-mediated social process that requires the interaction of members within the academic community, as well as across the larger contexts of the regional and professional communities. Diversity in learning, cultural backgrounds and roles are recognized and valued for the different perspectives they bring to the learning experience and to our personal and professional growth.

The OTA Program's instructional philosophy and methodology incorporates concepts from **cognitive and learning theories** that foster use of research on the brain and its functioning (Herrmann, 1998), application of cognitive, learning and social constructivism (Bruffee, 1995, McCombs, 1992), mastery learning (Bloom, 1956; Morrison, Ross, & Kemp, 2001) and facilitation of connected learning (Clinchy, 1994). Small group, **active learning activities** and "learning stations" are used to promote whole-brain learning, and the relational context for shared meaning-making and associative learning. Structured class notes contain **critical thinking** exercises. The topical outlines provide clear structure and direction while the assignments, discussions, laboratory and fieldwork experiences foster the exchange of ideas and learning and motivational strategies, as well as they aid development of personal and professional teams and networks.

We believe that the integrated curriculum model is a highly effective way to teach and learn. The OTA curriculum's spiral dynamic matrix organizes learning using repetition, elaboration and organization strategies described by Weinstein and Meyer (1991), and thematic maps and redundancy described by Caine & Caine (1997). A variety of instructional approaches are incorporated to promote guided, independent learning. Community resourcefulness and initiative are valued and promoted. The learning activities are selected, guided, and evaluated by the faculty and students to fulfill the objectives of the program and to address the diversity of student needs and learning styles. The program engages students in a **collaborative learning** process that "integrates knowledge, active learning, clinical reasoning, and self-reflection" (Philosophy of Education, 1997). **Self-reflective journals** are required during all levels of fieldwork education to facilitate develop a new perspective on oneself and how one learns through service experiences.

The OTA faculty assists students in recognizing and strengthening their use of **self-regulated learning strategies**. Self-regulated learning is characterized by awareness of thinking, use of strategies, and situated motivation (Zimmerman & Schunk, 1998). Self-regulated learning strategies such as resource management, goal setting, self-assessment, motivational strategies and use of metacognitive strategies are presented during classroom and advisement sessions. For example, faculty will assist students in developing reading retention and comprehension using directed-reading strategies and the OTA learning objectives. The OTA Program applies **sensorimotor self-regulation** learning strategies based on the Alert Program (Williams & Shellenberger, 1996) to the college classroom to promote autonomy in maintaining effective attentional levels for learning at home and school. Classroom exercises and individual

advisement stress the importance of using more effective learning strategies not just longer hours of studying.

The OTA faculty use **formative and summative assessment** approaches to determine the effectiveness of learning. Formative assessment is a valuable self-assessment process that provides valuable feedback to faculty about the students' formative learning processes, or how well the learning is progressing. OTA formative assessments are regularly used in the assessment of reading comprehension and knowledge-based learning. The students determine when they are "ready" to take the quizzes within the designated period. **Classroom assessment techniques** (Angelo & Cross, 1993) are used to obtain student feedback about how well they are able to understand the content through current instructional methods. This feedback loop system communicates that the students and faculty are responsive to individual needs for clarification and/or other methods of instruction to aid learning. Classroom assessment techniques (CAT) may be administered spontaneously (such as use of One Minute Assessments) and/or formally through planned use of a CAT for a specific topic area. Summative assessments are used to assess the students' ability to use long-term retention and recall strategies to access knowledge, and their ability to comprehend and apply OT concepts and skills. Formative assessments are also conducted during fieldwork education to accurately coach student's clinical performance. Summative assessments are criterion-based measurements used to evaluate students' comprehension and application of OT concepts, methodologies and technology. Summative assessments are regularly scheduled in the form of exams, homework assignments, papers, projects and fieldwork performance evaluations.

The OTA Program sponsors the development of a **professional role identity** with its corresponding level of clinical reasoning and responsibilities through role modeling, graded peer instruction responsibilities, and through professional feedback during classroom and fieldwork education. Our students' attain and refine their entry-level professional abilities in a relatively ordered, sequential and predictable manner. **Effective work ethics** are facilitated through structured learning activities and feedback. OTA educators are encouraged to foster life-long learning skills such as analysis, critical thinking, problem-solving and application skills as well as professional behavior and service management skills. **Service learning and fieldwork education** build links between classroom learning and community, and student and professional roles. Service learning is differentiated from fieldwork education by their goals, types of assignments, and the methods of evaluation.

Learning activities are selected on a basis of their effectiveness to influence a valued change in students' clinical reasoning and behavior, relevant to the learning objectives and to the practice of occupational therapy. These activities will prepare the students to function in a professional setting working in a collaborative and supervisory relationship with the registered occupational therapist, as well as other members of the service team.

References

- Angelo, T. A., & Cross, K. P. (1993). *Classroom assessment techniques: A handbook for college teachers*. (2nd ed.), San Francisco: Jossey-Bass Publishers.
- American Occupational Therapy Association. (2008). Occupational therapy practice framework: Domain and process (2nd ed.). *American Journal of Occupational Therapy*, 62, 625-683.
- American Occupational Therapy Association. (2010). Occupational therapy code of ethics and ethics standards. DOC retrieved July 12, 2010, from <http://www.aota.org/Practitioners/Ethics/Docs/Standards/38527.aspx>
- Baum, C., & Christiansen, C. (2005). Person-environment-occupation-performance: An occupation-based framework for practice. In C. Christiansen and C. Baum (Eds.), Occupational therapy: Performance, participation, and well-being (pp.243-266). Thorofare, NJ: SLACK.
- Bloom, B.S. (1956). *Taxonomy of Educational Objectives*. New York: David McKay Company Inc.
- Brown, C. (2009). Ecological models in occupational therapy. In E.B. Crepeau, E.S. Cohn, & B. Schell, (Eds.), Willard and Spackman's occupational therapy, (11th ed.), (pp. 435-445), Philadelphia, PA: J. B. Lippincott Williams and Wilkins.
- Bruffee, K. A. (1993). Collaborative learning: higher education, interdependence, and the authority of knowledge, Baltimore, MD: The John Hopkins University Press.
- Caine, R. N. & Caine, G. (1997). Making connections: Teaching and the human brain. New York: Innovative Learning Publications.
- Chickering, A. W. & Gamson, Z. F. (1991). Seven principles for good practice in undergraduate education. New Directions for Teaching and Learning, 47, San Francisco: Jossey-Bass.
- Clinchy, B. (1994). On critical thinking and connected knowing. In K. S. Walters (Eds.), Re-thinking reason, Albany, NY: State University of New York Press.
- Crepeau, E.B., Cohn, E.S., & Schell, B. (2009). Willard and Spackman's occupational therapy, (11th ed.), Philadelphia, PA: J. B. Lippincott Williams and Wilkins.
- Cross, K. P. (1997). Developing professional fitness through classroom assessment and classroom research: The Cross papers, No.1, Mission Viejo, CA: League for Innovation in the Community College.
- Cross, K. P., (1998). Opening windows on learning: The Cross papers, No. 2, Mission Viejo,

CA: League for Innovation in the Community College.

Rogers, J., & Holm, M. (2009). Person-task-environment interventions: A decision-making guide. In E.B. Crepeau, E.S. Cohn, & B. Schell, (Eds.), Willard and Spackman's occupational therapy, (11th ed.), (pp. 460-490), Philadelphia, PA: J. B. Lippincott Williams and Wilkins

Dunn, W., Brown, C., & McGuigan, A. (1994). The ecology of human performance: A framework for considering the effect of context. *American Journal of Occupational Therapy*, 48, 595-607.

Kielhofner, G. (2008). A model of human occupation: Theory and application, (4th ed.), Baltimore: Lippincott Williams & Wilkins, Co.

MacGregor, J., Smith, B., Matthews, R., & Gabelnick, F. (2002). Learning community models. [On-line]. Available: <http://learningcommons.evergreen.edu/>.

McCombs, B. L.(1992). *Learner-centered psychological principles: Guidelines for school redesign and reform (revised ed.)*, Washington, DC: American Psychological Association, APA Task Force on Psychology in Education.

Morrison, G., Ross, S. & Kemp, J. (2001). *Designing Effective Instruction*, 3rd edition. New York: John Wiley and Sons Inc.

Moyers, P.A., & Dale, L. M. (2007). *The guide to occupational therapy practice*. (2nd ed.), Bethesda, MD: AOTA Press.

Nelson, D. (1988). Occupation: Form and performance. *American Journal of Occupational Therapy*, 42, 633-641.

American Occupational Therapy Association. (2010). Code of ethics and ethics standards. Retrieved July 12, 2010, from <http://aota.org/>

Peloquin, S.M. (1997). Nationally speaking: The spiritual depth of occupation: Making worlds and making lives. *American Journal of Occupational Therapy*, 3, 167-168.

Philosophy of education. (2003). Commission on Education. American Occupational Therapy Association, Inc.

The philosophical base of occupational therapy. (1979). *American Journal of Occupational Therapy*, 33, 785.

The purpose and value of occupational therapy fieldwork education. (2003). Commission on Education. American Occupational Therapy Association, Inc.

- Rowles, G. D. (2000). Habituation and being in place. *Occupational Therapy Journal of Research*, 20 (Suppl. 1), 52S-67S.
- Weinstein, C. E. & Meyer, D. K. (1991). Cognitive learning strategies and college teaching. *New Directions for Teaching and Learning*, 45, 15-26.
- Williams, M. & Shellenberger, S. (1996). *How does your engine run?" A leader's guide to the alert program for self-regulation*. Albuquerque, NM: TherapyWorks, Inc.
- Zimmerman, B. J., & Schunk, D. (Eds.) (1989). *Self-regulated learning and academic achievement; Theory, research, and practice*. New York: Springer-Verlag.

COURSE CONTENT: CURRICULUM DESIGN, SCOPE & SEQUENCE

CURRICULUM DESIGN:

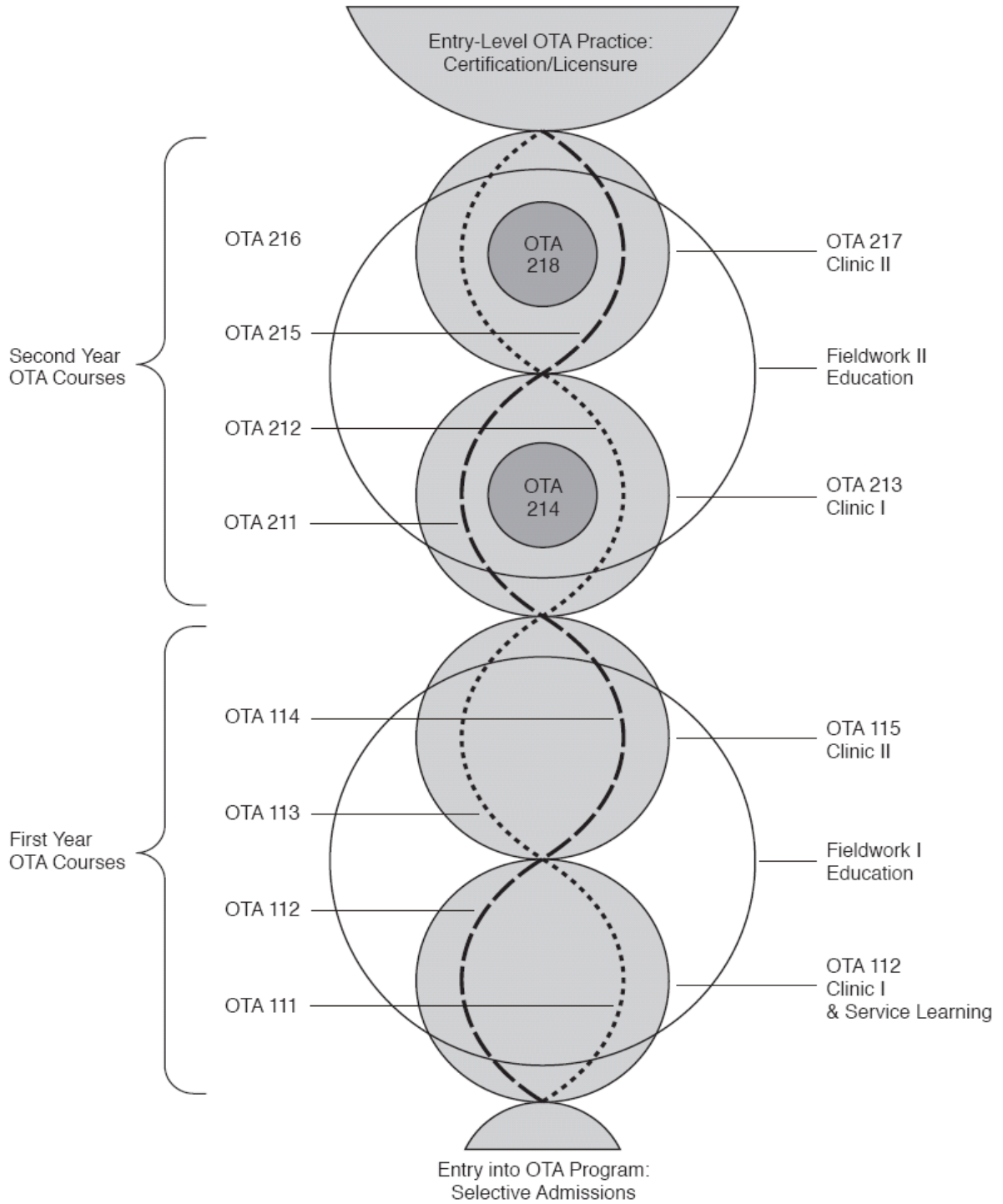
The Parkland College OT Assistant curriculum design is a structured, non-traditional, integrated curriculum model that effectively synthesizes problem-based (bottom-up) approaches with client-centered, occupation-based (top-down) approaches. The characteristics of a problem-based curriculum are considered necessary for effective preparation of the entry-level OTA clinician into the primarily problem-oriented health care system focused on performance skills, techniques, and client factors. The characteristics of a client-centered, occupation-based curriculum are considered essential to address the unique philosophy, role and process of occupational therapy in evaluating occupational needs and in fostering improved “engagement in occupation” in the healthcare and community service systems. The client-centered, occupation-based approach guides students to identify and utilize occupation as the focus of all therapeutic interactions.

