



**Master of
Occupational Therapy**

**DEPARTMENT OF
OCCUPATIONAL
THERAPY
STUDENT
HANDBOOK**

**Professional Phase Handbook for
OT students entering
Professional Phase
Summer 2023**

2023

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Welcome

On behalf of the Master of Occupational Therapy faculty and staff, I would like to welcome you to the exciting field of occupational therapy! We are thrilled and thankful that you chose Saint Francis University to pursue your goal of becoming an occupational therapist.

Saint Francis University offers a challenging and unique educational experience enriched by the Franciscan tradition and supported by the Franciscan Goals of Higher Education:

- Humble and Generous Attitude Toward Learning
- Reverence for All Life and Care for Creation
- Solidarity and Reconciliation
- Service to the Poor and Needy
- Respect for the Uniqueness of Individual Persons
- Community of Faith and Prayer
- Simplicity and Joy
- Franciscan Character

Your years here at SFU will be filled with learning, friendships, and new adventures that are life forming! Your academic advisor is here to assist you in obtaining your educational pursuits. Please utilize the resources Saint Francis University and our department have available to you.

Sincerely,

Lorie Rowles

Dr. Lorie Rowles, OTD, OTR/L
Chair, MOT Program

Department of Occupational Therapy Faculty & Staff Directory

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Introduction

What is OT? Occupational Therapy is a unique discipline among health and human service specialties. It uses occupation as its primary mode of intervention with consumers of all ages who face challenges that might impair daily and life satisfaction. Occupational therapists serve those whose daily routine may be challenged by physical injury or illness; developmental delay; or social, environmental or emotional problems. Occupations are those meaningful and purposeful tasks that people do every day. Occupations are endeavors which make people unique, and which provide a sense of identity and self-worth. Research has shown that when people engage in occupations they enjoy and which are appealing and motivating, return to normal patterns of life occur faster.

The Saint Francis University Master of Occupational Therapy program was introduced in 1996 and received accreditation from the Accreditation Council for Occupational Therapy Education (ACOTE) in December 2000 with its latest reaccreditation in 2015 and mid-cycle review in 2019. The Master of Occupational Therapy program curriculum is designed to provide a solid professional education rooted in the liberal arts tradition. The 3+2 program provides three years of pre-professional coursework where the general education core and required collateral courses are completed, followed by two years of intense Occupational Therapy study.

Students who enter the program as freshmen and successfully complete the program will earn both a Bachelor of Science in Health Science degree and a Master of Occupational Therapy degree. Once degree requirements are satisfactorily completed, students will be eligible to sit for the national certification examination offered through the National Board for Certification in Occupational Therapy (NBCOT). After successful completion of this exam, the individual will be an Occupational Therapist, Registered (OTR). **In addition, most states require licensure in order to practice; however, state licenses are usually based on the results of the NBCOT Certification Examination. NOTE: Students with prior criminal records/felony convictions may not be eligible for Occupational Therapy licensure in certain states.** It is the responsibility of the prospective student to determine eligibility.

Accreditation Statement

The Department of Occupational Therapy at Saint Francis University is accredited through the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association, located at 6116 Executive Boulevard, Suite 200 North Bethesda, MD 20852-4929.
Telephone: (301) 652-6611 or (800) SAY – AOTA [(800)-729-2682]
Website: www.acoteonline.org.

Graduates of the Saint Francis University MOT program are eligible to sit for the national certification examination offered through the National Board for Certification in Occupational Therapy (NBCOT) once all requirements are completed.

[Link to 2018 Accreditation Standards](#)

Statement of Non-Discrimination

Saint Francis University, inspired by its Franciscan and Catholic identity, values equality of opportunity, human dignity, racial, cultural and ethnic diversity, both as an educational institution and as an employer. Accordingly, the University prohibits and does not engage in discrimination or harassment on the basis of gender, age, race, color, ethnicity, religion, sexual orientation, marital status, disability, veteran status, or any protected classification. Saint Francis University will not tolerate sexual violence, dating violence, domestic violence, stalking, or sexually inappropriate conduct in any form. The University is committed to this policy based upon its values and as required by Title IX of the Education Amendments Act of 1972, the Americans with Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1973, Title VII of the Civil Rights Act of 1964, and other applicable statutes and University policies. This policy applies to all programs and activities of the University, including, but not limited to, admission and employment practices, educational policies, scholarship and loan programs and athletic or other University sponsored programs.

Inquiries about this policy and procedure may be made internally to:

Ms. Lynne Banks
Title IX/Equity Coordinator
Padua Hall, 232B
(814) 472-3002
lbanks@francis.edu

Mission Statement

The Department of Occupational Therapy and the Master of Occupational Therapy degree program were established to assist Saint Francis University in fulfilling its stated mission:

As the oldest Franciscan institution of higher learning in the United States, Saint Francis University draws inspiration from our Catholic tradition and expresses the lived example of Saint Francis of Assisi in the modern world. Saint Francis University promotes an inclusive learning community and a lifelong path to virtue, truth, and compassion. Within a culture that seeks understanding through innovation and collaboration, we champion both the inherent dignity of the individual person and the common good.

Inspired by the spirit of the Goals of Franciscan Higher Education and the Saint Francis University School of Health Sciences and Education, occupational therapy education at Saint Francis University will:

Prepare students for practice as competent, innovative, equitable, compassionate, and ethical occupational therapists for service to underserved populations of Pennsylvania and beyond.

Prepare students to actively foster the growth and development of the profession of occupational therapy through systematic inquiry, community awareness and action, and professional organization involvement.

Prepare students to commit to their own personal and professional growth and development through the quest for life-long learning, critical self-reflection and analysis, and a humble attitude toward learning.

These three broad goals will provide the framework on which the educational philosophy and curriculum design of the program will be built.

Approved 2022

MOT Program Philosophy

Occupational therapy education at Saint Francis University reflects the *Philosophical Base of Occupational Therapy* adopted by the American Occupational Therapy Association (2017) and the *Philosophy of Occupational Therapy Education* adopted by the American Occupational Therapy Association (2018). Consistent with this philosophy, the Master of Occupational Therapy program believes:

- Occupations are activities that bring meaning to the daily lives of individuals, families, communities, and populations, and enable them to participate in society.
- All individuals have an innate need and right to engage in meaningful occupations throughout their lives. Participation in these occupations influences their development, health and well-being across the lifespan. As such, participation in meaningful occupation is a determinant of health and leads to adaptation.
- Occupations occur within diverse social, physical, cultural, personal, temporal, or virtual contexts. The quality of occupational performance and the experience of each occupation are unique in each situation due to the dynamic relationship between factors intrinsic to the individual, the environment, and contexts in which the occupation occurs, and the characteristics of the occupation.
- The focus and outcome of occupational therapy are individuals' engagement in meaningful occupations that support their participation in life situations.
- Occupational therapy practitioners conceptualize occupations as both a means and an end to therapy. That is, there is therapeutic value in occupational engagement as a change agent, and engagement in occupations is also the ultimate goal of therapy.
- Occupational therapy is based on the belief that occupations may be used for health promotion and wellness, remediation or restoration, health maintenance, disease and injury prevention, and compensation/adaptation.
- The use of occupation to promote individual, community, and population health is the core of occupational therapy practice, education, research, and advocacy.

Thus, the education of future occupational therapists must:

- Consistently reinforce the development of new knowledge supporting the use of occupation, the application of clinical reasoning based on evidence, the necessity for lifelong learning, and the improvement of professional knowledge and skills.
- Promote competence through didactic and experiential opportunities that foster the occupational therapists' practice potential and scholarship development within and beyond the classroom environment.
- Employ active learning strategies that engage the learner in a developmental and collaborative process which emphasizes comprehension and analysis and integrates professional academic knowledge, experiential learning, clinical reasoning, and self-reflection.

- Promote integration and synthesis of philosophical and theoretical knowledge, values, beliefs, ethics, and technical skills for broad application to practice in order to improve and enhance the outcomes of occupational therapy for those individuals with and without impairments and limitations.
- Emphasize a life-long love of professional development and advocacy that include the various levels of scholarship so occupational therapists are well prepared to function and thrive in the dynamic environments of a diverse and multicultural society, using the power of occupation as the primary method of evaluation, intervention, health promotion, and advocacy.

The Master of Occupational Therapy program views humanity from a holistic perspective which recognizes that human occupation is a complex phenomenon involving constant interaction among the physical, social, cognitive, sensory, motor, psychological and spiritual dimensions of self.

Finally, the Master of Occupational Therapy program is committed to an educational philosophy which employs the principles of effective occupational therapy intervention. These principles were best articulated by John Dewey, a prominent educator whose ideas on teaching and learning emerged at the same time the profession of occupational therapy was developing. To assure that the mission of the Master of Occupational Therapy program is fulfilled, the following principles will guide the faculty in designing curricular content:

- Teachers/faculty in the program are viewed as facilitators who create positive environments for learning and growth.
- The best learning environments are those that challenge students to develop their sensorimotor, cognitive, psychosocial and spiritual dimensions as a context for gaining empathy for the consumers they will serve.
- Students of occupational therapy, like the consumers with whom they will interact, learn and grow best by doing ample experiential opportunities to put knowledge and concepts into action produce the best learning outcomes.
- Student self-direction, exploration and reflection are crucial elements in learning.

Revised: 2019

References:

American Occupational Therapy Association. (2017). Philosophical base of occupational therapy. *American Journal of Occupational Therapy*, 71(Suppl. 2), 7112410045. <https://doi.org/10.5014/ajot.716S06>.

American Occupational Therapy Association. (2018). Philosophy of occupational therapy education. *American Journal of Occupational Therapy*, 72(Suppl. 2), 7212410070. <https://doi.org/105014/ajot.2018.72S01>.

Curriculum Design Statement

A curriculum design is the keystone of any educational program. It brings to life the mission and philosophy of the sponsoring institution, the profession, and the faculty. It reflects the needs of the profession and society. Embedded in a curriculum design are time honored values and beliefs as well as practical knowledge and skills which represent contemporary practice and projected future societal concerns and conditions. A curriculum design provides the foundation for determining student selection criteria, selection of content, scope of material presented and sequencing of course work. Ultimately, a sound curriculum design provides the basis for ongoing, systematic evaluation of program goals and learning outcomes.

The Master of Occupational Therapy program at Saint Francis University is considered to be a 3+2 program – meaning that during the first three years, students are completing pre-professional studies (General Education credits, collateral credit requirements [some of the collateral courses also count toward General Education requirements], free elective credits). These courses provide the foundation for progression into the professional phase of study, which is the final two years of the program. The pre-professional phase includes four (5) Occupational Therapy courses:

- OT 102: Introduction to Occupational Therapy I (1 credit)
- OT 201: Introduction to Occupational Therapy II (2 credits)
- OT 301: Occupational Therapy Seminar I (1 credit)
- OT 302: Occupational Therapy Seminar II (1 credit)
- OT 310: Occupation and Movement (3 credits)

The professional phase of the Master of Occupational Therapy program is considered to be the fourth and fifth years. During the fourth and fifth years, students concentrate only on their Occupational Therapy major courses.

Pre-Professional Phase

The General Education program, *Ethical Citizenship for the 21st Century*, as an integral component in the achievement of the Mission of Saint Francis University, provides a means for the University to honor many of its most important commitments. Ever mindful of the rapidly changing world around us and the need for multidisciplinary and interdisciplinary inquiry to address complex problems, the General Education program is dedicated to providing students with the values, skills, and knowledge necessary to meet future challenges. True to the liberal arts roots and Franciscan heritage of the University, the program encourages students to examine ethical issues, demonstrate global awareness, become actively involved in community service, and prepare for life-long learning of new skills and knowledge. The General Education program contributes to the development of the whole person, allowing individuals to achieve more rewarding and purposeful lives. Housed within the SFU General Education curriculum are 48 credits of coursework.

In addition to the General Education course requirements, the Department of Occupational Therapy requires prerequisite courses to prepare students to succeed in occupational therapy. The collateral courses that are required include:

- General Biology (3-credit lecture, 1 credit lab)

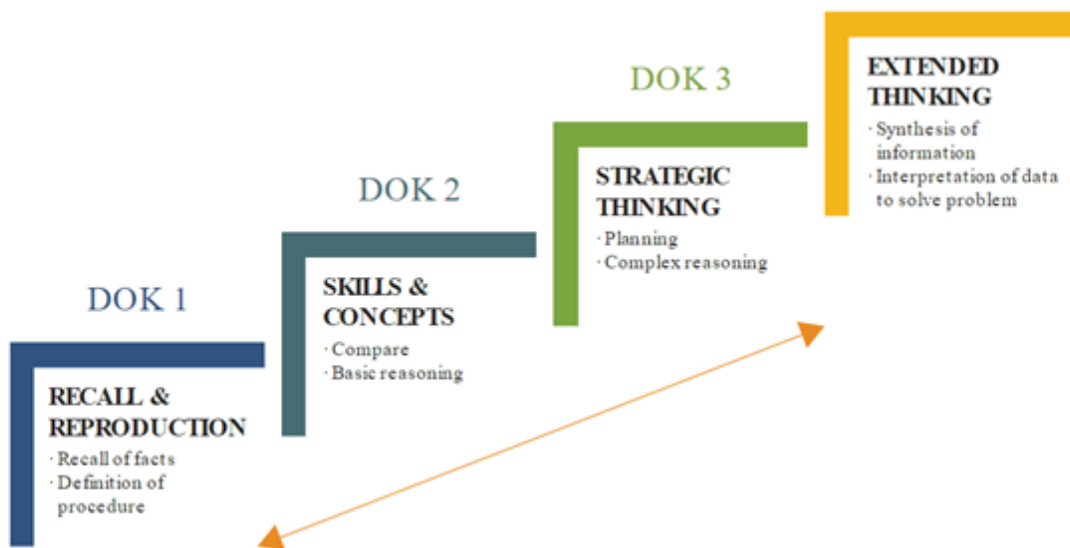
- Anatomy & Physiology I (3-credit lecture, 1 credit lab)
- Anatomy & Physiology II (3-credit lecture, 1 credit lab)
- Psychology courses (7)
 - Introduction to Psychology
 - Developmental Psychology
 - Psychopathology
 - Memory and Cognition
 - Biopsychology
 - Research Methods and Statistics I & II
- Introduction to Sociology
- Introduction to Public Health
- Introduction to Occupational Therapy II
- OT Seminar I
- OT Seminar II
- Occupation and Movement

(NOTE: Some of the collateral courses also count toward General Education requirements.)

Professional Phase

Curriculum Design

The occupational therapy education program brings to life the vision, mission, and philosophy of Saint Francis University, the School of Health Sciences and Education, and the occupational therapy department. The curriculum integrates knowledge from multiple resources, pedagogical practices (community engaged learning and course-based practices), and pedagogical paradigms (competency-based pedagogy and constructivist pedagogy) within an innovative framework designed for students to make authentic and genuine connections in unique and creative ways. In alignment with *Webb's Depth of Knowledge*, the curriculum design framework evolves according to levels of complexity in thinking with a focus on context.



Furthermore, the occupational therapy program is committed and faithful to the principles of diversity, equity, and inclusion which are contained and expressed in the Goals of Franciscan Higher Education. These ideals are interwoven throughout all curricular threads and explicitly articulated in the *Virtuous Practitioner* curricular thread as a continuum of learning experiences and cultural competence. The curriculum emphasizes the evolving occupational needs of all people, groups, and populations with unique, individualized attributes amid distinct environments. In an impartial learning environment that recognizes and respects diverse perspectives and backgrounds, the pedagogical practices and paradigms are resolute in inspiring optimism, driving innovation, and empowering students to provide services focused on inclusive participation and engagement in daily activities for all persons in society through holistic interactions (interaction of mind, body, and spirit).

Curricular Threads and Program Goals

The Competent Practitioner: The graduate will possess the knowledge, skills, and approach to practice with competence and compassion guided by concepts of ethics and evidence-based practice with underserved populations of Pennsylvania and beyond.

The Scholarly Practitioner: The graduate will possess the knowledge, skills, and approach essential to furthering the growth of the occupational therapy profession through systematic inquiry and scholarly activity beyond the walls of Saint Francis University.

The Innovative Practitioner: The graduate will possess the knowledge, skills, and approach necessary to achieve professional reflection, leadership, assessment, and growth throughout life, demonstrating a humble and generous approach toward learning.

The Engaged Practitioner: The graduate will possess the knowledge, skills, and approach necessary to collaborate with community partners, interdisciplinary teams, and peers and with a spirit of simplicity and joy.

The Virtuous Practitioner: The graduate will possess the knowledge, skills, and approach necessary for personal reflection, assessment, and growth throughout life; sensitive to ideals that are central to our Catholic and Franciscan character in solidarity with all humanity and the principles of diversity, equity, and inclusion which are contained and expressed within the Goals of Franciscan Higher Education.

Learning Outcomes (holistically)

The student will:

- Apply knowledge and theories of domains and translate to the Occupational Therapy Process
- Apply ethical principles to situations in the field and decision making
- Find scholarly sources, interpret, and evaluate evidence, conduct research, write research papers, and disseminate research
- Engage in reflective practice through writing reflections, completing self-assessments, and creating self-development plans
- Implement effective approaches when working with all persons, cultures, and groups within the community
- Research and stay current on concepts related to public health and social determinants of health

- Integrate Goals of Franciscan Higher Education into Occupational Therapy practice
- Apply leadership skills needed to successfully manage, market, and implement programs (needs assessment, b Develop lifelong learning mindset and write professional and ongoing goals budgeting, programming, marketing, delivery)
- Collaborate with others in the field and health network
- Engage with the Community

MOT Program Modules and Content

Module I: The Competent Practitioner

The graduate will possess the knowledge, skills, and approach to practice with competence and compassion guided by concepts of ethics and evidence-based practice with underserved populations of Pennsylvania and beyond.

The Competent Practitioner curriculum goals/outcomes include:

- Completed student portfolio of clinical practice activities by Summer II with minimum passing grade of ‘C’ on all activities.
- Successful completion of the advanced clinical competency in Summer II with a grade of 90% or better

Module II: The Scholarly Practitioner

The graduate will possess the knowledge, skills, and approach essential to furthering the growth of the occupational therapy profession through systematic inquiry and scholarly activity beyond the walls of Saint Francis University.

The Scholarly Practitioner curriculum goals/outcomes include:

- Successful completion of the OT Senior Leadership Project (housed in OT507) with a ‘C’ or better.
- Successful completion and presentation of the Capstone/Scholarly Project in Summer II with a ‘C’ or better

Module III: The Innovative Practitioner

The graduate will possess the knowledge, skills, and approach necessary to achieve professional reflection, leadership, assessment, and growth throughout life, demonstrating a humble and generous approach toward learning.

The Innovative Practitioner curriculum goals/outcomes include:

- PASSING grade in the Professional Behaviors thread in the Personal and Professional Growth Module in all semesters of the professional phase (Professional Behaviors).

Module IV: The Engaged Practitioner

The graduate will possess the knowledge, skills, and approach necessary to collaborate with community partners, interdisciplinary teams, and peers and with a spirit of simplicity and joy.

The Engaged Practitioner curriculum goals/outcomes include:

- Achieve a minimum of 36/50 on Level I FW evaluation
- Level II Fieldwork Performance Evaluation (FWPE): A sum score of 111 or higher will be required to receive a Pass on the FWPE
- At final, a score of 3 or higher must be achieved on the following objective items to receive a Pass on the FWPE:
 - # 1 (Adheres to the American Occupational Therapy Association’s Code of Ethics and all federal, state, and facility regulations)
 - # 2 (Adheres to safety regulations and reports/documents incidents appropriately)
 - # 3 (Ensures the safety of self and others during all fieldwork related activities by anticipating potentially unsafe situations and taking steps to prevent accidents)
- At final, a score of 1 on any of the objective items will not receive a Pass on the FWPE.

Module IV: The Virtuous Practitioner

The graduate will possess the knowledge, skills, and approach necessary for personal reflection, assessment, and growth throughout life; sensitive to ideals that are central to our Catholic and Franciscan character in solidarity with all humanity and the principles of diversity, equity, and inclusion which are contained and expressed within the Goals of Franciscan Higher Education.

The Virtuous Practitioner curriculum goals/outcomes include:

- Successful completion of Self Development Plans (each semester) with a ‘C’ or better and a final Professional Development Plan with a ‘C’ or better (Spring II).
- Successful completion of the Professional Portfolio with a ‘C’ or better by Spring II.

Curriculum Flow

During year one of the professional phase (Summer I, Fall I, Spring I), emphasis is on recall, reproduction, skills, and concepts of occupational therapy knowledge as students are building their foundational knowledge through pedagogy designed to engage students of all levels of Webb’s Depth of Knowledge learning theory.

During year two of the professional phase (Summer II, Fall II, Spring II), emphasis is on critical thinking and extended thinking as students prepare for and complete Level II Fieldwork and the professional electives. Foundational knowledge will be applied in clinical settings.