The curriculum design organizes and sequences content within a dynamic, spiral process matrix along five **Core Curricular Threads**. (Refer to Fig. 1) These core curricular threads provide **longitudinal, thematic structure** within each course and across the entire curriculum and provide a framework for sequencing the content and process learning objectives, learning outcomes, curricular activities and laboratory experiences. The five Core Curricular Threads are interwoven to provide a cohesive, integrated instructional system, based on:

(1) The *Occupational Therapy Practice Framework* (2008) provides the core organizational structure for the description of occupational therapy’s domain and process delivery model. The concepts, terminology and organizational structure of the Occupational Therapy Practice Framework (OTPF) are introduced in the first semester in OTA 111: Introduction to Occupational Therapy, and in OTA 112: Therapeutic Media. Students learn about each part of the model and generally, how it is applied to evaluation and intervention. Initially, the students develop competency in conducting activity analysis based on the OTPF. Later, the students learn that other frames of reference can be integrated with the OTPF to further expand and/or to focus activity analysis on selected preparatory methods and purposeful activities in order to address specific client factors, performance areas, skills, patterns, and contexts.

The OTPF is embedded throughout each of the OTA courses. The Health and Occupation courses (OTA 113, OTA 211, and OTA 215) focus on client factors and their impact on occupational performance areas, skills, and patterns. The Therapeutic Process courses (OTA 114, OTA 212, and OTA 216) focus on the occupational therapy intervention process and the types of approaches used to restore, compensate and maintain occupational performance and role functions, and to prevent occupational dysfunction or deterioration in health. The Occupational Therapy Theory course (OTA 214) utilizes the OTPF and the *Model of Human Occupation* as the scaffolding for incorporating different frames of reference and models into clinical practice. The Therapeutic Group course (OTA 218) applies the OTPF to evaluation and intervention for client groups in different contexts. In the Level I and II Fieldwork courses (OTA 115, OTA 213, and OTA 217), the students apply the OTPF in clinical practice. The *Parkland College Fieldwork II Objectives for OTA Students* integrates the OTPF to define and evaluate the student’s Level II clinical competency in the client-centered, occupation-based approaches to intervention.

Figure 1: OTA Curriculum Model



When the Parkland College OTA curriculum was designed by Janet Engbring, M.Ed., OTR/L, FAOTA in 1984, she conceptualized a curriculum design that incorporated and supported the major tenets of the *Occupational Therapy Practice Framework* even though it would be 17 years before the OTPF was formally developed. Thus, when the OTPF was published in 2002, it was easy to apply this model to the Parkland College OTA curriculum design and revise the courses to reflect the most current concepts and terminology employed by the OTPF.

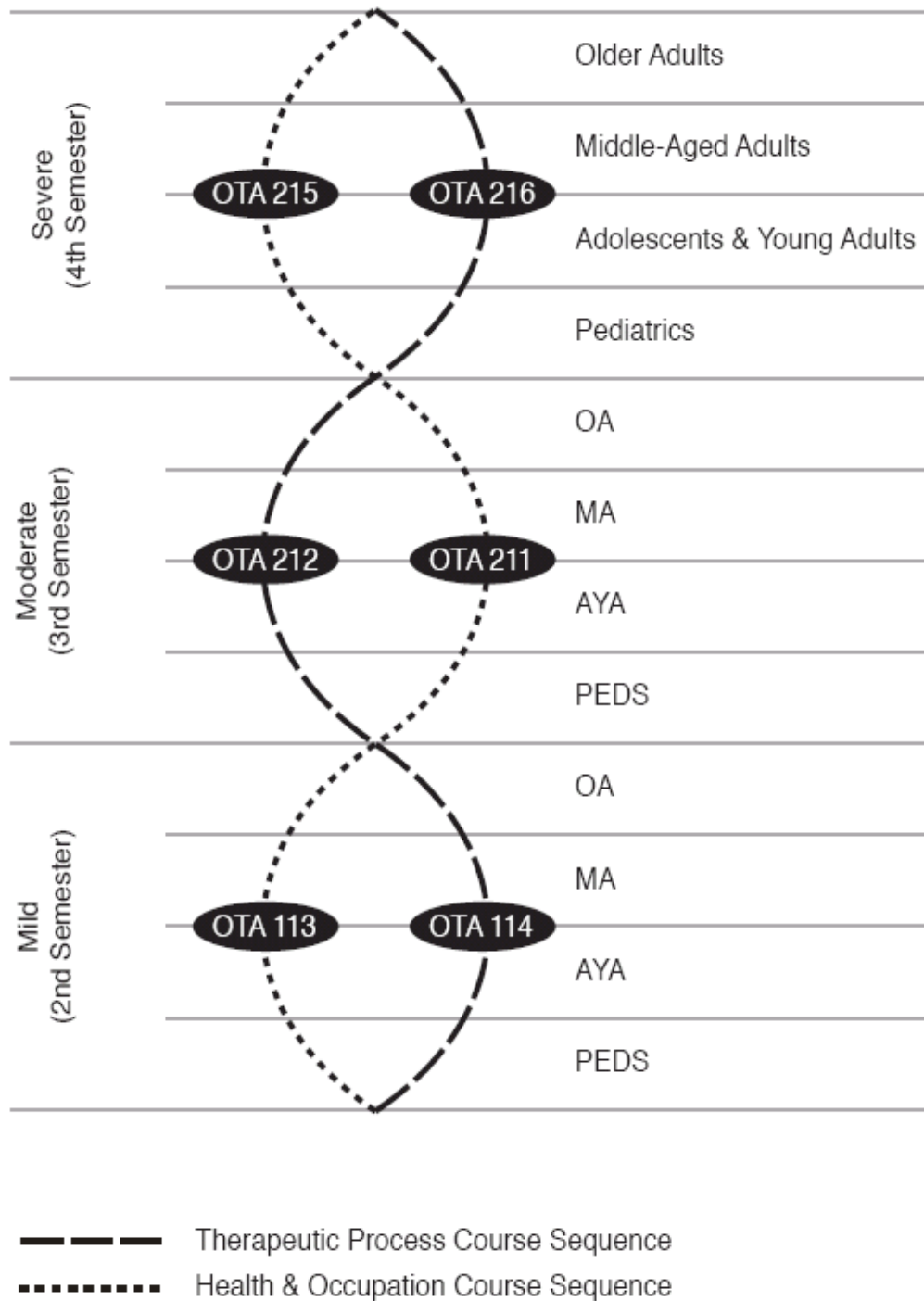
(2) The **developmental process across the life span**: The Health and Occupation (OTA 113, OTA 211, OTA 215) and Therapeutic Process (OTA 114, OTA 212, OTA 216) courses are paired courses across three semesters, beginning in the second semester. The developmental core curricular thread organizes course content from pediatrics to geriatrics, each semester, in each of these courses. (Refer to Fig. 2). For example, when the students are learning about a specific diagnosis or impairment in the pediatric developmental stage of a Health and Occupation course, they are concurrently learning about the types of occupational therapy interventions used for children with that same impairment in the paired Therapeutic Process course. Later in the semester, the students learn about adult and older adult conditions while concurrently learning about intervention for adults and older adults.

A specific health condition is sequenced within the course outline at a specific developmental stage with the highest prevalence for OT intervention even though certain health conditions may have an onset time at different times in a person's life span or a health condition may span across several developmental stages. The Health and Occupations courses address how a person lives with the impact of a specific health condition across several life stages so that students become aware of the long-term impact of a health condition on occupational choices and performance across the life span. In addition, students learn how the developmental and aging processes may influence the health and occupation transactional process. For example, a client may have a stroke at any age yet the content is often taught in the adult and older adult segment of the Health and Occupation and Therapeutic Process courses. However, case studies and other learning assignments are presented to illustrate how OT intervention for young adults, post-CVA, will be different than for older adults, post-CVA due to differences in occupational roles, patterns and routines relevant to each developmental period.

(3) The **occupational performance function/dysfunction continuum** core curricular thread sequences OTA courses across the entire curriculum design. The function/dysfunction continuum is identified by well, mild, moderate and severe occupational performance/dysfunction. Wellness constructs define occupational performance for persons without impairments, activity limitations, or participation restrictions. Mild occupational performance/dysfunction defines occupational performance for persons with diseases or impairments that may result in minimal activity limitations and restrictions. Moderate occupational performance/dysfunction defines occupational performance in terms of moderate activity limitations and restrictions. Severe occupational dysfunction defines occupational performance for persons with diseases and impairments that may result in severe activity limitations and restrictions. The function/dysfunction continuum progresses from "well" in the first semester to "severe" occupational performance/dysfunction in the fourth semester.

During the first semester, OTA 112: Therapeutic Media focuses on presenting basic

Fig. 2
 Developmental Core Thread
 & Occupational Performance Function/Dysfunction Continuum



principles and concepts about how people perform occupations, how to prevent impairments, and how to modify objects, spaces, actions and behavior to address basic impairments (e.g.; one-hand function, no grasp, no vision) and basic activity limitations (e.g.: difficulty performing ADL, work, play and leisure activities). The Health and Occupations courses (OTA 113, OTA 211 and OTA 215) and the Therapeutic Process courses (OTA 114, OTA 212, and OTA 216) are organized along the mild, moderate, and severe occupational performance/dysfunction continuum across three semesters (refer to Fig. 2). The Health and Occupations courses and the Therapeutic Process courses focus on presenting specific client factors and interventions for persons who have different levels of impairments and limitations, within different roles and contexts, along the developmental and occupational performance function/dysfunction continuum.

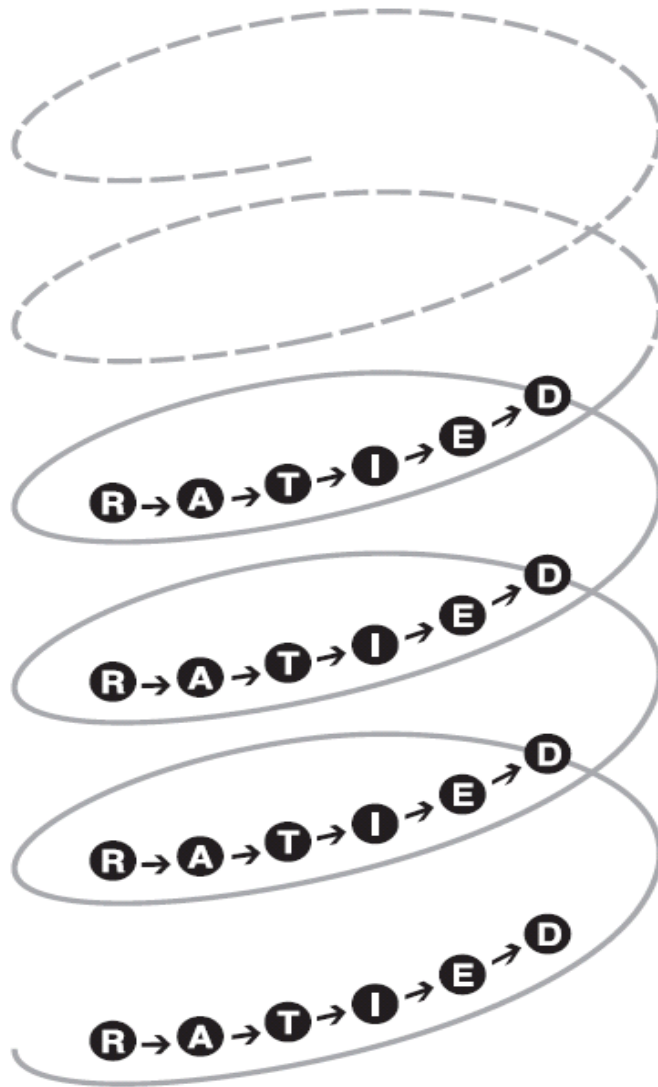
The function/dysfunction continuum structures the grading of content objectives and the evaluation of learning outcomes. Thus, students first learn about how to identify and plan intervention for clients with mild limitations prior to developing skills to address more complex occupational performance problems. In addition, the students learn the basic roles, responsibilities, and skills of the COTA prior to developing skills in more specialized areas of practice and consultancy roles.