Curriculum Content, Scope, and Sequence

Each course, in turn, will reflect the following assumptions which are consistent with the program's educational philosophy:

Content:

Year one of the professional phase (Summer I, Fall I, Spring I) emphasizes recall, reproduction, skills, and concepts of occupational therapy knowledge, while year two of the professional phase (Summer II, Fall II, Spring II) emphasizes critical and extended thinking in occupational therapy.

Course content will:

1. Reflect a broad, generalist approach to educating a reflective practitioner who can adapt to a variety of practice settings and work.
2. Provide students with exposure to technologies in learning and service delivery.
3. Provide students with ample practical application of material in each occupational therapy course.
4. Be presented in the most scholarly manner possible in which practice skills and techniques are critically analyzed using the most current scientific literature (evidence-based practice).
5. Provide fieldwork experiences that will be the culminating opportunity of each course (up to Level II Fieldwork).
6. Promote awareness of/respect for cultural aspects of patient care.
7. Reflect common threads throughout each semester of the professional phase to include competency, scholarship, innovation, engagement, and virtue.

Scope: The scope reflects the following assumptions:

1. Course content will meet or exceed the 2018 Standards for an Accredited Educational Program for the occupational therapist. Existing professional documents and standards as well as licensing regulations will dictate entry-level practice expectations.
2. In addition to the traditional occupational therapy focus, professional coursework will also emphasize rural, under-served populations, and diverse populations as per the department mission.
3. The curriculum will be substantially influenced by current and relevant approaches which are supported by evidence and culturally sensitive foundations.
4. Coursework will integrate a high degree of recall, reproduction, skills, and concepts during year one of the professional phase and higher levels of critical and extended thinking during year two of the professional phase.
5. Courses will include integration of innovative advances in instruction as well as service delivery models.

Sequence: The sequence will reflect the following assumptions (includes pre-professional phase):

1. OT 102 and OT 201 (Introduction to Occupational Therapy courses) serve as pre-professional phase courses designed to socialize occupational therapy students into the occupational therapy program.
2. OT 301 and OT 302 (Occupational Therapy Seminars) and serve as a “bridge” from the “pre-professional phase” to the “professional phase”.
3. Sequencing of professional level course work will present a logical progression of increasingly challenging content.
4. Year one of the professional phase (Summer I, Fall I, Spring I) emphasizes recall, reproduction, skills, and concepts, while year two of the professional phase (Summer II, Fall II, Spring II) emphasizes both the critical and extended thinking skills. The fifth year of the curriculum includes completion of “advanced clinical competency” which verifies that the student is ready to engage in Level II fieldwork.
5. Professional electives are courses (two 3-credit graduate courses) that the student choose to take in the 5th year (or earlier if they meet the criteria to take graduate courses as an undergraduate student as defined in the University policies) that support their own personal and professional development. For example, a student who wishes to work as a school-based OT may choose 6 credits of Master of Education courses.

Occupational Therapy Course Descriptions

Pre-Professional Phase:

OT 102: Introduction to Occupational Therapy I (1 credit)

An introduction to the field of occupational therapy, students will learn the foundational framework upon which the profession is built. A special emphasis on personal and professional development will be explored. Spring. No prerequisites.

OT 201: Introduction to Occupational Therapy II (2 credit)

This course is designed to introduce sophomore occupational therapy majors to medical terminology and other terminology utilized by occupational therapy professionals. This course will prepare students to enter junior-level (and beyond) occupational therapy seminar coursework where they will be expected to understand and apply medical terminology and related occupational therapy terminology. This is a hybrid course where class sessions are both face-to-face and online. No prerequisites; however, this is a required course for occupational therapy majors. Fall. Course substitution available.

Equivalent: 1-3 credit medical terminology course

OT 301: Occupational Therapy Seminar I (1 credit)

This course, the first of a two-course sequence, provides students with an overview of significant occupational therapy framework and its application to the field of occupational therapy. Prerequisite: OT 201. Fall. Course substitution available.

OT 302: Occupational Therapy Seminar II (1 credit)

This course, the second of a two-course sequence, provides students with a continued focus on occupational therapy framework emphasis. This course also includes an interdisciplinary project and preparation for the professional phase of the curriculum. Prerequisite: OT 301. Spring. Course substitution available.

OT 310: Occupation and Movement (3 credits)

This course delivers a theoretical, scientific, anatomical, and physiological foundation as it applies to human movement patterns. The specific body systems presented include skeletal, muscular, nervous, and the interrelationships of the aforementioned systems. Basis concepts of kinesiology and biomechanical principles will also be addressed and applied to daily functional activities, clinical conditions, and rehabilitation.

Prerequisites: BIOL205 and BIOL205L. Spring. Course substitution available.

Professional Phase:

Summer I

OT 404: Foundations of Occupational Therapy (2 credits)

This course is subdivided into three modules: module 1 explores the basic tenets of occupational therapy including history and philosophy of the profession, occupation, culture and meaning, the Occupational Therapy Practice Framework and related terminology, licensure and certification requirements. Module 2 examines the concept of activity analysis and its relation to occupations. Students will demonstrate

activity analysis in areas of occupation, performance skills, performance patterns, context(s) and environments, and client factors. Module 3 explores the concepts of group dynamics including understanding the needs of groups and populations, establishing group protocols and goals. Prerequisite: Successful completion of pre-professional phase coursework.

OT 405: Introduction to Healthcare Concepts (1 credit)

This course provides students with an introduction to the healthcare environment. Students will earn CPR certification, complete various trainings (child abuse), learn the basics of first aid, learn how to assess vital signs, demonstrate competency in infection control measures, fire and personal safety. Students will gain an understanding in basic medical equipment including wheelchairs and other mobility devices, oxygen tubing/tanks and other acute care devices.

Prerequisite: Successful completion of pre-professional phase coursework.

OT 406: Introduction to Professionalism in Occupational Therapy (1 credit)

This course will assist in professional behavior development addressing the following concepts: therapeutic use of self, personal and professional goal development, therapeutic relationship development, observation skills.

This course will serve as a foundation to prepare students for experiential learning in diverse settings through didactic coursework.

Prerequisite: Successful completion of pre-professional phase coursework.

OT 407/L: Introduction to Pediatric Occupational Therapy/Lab (2 credits)

This course explores human development and the relation to occupational performance. A study of sensory, physical, cognitive, emotional and sociocultural aspects of human development is emphasized to analyze occupational performance. Lab included.

Prerequisite: Successful completion of pre-professional phase coursework.

OT 408/L: Introduction to Musculoskeletal Occupational Therapy/Lab (2 credits)

This course delivers a theoretical, scientific, anatomical, physiological, and biomechanical foundation of structures and how they influence movement and occupational performance across environmental contexts and activity. Emphasis of this course is concentrated on OT practice concepts and its relationships with theories, frames of references, and uniform medical terminology within the neuromusculoskeletal domain, functional anatomy of the extremities, head, neck, and back, kinesiology and biomechanical principles, and back safety during functional movement patterns. Lab included.

Prerequisite: Successful completion of pre-professional phase coursework.

OT 409/L: Introduction to Neurological Occupational Therapy/Lab (2 credits)

This course examines the structure and function of the human nervous system with practical applications to human development and occupation. We will explore the role of the occupational therapist in various settings providing neurorehabilitation. Although the focus is on typical development and movement, overview of settings, diagnoses, OT Process, neurorehabilitation terminology, OT/OTA collaboration, how occupation is used in treatment planning and implementation will be covered. Teaching/learning process and health literacy will also be discussed. Lab included.

Prerequisite: Successful completion of pre-professional phase coursework.

OT 410/L: Introduction to Psychosocial Occupational Therapy/Lab (2 credits)

This introductory course will link the occupational therapy student's knowledge of the field of psychology with psychosocial concepts in occupational therapy. Topics covered include mental illness, concepts of recovery and stigma, and the OT process with mental health conditions. Students will participate in a community-based psychosocial lab experience. This course serves as a foundation and preparation for the psychosocial emphasized Level I Fieldwork in the same semester. Lab included.

Prerequisite: Successful completion of pre-professional phase coursework.

OT 411: Organization of Theory, Scholarship, and Evidence-Based Practice I (1 credit)

This course will provide a basic overview of the research process in conjunction with the essential elements of evidence-based practice. Learning approaches are primarily through the comprehension and critical analysis of scholarship. Students will develop a general understanding of the literature review process by identifying quantitative and quantitative research studies utilized in occupational therapy. Prerequisite: Successful completion of pre-professional phase coursework.

OT 412: Introduction to Clinical Competency (1 credit)

This course serves to provide a foundation of clinical competency skills that will prepare them for their Level I FW experiences as well as advancing through the professional phase of the program. Students will participate in a simulated role of the patient, facilitating knowledge of the OT process, including core values, ethics, culture and documentation. Prerequisite: Successful completion of pre-professional phase coursework.

OT 413: Fieldwork Level IA Experience (1 credit)

The first of 3 Level-I Fieldwork opportunities will follow the curriculum design in providing students with the foundations to serve the community with a focus on the psychosocial factors that influence engagement in occupation. Building upon the pre-professional phase minor in psychology coursework, this Level IA focus' on behavioral health or the psychological and social factors that influence engagement in occupation. Prerequisite: Successful completion of pre-professional phase coursework.

Fall I

OT 505: Therapeutic Interventions and Activity Analysis in Occupational Therapy (1 credit)

This course explores therapeutic interventions for a variety of diagnoses related to musculoskeletal, neurological, and pediatric conditions. In addition, activity analysis is applied as a working concept and therapeutic application.

Prerequisites: Successful completion of Summer I coursework

OT 506: Introduction to Health Promotion, Planning, & Programming (1 credit)

This is a community engaged course that prepares the student to create, implement, and evaluate community-based occupational therapy services. Students will demonstrate, evaluate, and utilize the principles of the teaching-learning process using educational methods and health literacy education approaches: To design activities and clinical training for persons, groups, and populations; to instruct and train the client, caregiver, family, significant others, and communities at the level of the audience. This course will assist students in preparing for the leadership/scholarly project in the spring semester. Prerequisites: Successful completion of Summer I coursework

OT 507: Leadership, Ethics, & Advocacy Concepts in Occupational Therapy (1 credit)

This course will explore various leadership theories and application to the management of OT services. Students will explore American Occupational Therapy Association (AOTA) Occupational Therapy Code of Ethics and AOTA Standards of Practice and use them as a guide for ethical decision making in professional interactions, client interventions, employment settings, and when confronted with personal and organizational ethical conflicts. This course will teach students to identify, analyze, and advocate for

existing and future service delivery models and policies, and their potential effect on the practice of occupational therapy and opportunities to address societal needs.

Prerequisites: Successful completion of Summer I coursework

OT 508/L: The Occupational Therapy Process in Pediatric Conditions/Lab (4 credits)

This course applies occupational therapy domains and processes for therapeutic interactions with children and youth participating in medical, educational, and community contexts. Lab included.

Prerequisites: Successful completion of Summer I coursework

OT 509/L: The Occupational Therapy Process in Neurorehabilitation/Lab (4 credits)

This is a community engaged course that examines the structure and function of the human nervous system with practical applications to occupational therapy practice. Students examine the effects of neurological dysfunction and conditions associated with the nervous system on occupational performance across the lifespan. Occupation-based models, frames of reference, assessment tools, and an introduction to intervention strategies used when working with persons with neurological and neurodegenerative conditions will be addressed. Lab included.

The community engaged clinical application offers opportunities for students to integrate and apply what they have learned in OT Process: Neurorehabilitation Practice by participating in active, hands-on, and experiential learning. Emphasis will be placed on applying the skills of evaluation, treatment planning, intervention, and documentation in preparation for entry level neuro rehabilitation practice.

Prerequisites: Successful completion of Summer I coursework

OT 510/L: The Occupational Therapy Process in Musculoskeletal Conditions/Lab (4 credits)

This course will provide students with advanced knowledge of human movement including joint motions and muscle actions, biomechanics and movement analysis. Manual muscle testing, goniometry and other biomechanical assessment techniques will be taught. Emphasis will be on the analysis of movement, creating treatment plans to maintain and restore musculoskeletal functions, and the development of intervention planning for neuromusculoskeletal and orthopedic conditions. Lab included.

Prerequisites: Successful completion of Summer I coursework

OT 511: Innovative Approaches in Occupational Therapy (1 credit)

This course highlights technological advances in OT and immerses the student in innovative, evidence-based interventions including assistive technology, HaloAnatomy Software and Anatomage Tables (Experiential Learning Common Virtual Anatomy lab), 3-D printing, functional mobility, prosthetics, driving simulation, modalities, ergonomics, gaming and virtual interventions, Bioness Integrated Therapy System, H200 Wireless Hand Rehabilitation System, and functional mobility. Students will learn to utilize the devices/techniques, as well as be able to verbalize the rationale for usage as OT intervention.

Prerequisites: Successful completion of Summer I coursework

OT 512: Professionalism: Clinical Reasoning & Competence in Occupational Therapy (1 credit)

This course will focus on the application and analysis of professionalism, clinical reasoning, and clinical and cultural humility and the occupational therapy student. The student will continue to build upon the professional skills required in OT practice, build on their ability and confidence with clinical reasoning skills within the OT process and explore the sociocultural, socioeconomic, diversity factors, and lifestyle choices that lead to preferences in engagement in occupation.

Prerequisites: Successful completion of Summer I coursework

OT 513: Fieldwork Level IB Experience (1 credit)

The course provides students with the opportunity to apply coursework into practice during a Level I fieldwork learning experience. This one-workweek (5 day) direct experience will take place in various settings with established partners and involves direct observation and participation in selected aspects of the occupational therapy process.

Prerequisites: Successful completion of Summer I coursework

Spring I

OT 517/L: The Occupational Therapy Process in Mental Health Conditions & Psychosocial Wellbeing (4 credits)

This course will explore the history of mental illness in our society as well as the impact of laws on treatment and access to occupational therapy services. Students will examine and build skills in psychosocial interventions used in occupational therapy. Students will examine the theoretical basis, evaluation tools and practice application of individual, group and consultation psychosocial interventions used by occupational therapists. Lab included.

Prerequisite: Successful completion of all Summer I and Fall I coursework.

OT 516: Aging, Health, & Occupation (2 credits)

This course focuses on Optimizing occupational performance for adults and older adults with attention to roles, satisfaction, competence and activities. A review of human development from adulthood to geriatrics in relation to occupational performance will be provided. The impact of aging on occupational performance with an emphasis on aging in society will be explored. Issues that may impact occupational performance and thus require adaptation will be discussed. Topics will include theory, evidence-based practice, frames of reference, the occupational therapy process and the roles of OTA and OT in practice settings for this population will be discussed.

Prerequisite: Successful completion of all Summer I and Fall I coursework.

OT 515: Managerial Concepts in Occupational Therapy (2 credits)

The principles of management in the provision of occupational therapy are considered in depth, including the principles of organizing, planning, directing, controlling, budgeting and communicating services. A variety of systems and models are examined in relation to the marketing and delivery of occupational therapy services, including medical, community, education, and social models.

Prerequisite: Successful completion of all Summer I and Fall I coursework.

OT 514: Medical Conditions in Occupational Therapy (2 credits)

This course is designed to provide students with knowledge of medical disorders commonly encountered by rehabilitation professionals and to provide an understanding of the management of these disorders. Emphasis is placed on the pathology, etiology, symptomatology, prognosis, and contraindications of cardiovascular, pulmonary, neurological, endocrine, immunologic and other selected medical conditions across the lifespan. The ways in which these diseases and disabilities can affect the development, functioning, and occupation of individuals within their various contexts will be reviewed and examined. Implications for occupational therapy interventions and precautions for practice will be addressed.

Prerequisite: Successful completion of all Summer I and Fall I coursework.

OT518/L: Scholarship & Evidence-Based Practice II (2 credits)

This course engages the student in concepts used in qualitative and quantitative research methodology as used in the occupational therapy profession. Specifically, the student applies principles of evidenced-based practice investigation, critiques and demonstrates a foundational knowledge of research

methodology, engages in beginning-level data analysis and interpretation, and is introduced to the process of presentation and publication of quantitative research projects. Lab included.

Prerequisite: Successful completion of all Summer I and Fall I coursework.

OT 521: Professionalism: Inter/Intra Professional Perspectives (1 credit)

This course explores the role of the OT as an interdisciplinary team member, which includes an examination of other team members (PT, SLP, Psychologist, teacher, OTA, etc.), and includes an in depth exploration of the role of the occupational therapy assistant (OTA). Students learn collaborative techniques including emotional intelligence and role-playing scenarios. Level I Fieldwork preparation and assignments are included in this course.

Prerequisite: Successful completion of all Summer I and Fall I coursework.

OT 519/OT 520: Special Topics in Occupational Therapy I (2 credits)

Advanced knowledge from academic, administrative, and/or clinical management perspectives in occupational therapy area of specialty. Utilize clinical reasoning to facilitate occupation-based interventions that address client factors. This must include interventions focused on promotion, compensation, adaptation, and prevention. Topics can include advanced pediatric feeding issues/interventions, sensory integration, advanced upper extremity rehabilitation, upper extremity modalities and interventions, wellness and well-being, vision therapy, women's health, dementia care, cancer care, advanced school-based and early intervention considerations, advanced acute care, among others. This course will be offered twice (in module 1 and module 2). Students will select topics based on interests and availability.

Prerequisite: Successful completion of all Summer I and Fall I coursework.

OT 522: Fieldwork Level IC Experience (1 credit)

The course will follow the curriculum design in providing the opportunity for students to build upon their application and analysis skills when participating in the clinic-based Level I experience. They will continue to build upon their therapeutic use of self through, engage in the occupational therapy process and apply and analyze their didactic teachings into the clinic setting. This one work-week experience will take place in various settings with established partners.

Prerequisite: Successful completion of all Summer I and Fall I coursework.

Summer II

OT 602: Occupational Therapy Essentials for Clinical Competency (5 credits)

The purpose of this course is to prepare students for Level II Fieldwork in all domain areas including the preparation for Advanced Competency testing. Students will be provided with direct opportunities to utilize the OT Process with simulated clients and/or case studies who are engaged in occupations that are appropriate for their respective cognitive, psychosocial and physical stage of development. Students will participate in a simulated role of the OT utilizing the OT process, including core values, ethics, culture and documentation. The focus is on learning through integration and synthesis of concepts. The first six weeks of this course are online with all asynchronous content with the seventh week being held on-campus in-person. Pre-requisite: Successful completion of Spring I of the professional phase curriculum. Prerequisite: Successful completion of all coursework in the Summer I, Fall I, Spring I of Professional Phase.

OT 601: Scholarship & Evidence-Based Practice III (2 credits)

This course engages the student in qualitative and quantitative research design methodology and analysis used in the occupational therapy profession and introduces the student to interprofessional research

engagement. In addition, students learn to apply evidence to practical clinical scenarios and develop further their identity as occupational therapy clinician-researchers.

Prerequisite: Successful completion of all coursework in the Summer I, Fall I, Spring I of Professional Phase.

OT 603: Advanced Fieldwork Seminar (1 credit)

This course will prepare the student for their Level II fieldwork placement with an emphasis on, Level II fieldwork expectations, the transition from the role of the classroom student to the fieldwork student, professional relationships, site requirements, objectives, and fieldwork priorities.

Prerequisite: Successful completion of all coursework in the Summer I, Fall I, Spring I of Professional Phase.

Fall II

OT 604: Professional Development I (2 credits)

This course will house multiple aspects of professional development including the development of a professional-development plan and portfolio, creation of an NBCOT study plan and implementation through online simulation quizzes and other professional activities.

Prerequisite: Successful completion of Summer II coursework.

OT 605: Fieldwork Level IIA Experience (6 credits)

This course is the first of two 12-week Level II fieldwork learning experiences. This course assists in the development of competent, entry-level, generalist occupational therapists. The student will be exposed to a variety of clients across the lifespan and to a variety of settings. The experience promotes the student's clinical reasoning, reflective and ethical practice, and develops professionalism and competence within professional occupational therapy practice.

Prerequisite: Successful completion of Summer II coursework and a passing score on the *advanced clinical competency*.

Elective: Professional Elective (3 credits)

This is an elective course the student will select from a variety of graduate-level courses offered at Saint Francis University.

Spring II

OT 606: Professional Development II (2 credits)

This course will house multiple aspects of professional development including the development of a professional-development plan and portfolio, creation of an NBCOT study plan and implementation through online simulation quizzes and other professional activities.

Prerequisite: Successful completion of coursework in Fall II.

OT 607: Fieldwork Level IIB Experience (6 credits)

This course is the second of two 12-week Level II fieldwork learning experiences. This course assists in the development of competent, entry-level, generalist occupational therapists. The student will be exposed to a variety of clients across the lifespan and to a variety of settings. The experience promotes the student's clinical reasoning, reflective and ethical practice, and develops professionalism and competence within professional occupational therapy practice.