(4) The *Standards of Practice of Occupational Therapy* (2010) and the *Guide to OT Practice* (Moyers & Dale, 2007) both define the intervention process. These core professional documents are introduced in the first semester in OTA 111: Introduction to Occupational Therapy. Then, these core documents are used to organize weekly course content within all Therapeutic Process courses (OTA 114, OTA 212, and OTA 216). (Refer to Fig. 3). Each week, each Therapeutic Process course presents learning objectives that begin with identifying how clients are referred to occupational therapy, followed by the assessment, intervention planning and implementation, and discharge planning processes for the specific content area. Thus, the Standards of Practice becomes an internalized structure for organizing clinical practice.

(5) In OTA 214: Occupational Therapy Theory, the *Model of Human Occupation* (Kielhofner, 2008) is used in conjunction with the *Occupational Therapy Practice Framework* (2002) as the core referents or core frames of reference to relate all other frames of reference used in occupational therapy practice. The Model of Human Occupation (MOHO) is first introduced in the OTA 114: Therapeutic Process I as one of several ways to assess occupational behavior and organize intervention. In the OTA 214 course, the MOHO is presented as a system for clinical reasoning. Each new frame of reference is presented and then integrated with the MOHO to show the relationship between the two or more frames of reference. The primary purpose for using the MOHO and OTPF in the theory course is illustrate how they an occupation-based approach in practice is used concurrently with other frames of references, models and approaches.

The **longitudinal linkages** are comprised of both the core curricular threads and the **threads for specific content learning objectives**. The threads for specific content learning are embedded within the larger constructs of the core curricular threads. The content and skills are graded across the entire semester and across the entire curriculum. There are as many longitudinal threads as there are content areas and clinical skills. A specific content thread may be introduced in the first semester and be progressively developed, combined, modified, applied

Fig. 3
Standards of Practice in Thearpeutic Process Courses
(Illustrates Weeks 1–4)



R = Referral
A = Assessment
T = Treatment Plan
I = Implementation/Intervention
E = Re-evaluation
D = Discharge Plan

and graduated through each semester until completion of the program. For example, a student will learn about basic principles and techniques of biomechanics and therapeutic exercise in OTA 112: Therapeutic Media. In the Therapeutic Process and OT Theory courses (OTA 114, OTA 212, OTA 214, and OTA 216), the principles of biomechanics and therapeutic exercises are applied to specific impairments, and new techniques and modifications are added such as exploring the use of physical agent modalities (OTA 114), learning handling techniques for persons with spasticity (OTA 212 and OTA 214), and knowing how to modify exercise when working with clients who have multiple sclerosis (OTA 216). From an occupation-based perspective, the students learn basic strategies and methods for teaching activities of daily living, and to assess and modify work sites and homes in OTA 112: Therapeutic Media. In the Therapeutic Process and OT Theory courses, the students learn specific ways to restore, compensate, and adapt for limitations in dressing skills, home management skills and worker roles by modifying methods, tools, and spaces relevant to the specific impairment/occupational performance dysfunction. From a professional behavior perspective, the students learn to prepare and conduct oral presentations about their favorite occupations to their classmates in OTA 112: Therapeutic Media. By the second year, the students are required to conduct PowerPoint presentations, and present active learning seminars, health fair projects and posters sessions to the community. The entire curriculum requires the students to develop and use a greater variety skills and different skill combinations of the content and process skills.

Lateral linkages connect and integrate content and learning processes in all courses within each semester. Eventually, all courses are integrated by the longitudinal and lateral linkages along the graduated course sequence. Lateral linkages are both direct and indirect. Some examples of **direct lateral linkages** are found in the relationship between the Health and Occupation and Therapeutic Process content sequences. For example, a specific disorder that is taught in the OTA 113: Health and Occupation I course will have a direct lateral link with the content on OT intervention for clients with that specific disorder as taught in the OTA 114: Therapeutic Process course. The same types of lateral linkages are found between all the Health and Occupation and Therapeutic Process courses each semester. General education courses can also have direct lateral links with OTA courses. For example, the developmental progression of course content presented in PSY 209: Human Growth and Development coincides with the course content sequences in OTA 113: Health and Occupation I and OTA 114: Therapeutic Process I. Another example of a direct lateral content link would be found in linking classroom content with fieldwork assignments. In OTA 114: Therapeutic Process I, the students learn the skills needed to participate in the Level I fieldwork assignments presented in OTA 115: Fieldwork I/Clinic II. For instance, in the OTA 114 labs the students learn how to perform the Test of Visual Motor Skills (TVMS) and perform transfer and ADL activities for persons with a total hip replacement. Then, the students administer the TVMS with a child in the home setting or work with an older adult in a long term care facility in OTA 115. A direct lateral link between classroom content and Level II assignments (OTA 213 and OTA 217) can be found throughout the second year. In OTA 214: Occupational Therapy Theory, the students learn a specific frame of reference, such as the Model of Human Occupation, in class. The direct lateral linkage between theory and Level II fieldwork (OTA 213) is presented as a structured homework assignment that requires them to find out how the specific frame of reference is being used or could be used in their current Level II fieldwork assignment. The term paper in OTA 214

requires the students to find direct evidence of two frames of reference being used in their current Level II fieldwork assignments (OTA 213). In OTA 215: Health and Occupation III, the students investigate classroom topics by directly relating it to a client they have worked with in their fieldwork II assignment (OTA 217). In addition, OTA 218: Therapeutic Groups requires students to interview OT and non-OT personnel about group programs being used in their clinical setting and then develop an OT group treatment protocol for that particular fieldwork site.

Inherent within this design are curricular threads that serve as the linkage among the technical and general education courses. **Indirect lateral linkages** are related to the development of general education and communication skills that are structured and sequenced during each semester and graded across the two years. Students take the composition courses (ENG: 101 and ENG 102) to develop written communication skills necessary to communicate their research and clinical reasoning skills in the Health and Occupation and OT Theory courses (OTA 113, OTA 211, OTA 214, and OTA 215). Another example of lateral linkages are related to the content presented in the Anatomy and Physiology courses (BIO 121 and BIO 122) and the content presented in any of the Health and Occupation, Therapeutic Process and OT Theory courses. Obvious linkage exists between musculoskeletal anatomy and learning range of motion, strengthening and other biomechanical techniques in the Therapeutic Process and OT Theory courses. Human anatomy and physiology are linked to understanding diseases, disorders and impairments in Health and Occupation courses. Students' basic computer competency skills are assessed during the Orientation Day before the first day of classes. Students are advised to take self-paced courses through the Computer Technology Center (CTC) when skill deficits are noted. Other lateral threads include communication, interpersonal relations, growth and development, psychosocial behavior alterations, physical disabilities, adaptation, cognition and the humanities.

Fieldwork education, Levels I and II, grades OTA clinical performance skills and competencies across each semester. Level I fieldwork experiences correlate most directly with the first year OTA course content progression. Level II fieldwork experiences are not directly linked to the second year OTA course sequence however as stated, the course content is correlated with the students' fieldwork experience through specific clinical research assignments. Fieldwork education is integral to the students' development of clinical reasoning skills and the assumption of the role responsibilities of occupational therapy assistants. Fieldwork educators and academic fieldwork educators collaborate to prepare learning and performance objectives.

The **spiral aspect of the curriculum** differentiates its structure from more traditional, linear sequential models. In this design, the sequence of content is graded and linked to all previous content and is accommodated, associated and differentiated through the progression of learning activities. The spiral aspect of the curriculum model is reminiscent of similar spiral matrices used to describe models of learning (Caine & Caine, 1994), cognition and cognitive disabilities (Allen, 1992), sensory integration and self-actualization (Bundy, Lane, Fisher, & Murray, 2002), human occupation (Kielhofner, 2008), spatiotemporal adaptation (Gilfoyle, Grady & Moore, 1990) and genetic biology (Marieb, 2004). (Refer to Figure 1). The spiraling aspect carefully provides students with opportunities to "revisit" and "recall" previously learned content each semester through repetition (**built-in redundancy**) so that core concepts and skills are retained. At the same time, the students are learning new related concepts or skill sets, so that core knowledge and skills are further developed, expanded, modified, combined, and elaborated requires the students to find direct evidence of two frames of reference being used in their current

Level II fieldwork assignments (OTA 213). In OTA 215: Health and Occupation III, the students investigate classroom topics by directly relating it to a client they have worked with in their fieldwork II assignment (OTA 217). In addition, OTA 218: Therapeutic Groups requires students to interview OT and non-OT personnel about group programs being used in their clinical setting and then develop an OT group treatment protocol for that particular fieldwork site.

Inherent within this design are curricular threads that serve as the linkage among the technical and general education courses. **Indirect lateral linkages** are related to the development of general education and communication skills that are structured and sequenced during each semester and graded across the two years. Students take the composition courses (ENG: 101 and ENG 102) to develop written communication skills necessary to communicate their research and clinical reasoning skills in the Health and Occupation and OT Theory courses (OTA 113, OTA 211, OTA 214, and OTA 215). Another example of lateral linkages are related to the content presented in the Anatomy and Physiology courses (BIO 121 and BIO 122) and the content presented in any of the Health and Occupation, Therapeutic Process and OT Theory courses. Obvious linkage exists between musculoskeletal anatomy and learning range of motion, strengthening and other biomechanical techniques in the Therapeutic Process and OT Theory courses. Human anatomy and physiology are linked to understanding diseases, disorders and impairments in Health and Occupation courses. Students' basic computer competency skills are assessed during the Orientation Day before the first day of classes. Students are advised to take self-paced courses through the Computer Technology Center (CTC) when skill deficits are noted. Other lateral threads include communication, interpersonal relations, growth and development, psychosocial behavior alterations, physical disabilities, adaptation, cognition and the humanities.

Fieldwork education, Levels I and II, grades OTA clinical performance skills and competencies across each semester. Level I fieldwork experiences correlate most directly with the first year OTA course content progression. Level II fieldwork experiences are not directly linked to the second year OTA course sequence however as stated, the course content is correlated with the students' fieldwork experience through specific clinical research assignments. Fieldwork education is integral to the students' development of clinical reasoning skills and the assumption of the role responsibilities of occupational therapy assistants. Fieldwork educators and academic fieldwork educators collaborate to prepare learning and performance objectives.

The **spiral aspect of the curriculum** differentiates its structure from more traditional, linear sequential models. In this design, the sequence of content is graded and linked to all previous content and is accommodated, associated and differentiated through the progression of learning activities. The spiral aspect of the curriculum model is reminiscent of similar spiral matrices used to describe models of learning (Caine & Caine, 1994), cognition and cognitive disabilities (Allen, 1992), sensory integration and self-actualization (Bundy, Lane, Fisher, & Murray, 2002), human occupation (Kielhofner, 2002), spatiotemporal adaptation (Gilfoyle, Grady & Moore, 1990) and genetic biology (Marieb, 2004). (Refer to Figure 1). The spiraling aspect carefully provides students with opportunities to "revisit" and "recall" previously learned content each semester through repetition (**built-in redundancy**) so that core concepts and skills are retained. At the same time, the students are learning new related concepts or skill sets, so that core knowledge and skills are further developed, expanded, modified, combined, and elaborated

upon for use in problem-solving and application to increasingly more complex case studies. The students are challenged to progressively **synthesize and integrate** previously learned concepts and skills within new applications and new contexts. For example, students learn activity analysis based on the OTPF in the first semester in OTA 112: Therapeutic Media. Then, activity analysis is “revisited” in OTA 114: Therapeutic Process I to be used as a tool for selecting, matching and or modifying therapeutic activities. However, in OTA 114, new content is linked to the previous concepts used in activity analysis so that the activity analysis process becomes more detailed, refined, and enriched for application to case studies. Each new frame of reference presented in the OTA 214: OT Theory adds to the core knowledge of activity analysis and further expands, focuses and modifies the activity analysis process within its domain. By the fourth semester, the students are learning how to apply several frames of reference in the selection and modification of the activities and contexts while concurrently learning how to develop group activity analytical skills. Another example to describe the spiral aspect is noted when students learn basic principles of positioning and mobility in OTA 112: Therapeutic Media, and then learn new strategies and techniques of positioning and mobility in OTA 114 for persons with hip fractures, OTA 212 for persons with cerebral palsy and cerebrovascular accidents, in OTA 214 in the neurodevelopmental frame of reference, and in OTA 216 for persons with severe head injuries. Each semester students revisit the core content of positioning and mobility yet each semester this knowledge is recalled and linked to new skills sets, new options, and new opportunities while applying these composite skills to different situations and different clients.

The curriculum design incorporates sufficient flexibility and responsiveness for quick accommodation and adaptation to the evolution and changes in interventions, contexts, and roles for occupational therapy personnel and the profession. Course instruction is governed by each course’s sequential topic outline and learning objectives however each instructor may be creative in the use of various pedagogical styles particularly active and collaborative learning methods, although not exclusively. Each course functions pragmatically on an autonomous basis however content and process learning objectives are interwoven with all other required courses through the longitudinal and lateral linkages. A content change in one course is likely to affect a need for change in content and/or sequencing in many or most courses across the curriculum. This curriculum requires effective collaboration and management by the faculty team in order for it function as a whole entity (process) with each course and learning objective being interrelated to other learning objectives in the other OTA courses. A decision to change course content requires an instructional team decision, with the Program Director acting as Curriculum Manager. Administration of the curriculum requires knowledge and maintenance of this dynamic balance of course content across the entire curriculum at all times.

The parameters of this dynamic, spiral process matrix delineate the cognitive (knowledge), intrapersonal (attitudes, beliefs, values, and emotional), social (professional) and performance (technical) constructs and skills required to successfully function as an entry-level occupational therapy assistant. The *Standards of Practice* (2010), *Delineation of the AOTA Standard of Practice for Occupational Therapy* (Crepeau, Cohn, & Schell, 2003), and the *Guidelines for Supervision, Roles and Responsibilities during the Delivery of Occupational Therapy Services* (2004) and provide the basic guidelines for each construct.

References

- Allen, C., Earhart, C.A. & Blue, T. (1992). *Occupational therapy treatment goals for the physically and cognitively disabled*. Rockville, MD: The American Occupational Therapy Association, Inc.
- American Occupational Therapy Association. (2008). *Occupational therapy practice framework: Domain and process (2nd ed.)*. *American Journal of Occupational Therapy*, 62, 625-683.
- American Occupational Therapy Association (2010). *Standards of practice in occupational therapy*. *American Journal of Occupational Therapy*, 64 (publication pending in November /December).
- Caine, R. N. & Caine, G. (1994). *Making connections: Teaching and the human brain*. New York: Innovative Learning Publications.
- Crepeau, E., Cohn, E., & Schell, B. (2009). *Willard and Spackman's occupational therapy, (11th ed.)*, Philadelphia, PA: Lippincott Williams & Wilkins.
- Bundy, A. C., Lane, S. J., Fisher, A. G., & Murray, E. A. (2002). *Sensory integration: Theory and practice*, Philadelphia, PA: F. A. Davis.
- Gilfoyle, E., Grady, A. & Moore, J. (1990). *Children adapt, (2nd ed.)*, Thorofare, NJ: Slack, Inc.
- Guidelines for Supervision, Roles and Responsibilities During the Delivery of Occupational Therapy Services, *American Journal of Occupational Therapy*, 58 (6), 663-667.
- Kielhofner, G. (2008). *A model of human occupation: Theory and application, (4th ed.)*, Baltimore: Lippincott Williams & Wilkins, Co.
- Marieb, E. (2004). *Human anatomy and physiology, (6th ed.)*, Redwood City, CA: Benjamin/Cummings Publishing Co., Inc.
- Moyers, P.A. & Dale, L. M. (2007). Guide to occupational therapy practice. *American Journal of Occupational Therapy*, 53 (3), 247-322.

OTA PROGRAM GENERAL EDUCATIONAL OBJECTIVES:

In accordance with the Mission and Purposes of Parkland College, the OTA Program's Mission, and the Description of the Profession Statement (Standards, 2006), the Parkland College Occupational Therapy Assistant Program's educational program prepares students to:

1. Demonstrate high level, entry-level knowledge and performance competencies of the certified occupational therapy assistant that reflect the philosophy of occupational therapy, and that are well-grounded in the theoretical principles, technology and standards of practice of occupational therapy. Demonstrate knowledge of national requirements for certification and state requirements for licensure to practice.
2. Collaborate with occupational therapy personnel in providing high quality occupational therapy services to diverse populations, across the life span, within the variety of practice contexts, both traditional and emerging practices, in accordance with the standards of practice and the credentialing bodies.
3. Demonstrate effective problem solving and clinical reasoning (critical thinking) skills as valued parts of their professional competency.
4. Advocate and promote the profession of occupational therapy and therapeutic interventions with respect for each persons' inherent dignity, occupational nature, diversity, and right to quality of life.
5. Demonstrate active, responsible professional conduct in accordance with the profession's educational, legal, and ethical standards of practice.
6. Demonstrate civic engagement and professional responsibility for service to communities and populations that are underserved and would benefit from the philosophy, knowledge and skills of occupational therapy.
7. Participate in effective service management and the development and marketing of occupational therapy services for diverse populations and settings.
8. Assist in developing, adapting and maintaining environments that support clients' engagement in occupation.
9. Effectively utilize professional written and oral communication in client and team interactions, and meet the standards for reimbursement of services.

DESCRIPTION OF THE COURSE SCOPE:

FIRST YEAR COURSES:

In the first semester, **OTA 111: Introduction to Occupational Therapy** provides an introduction to the field of occupational therapy and the *Occupational Therapy Practice Framework*. Students explore the scope and purposes of key professional documents that describe the philosophy, framework, purpose and scope of practice of occupational therapy as well as the professional values, ethics and guidelines/standards for effective practice. Included are the role delineation of OT personnel and team members, reimbursement, documentation, and the historical, sociocultural and legislative factors that impact practice. **OTA 112: Therapeutic Media** presents students with knowledge, skills and experiences in analyzing, selecting, adapting and grading of objects, tasks, and environments used in occupational therapy for intervention. Students develop basic competency in activity analysis based on the *Occupational Therapy Practice Framework*. Included in OTA 112 are learning activities to develop students' knowledge and skills in using assistive devices and therapeutic equipment to improve motor and process skills, and to promote occupational performance in work, play/leisure and activities of daily living.

In the second semester, there are three OTA courses, **OTA 113: Health and Occupation I**, **OTA 114: Therapeutic Process I** and **OTA 115: Fieldwork I/Clinic II**, which are integrated and organized in a developmental progression from pediatrics to geriatrics. In accordance with the OTA curriculum design, the first year focuses on knowledge and skills needed to promote occupational engagement for persons with mild limitations or activity restrictions. Each week, students apply the therapeutic practice sequence from referral to discharge planning in the Therapeutic Process course to the address the developmental, health and psychosocial conditions presented in the OTA 113. In OTA 113, the students learn about the signs, symptoms, and etiology of specific health and developmental conditions, and how the related impairments and limitations impact occupational performance. Representative disabilities and client factors have been selected to identify mild occupational performance problems and to sequence therapeutic learning activities. In OTA 114, the students learn how to conduct specific interviews and performance assessments, develop treatment objectives, select, modify and grade treatment activities, and perform specific treatment protocols using therapeutic equipment and activities within the context of the specific health problems. Skills learned in the first semester (OTA 112) are expanded and applied to specific case studies in the second semester.

Fieldwork I assignments are presented in OTA 112 and OTA 115. Fieldwork I assignments are developed to aid the student in developing and applying therapeutic skills within the community, to facilitate appropriate professional behavior, and to prepare students for Fieldwork II assignments in the second year. During OTA 112, Fieldwork I assignments are initially conducted with instructor support to access community resources. Later, the students are assigned to a facility to develop and demonstrate basic therapeutic skills with clients. In OTA 115, students participate in structured assignments in clinical facilities and within the community. Skills learned in OTA 114 laboratory assignments are applied during OTA 115 fieldwork I assignments. In addition, the academic fieldwork I instructors facilitate student participation in group programs within emerging practice areas in the community.

Required support courses during the first year include **BIO 121** and **BIO 122: Anatomy and Physiology I and II**, **PSY 101: Introduction to Psychology**, **PSY 209: Human Growth and Development** and **SOC 101: Introduction to Sociology**. Collectively, these courses provide a basis for understanding the structure and function of the human body, the expression of human behavior and its relationship to social groups to include family, friends, community, cultural groups, and the global society. **ENG 101: Composition I**, prepares the student to use critical thinking skills and to communicate in the written word which is the basis for clinical reasoning and documentation in practice. The first year OTA courses and required support courses are prerequisites to progressing on to the second year OTA course sequence.

SECOND YEAR COURSES:

In the third semester, there are four concurrent OTA courses that include Fieldwork II education. In **OTA 211: Health and Occupation II**, the focus is on identifying and describing specific client factors associated with selected disabilities and diseases that result in moderate impairment and restrictions of occupational performance. **OTA 212: Therapeutic Process II** focuses on the application of OT principles and OTA practice skills during assessment and intervention for persons with selected health problems presented in OTA 211. Students concurrently apply their knowledge and treatment skills during twenty hours per week fieldwork II education in **OTA 213: Fieldwork II/Clinic I**. Fieldwork II education is conducted in participating hospitals, outpatient clinics, school systems, mental health and community-based programs under the supervision of registered occupational therapists (OTR). Students provide individual and group therapy services in accordance with the OTR's recommendations. **OTA 214: Occupational Therapy Theory** focuses on how different frames of reference and therapeutic models can be used as systems for (1) adaptation and/or refinement of activity analysis, (2) for selective and systematic clinical reasoning and problem-solving, and (3) for organization of treatment strategies used by occupational therapy in a variety of clinical settings.

In the final semester of the program, **OTA 215: Health and Occupation III** addresses specific diseases, disorders and related client factors which result in serious or severe life-long health problems, and severe impairments and occupational restrictions. OTA 215 is closely coordinated with **OTA 216: Therapeutic Process III** which emphasizes the OT principles and OTA clinical roles and responsibilities for implementing treatment of persons with severe occupational dysfunction. Students concurrently apply their knowledge and treatment skills during twenty hours per week fieldwork II education in **OTA 217: Fieldwork II/Clinic II**. Finally, **OTA 218: Therapeutic Groups** prepares students to plan and lead group activities, and to further develop interpersonal communication skills, conflict negotiation, and supervisory skills for therapeutic and team relationships in a variety of practice settings. In addition, the students learn how to direct activity programs and design professional development plans for life-long learning and continuing competency.

The supportive courses required during the second year include **ENG 102: Composition II**, and a **Focused Elective** from either Psychology or Sociology. The focused elective course provides students with the opportunity to engage in a more concentrated area of study that addresses their professional goals and interests such working with children or older adults, or working with persons with mental and social problems. The composition course further develops students' skills to write term papers and use information technology to conduct research.

CURRICULUM SEQUENCE

Associate in Applied Science (72 Cr. Hrs.)

<p>FIRST YEAR Fall Semester OTA 111 Introduction to Occupational Therapy 3 OTA 112 Therapeutic Media 3 BIO 121 Anatomy & Physiology I 4 PSY 101 Introduction to Psychology 4 SOC 101 Introduction to Sociology <u>3</u> 17</p>	<p>FIRST YEAR Second Semester OTA 113 Health & Occupation I 3 OTA 114 Therapeutic Process I 3 OTA 115 Fieldwork Level I 4 BIO 122 Anatomy & Physiology II 4 PSY 209 Human Growth & Development 3 ENG 101 Composition I <u>3</u> 20</p>
<p>SECOND YEAR Fall Semester OTA 211 Health & Occupation II 3 OTA 212 Therapeutic Process II 3 OTA 213 Fieldwork II/Clinic I 5 OTA 214 Occupational Therapy Theory 3 ENG 102 Composition II <u>3</u> 17</p>	<p>SECOND YEAR Spring Semester OTA 215 Health & Occupation III 3 OTA 216 Therapeutic Process III 3 OTA 217 Fieldwork II/Clinic II 6 OTA 218 Therapeutic Groups 3 Concentration Elective <u>3</u> 18</p>

- NOTE 1: This is a selective admissions program – you must be admitted into the program before taking OTA courses. Placement into ENG 101, MAT 095, college-level reading (83 or above on the ACT COMPASS exam), and computer competency (minimum 21 or equivalent) is required for admission to the program. See a counselor/advisory or the health professions manager to advise you through the application process.
- NOTE 2: Required general education courses must be completed prior to or during the assigned semester.
- NOTE 3: Credit/no credit option not available for required courses in this program. Students are required to keep a current CPR card, 2.0 minimum GPA, a C or higher in all OTA and BIO courses, and a passing clinical grade in all OTA fieldwork courses.
- NOTE 4: A history of felony conviction may limit clinical placement and license to practice. A background check may be required prior to participating in several clinical settings.
- NOTE 5: Students transferring in BIO 121 and BIO 122 credit that does not include a cadaver lab must take BIO 162 and BIO 163.
- NOTE 6: Successful completion of high school chemistry, CHE 100 or CHE 106, within the past three years; or satisfactory score on Parkland's chemistry competency test is a prerequisite for BIO 121.
- NOTE 7: All Level II Fieldwork requirements for OTA 213 and/or OTA 217 must be completed by the end of the following semester in order to progress and/or graduate from the program. Fieldwork II alternates may be required to take OTA 213 and OTA 217 in a different sequence.
- NOTE 8: Upon successful completion of program, graduates are eligible to take the certification examination given by the National Board of Certification in Occupational Therapy (NBCOT) to become a certified occupational therapy assistant (COTA). Licensure for COTAs is required for practice in the state of Illinois.

ACADEMIC POLICIES

GRADING SYSTEM:

All OTA courses use the same grading system.

A = 90 - 100 (4.0)

B = 80 - 89 (3.0)

C = 72 - 79 (2.0)

D = 70 - 71 (1.0)

F = Below 70 (0.0)

GRADE APPEAL PROCESS:

A student who is not satisfied with the final grade that he or she received in a course is advised to, first, meet with the course instructor. If the student continues to be dissatisfied with the procedures used to calculate the grade, then the student may appeal the grade according to the steps outlined in the **Parkland College Student Policies and Procedures Manual**, Grade Appeal section.