Prerequisite: Successful completion of coursework in Fall II.

Elective: Professional Elective (3 credits)

This is an elective course the student will select from a variety of graduate-level courses offered at Saint Francis University.

A Curriculum Design – Pre-Professional Phase

YEAR 1				YEAR 2				YEAR 3			
FALL	WRIT102	Research Writing	3	FALL	*BIOL205	Anatomy & Physiology I	3	FALL	*OT301	Occupational Therapy Seminar I	1
	HIST	History Elective	3		*BIOL205L	Anatomy & Physiology I Lab	1		*PSYC311	Research Methods & Statistics I	3
	*BIOL111	Intro to Biology: Molecules, Cells, and Animal Physiology	3		*PSYC209	Developmental Psychology	3		*PSYC205	Psychopathology	3
	*BIOL111L	Intro to Biology Lab	1		PHIL205	Discovering Philosophy, Reasoning, & Responsibility	3		FREE	Free Elective	3
	*SOC101	Intro to Sociology	3		*OT201	Intro to OT II	2		FTAE/PHIL	Religion or Philosophy Elective	3
	*PSYC101	Intro to Psychology	3						*OT310	Occupation & Movement	3
	CORE103	Community Enrichment Series	0						EXAM301	Writing Competency Exam (or ENGL199)	0
	TOTAL CREDITS:				16	TOTAL CREDITS:			12	TOTAL CREDITS:	
SPRING	*PUB101 (Div)	Intro to Public Health	3	SPRING	*BIOL206	Anatomy & Physiology II	3	SPRING	*OT302	Occupational Therapy Seminar II	1
	MATH101	General Mathematics	3		*BIOL206L	Anatomy & Physiology II Lab	1		*PSYC312	Research Methods & Statistics II	3
	LANG	Elective (102 or higher)	3		*PSYC314	Biopsychology	3		*PSYC317	Memory & Cognition	3
	FTAE105	Franciscan Goals for Today	3		LIT Elective	Literature Elective	3		CORE407	Keystone Seminar	3
	CORE104	Community Enrichment Series	0		FNAR	Fine Arts Elective	3		FREE	Free Elective	3
	CORE113	First Year Seminar	3								
	OT102	Intro to OT I	1								
	TOTAL CREDITS:				16	TOTAL CREDITS:			13	TOTAL CREDITS:	



Master of Occupational Therapy

Curriculum Design – Professional Phase

(effective Summer 2023)

SUMMER I			FALL I			SPRING I		
OT404	Foundations of OT	2	OT510/L	OT Process in Musculoskeletal Conditions + Lab	4	OT517/L	OT Process in Mental Health Conditions & Psychosocial Wellbeing	4
OT410/L	Intro to Psychosocial OT + Lab	2	OT509/L	OT Process in Neurorehabilitation + Lab	4	OT516	Aging, Health, & Occupation	2
OT408/L	Intro to Musculoskeletal OT + Lab	2	OT508/L	OT Process in Pediatric Conditions + Lab	4	OT515	Managerial Concepts in OT	2
OT409/L	Intro to Neurological OT + Lab	2	OT505	Therapeutic Interventions & Activity Analysis in OT	1	OT514	Medical Conditions in OT	2
OT407/L	Intro to Pediatric OT + Lab	2	OT507	Leadership, Ethics, & Advocacy Concepts in OT	1	OT518/L	Scholarship & Evidence-based Practice: Phase II	2
OT412	Intro to Clinical Competency	1	OT506	Intro to Health Promotion, Planning, & Programing	1	OT521	Professionalism: Inter/Intra Professional Perspectives	1
OT405	Intro to Healthcare Concepts	1	OT512	Professionalism: Clinical Reasoning & Competence in OT	1	OT522	Fieldwork Level I C Experience	1
OT411	Organization of Theory, Scholarship, & Evidence-based Practice: Phase I	1	OT513	Fieldwork Level I B Experience	1	OT519	Special Topics in OT I	2
OT406	Intro to Professionalism in OT	1	OT511	Innovative Approaches in OT	1	OT520	Special Topics in OT II	2
OT413	Fieldwork Level I A Experience	1						
TOTAL CREDITS:		15	TOTAL CREDITS:		18	TOTAL CREDITS:		18
Bachelor of Science in Health Science								
SUMMER II			FALL II			SPRING II		
OT602	Occupational Therapy Essentials for Clinical Competencies (4 sections)	5	OT604	Professional Development I	2	OT606	Professional Development II	2
OT601	Scholarship & Evidence-based Practice: Phase II	2	OT605	Fieldwork Level II A Experience	6	OT607	Fieldwork Level II B Experience	6
OT603	Advanced Fieldwork Seminar	1	Elective	Professional Elective	3	Elective	Professional Elective	3
TOTAL CREDITS:		8	TOTAL CREDITS:		11	TOTAL CREDITS:		11
Master of Occupational Therapy								

Admission Criteria

Admission to the professional phase of the MOT curriculum is determined by the pre-professional phase progression standards:

By the end of the junior year, the occupational therapy student must achieve *all* of the following:

- 3.0 or better overall QPA
- 2.75 or better collateral QPA
- 30 hours of OT observation
- 'C' or better in all collaterals

Progression and Retention Policies

Students progressing to the professional phase will have successfully completed all prerequisites and met all program requirements to begin the professional phase (please see the pre-professional phase student handbook for progression standards relating to the pre-professional phase).

The professional phase of the MOT program is comprised of lectures and clinical application experiences, scholarly projects, and fieldwork (Level I & Level II) experiences. The curriculum emphasizes the evolving occupational needs of all people, groups, and populations with unique, individualized attributes amid distinct environments. Please refer to Occupational Therapy Curriculum - Guiding Statements for further description on the curriculum design, curricular threads, program goals, and learning outcomes.

Progression through the professional phase of the MOT curriculum is centered around scholastic achievement, professional behavior expectations, and fieldwork success and fulfillment expectations, with a strong commitment to social justice, equity, diversity, and inclusion principles. Student competencies will be measured by formal tests, practical skills competencies, in-class knowledge and skill checks, virtual lab experiences, scholarly papers, research, special projects, satisfactory fieldwork completion, and other methods deemed appropriate.

The professional phase of the MOT curriculum is provided as cohort-based learning environment in which students advance together to achieve semester milestones. All MOT degree requirements must be completed within a period of three consecutive calendar years from the student's initial registration for the professional phase of the curriculum.

Professional Phase Progression:

Progression from Year One of Professional Phase to Year Two of Professional Phase:

Professional phase progression standards are based on grades achieved at the start of professional phase. The student's grade point average (GPA) leading up to the professional phase does not get calculated into the professional phase GPA for progression purposes. Note: for graduation honors purposes, the preprofessional phase GPA is calculated with the first-year professional phase GPA.

During Year One of the professional phase of the MOT curriculum, the student must meet or exceed all the following academic requirements to maintain good academic standing and progress as an occupational therapy student:

At the completion of Year One (Summer I, Fall I, Spring I), each student must:	Additional Information:	Outcome:
Achieve at least a C letter grade in each course	Students are encouraged to self-monitor grades and request a meeting with any faculty member at any point in time during the semester with concerns regarding their grade. However, if a student's letter grade in any course drops below a "C" from midterm of the semester through end of the semester, then the student will be subject to a PRC in order to attempt to rectify deficits prior to the end of the semester.	If a "C" letter grade is not achieved in any course(s), the student will not be able to progress and must re-take the course at the next available offering in order to progress in the program (permitting there is a seat available)
Achieve at least a minimum term GPA of 2.75 or higher each individual semester (Summer I, Fall I, Spring I)	If the minimum term GPA of 2.75 or higher is not achieved, the student will be subject to a PRC, in which a learning contract will be developed. The student will be on academic probation that following semester. While on academic probation, the student will be required to abide by the terms and conditions set forth by the OT PRC including, but not limited to being required to successfully complete ancillary learning experiences.	If the student fails to complete ANY aspect of the terms and conditions set forth by the OT PRC, the student will be dismissed from the program.
Achieve a cumulative GPA of 3.0 or higher (for those 3 semesters combined) in order to progress to Year Two of professional phase	This cumulative GPA of 3.0 MUST be achieved by the end of Spring I.	If a student does not attain the cumulative GPA of 3.0, the student will be dismissed from the program.
Achieve a passing grade ($\geq 36/50$) on each Level I Fieldwork evaluation	If the student does not receive a passing score ($\geq 36/50$) on the Level I Fieldwork Evaluation,	If the student fails to complete ANY aspect of the terms and conditions set forth by the OT PRC, the student will be

	they will be subject to a PRC in order to determine if remediation is appropriate (any scores reflecting on unsafe or unethical behaviors will be considered ineligible for remediation).	dismissed from the program. Once the remediation is completed, the student must participate in a Level I Fieldwork Experience with a passing grade.
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Achievement of all the above standards will allow the student to progress from year one to year two of the professional phase.

If a student does not achieve any of the above, the student will be required to “Step Out” of the Occupational Therapy program for a period of a year. The student may apply for readmission that following year, provided an opening in the cohort. Readmission will be granted at the discretion of the department chairperson. Upon readmission to the OT program, the student would be required to repeat, from the beginning, the course that the student did not achieve a ‘C’. In addition, the student would be placed on Occupational Therapy Department Probation. An ensuing grade below ‘C’ in a repeated professional-level course will result in the student's dismissal from the occupational therapy major. There is no opportunity for further remediation at this point.

Bachelor of Science in Health Sciences Graduation Requirements:

At the completion of Year One professional phase (Summer I, Fall I and Spring I):

1. The student earning a minimum of a 3.0 cumulative GPA (GPA based on Summer I, Fall I and Spring I) will be approved to graduate with a Bachelor of Science in Health Sciences degree and gain approval to progress to Year Two of the professional phase.
2. The student achieving less than a cumulative GPA of 3.0 (Summer I, Fall I and Spring I) will be approved to graduate with a Bachelor of Science in Health Sciences degree (as long as the student meets all other University requirements for graduation) however, *will not* be permitted to progress to Year Two of professional phase.