PROGRESSION IN THE PROGRAM:

1. A student may progress in the OTA program by obtaining a “C” or higher in all required courses. Each required course functions as a prerequisite to the next semester of required courses. If a student obtains less than a C in any required course, the student has not completed the prerequisite requirements to progress. Therefore, the student must retake the course in order to progress in the OTA program. A grade of “C” or better must be obtained in all required courses of the Associate in Applied Science degree in Occupational Therapy Assistant in order to graduate.
2. Grades of “I” must be completed in accordance with the terms outlined on the **Incomplete Grade Form**, by the designated due date. An Incomplete Grade Form must be completed by the instructor and student for all grades of “I.” Any incomplete assignments in OTA courses are to be completed prior to the first week of classes in the next semester to determine eligibility to progress. Grades of “I” are given based on the instructor’s decision in accordance with the policies and procedures outlined in the college catalog. A student should not assume that a grade of “I” will be given for any assignment or course prior to meeting with the instructor.
3. A student who receives a grade lower than a "C" in any occupational therapy assistant course must drop out of the program. The student who has been unsuccessful in an OTA course is be required to meet with the Program Director to develop an individualized **Academic Action Plan (AAP)**. Refer to the *Student Withdrawals and Readmission* sections of this handbook. The student may re-enter the program to re-take the failed course, pending eligibility, in one year.

4. An **Academic Action Plan** includes a description of the factors that appear to have led to the student's unsuccessful performance, identification of academic needs, measurable academic goals, a plan of actions for a set period of time, and a description of the consequences in the event of non-compliance with the AAP. Often, the student and Program Director will collaborate with the **Center for Academic Success** in the development and implementation of goals in the Academic Action Plan.
5. A returning student who plans to retake the OTA course must notify and meet with the Program Director to discuss his/her intention to retake the course at least 2 months prior to the anticipated re-entry date. There will be a review student's progress on the Academic Action Plan and determination of eligibility. A **Faculty Review Committee** may be organized to assist in the review of a student's progress and request to re-enter the OTA Program. The returning student will be assigned a fieldwork II Alternate status upon reentry.
6. Upon satisfactory completion of the OTA course after the second attempt, then the student will be able to progress into the next semester of the OTA curriculum. For more information, refer to the sections on **Student Withdrawals and Readmission** section in this handbook for clarification of program policies.
7. If a student fails an OTA course two times or fails two OTA courses in the OTA course progression, the student may no longer be eligible to be in the program. The student will be advised to meet with the Career Center, Counseling and Advising and/or the Center for Academic Success to develop an academic and career plan within a different focus of study or career path.
8. A student who fails a Fieldwork II course may repeat the course one time following a period of remediation based on an individualized Academic Action Plan. If the student is unable to pass a fieldwork II course for a second time, then the student will be ineligible to complete the OTA Program. The student will be advised to seek career advisement from representatives at the Career Center, Counseling and Advising Center, and/or from other community resources.
9. Grades of "D" or "F" made in any required courses in the specific course sequence are not compatible with continued progression in the program. These deficiencies must be corrected before the OTA student will be allowed to continue on the outlined course sequence.
10. Criminal background checks are required for several fieldwork practice areas during Level I and Level II fieldwork education. If a student does not pass the criminal background check, then the student will not be able to attend the fieldwork assignment. It is recommended that the student contact the Illinois Department of Financial and Professional Regulation [www.IDFPR.com; (217)782-8556] to determine if the conviction will prevent him or her from becoming licensed to practice.

GENERAL CLASSROOM CONDUCT:

1. All OTA students are encouraged to collaborate with other OTA students and instructors to develop an **effective learning community** for the next two years.
2. OTA students are expected to demonstrate **effective work ethic behaviors** in the classroom, in fieldwork education, and in execution of course requirements based on the *Parkland College Work Ethics Student Handbook*. These behaviors include Attendance, Character, Teamwork, Appearance, Attitude, Productivity, Organizational Skills, Communication, Cooperation, and Respect.
3. OTA students are expected to attend class on time and be prepared to engage in the learning objectives and activities outlined in the course topic outlines. See **Attendance & Punctuality Policy**.
4. OTA students are encouraged to be **active participants** in classroom discussions, to share ideas, ask questions, to express differences in perspectives, to explore creative problem-solving, and to engage in critical analysis of course content.
5. OTA students are expected to interact with all students and faculty in a **respectful manner**. A student will be reminded one time, in a respectful manner, to refrain from using disruptive or disrespectful behavior. A student may be requested to leave the classroom for a designated period of time (e.g., until composed or until the next class period) if the student is unable to stop the disruptive behavior. A student who has demonstrated frequent disruptive behavior will be requested to meet with the instructor, the program director and/or the Vice President for Student Services for remediation and/or disciplinary action. Refer to the *Parkland College Student Policies and Procedures Manual, Student Conduct Code* for additional information.
6. **Scheduling, time and task management skills** and **prioritizing daily activities** are critical work ethic behaviors essential to be an effective student in the OTA Program, and to be an effective clinician. You are responsible for modifying your skills to effectively schedule your assignments with your other responsibilities. Contact the course instructor or Counseling and Advising Center for assistance.
7. **Conflict Resolution:** OTA students are encouraged to engage in proactive, solution-focused, problem-solving approaches when conflicts arise. Students are encouraged to discuss concerns and issues with the instructor, program director and/or Counseling and Advising. The OTA faculty will empower each student to use effective conflict resolution strategies in their academic interactions.
8. Students will be evaluated on their **professional behavior and work ethic behaviors** during classroom, clinical and laboratory assignments, and the completion of assessments and homework. The primary objective for evaluation is to provide feedback for the learner to improve professional and work behavior. Secondly, the evaluation will aid instructors and students in defining specific objectives in need of remediation..

- A student who demonstrates significant work ethics problems (Attendance, Character, Teamwork, Appearance, Attitude, Productivity, Organizational Skills, Communication, Cooperation, and Respect) will be considered ineligible to participate in Level I and/or Level II fieldwork in the community. An **Academic Action Plan** will be required which may include working with Counseling and Advising or other community resources.

GENERAL CLASSROOM POLICIES: The following policies apply to all OTA courses.

Attendance & Punctuality

- Students are expected to attend all scheduled classes and clinical assignments **100% of the time**. However, it is preferred that students do not attend class if their illness may be easily transmitted to other students and faculty. Attendance will be taken at the beginning of each class and evaluated as follows:

Absence	Status	Actions
0-1 day absence	Excellent/Good	Student must contact instructor prior to class time by phone or email.
2 days consecutive absence	Satisfactory	1 point deducted from the final grade. Student must contact instructor prior to class time.
2-3 days total absence	Fair	3 points deducted from the final grade. Student must contact instructor prior to class time.
3 consecutive days absence	Fair	3 points deducted from the final grade unless accompanied by a physician's or nurse practitioner's note. Student must contact instructor prior to each class time. Student must meet with the instructor(s) to discuss course progress.
4 or more consecutive or total days	Unsatisfactory	10 points may be deducted from the final grade. Student must have a physician's or nurse practitioner's note. Student must meet with the instructor and program director to discuss academic progress. Student may be advised to withdraw from the OTA Program following prolonged or habitual absences.

- Any student who is absent from class, clinical, or laboratory periods must contact the instructor prior to the scheduled time. Students are responsible for making arrangements with either their peers and/or the instructor to obtain the information that was missed during the absence.
- Parents** are expected to attend class in accordance with the stated attendance policy. It is advised that parents find alternative care for children who are sick for more than 1 day.
- Punctuality** to scheduled classes and clinical assignments is expected. Habitual tardiness is considered to be an attendance problem. A student who is late to class more than two times may be required to meet with the course instructor to develop a written attendance plan that outlines the consequences for continued absence. 1 point may be deducted from the final grade for each day tardy.

5. **Sleeping or napping** in class constitute an absence. If a student sleeps more than 10 minutes in a class period or requires frequent reminders to remain awake, then the instructor may request that the student leave the class for that session in order to obtain proper rest for academic performance. The student will be marked as absent for that class period.
6. **Personal vacations** are not to be scheduled during required class, laboratory or clinical times and are considered unexcused absences.

Assignment Completion & Deadlines

1. Assignments are due at class time on the designated due date. Many assignments are required to be submitted electronically through the Angel Drop Box. Assignments will be accepted after the due date only with prior approval from the course instructor. Late materials will be deducted points for each day it is late unless otherwise approved, as stated in the course syllabus. Habitual lateness on submission of assignments will require a meeting with the Course Instructor and the Program Director to develop an Academic Action Plan to address work ethics problems.
2. Papers must be typewritten using Word, be complete, neat, and legible. Written assignments will be double spaced, using 12 pt font size and Times New Roman font style.
3. Papers must follow the guidelines for professional writing based on the **American Psychological Association (APA) Manual**. Students must demonstrate basic APA referencing skills for satisfactory completion of the OTA Program. Refer to the materials available from the **Writing Lab** which are easy to access online at <http://www.parkland.edu/cas/WritingLabHandouts.htm>
4. **Academic honesty** is required in completion of all assignments. Plagiarism constitutes grounds for dismissal and/or a failing grade for the assignment. Students must reference all materials taken from any source, using APA referencing, whether it be for a written assignment or oral presentation. You may always ask the instructor or the Center for Academic Success for clarification prior to submitting the assignment. Review the *Parkland College Student Handbook* for further information pertaining to Academic Honesty.

* **Plagiarism** is defined as misrepresentation of ideas or words as one's own which belong to another author; copying or summarizing any statements from published materials without referencing.

Assessments & Examinations

1. Most quizzes are **formative assessments** administered through Angel. The students are able to select the “best” time take the quiz on-line during the designated dates. All quizzes are timed (e.g.; 15 questions in 30 minutes). The student should read all required readings prior to taking the quiz. It is assumed the students will be using their textbooks

while taking the quiz. It is cheating to take quizzes together.

2. **If a quiz is missed**, you will be allowed to retake it if you have contacted the instructor prior to the absence. If the quiz was missed due to management problems then the student will be required to take the quiz however 90% of the quiz points will be deducted from the final score. If a student misses more than two quizzes, then the student will be required to meet with the instructor and the Program Director to develop an Academic Action Plan.
3. A student who is taking a quiz on Angel may be interrupted by service problems. The student must immediately contact the instructor and describe the problem and request the quiz be reset. If a student has a habit of requesting resets, the student will be asked to make other arrangements to take quizzes (i.e., take quiz at other times of day, on a campus computer).
4. **Extended test and quiz times** are granted for students who have documented requests obtained through Disability Services.
5. **Cheating:** It is cheating to copy other student's work on assignments or to copy answers during quizzes and exams. You will be notified by the instructor if you are suspected of engaging in dishonest behaviors such as cheating. You will receive a 0 for the assignment, quiz or exam and you will be required to meet with the Course instructor, the OTA Program Director and/or the Office of the Vice President of Student Services. Review the *Parkland College Student Handbook* about Academic Honesty.
6. **Final examinations** in any OTA course must be taken during the scheduled examination period. No student will be allowed to take an exam prior to the regularly scheduled and published times. Be sure to check the calendar prior to making any holiday arrangements.
7. **If an exam is missed** due to absence, then the instructor will determine the makeup policy. Students are required to contact to instructor before missing the exam, and to schedule a time to take the exam. The exam must be taken within 48 hours of the previously scheduled exam time. Students may not make up exams based on unexcused absences.

Computer Skills & Competencies

1. Basic computer skills required to participate in the OTA Program include ability to use Word, to write single and group e-mails, to use the Internet, to conduct on-line research, to use Powerpoint, to access grades from Parkland Connection, and ability to participate in on-line instruction and assessment using Angel.
2. Students are required to demonstrate basic computer competency in keyboarding and basic computer skills based on the **Computer Competency Assessment**.
3. A student who demonstrates below average performance will be required to complete a Computer Technology Course (CTC) to improve computer skills.

4. Students are **required to demonstrate basic computer competency skills as a requirement for graduation.**

Cell Phone and Lap Top Policy

Cell phones can be invaluable tools for students to use while they travel to and from classes and while traveling to fieldwork sites. Students must keep phones turned off during all OTA courses unless otherwise approved by the instructor. The student will be asked to leave the classroom should there be repeated failure to respect this policy. Texting during class and lab time is prohibited.

Parkland College has WiFi so that students may access the Internet with a laptop. Laptops may be used during class time for **educational purposes only** such as taking class notes, using Angel to access class and lab materials, and for research to address course related questions. If a student is found to be using his/her laptop during the scheduled class time for non-course activities such as emailing, Facebook, tweeting, shopping, or participating in similar activities, then the student may be considered to be not in attendance and/or may lose laptop privileges for a designated period of time during the semester.

Teaching & Evaluative Methods

Students will participate in a variety of teaching and evaluative methods to foster concept development, clinical reasoning, professional communication, professional behavior and teamwork, and practice skills. Refer to the Educational Philosophy section for a more detailed description of the teaching methods used in the OTA Program.

TEACHING METHODS	EVALUATIVE METHODS
Lecture-Discussion	Objective written exams
Small group discussions/assignments	Case studies, class participation, lab proficiency exams
Active/collaborative learning exercises	Activity Analysis, case studies, group presentations
Fieldwork I and II experiences	Fieldwork I and II Performance Objectives
Peer instruction	Final Student Projects, Poster Sessions, seminars
Laboratory Experiences	Lab proficiency exams, worksheet completion
Demonstrations	Case Study/Intervention Plans
Writing treatment plans	Case study assignments, fieldwork education

	assignments
Practice skills	Fieldwork objectives
Audiovisual materials	Video Guide completion, Group projects
Computer-assisted instruction	On-line testing
Required reading assignments	On-line weekly objective quizzes
Community Observations	Fieldwork homework
Investigative learning	Research papers, problem-solving assignments
Fieldwork Partnerships	Peer feedback and mentoring

1. Students are encouraged to get to know their classmates, to form regular study group sessions, to develop email and telephone networks, and to develop cooperative learning skills without doing for each other.
2. Some occupational therapy courses (OTA 112, OTA 114, OTA 115, OTA 212, OTA 216) have evening times for laboratories or fieldwork experiences. Students who live at a distance from Parkland and the fieldwork facilities might consider making arrangements to stay within the local area in times of inclement weather.

Academic Accommodation

1. **Academic Accommodations** are made for students who have a documented disability that may impact their learning and academic performance. All requests for academic accommodation must be made prior to the assigned academic activity.

Office of Disability Services: If you think you have a disability for which you may need an academic accommodation, please inform the instructor as soon as possible and/or contact:

Becky Osborne, Coordinator X-149 353-2082

Center for Academic Success: If you find yourself needing assistance of any kind to complete assignments, stay on top of readings, study for tests, or just to stay in school, please contact one of the following staff at the Center for Academic Success:

Anita Taylor	Gail Hoke
Room: D120	Room: D120
Phone: 353-2005	Phone: 351-2441

You may also email the CAS at CenterForAcademicSuccess@parkland.edu

2. The OTA Program agrees to comply with the guidelines established by the *Americans with Disabilities Act*.
3. The OTA applicant or student may be requested to obtain professional advisement in writing to clarify their learning needs.
4. Learning materials and instruction may be individualized to address student's learning and performance abilities unless it is determined that modification will sacrifice core knowledge and performance objectives required for entry-level technical performance in the profession. The OTA Advisor and faculty will contact the American Occupational Therapy Association, Committee on Education, for advisement.
5. Adaptation of Fieldwork Level I and II assignments and performance evaluation will be conducted on an individual basis for each facility, as needed. The academic fieldwork coordinator and instructors are required to maintain student's privacy in accordance with the **Family Education Rights to Privacy Act (FERPA)**. Students are responsible for contacting and informing the fieldwork education facility about their specific needs for accommodation. The academic fieldwork coordinator will collaborate with fieldwork educators and the student to develop **reasonable accommodations** for the specific site requirements. If the fieldwork site is unable to make reasonable accommodations, then the student may be re-assigned to another site upon availability.
11. Students are responsible for requesting accommodations for his or her disability on the first day of the fieldwork assignment. The student will provide written documentation of the accommodation to the Academic Fieldwork Instructor and the Clinical Instructor (i.e.; lifting restriction; extended documentation time due to learning disability). The Academic Fieldwork Instructor will assist the Clinical Instructor in making reasonable and appropriate accommodations in accordance with the facility's policies and procedures, and the Americans with Disabilities Act (ADA).

Student-Faculty Advisement

1. Registration for courses can be made on-line. The OTA Faculty Advisor will "lift" the registration flag after reviewing the student's records so that the student may register for classes by phone.
2. All OTA faculty are required to provide weekly scheduled office hours for individual learning strategies and advisement sessions. Students should feel free to take the opportunity to contact their advisors and/or instructors as needed during these scheduled hours. Special appointments may be made for meetings at other times.
3. OTA students are required to meet with the OTA Instructor and/or OTA Program Director when they are;
 - receiving a C or below in any OTA course,
 - failing any OTA assignment,

- demonstrating repeated work ethics problems, and/or
- demonstrating unsatisfactory fieldwork performance.

These conferences may be scheduled at midterm or at anytime during the semester. The purpose of the conference is to provide 1:1 advisement on individual student performance, and exchange feedback.

4. The OTA course instructors are available to provide advisement and/or referral to other college and community resources for students in need of additional assistance, such as;
 - **Financial Aid** for financial assistance/scholarships
 - **Center for Academic Success** for assistance in study skills, test taking, note writing, writing papers and related academic skills.
 - **Tutorial assistance** for OTA courses
 - **Counseling/Self-Help Programs**
5. A student may be eligible for **Perkins Tutor** based on the Perkins criteria. Frequently, tutors are graduates of the Parkland College OTA program. Contact the instructor to determine if you are eligible for a Perkins Tutor and if a tutor is available.

Student- Faculty Evaluations

1. **Ongoing evaluation** of student performance is used to determine progress and deficiency will be called to the student's attention. Each semester, the instructor will review and summarize the students' academic performance. Midterm and final grades are posted to the Parkland Connection and Admissions. Students are able to view their assignment and course grades at any time through the grade book in Angel. Remember that each grade category and each grade are weighted differently according to the published Course Requirements on the course syllabus. (For example, there may be 10 quizzes that account for 20% of your final grade, and only 2 exams that account for 50% of your final grade.)
2. Students will receive a **written evaluation** of their fieldwork performance from the clinicians who are Registered Occupational Therapists (OTRs) and/or Certified Occupational Therapy Assistants (COTAs) at midterm and at the end of the fieldwork assignment.
3. Each semester, the program director will evaluate all students' transcripts to determine if the student has met the **pre-requisites for progression** into the next semester, and the requirements for graduation. All students are responsible for completing a Petition to Graduation form by the deadline posted in the *Parkland College Catalog* and the *Parkland College Class Schedule*. A student may be required to meet with the Program Director to discuss progression through the program.
4. **Classroom assessment techniques** are used throughout each course to develop a collaborative learning environment, building upon on-going student and instructor feedback about the learning process. In addition, students' will be requested to participate in evaluations of their learning preferences and learning strategies to provide both

instructor and students with information about how effectively the student is learning to learn.

5. At the conclusion of each course, students will be requested to write an evaluation of the course content, process, laboratory or fieldwork experience and individual faculty or clinicians' performance. Anonymity of each student's responses is assured. None of the OTA faculty have access to the course evaluations until the evaluations are summarized by an appointed secretarial staff.

STUDENT-ADVISORY BOARD REPRESENTATION:

1. Student representatives are selected by their peers to attend advisory committee meetings to offer constructive input with regard to curriculum, clarification of policies and other topics.
2. Student representatives may be invited to attend the curriculum and general faculty meetings to discuss specific topics.

STUDENT WITHDRAWAL POLICIES AND PROCEDURES:

1. The OTA student is **required to meet** with the Program Director for an exit conference prior to withdrawing from an OTA course and the OTA Program. During the exit conference, the student and Program Director will develop an **Academic Action Plan** which outlines the problems leading to withdrawal, strategies for preparing to re-enter, and the criteria for eligibility for readmission into the OTA Program.
2. The OTA student is responsible for withdrawing from any course.
3. Course withdrawals must be conducted prior to or by the designated "Last Day to Withdraw" as outlined in the semester's class schedule in order to receive a grade of "W". The deadline for last day to withdraw with a W grade is published in the *Parkland College Catalog*, and the *Parkland College Class Schedule*.
4. Students who withdraw from the OTA Program will be assigned a **Re-admission Status** as designated by one of the following categories:
 - **Re-Application Level 1 (probationary)**
 - **Re-Application Level 2**
 - **Re-Application Level 3**

Refer to the criteria for each re-admission status under the Re-Admission Policies and Procedures section.

5. A student who withdraws from the OTA Program and does not participate in an exit conference with the Program Director and does not develop an Academic Action Plan will be given a **Re-Application Level III Status**.

RE-ADMISSION POLICIES AND PROCEDURES:

1. A prospective returning student, who plans to re-enter the OTA program, must **notify the Program Director at least 2 months** prior to the anticipated re-entry date. The prospective returning student is required to meet with the Program Director to discuss his/her academic plan. A student must retake a failed OTA course. The program director will review the student's progress on the Academic Action Plan and determination of eligibility. A **Faculty Review Committee** may be organized to assist in the review of a student's progress and request to re-enter the OTA Program. The returning student will be assigned a Fieldwork II Alternate status upon reentry.
2. Re-admission to the OTA Program is contingent upon the student's satisfactory performance of the terms outlined in the Academic Action Plan, and the availability of class seats and Fieldwork II assignments. Failure or unsatisfactory completion of the Academic Action Plan would be considered as evidence of non-eligibility to re-enter the OTA Program.
3. Students who demonstrated a history of **unsatisfactory work ethics or professional behavior** may not re-enter the OTA Program except under special circumstances.
4. All students seeking re-admission into the OTA Program will be assigned a **FWII Alternate status** for Fieldwork Level II assignments. Lack of class seats and FWII Alternate positions may delay re-admission.
5. The **OTA Program Re-Application Level I Status** signifies that the student has withdrawn from the program, and plans to continue within one academic calendar year to satisfactorily complete outstanding OTA course work. A student who leaves the OTA program must meet with the Program Director to develop an **Academic Action Plan**. The prospective returning student will be assigned a probationary Re-Application Level I Status for a **one year period only**.
 - If the student does not return to the OTA Program then the student's status will be changed to **Re-Application Level II status**.
 - If the student is unable to satisfactorily complete the required course(s) within the one year period, then the student will automatically obtain a **Re-Application Level III status**.

EXAMPLES:

- 1) **Personal/Health problem:** The OTA student who withdraws from the OTA Program due to personal or family issues, and is in good standing (satisfactory grades and course work prior to withdrawal), obtains a Re-entry status. The prospective returning student meets with the Program Director prior to the projected start date. Eligibility for re-entry into the OTA Program is pending availability of seats and advisement with the Program Director.
- 2) **Unsuccessful Completion of a Required Course:** The OTA student who has

failed one OTA course or one required support course is ineligible to progress until these pre-requisites are satisfactorily completed. The student must meet with the Program Director to develop an Academic Action Plan that addresses the factors that led to the failure, and describes the actions to be taken to address these problems. The student must withdraw from the OTA Program.

- If the required course was a non-OTA course, then the student must pass it prior to consideration for re-entry into the OTA Program.
- If the student did not pass an OTA course, then the student must meet with the Program Director who will review the student's progress on the Academic Action Plan and determine eligibility for re-entry.
- If the student fails to comply with the Academic Action Plan, then the student may be identified as ineligible to re-enter the OTA Program at that time. A Faculty Review Committee may be organized to assist in the review of a student's progress and request to re-enter the OTA Program.

6. The **OTA Program Re-Application Level 2 & 3 categories** signify that the student has been inactive in the program for an extended period of time, and/or that the student has failed to complete the program requirements on more than one occasion.

(a) **Re-Application Level 2 status** is obtained when the prospective student has been an inactive participant in the OTA program for greater than one academic calendar year. A Re-Application Level 2 status may be granted for a period of two academic calendar years from date of withdrawal from the OTA Program.

- A prospective student who has been withdrawn from the OTA Program for greater than one academic calendar year will be required to sit for **Proficiency Content and Clinical Exams** based on OTA course work completed prior to withdrawal. Satisfactory completion of all Proficiency Exams is required for consideration of readmission into the OTA Program.
- A prospective student who has been withdrawn for more than two academic calendar years is not likely to be successful in completing the program and passing the NBCOT Certification Examination for Occupational Therapy Assistants. This student will be assigned a Re-Application Level III status.
- If the applicant who continues to be interested in seeking a degree in the Occupational Therapy Assistant Program will need to reapply to the program and start the OTA Progression in the first semester.

(b) **Re-Application Level 3 status** is obtained when a student has:

- Failed a required OTA course two times during the scheduled course sequence;

- Failed two Level II fieldwork assignments in OTA 213 and/or OTA 217.
 - Failed the Re-Application II Proficiency Exams and/or;
 - Lapsed in participation in the OTA Program for greater than 2 academic calendar years from withdrawal date.
7. **Under Re-Application Level 3 status**, the student must reapply to the OTA Program using the Selective Admission process, and may become eligible to participate as an OTA first year, first semester student by:
 - A. Submitting in writing to the Program Director reasons why the student should be considered for readmission. This letter should specifically show evidence of satisfactory behavior changes that address the problems which resulted in the withdrawal/ failure in the OTA Program and will be reviewed by a **Faculty Review Committee** for recommendations.
 - B. A prospective returning student's academic history, records of attendance to OTA class and fieldwork, and assessments of work ethics performance will be strong determining factors in the total consideration for readmission.
 - C. Faculty review of request for re-admission and previous academic performance will be conducted.
 8. A student who withdraws from the Occupational Therapy Assistant Program for a second time will be ineligible for re-application or readmission.
 9. A student who has failed a required OTA course two times during the scheduled course sequence will be ineligible for re-application or readmission into the OTA Program.
 10. A student who has failed two Level II fieldwork assignments in OTA 213 and/or OTA 217 will be ineligible for re-application or readmission into the OTA Program.

PARKLAND COLLEGE HEALTH PROFESSIONS HIPAA POLICY:

Parkland College Health Professions Department will implement and adhere to the HIPAA Act of 1996. All students who will be attending to patients/clients will receive HIPAA education and training. It is the practice and philosophy of the Health Professions programs to protect the interest of patients and to fulfill the legal obligations mandated under HIPAA.