Year Two of the Professional Phase:

During Year Two of the professional phase of the MOT curriculum, the student must meet or exceed all the following academic requirements to maintain good academic standing and progress as an occupational therapy student to achieve graduation requirements:

At the completion of Year Two (Summer II, Fall II, Spring II), each student must:	Additional Information:	Outcome:
Achieve at least a B letter grade in the <i>Occupational Therapy Essentials for Clinical Competencies</i> course (Summer II) to be approved to begin Level IIA Fieldwork.	Students are encouraged to self-monitor grades and request a meeting with any faculty member at any point in time during the semester with concerns regarding their grade. However, if a student's letter grade in this course drops below a "B" or achieves a grade less than a 90/100 on the advanced skills competency then the student will be subject to a PRC.	If a "B" letter grade and a grade less than a 90/100 on the advanced competency is not achieved in this course, the student will not be able to progress and must re-take the course at the next available offering in order to progress in the program (permitting there is a seat available)
Achieve at least a C letter grade in each course	Students are encouraged to self-monitor grades and request a meeting with any faculty member at any point in time during the semester with concerns regarding their grade. However, if a student's letter grade in any course drops below a "C" from midterm of the semester through end of the semester, then the student will be subject to a PRC in order to attempt to rectify deficits prior to the end of the semester.	If a "C" letter grade is not achieved in any course(s), the student will not be able to progress and must re-take the course at the next available offering in order to progress in the program (permitting there is a seat available)
Achieve at least a minimum term GPA of 2.75 or higher each individual semester (Summer II, Fall II, Spring II)	If the minimum term GPA of 2.75 or higher is not achieved, the student will be subject to a PRC, in which a learning contract will be developed. The student will be on academic probation that following semester. While on academic probation, the student will be required to abide by the terms and conditions set forth by the OT PRC including, but not	If the student fails to complete ANY aspect of the terms and conditions set forth by the OT PRC, the student will be dismissed from the program.

	limited to being required to successfully complete ancillary learning experiences.	
Achieve a cumulative GPA of 3.0 or higher (for those 3 semesters combined) in order to progress to Year Two of professional phase	This cumulative GPA of 3.0 MUST be achieved by the end of Spring I.	If a student does not attain the cumulative GPA of 3.0, the student will be dismissed from the program.
Achieve a score of 111 or higher on the Level II Fieldwork Performance Evaluation - AND - achieve a three or above on questions 1, 2, and 3 on the Fieldwork Performance Evaluation.	If the student does not achieve a score of 111 or higher and a three or above on questions 1, 2, and 3 on the Fieldwork Performance Evaluation they will have failed the Level II fieldwork experience, they must request a PRC.	If the student fails to complete ANY aspect of the terms and conditions set forth by the OT PRC, the student will be dismissed from the program. Once the student passes and completes the remediation, the student must participate in a Level II Fieldwork Experience with a passing grade.

Graduation Requirements:

In order to graduate from the Saint Francis University Master of Occupational Therapy program, the student must:

1. Successfully progress from the pre-professional phase to the professional phase
2. Successfully complete each semester of the professional phase (Summer I, Fall I, Spring I, Summer II, Fall II, Spring II) with a term GPA of 2.75 or higher and a letter grade of “C” or better in each MOT professional phase course.
3. Achieve at least a B letter grade in the *Occupational Therapy Essentials for Clinical Competencies* course (Summer II) to be approved to begin Level IID Fieldwork.
4. Successfully complete the first professional year (Summer I + Fall I + Spring I) with a cumulative GPA of 3.0 or higher and a letter grade of “C” or better in each MOT professional phase course (Year One).
5. Successfully completed the second professional year (Summer II + Fall II + Spring II) with a cumulative GPA of 3.0 or higher and a letter grade of “C” or better in each MOT professional phase course (Year Two).
6. Successfully complete each Level I fieldwork experience with a passing grade on the fieldwork evaluation.
7. Successfully complete each Level II fieldwork experience with a score of 111 or higher on the AOTA Fieldwork Performance Evaluation and receive three or above on questions 1, 2, and 3 at the final. A score of 1 on any of the questions is not allowed to receive a Pass on the AOTA FWPE at the final. If the student receives a 110 or less and/or does not achieve a three on questions 1, 2, and 3, they did not successfully complete their Level II Fieldwork experience. The Level II Fieldwork component of each course MUST be completed within 12 months at the end of the next academic year.
8. Successfully complete and defend the scholarly project as outlined in the Department of Occupational Therapy Student Handbook.

Academic Remediation, Probation, Suspension, Dismissal

Occupational Therapy Department Definitions (note: these terms are applied specifically to students in the professional phase of the occupational therapy program):

Good academic standing: student meets or exceeds all academic (GPA and individual course minimum grade) expectations.

Remediation: an academic plan that defines the requirements necessary for the student to resume the academic progression.

Probation: a specific time period outlined in the remediation plan in which a student completes the required learning outcomes. Once the learning outcomes are met, the student will resume good academic standing and is no longer on probation.

Suspension: a specific time period the student must step out of the program before they can resume their academic progress, typically 1 year due to the cohort style design.

Dismissal: an act that removes the student from the MOT program with no opportunity to be readmitted.

Academic progression in the professional phase of the MOT program requires achievement of a 2.75 cumulative GPA each semester, a 3.0 cumulative GPA at the end of Year One and Year Two, a letter grade of C or better in all courses and a passing grade in all fieldwork experiences (Level I and Level II). Achieve at least a B letter grade in the *Occupational Therapy Essentials for Clinical Competencies* course (Summer II) to be approved to begin Level II D Fieldwork.

Students will be required to repeat those courses in which a student has a deficiency before progressing into the next phase if a student encounter any of the following:

- a. Achieves less than a 2.75 cumulative GPA at end of any semester
- b. Achieves less than 3.0 cumulative GPA at the end of Year One or Year Two
- c. Achieves less than a C letter grade in any course
- d. Achieves less than a B letter grade in *Occupational Therapy Essentials for Clinical Competencies* course
- e. F (Fail) in any fieldwork experience

When repeating MOT occupational therapy professional phase courses, the student may be required to successfully complete ancillary learning experiences or clinical competencies/practicums that validate theoretical knowledge.

1. If the student is unable to repeat the courses or fieldwork experiences the ensuing semester as a result of this policy, the student is placed on academic suspension and repeats the courses and/or fieldwork experiences during the next appropriate semester, as space permits. Any MOT professional phase course may be repeated only one time. The student receiving a letter grade less than a C in a repeated MOT professional phase course is dismissed from the program.
 - a. While the student is on academic suspension:
 - i. The student may select another major course of study.
 - ii. The student may graduate with a Bachelor of Science degree provided Saint Francis University requirements are achieved.

- iii. The student may disembark from the MOT program for no longer than one year and then reapply/register to repeat the courses within the semester of which the student did not meet progression criteria. During the waiting period resulting from the academic suspension, the student may seek to complete a second (dual) major or apply for a leave of absence from Saint Francis University.
 - iv. The student may submit a written request for remediation (See Department of Occupational Therapy student handbook, Section V).
 - v. The student placed on academic suspension must appear before the Occupational Therapy Program Performance Review Committee (PRC). The PRC will review the student's case, contract, and terms of the Occupational Therapy Program academic suspension with the student.
- b. Academic Probation
- i. The student may be placed on academic probation for a period of one semester:
 - 1. If the student achieves a cumulative GPA between a 2.5 and a 2.74 upon completion of a semester but must achieve a letter grade of C or better in all courses and a passing grade in all fieldwork experiences.
 - 2. The student must submit a written request for remediation (See Department of Occupational Therapy student handbook, Section V).
 - 3. The student must appear before the Occupational Therapy Program Performance Review Committee (PRC). The PRC will review the student's case and contract with the student and the terms of the Occupational Therapy Program academic probation.
 - 4. If the PRC grants the student academic probation in opposition to academic suspension, then the student will be required to abide by the terms and conditions set forth by the Occupational Therapy PRC including, but not limited to being required to successfully complete ancillary learning experiences or clinical competencies/practicums that validate theoretical knowledge.
 - 5. All information discussed in the student PRC meeting is confidential.
- c. Process for Level II Fieldwork Remediation
- i. The student must:
 - 1. Initiate a request for an Occupational Therapy Performance Review Committee (OTPRC) meeting.
 - 2. The student must submit a letter to the SFU MOT Department Chair and the Academic Fieldwork Coordinator outlining the reasons for the OTPRC and the request for remediation to the Level II Fieldwork Coursework. (Please see the OTPRC process in the handbook).
 - 3. If granted the remediation, the student must participate in a Level II Fieldwork Remediation course that outlines a mutually agreed-upon plan between the student and the instructor to remediate the deficient skills as outlined in the AOTA FWPE, Learning Contract, and collaboration with the student and Fieldwork Educator.
 - 4. The student and instructor must agree to and sign off on this plan. The student's responsibility will be to ensure that ALL work is completed by the due date.

5. The student understands that the Level II Fieldwork Remediation course may include additional credits and costs incurred as determined by the SFU MOT Department Chair and student needs.
6. Once the student completes and passes all remediation coursework, they will participate in an Advanced Competency (as outlined in Summer II coursework).
7. If the student passes the Advanced Competency, they will be granted a 12-week Level II Fieldwork experience as per graduation requirements. The fieldwork experience will be within a 45-minute drive from the Saint Francis University campus.
8. The student will complete all required Level II Fieldwork Assignments with additional meetings and requirements determined by the remediation instructor.
9. The student must achieve a 74 or higher on the AOTA FWPE at midterm to continue with the experience. The student must achieve a 111 or higher on the AOTA FWPE at the final and a three or higher on questions 1, 2, and 3 to pass the Level II Fieldwork experience.
10. The student must submit a request for a 'CN' grade as per university policy.
 - a. NOTE: The request for the OTPRC and 'CN' grade must be completed prior to submission of final grades to the Registrar's Office.
11. The student's earned grade will be issued upon completion of the Level II Fieldwork Remediation Course and Level II Fieldwork completion. Assignments not completed by the due date as shown on the contract will result in a grade of 'F' for the course.
12. If the student fails to successfully complete the Level II Fieldwork Remediation Course, Advanced Competency, and/or the Level II Fieldwork Experience, the student will be required to immediately step out of the OT program for 1 year. All University financial implications apply in this situation (refer to University policy for withdrawal policies).

Leave of Absence:

Refer to University's policy for Leaves of Absence provided in the University Catalog. Readmission into the MOT professional program is possible based on space availability.

Policy Approved: 05/99

Revised: 05/00; 09/03; 01/07; 05/13

Position Description Worksheet: Occupational Therapy

The following 12 pages were reprinted with permission of Joane M. Wyrick, MA, OTR, FAOTA of Traveling Occupational Therapy Educators, Leavenworth, Kansas.

1. Scope

2. Required Credentials

3. Responsibilities of Each Therapist

Essential Tasks

- a) Engage in
- b) Select
- c) Interpret & understand
- d) Observe
- e) Communicate
- f) Assimilate information
- g) Produce documentation
- h) Interact
- i) Administer treatment
- j) Select, design, and evaluate
- k) Adhere

Essential Tasks That May Be Delegated to Another OT

- a) Administer evaluations
- b) Administer tests
- c) Conduct interviews
- d) Elicit information
- e) Transfer patients
- f) Fabricate

4. Additional Essential Tasks of Therapist in a Specific Discipline

- a) Endurance
- b) Agility/flexibility
- c) Perform or direct

5. Essential Tasks That May Be Delegated to Another OT

- a) Administer tests/evaluations
- b) Transfer patients
- c) Fabricate

6. Number of People Per Shift to Perform Job

7. Environment and Physiological Considerations

8. Cognitive Skills Required

9. Physical Demands – DOT

Essential Tasks of the Occupational Therapist

The following are considered *essential tasks* that must be performed by *each* occupational therapist to assure a universal standard of care:

1. **Engage** in problem solving and clinical reasoning to design a successful treatment program for a patient through the process of informed decision making.
2. **Select** appropriate evaluations and forms of measurement for individual patients assigned.
3. **Evaluate** and **understand** results of evaluations. Provide comprehensive and accurate evaluation on patients assigned and prepare findings according to department policies and procedures.
4. **Observe** a patient accurately and close at hand to render information relating to the identified problem and formulate a plan for intervention.
5. **Communicate** with patient to establish therapist-patient relationship, explain information, provide instructions, and intervene in the therapeutic process.
6. **Assimilate information** from written sources to adhere to hospital and department policies and procedures, meet standards for continuing education, maintain high standards of practice and customer relations.
7. **Produce documentation** toward identified objectives according to department standards.
8. **Interact** as an interdisciplinary team member establishing and maintaining strong, courteous communication patterns that facilitate integrating the individual therapist role into the facility team.
9. **Administer treatment** for all diagnoses using accurate and appropriate basic occupational therapy strategies, skills and techniques.
10. **Select, design, and evaluate** appropriate orthoses and/or assistive devices for assigned patient(s) to facilitate patient independence.
11. **Adhere** to appropriate precautions as per diagnosis to ensure patient and staff safety and quality of care.

The following essential tasks may be delegated to another person when staffing pattern(s) allow for flexibility:

1. Administer fine-motor/gross motor evaluations. These tasks must be delegated to another occupational therapist.
2. Administer paper-and-pencil tests.
3. Conduct interviews with patients, family, staff, and members of the community.
4. Elicit information from patients/clients.
5. Transfer patients when lifting is required to accomplish task and/or ensure safety.
6. Fabricate orthoses from raw materials and modify assistive devices.

Potential Risk(s)

Therapists may be at risk while working with patients who are *Ano code@ status/acutely ill*, patients in isolation or with infectious diseases, and when using physical strength to support and/or transfer patients during treatment sessions. Therapists may have to respond quickly in emergency situations to prevent harm to patients(s) who have loss of balance, poor coordination, and/or poor judgment.

Equal Employment Opportunity Commission:

_____ is an equal opportunity employer. Qualified individuals of any age, sex, race/national origin are encouraged to apply. Qualified individuals with disabilities who are graduates of occupational therapy programs must be able to demonstrate or describe how they would perform the essential functions of the job with or without reasonable accommodations.

Sample Position Description: Occupational Therapist

Scope

Implements, with varying supervision, high quality occupational therapy services for clients, caregivers, and in family in accordance with the standards of care of occupational therapy and policies of _____. Is responsible for evaluating, planning, administering, and supervising patient treatment programs and for serving as a resource person for students and the interdisciplinary team members.

Required Credentials

The individual must:

- be a graduate of an accredited occupational therapy curriculum, including 6 to 9 months of internship, leading to an entry-level master's degree in occupational therapy.
- hold or be eligible for NBCOT certification as a registered occupational therapist.
- hold a current _____ registration.

Responsibilities and Essential Functions

The majority of responsibilities and essential functions must be performed by each therapist. In addition, specific clinics require additional obligations and performance of essential tasks. Qualified individuals with disabilities must be able to demonstrate or describe how they would perform the essential functions of the job, with or without reasonable accommodations.

The following are considered *essential tasks* that must be performed by each occupational therapist in a hospital to ensure a universal standard of care:

1. Engage in problem solving and clinical reasoning to design a successful treatment program for a patient through the process of informed decision making.
2. Select appropriate evaluations and forms of measurement for individual patients assigned.
3. Interpret and understand the results of evaluations. Provide comprehensive and accurate interpretations of evaluations on patients assigned and prepare findings according to department policies and procedures.
4. Observe a patient accurately and close at hand to render information relating to the identified problem and formulate a plan for intervention.
5. Communicate with patient to establish therapist-patient relationship, explain information, provide instructions, and intervene in the therapeutic process.
6. Assimilate information from written sources to adhere to hospital and department policies and procedures, meet standards for continuing education, and maintain high standards of practice and customer relations.
7. Produce documentation toward identified objectives according to department standards.
8. Interact as an interdisciplinary team member, establishing and maintaining strong, courteous communication patterns that facilitate integrating the individual therapist into the facility team.
9. Administer treatment for all diagnoses assigned using accurate and appropriate basic occupational therapy strategies, skills, and techniques.
10. Select, design, and evaluate appropriate orthoses and/or assistive devices for assigned patient(s) to facilitate patient independence.
11. Adhere to appropriate precautions as per diagnosis to ensure patient and staff safety and quality of care.

Physical Dysfunction / Industrial Rehabilitation Therapist Position

In addition to the above, each therapist who works in the physical disabilities area of acute care, intensive care (ICU), rehabilitation unit, outpatient services, and work hardening program(s) must be able to perform the following essential functions:

1. Demonstrate sufficient endurance to engage in 5 hours of patient treatment per day.
2. Demonstrate agility and flexibility of motions when working with patients.
3. Perform or direct treatment in ADL, work and productive activities, motor performance, leisure activities, and cognitive, sensorimotor, and perceptual skills.
4. Administer fine-motor/gross motor evaluations. If delegated, this task must be performed by another occupational therapist.
5. Administer paper-and-pencil tests.
6. Transfer patients when lifting is required to accomplish task and/or ensure safety.
7. Fabricate orthoses from raw materials and modify assistive devices.

Environmental and Physiological Considerations

1. Clinic/patient room/ICU work is performed indoors in a controlled heat or air-conditioned area.
2. Therapists are exposed to a wide variety of infectious diseases and must be able to use standard precautions.
3. Therapist(s) assigned to the work-hardening program perform job-site evaluations in multiple environments involving exposure to outside weather, including extreme cold, extreme heat, wet and/or humid, intense noise, vibration, atmospheric conditions, and proximity to moving mechanical parts.
4. Therapists assigned to the ICU are exposed to numerous types of electrical monitoring and support equipment.

Cognitive Skills Required

1. The ability to use logical and creative thinking and analytic reasoning.

2. The ability to identify and solve a wide variety of problems using clinical reasoning. This process involves:
 - a. An understanding of and familiarity with the signs and symptoms of all diagnoses assigned for treatment.
 - b. The ability to recognize and match the needs of the client with the proper evaluations.
 - c. Identification of physical environment as well as the social, cultural, and temporal factors that influence the client=s behavior.
 - d. The ability to compare and contrast findings with theory and experience to make sound clinical judgments
3. Development of a hypothesis for treatment, formulation of a treatment plan, and reevaluation of the plan when appropriate.

Psychological Considerations Required

The therapist must understand the devastating effect of physical illness and trauma and be able to provide emotional support to the client and family. This involves the ability to:

1. Be empathetic, and to maintain a therapeutic relationship while working in a high-stress environment.
2. Use social skills and self-expression to motivate the client=s interest and participation.
3. Seek and utilize additional resources.
4. Discard what does not work and to be flexible and to try new approaches.
5. Be self-motivated and find job satisfaction when client response is limited.
6. Interact positively with other members of the treatment team while appreciating their diverse backgrounds and focus.
7. Be flexible in time management when patient(s) are not available.

Physical Demands of Job Tasks

The Dictionary of Occupational Titles (DOT) defines occupational therapy as a medium work (exerting up to 50 lbs. of force Occasionally; and/or up to 20 lbs. of force Frequently and/or up to 10 pounds of force constantly to move objects), however many tasks require lifting strength can be delegated when staffing patterns allow. The safety of the client can never be compromised, therefore clients who may need to be protected from falling and/or have poor balance could not be assigned to a therapist who could not catch/support them.

The following physical demands are **required**:

1. Mobility-therapist must go between clinic(s) and patient floors frequently and occasionally to other areas of the hospital.
2. Balance-therapist must have sufficient balance to protect and assist client(s) assigned.
3. Communication-therapist must be able to use at least one method of communication (speech or assistive technology).
4. Documentation-therapist must be able to produce at least one method of written communication (writing, typing, dictation, assistive technology).
5. Information assimilation-therapist must be able use written sources (typeset, enlarged print, Braille, personal assistant-reader).

The following could be delegated to another person if staffing patterns allow:

1. Stooping, kneeling and crouching-are performed on an occasional basis to assist client and to set up equipment. These tasks could be delegated to an assistant.
2. Reaching, handling, fingering, feeling-are performed on a frequent basis to evaluate patient and to set up equipment and work area. These tasks could be delegated to an assistant.

Pediatric Therapist Position

In addition to the above, each therapist who works in the pediatric area must be able to perform the following essential tasks:

1. Demonstrate the flexibility to work with children at bedside, at a table, and on a mat (raised or at floor level).
2. Demonstrate the strength and agility to manipulate and position a child.
3. Establish treatment appropriate for the specific pediatric diagnosis and design the environment to elicit maximum

response.

4. Demonstrate sufficient endurance to engage in 5 hours of patient treatment each day.

The following essential tasks may be delegated to another person when staffing pattern(s) allow for flexibility:

1. Administer fine-motor/gross-motor evaluations. If delegated, this task must be performed by another occupational therapist.
2. Administer paper-and-pencil tests.
3. Transfer patients when lifting is required to accomplish tasks and/or ensure safety.
4. Fabricate orthoses from raw materials and modify assistive devices.
5. Physically control child within the setting and be able to return child to the task.
6. Set up the treatment environment. Arrange furniture and modalities.
7. Administer cognitive-perceptual motor evaluations.

Environmental and Physiological Considerations

1. Work in clinic/patient room/recreational gym/ICU is performed in a controlled heated or air-conditioned area.
2. Work at outdoor playground, weather permitting.
3. While working in ICU, therapist is exposed to numerous types of electric monitoring and support equipment.
4. Therapists are exposed to a wide variety of infectious diseases and must be able to use standard precautions.