Definition: Protected Health Information (PHI) is any information that identifies an individual

AND relates to:

- 1) The individual's past, present or future physical or mental health; OR
- 2) The provision of health care to the individual; OR
- 3) The past, present or future payment for health care.

Information is deemed to identify an individual if it includes either the patient's name or any other information taken together that enables someone to determine an individual's identity, such as, date of birth, gender, medical record number, address, phone number, email address, social security number, or full face photograph.

Implications for Students

HIPAA has important implications for Health Profession students and their education. Protecting the privacy of your patients' health information must be foremost in your mind as you are considering how you will communicate what you are learning with faculty, clinical staff, and fellow students. When preparing case specific presentations, papers, discussions, and reports, you must avoid disclosing patient information that could identify the patient.

Consequences

1. Students providing information to the media will be dismissed immediately.
2. The student will receive a written warning when the HIPAA violation appears accidental (such as leaving a chart open).
3. The student will be expelled if a willful HIPAA violation occurs, such as looking up information on a patient without good reason; taking pictures of images with a cell phone, etc.
4. Any violation of confidentiality may result in removal from a clinical site and dismissal from the program.

Student Expectations

Students are expected to observe the standards of conduct established by the college and health care agencies.

1. All patient/client/resident records, verbal or written, are confidential (i.e. the chart, reports, notes from the record, images and any other information).

2. Patient/client/resident records may not be duplicated or removed from the health care setting with patient-identifiable PHI.
3. Students must be protective of patient/client/resident information once it is removed from the health care setting (notes from records must not contain PHI, be left open for public view, left open in the classroom, etc.).
4. All identifying patient/client/resident information (surgical schedules, printed orders, EMR, etc.) should be disposed of properly at the health care setting.
5. Students must not discuss patient/client/resident, staff or care issues in public with friends, family, fellow students, or other patients, including cafeterias, elevators, bars, restaurants, etc.
6. If a patient chooses to be “anonymous” in the hospital, no information should be discussed, even the room number.
7. If inquiries are made by family or other individuals, the patient/client/resident must give full consent before disclosure of information is discussed or shared.
8. Release of medical information to other agencies requires a signed release from the patient/client/resident. Once the release is signed, send only the requested information and nothing more.
9. Students are responsible for computer login and password information, if applicable.
10. Students must report any HIPAA violations to the course instructor/coordinator or program director immediately.

NOTE: All students will review the HIPAA policy at Parkland College, pass an assessment test, and sign the HIPAA agreement, prior to attending clinical.

MANDATED REPORTING OF SUSPECTED ABUSE AND/OR NEGLECT

Occupational therapy personnel, OTA faculty and OTA students are required to report to designated authorities when he/she suspects that a client has been abused or neglected during the performance of services provided by any member of the professional team, supportive staff and ancillary care providers, and/or family members. The following procedure is required by all OTA students who may witness behavior that may be interpreted as abusive or negligent.

Abuse is defined as any knowing, intentional, or negligent act by a caregiver or any other person that causes harm or a serious risk of harm to a child or vulnerable adult.

For additional information you are directed to look at the following websites to protect persons who are vulnerable.

Administration for Children and Families

<http://www.childwelfare.gov/can/>

Illinois Department of Children and Family Services

http://www.state.il.us/dcf/faq/faq_faq_can.shtml

Administration of Aging:

http://www.aoa.gov/aoaroot/aoa_programs/elder_rights/ea_prevention/whatisea.aspx

Illinois Department on Aging:

<http://www.state.il.us/aging/1helpline/helpline-main.htm>

The following **OTA Program Procedures** for incident reporting and documentation are required for all persons involved in fieldwork education program (clinical faculty, academic fieldwork educator and student);

1. Immediately contact the on-site fieldwork educator and follow recommendations and procedures of the facility.
2. Contact the academic fieldwork instructor and the academic fieldwork coordinator within 2 hours of incidence either by phone and/or email giving detailed account of the incidence.
3. The on-site fieldwork educator is required to contact the academic fieldwork instructor and the academic fieldwork coordinator to discuss incidence, student advisement and actions required by student.
4. The student, academic fieldwork instructors and academic fieldwork coordinator are required to comply with the legal procedures stated by the laws that safeguard the protection of vulnerable populations (Ex.: Office of Inspector General [OIG] for persons with developmental disabilities; Elder Abuse Hotline).
5. Students and faculty are required to contact and submit documentation of the incident and any actions taken to the OTA Program Director within 24 hours of the incident.

Failure to comply with the steps of these procedures may result in the student's and/or faculty member's removal from the fieldwork setting and/or course.

FIELDWORK I POLICIES:

1. Satisfactory completion of all Fieldwork Level I assignments is mandatory before the student can progress to Fieldwork Level II. The student must obtain a C+ (80 points) or

better on all FWI assignments to satisfactorily complete FWI requirements.

2. Since there is a close correlation between FWI and FWII experiences, a failure in Fieldwork I experiences constitutes a failure in the course and prohibits progression in the OTA curriculum. A student may fail OTA 115 Fieldwork I course if he or she fails one assignment or has significant professional behavior and work ethics problems.
3. Students are expected to plan, execute, and complete all FWI assignments according to the guidelines outlined in the OTA 112 and OTA 115: FWI assignments. Transportation to the FWI facility is the student's responsibility.
4. The Fieldwork I Coordinator makes the community group assignments. No assignments will conflict with other required courses. However, students may be required to modify their work schedule to participate in Level I fieldwork assignments.
5. FWI Clinical Instructors, either OT clinicians or other designated professionals, will conduct an objective written evaluation of the student's clinical performance. A combination of clinical instructor and course instructor evaluations will contribute to the FWI Performance Evaluation and grade.
6. Students are expected to adhere strictly to each facility's policy and procedures. Misconduct may require the student to leave the facility and may be designated as a failure of that assignment and/or the course.

FIELDWORK II POLICIES:

1. Students prepare for Fieldwork II participation by completing a Fieldwork II Preference Form at the end of the second semester. Students may not always get their preferred choices due to limitations in availability of fieldwork sites. The following criteria are used to make Fieldwork II assignments:

Type of Fieldwork Sites Available	Student FW Preferences
Duration of Assignment (8 or 16 weeks)	Academic Skills
Travel Distance from permanent address	Professional Behavior/Work Ethics
Clinical Instructor Experience/ Teaching Style	No < than 2 and no > than 3 sites
Clinical Instructor availability	Organizational changes

2. Fieldwork II assignments are arranged by legal contracts developed between Parkland College and each community agency. Students should be aware of the legal/ethical relationship that is established and the ensuing responsibilities. Thus, students are not at liberty to arrange or change their fieldwork assignments.
3. FWII assignments are developed for 8 week (160 hours) or 16 week (320 hours) sessions

for a minimum total of 640 hours during the second year. Students are required to attend FWII assignments for a minimum of 18 hours per week up to a maximum of 20 hours per week. Several FWII assignments require that the student plan for one hour travel time (i.e.: Decatur, Mattoon, Bloomington).

4. Transportation to the FWII facility is the student's responsibility.
5. Students will be assigned to no more than three different fieldwork sites in the second year according to the *2006 Standards for an Accredited Educational Program for the Occupational Therapy Assistant*. The only exceptions to this rule are for a student who has failed one fieldwork II assignment and/or for a student whose fieldwork was terminated during the assignment due to onsite problems. The returning FWII student would be reassigned to a new fieldwork II facility which might result in a maximum of four settings.
6. A student is ineligible to enroll in and/or attend a Level II Fieldwork without a current health record and current CPR certification on file in the Health Specialist's office before the first day of school otherwise the student will be dropped from the Fieldwork II course. Students will be required to obtain annual physical examination and TB tests at their own cost. Failure to complete the health requirements may lead to dismissal from the OTA Program.
7. The student will be required to participate in a background check in order to participate in some fieldwork settings. Contact the Program Direction if you have any concern about participating in a background check. A problem with the background check may preclude and/or delay the student's participation in a Level II fieldwork assignment.
8. Students and Fieldwork Instructors obtain Fieldwork II assignments at least four weeks prior to the date scheduled for the FWII assignment to begin.
9. Students must abide by the policies and procedures of the Fieldwork II facilities, the Occupational Therapy Assistant Program, and the *Parkland College Student Policies and Procedures Manual*. Students will be informed in writing about the health and safety procedures for each facility during the first week at the fieldwork assignment. The students will perform all clinical responsibilities in accordance to the regulations regarding client and staff (student) safety and welfare.
10. The Parkland College Health Professions Department will implement and adhere to the **HIPAA-Health Insurance Portability and Accountability Act of 1996**. It is the practice and philosophy of the Health Professions Programs to protect the interest of patients and to fulfill the legal obligations mandated under the Health Insurance Portability and Accountability Act of 1996. All faculty and students who will be attending

to patients/clients will receive education and training in the Policy and Procedures inherent in HIPAA. Refer to the Parkland College HIPAA policies posted in this handbook for further clarification.

11. The Academic Fieldwork Coordinator is required to evaluate the effectiveness of fieldwork experiences according to the 2006 *Standards for an Accredited Educational Program for the Occupational Therapy Assistant*.
12. Students are expected to cooperate with and work closely with the fieldwork educator and facility staff. Students are recommended to seek guidance from their *fieldwork instructor(s)* when questions and/or problems arise about the performance of clinical responsibilities, tasks or approaches to various client care problems.
13. Students are encouraged to seek guidance from the *Academic Fieldwork Instructor or Coordinator* when they think that they may need assistance in resolving problems at the fieldwork site that they are uncomfortable discussing with the fieldwork instructor.
14. Attendance and punctuality in Fieldwork II are mandatory. Students are expected to prepare to be active, contributing participants in Fieldwork II clinical assignments and to arrive on time in proper attire, ready to work. Students who arrive late or who have not prepared for their fieldwork experiences may be asked to leave the site. This will constitute a fieldwork course absence.
15. Students and fieldwork instructors are required to maintain written attendance records using the OTA Program Attendance forms. The fieldwork educators are responsible for reviewing and co-signing the Attendance form.
16. Students are given fieldwork II credit for hours in fieldwork education for the following fieldwork II activities. These requirements are posted on the back of the OTA Program Attendance forms.
 - On-site preparation and planning time for direct treatment (office time)
 - Direct client services
 - Documentation time
 - Observation of other team members' services
 - Team meeting time
 - Required lunch time meetings
 - Meetings with Fieldwork Educator
 - Travel time required to move from one site to another site
 - Family meetings and educational services
 - In-services and staff training
 - Transitional services: meeting clients or personnel at referral site.
 - Special conditions: (to be defined by FW educator).
 - Required FWII meetings on campus (i.e.; Midterm meeting, mock interviews)

- Approved & confirmed attendance at IOTA or AOTA annual conferences
17. Students are *not given credit* for fieldwork II activities for:
 - Time lost due to late arrival
 - Doing homework assignments at home
 - Staying overtime due to poor planning or poor time management without prior permission from the *Fieldwork Instructor*.
 18. Students will comply with established health standards. Students are advised to reschedule their time at the facility if not feeling well and/or if any of them have any of the following:
 - Fever >100.4
 - Conjunctivitis
 - Diarrhea lasting more than 12 hours
 - Group A Strep-diagnosed by a physician
 - Jaundice
 - Active measles, pertussis, rubella, or chicken pox
 - Upper respiratory infection (cold)
 - Tuberculosis (TB)
 - Shingles or rash of unknown origin
 - Head lice
 - Scabies
 - Abscess or boil that is draining
 - Impetigo
 - Mononucleosis
 19. To maintain continuity during the fieldwork education process, the student is expected to have full attendance to the fieldwork assignment. Students who miss one 4 hour day equivalent due to illness will not be required to make up that time. Students may receive the equivalent of 4 hours sick leave for time scheduled to be on-site. Requesting time off to complete course assignments or to prepare for examinations are not appropriate uses of sick leave.
 20. If a student is absent then the student must contact the *Academic Fieldwork Coordinator* and the *Fieldwork Educator* to make arrangements for additional time to make up lost time. The Fieldwork Educator should contact the Academic Fieldwork Coordinator when a student is absent for 10 or more hours, even when the time has been made up.
 21. Prolonged or frequent absences may require the student to take an Incomplete for the course. If a student is absent for the equivalent of 40 hours or more due to an illness, injury or other significant condition, then the student may be asked to drop the course

and/or the student may need to begin the fieldwork assignment over from the beginning upon his/her return, not just make up the lost time.

22. Fieldwork educators will develop alternative plans for the student on occasions when the FW educator may be absent, if appropriate. This allows the student to participate in the FW when the FW Educator is not available. A few alternatives may include:
 - a. Student assigned to another therapist
 - b. Student observes/assists other team members with their clients' treatment
 - c. Student researches facility resources. IE: Books, videos, instruction manuals, resource files
23. Students are required to complete assignments requested by the fieldwork educator in a timely manner. Be sure to give students advanced notice of assignments and/or post the assignment on the *Fieldwork Education Plan* so they can plan their time accordingly. If a student has habitual problems with completing written work such as treatment plans, client notes, and/or home programs, then the Fieldwork Educator should contact the Academic Fieldwork Coordinator to schedule a meeting to develop an Academic Action Plan.
24. The Level II Fieldwork Educators (either OTR and/or COTA) are required to evaluate the student's clinical performance using the *Parkland College Fieldwork II Objectives for OTA Students* at midterm and during the last couple weeks of the fieldwork assignment. Students will review copies of the specific fieldwork objectives per facility, and the performance evaluation forms at the beginning of each assignment.
25. Meetings will be scheduled with the clinical instructor and the student to review the written evaluations of the student's performance. These meetings are required to be conducted at midterm and at the end of the assignment. The fieldwork educator may want to schedule weekly feedback meetings to discuss student progress throughout the fieldwork assignment.
26. The FWII Fieldwork Educator and the Academic Fieldwork Instructor are required to collaborate on developing effective clinical learning activities. The Academic Fieldwork Instructor conducts regularly scheduled on-site visits to collaborate with the Fieldwork Educator and to observe the student, fieldwork educator and clients interact. The on-site visits can be designed to assist the fieldwork educator in identifying and developing learning strategies for the students. On-site visits are provided to ensure that the fieldwork assignments are providing quality learning experiences.
27. The FWII Fieldwork Educator will provide the student with a written plan for the fieldwork assignment on the first day of the fieldwork assignment. The written plan will provide information about the proposed schedule for learning activities to be conducted on a weekly basis, and the sequence for grading caseload size and related responsibilities. The plan will reflect the activities required to develop competence on the performance

competence objectives. Plans will either represent eight or sixteen week assignments.

28. A student's unsafe, negligent, unethical, unsatisfactory and/or impaired clinical performance will be identified promptly by the Fieldwork Educator. The Fieldwork Educator is required to report his or her concerns immediately to the Academic Fieldwork Instructor. The student may be required to leave the fieldwork site and receive an "F" for the assignment. A remedial plan will be prepared to assist the student in future placement in fieldwork.
29. A student may fail the Level II fieldwork due to inability to pass the Basic Clinical Skills by midterm and/or by the end of the fieldwork assignment.
30. All Level II Fieldwork requirements for OTA 213 and/or OTA 217 must be completed by the end of the following semester in order to progress and/or graduate from the program. If a student is unable to complete OTA 213 and is eligible for an Incomplete, then the student is required to complete OTA 213 by the end of the spring semester. If a student is unable to complete OTA 217 and is eligible for an Incomplete, then the student is required to complete OTA 217 by the end of the summer semester. If a student fails OTA 213 or OTA 217 then the student will be required to re-take the course when it is offered.
31. A student who is in jeopardy of failing the FWII assignment will be notified promptly by the Fieldwork Educator through written documentation of performance/skill deficiencies. An exit conference is required and will be attended by the student, the Fieldwork Educator, the Clinical Fieldwork Education Coordinator (as applies), the Academic Fieldwork II Instructor, and/or OTA Program Director. The student will be notified if they are in danger of failing the FWII assignment by midterm.
32. A Remedial Fieldwork Action Plan or supplementary psycho/educational programs may be recommended for the student who is failing the FWII assignment. A student who is failing may be required to (a) continue to work at the facility under the terms of a individualized fieldwork agreement, (b) leave the facility to work on recommended skills and behaviors and withdraw from the course, (3) be re-assigned to another facility (pending availability) following participation in remedial activities, and/or (4) withdraw from the OTA Program.
33. If a student has failed either OTA 213 or OTA 217, may be allowed to continue to participate in the other OTA concurrent courses while working on the requirements for re-entry into Level II fieldwork education. The student will not be allowed to progress to the next semester with a failure to complete Level II fieldwork, however upon successful completion of the fieldwork assignment (pending the terms of re-assignment), the student will be able to continue to progress through the OTA curriculum as published.

34. If a student fails a Level II fieldwork course two times or fails both Level II fieldwork courses (OTA 213 & OTA 217), then the student will be required to withdraw from the OTA Program. The student will be assigned a status of Re-Application Level 2 and would be considered for readmission only with evidence of significant improvements or changes to support re-admission.
35. Clinical Instructors are required to maintain confidentiality about any OTA student's records, during and after the student's participation in the fieldwork II assignment.

FIELDWORK II ALTERNATES:

1. Certain students have agreed in writing, during the Selective Admissions or Re-Admission process, to enter the OTA Program with a Fieldwork II Alternate status. The Fieldwork II Alternate status is maintained by designated students throughout their enrollment in the OTA program, not dependent upon the number of students retained in the program.
2. All FWII policies and procedures are applicable to the FWII Alternate student except those that delineate the sequence of when assignments will be available, and the required minimum number of hours per week that FWII students attend assignments.
3. FWII Alternates have been assigned an entry number to identify the order in which they were accepted into the OTA program. Assignments for FWII Alternates will be made at the earliest possible time when an appropriate site becomes available. Prioritizing assignments for FWII Alternates will take entry number into consideration, although not exclusively. For example: FWII Alternate #1 would receive first option for assignments, whereas FWII Alternate #5 would receive fifth option. Other factors such as site location, travel distance, and specific fieldwork content areas (such as Pediatrics, Geriatrics) will also be determining factors.
4. The first priority for Fieldwork II assignments is always for students with a non-alternate status during the scheduled second year course sequence.
5. The FWII Alternate may be required to attend a clinical assignment on a full time basis over a shorter time span (less than 16 weeks) during the Summer session after the second year course sequence.
6. Students identified as Fieldwork II Alternates may not be eligible to graduate with their classmates in May due to the outstanding incomplete in course work, however the FWII student will be able to participate in commencement exercise with his or her peers.
7. The FWII Alternate status is considered to be non-negotiable and non-transferable to other students.

ETHICS AND CONFIDENTIALITY:

1. All OTA students will abide by the *AOTA Occupational Therapy Code of Ethics and Ethics Standards* (2010) and the *NBCOT Code of Conduct* for all client and professional interactions. A student who demonstrates unethical conduct will be required to meet with the Program Director, a Health Career Review Committee, and/or the Vice President of Student Services to discuss remedial and/or disciplinary procedures.
2. Students accused of violating the *Parkland College Student Conduct Code* is subject to disciplinary action as outlined in the *Parkland College Student Policies and Procedure Manual*. An accused student may be required to drop the OTA Program.
3. Students accused of violating the *AOTA Occupational Therapy Code of Ethics and Ethics Standards* and/or the policies and procedures of the fieldwork education setting will be required to meet with the OTA Program Director and/or may be required to drop the fieldwork course.
4. Violation of HIPAA Health Insurance Portability and Accountability Act of 1996) will lead to prompt dismissal of the student from the fieldwork site and will result in disciplinary action. All clients' records (the chart and any other information, verbal or written, and those notes taken from the record) are confidential. Violations of this confidentiality may be subject to litigation involving the student and the College.
5. Students must be protective of client information once it is removed from the fieldwork setting (i.e., notes not left on desks, in classrooms, in cafeterias, or out for any public viewing). No discussion of clients, staff or care issues are to occur in public (i.e. lounges, restaurants, stores). Refer to *Parkland College Health Professions HIPAA Policy* in this handbook.
6. Students must not identify clients, nursing staff, doctors, or other persons by name in course work treatment plans, notes, or other exercises for learning purposes.
7. Students will not discuss client or staff problems with other clients.
8. Students are expected to display professional behavior both in the classroom and while participating in the fieldwork assignments.
9. Students demonstrating unethical conduct, (i.e., cheating, deception) during examinations and preparation of class or clinical assignments (verbal, written or agency assigned visits) will be subject to a Health Profession Faculty Review to determine disciplinary action.
10. Parkland College will maintain student confidentiality in all interactions with the clinical

facilities. The Academic Fieldwork Coordinator is not at liberty to disclose any students' academic or personal history, or need for special accommodations for learning without the student's written permission.

INSURANCE

1. All occupational therapy assistant students are required to carry liability insurance for all fieldwork experiences through the College. This insurance is included in the fieldwork course fees. If students carry liability insurance independently, they must present evidence of current subscription to the Program Director of the Occupational Therapy Assistant Program which will be reviewed by the Chair and other.
2. It is highly recommended that the occupational therapy assistant students carry personal medical insurance to cover accidents including on-the-job related incidents in the clinical area. Cooperating agencies provide treatment for emergency services in cases of accidents at the student's own expense. If desired, information on this insurance can be obtained through Health Services.
3. A student who is injured in the classroom or at the fieldwork site must immediately report it to the course instructor. Emergency medical procedures will be provided on campus as needed.
4. A student who is injured while at the fieldwork site must immediately report it to the Academic Fieldwork Coordinator. The student will be required to complete an Incident Report at the facility and the college.

DRESS CODE: UNIFORMS AND ACCESSORIES

1. Students may wear comfortable clothing to class. Students might consider wearing layers to accommodate different temperatures. Clothing should not interfere with or be unsafe for participation in classroom or laboratory activities.
2. When students are attending service learning activities, fieldwork assignments and field trips in the community, they are to remember that they are representing the OTA program, the college and the profession of occupational therapy. Dress in community settings should be professional as appropriate for the assignment.
3. The OTA students must contact the fieldwork I and fieldwork II instructors and inquire about the appropriate dress code. Students are required to comply with each fieldwork facility's designated dress code in order to remain in the fieldwork assignment. The OTA Program does not have a uniform however, you may be required to purchase a short lab coat and Parkland College Health Professions sleeve badge to attend some clinical

settings. Some items are required by all facilities, as follows;

- OTA Program name pin
 - Cleanliness and appropriate grooming
 - Clean, non-wrinkled clothes, usually shirt and slacks, (no blue jeans or sweatshirts),
 - Flat soled, closed toe shoes
 - Simple jewelry to include watch, low profile ring, simple pierced earrings
 - Wear little or no perfume
4. Students should be able to bend, squat, lift, sit and kneel on the floor without his or her chest, midriff or buttocks showing. Blouses should not be provocative. It is recommended that students wear clothing that can be easily washed and maintained.
 5. Nails are to be kept short and groomed, and hair should be styled so that it does not interfere with client interaction and/or student safety.
 6. A student may be requested to remove any unusual facial piercings if they are considered to interfere with the performance of the fieldwork role.

GRADUATION

In the fourth semester, students who are planning to graduate in May are required to apply for graduation by the scheduled deadline posted in the Parkland College Dates and Deadlines. Fieldwork II Alternates who are planning on graduating in the summer will apply to graduate in August by the scheduled deadline in the summer. Failure to apply for graduation will delay graduation until the next semester.

Students are encouraged to participate in one or more of the following types of graduation activities. Fieldwork II Alternates are welcome to participate in any of the following activities even though they will not be graduating until the summer.

- (1) Parkland College provides a college-wide Commencement Ceremony which is scheduled for Friday evening of final exam week in the spring semester. All students who are planning to march at commencement are required to be fitted for a cap and gown by the due date. There is a rental fee for the cap and gown.
- (2) Students may wish to organize a dinner after final exams to provide an opportunity for faculty and students to celebrate completion of the program and commencement into the role as Occupational Therapy Assistants. Students will plan and make arrangements for this celebration. This is not considered a “bar hop” occasion. Awards and pins will be

presented at the dinner. Arrangements must be approved by the Program Director and/or designee.

- (3) Students may wish to organize a semi-formal “pinning” ceremony in the Parkland Theater. The ceremony must include invitations of key Parkland College Administrators and managers. In addition, the program agenda must include speakers to (1) express gratitude for the past, (2) recognition and celebration of the present, and (3) profess a vision for the future of the profession and your new roles as Occupational Therapy Assistants. Full description of the requirements needed for this type of event planning will be available in the 4th semester. The ceremony must be approved by the Program Director.

ASCOTA:

Student Occupational Therapy Assistant Association, ASCOTA, is the professional organization of Occupational Therapy Assistant students. The organization brings the occupational therapy assistant student body together in both service and social activities outside the classroom, laboratory and fieldwork environs. Officers are elected in the fall of each year and are responsible for planning the organization's activities for the year.

EMPLOYMENT:

1. Occupational therapy assistant graduates are permitted to practice after they have successfully completed the OTA program (including fieldwork II education), have applied for the national certification examination (NBCOT) to become a certified occupational therapy assistant (COTA), and have applied for an Illinois license to practice. In Illinois, students must receive a Letter of Authorization (LOA), from the Illinois Department of Financial and Professional Regulation, in order to practice prior to passing the certification exam.
2. The OTA Program is not responsible for obtaining employment of any graduate although all graduates are assured that their education adequately prepares them to practice at entry technical level in the profession.
3. The OTA Program and Career Center will inform and post job listings as they are made available. Parkland College assumes no responsibility for a graduate’s employment except as outlined in the Guaranteed Education Act.

SOME GENERAL GOOD ADVISE:

1. Actively listen, get involved, actively learn.
2. Respond, don't react.
3. Focus on solutions not problems.
4. Learn how to hold two opposing ideas in your head at once.
5. Plan ahead, be prepared, don't get behind, do one thing at a time.
6. Ask for help anytime.
7. Choose your helpers well.
8. Learn to work together and get help from other students.
9. Don't take everything or yourself too seriously; play at working, work at playing.
10. Accept and learn from your mistakes as well as your successes.
11. Amend your ways promptly when in error.
12. Respect others and yourself.
13. Learn to grow, grow to learn.
14. **Trust the process.**