Cognitive Skills Required

1. The ability to use logical and creative thinking and analytical reasoning. The ability to identify and solve a wide variety of problems using clinical reasoning. This process involves the ability to:
 - a. Understand and be familiar with the signs and symptoms of all diagnoses assigned for treatment.
 - b. Recognize and match the needs of the client with the proper evaluations.
 - c. Identify the physical environment as well as the social, cultural, and temporal factors that influence the client's behavior.
 - d. Compare and contrast findings with theory and experience to make sound clinical judgments.
 - e. Develop a hypothesis for treatment, formulate a treatment plan, and reevaluate the plan when appropriate.

Psychological Considerations Required

The therapist must understand the devastating effect of physical illness and trauma and be able to provide emotional support to the client and family. This involves the ability to:

1. Be empathetic, but to maintain a therapeutic relationship while working in a high-stress environment.
2. Use social skills and self-expression to motivate the client's interest and participation.
3. Seek and utilize additional resources.
4. Discard what does not work and be flexible and try new approaches.
5. Be self-motivated and find job satisfaction when client response is limited.
6. Interact positively with other members of the treatment team while appreciating their diverse backgrounds and focuses.
7. Be flexible in time management when patients(s) are not available.
8. Accept constructive criticism.

Physical Demands of Job Tasks

The Dictionary of Occupational Titles (DOT) defines occupational therapy as work (exerting up to 50 lbs. of force Occasionally; and/or up to 20 lbs. of force Frequently and/or up to 10 pounds of force constantly to move objects), however many tasks require lifting strength can be delegated when staffing patterns allow. The safety of the client can never be compromised, therefore clients who may need to be protected from falling and/or have poor balance could not be assigned to a therapist who could not catch/support them.

The following physical demands are **required**:

1. Mobility-therapist must go between clinic(s) and patient floors frequently and occasionally to other areas of the hospital.
2. Balance-therapist must have sufficient balance to protect and assist client(s) assigned.
3. Communication-therapist must be able to use at least one method of communication (speech or assistive technology).

4. Documentation-therapist must be able to produce at least one method of written communication (writing, typing, dictation, assistive technology).
5. Information assimilation-therapist must be able use written sources (typeset, enlarged print, braille, personal assistant-reader).

The following could be delegated to another person if staffing patterns allow:

1. Stooping, kneeling and crouching-are performed on an occasional basis to assist client and to set up equipment. These tasks could be delegated to an assistant.
2. Reaching, handling, fingering, feeling-are performed on a frequent basis to evaluate patient and to set up equipment and work area. These tasks could be delegated to an assistant.

Hand Rehabilitation/Burn Positions

In addition to the above, each therapist who works in hand rehabilitation and/or the burn unit must be able to perform the following essential tasks:

1. Perform fine-motor tasks to evaluate, treat, and manipulate the injured part.
2. Set up equipment and make fine adjustments using good eye-hand coordination.
3. Operate power equipment (e.g. drill press, sewing machine), handle physical agent modalities, and use small hand tools.
4. Design and fabricate orthoses from raw materials. Demonstrate skill in developing splints using current techniques appropriate for the patient population.
5. Identify and respond to changes in temperature in modalities and in patient.
6. Demonstrate sufficient endurance to engage in 6 hours of patient treatment each day.
7. The following essential tasks may be delegated to another occupational therapist when staffing pattern(s) allow for flexibility:
8. Administer selected modalities.
9. Provide debridement of wounds, make dressing changes, and remove stitches.
10. Administer fine-motor/gross-motor evaluations. This task must be delegated to another occupational therapist.
11. Administer paper-and-pencil tests.
12. Conduct interviews with patients, family, staff and members of the community.
13. Elicit information from patients/clients.
14. Transfer patients when lifting is required to accomplish task and/or ensure safety.

Burn Rehabilitation

In addition to the essential tasks required of all therapists who work in hand rehabilitation and/or the burn unit, each therapist who works on the burn unit must be able to perform the following essential tasks:

1. Demonstrate agility and flexibility in positioning and working with patients during surgery, at bedside, in the hydrotherapy tank, and in the clinic.
2. Measure, select, and apply compression garments on the patient.
3. Fabricate orthoses in the operating room.
4. Be available to work weekends to provide treatment.

Environmental and Physiological Considerations

1. Work in patient/client room/surgery/ICU is performed indoors in a controlled heated or air-conditioned area. Work in surgery is in cold environment.
2. While working in surgery and in the ICU the therapist is exposed to numerous types of electrical monitoring and support equipment.

Cognitive Skills Required

1. The ability to use logical and creative thinking and analytical reasoning. The ability to identify and solve a wide variety of problems using clinical reasoning. This process involves the ability to:
 - a. Understand and be familiar with the signs and symptoms of all diagnoses treated.
 - b. Recognize and match the needs of the client with the proper evaluations.
 - c. Identify the physical environment as well as the cultural, and temporal factors that influence the client's

- behavior.
- d. Compare and contrast findings with theory and experience to make sound clinical judgments.
 - e. Develop a hypothesis for treatment, formulate a treatment plan, and reevaluate the plan when appropriate.

Psychological Considerations

The therapist must understand the devastating effect of physical illness and trauma and be able to provide emotional support to the client and family. This involves the ability to:

1. Be empathetic, but to maintain psychological distance while working in a high stress environment.
2. Engage in hands-on therapy with patients who have open wounds, loss of soft tissue, infections, and disfigurement.
3. Use social skills and self-expression to motivate the client's interest and participation.
4. Discard what does not work and be flexible and to try new approaches.
5. Be self-motivated and find job satisfaction when client response is limited.
6. Interact positively with other members of the treatment team while appreciating their diverse backgrounds and focus.
7. Be flexible in time management when patient(s) are not available.

Physical Demands of Job Tasks

The Dictionary of Occupational Titles (DOT) defines occupational therapy as work (exerting up to 50 lbs. of force Occasionally; and/or up to 20 lbs. of force Frequently and/or up to 10 pounds of force constantly to move objects), however many tasks require lifting strength can be delegated when staffing patterns allow. The safety of the client can never be compromised, therefore clients who may need to be protected from falling and/or have poor balance could not be assigned to a therapist who could not catch/support them.

The following physical demands are **required**:

1. Mobility-therapist must go between clinic(s) and patient floors frequently and occasionally to other areas of the hospital.
2. Balance-therapist must have sufficient balance to protect and assist client(s) assigned.
3. Communication-therapist must be able to use at least one method of communication (speech or assistive technology).
4. Documentation-therapist must be able to produce at least one method of written communication (writing, typing, dictation, assistive technology).
5. Information assimilation-therapist must be able use written sources (typeset, enlarged print, braille, personal assistant-reader).

The following could be delegated to another person if staffing patterns allow:

1. Stooping, kneeling and crouching-are performed on an occasional basis to assist client and to set up equipment. These tasks could be delegated to an assistant. Reaching, handling, fingering, feeling-are performed on a frequent basis to evaluate patient and to set up equipment and work area. These tasks could be delegated to an assistant.

Psychosocial Dysfunction-Adult and Child Therapist Position

In addition to the above, each therapist who works in psychosocial dysfunction program(s) must be able to perform the following essential functions:

1. Demonstrate sufficient endurance to engage in 6 hours of patient treatment each day.
2. Demonstrate proficiency in techniques while working with patients.
3. Demonstrate an understanding of behavior modification.
4. Perform or direct treatment in group dynamics.

The following essential tasks may be delegated to another person when staffing pattern(s) allow for flexibility:

1. Administer fine-motor/gross-motor evaluations. If delegated, this task must be performed by another occupational therapist.
2. Administer paper-and-pencil tests.
3. Transfer patients when lifting is required to accomplish task and/or ensure safety.

Environmental and Physiological Considerations

1. Clinic/patient room/ and living area work is performed indoors in a controlled heated or air-conditioned area.
2. Therapists may take clients on therapeutic outings and work outdoors in areas adjacent to the building.
3. Therapists are exposed to a wide variety of infectious diseases and must be able to use standard precautions.

Cognitive Skills Required

1. The ability to use logical and creative thinking and analytical reasoning.
2. The ability to identify and solve a wide variety of problems using clinical reasoning. This process involves the ability to:
 - a. Understand and be familiar with the signs and symptoms of all diagnoses treated.
 - b. Recognize and match the needs of the client with the proper evaluations.
 - c. Identify the physical environment as well as the social, cultural, and temporal factors that influence the client=s behavior.
 - d. Compare and contrast findings with theory and experience to make sound clinical judgments.
 - e. Develop a hypothesis for treatment, formulate a treatment plan, and reevaluate the plan when appropriate.

Psychological Considerations

The therapist must understand the devastating effect of dysfunctional behavior, psychiatric illness, and trauma and be able to provide emotional support to the client and family. This involves the ability to:

1. Be empathetic, but to maintain psychological distance while working in a high stress environment.
2. Use social skills and self-expression to motivate the client=s interest and participation.
3. Discard what does not work and be flexible and try new approaches.
4. Be self-motivated and find job satisfaction when client response is limited.
5. Interact positively with other members of the treatment team while appreciating their diverse backgrounds and focus.
6. Be flexible in time management when patient(s) are not available.

Physical Demands of Job Tasks

The Dictionary of Occupational Titles (DOT) defines occupational therapy as work (exerting up to 50 lbs. of force Occasionally; and/or up to 20 lbs. of force Frequently and/or up to 10 pounds of force constantly to move objects), however many tasks require lifting strength can be delegated when staffing patterns allow. The safety of the client can never be compromised, therefore clients who may need to be protected from falling and/or have poor balance could not be assigned to a therapist who could not catch/support them.

The following physical demands are **required**:

1. Mobility-therapist must go between clinic(s) and patient floors frequently and occasionally to other areas of the hospital.
2. Balance-therapist must have sufficient balance to protect and assist client(s) assigned.
3. Communication-therapist must be able to use at least one method of communication (speech or assistive technology).
4. Documentation-therapist must be able to produce at least one method of written communication (writing, typing, dictation, assistive technology).
5. Information assimilation-therapist must be able use written sources (typeset, enlarged print, braille, personal assistant-reader).

The following could be delegated to another person if staffing patterns allow:

1. Stooping, kneeling and crouching-are performed on an occasional basis to assist client and to set up equipment. These tasks could be delegated to an assistant.

Academic Advising

Student Responsibilities

Students are responsible for knowing and fulfilling departmental and university policies as delineated in this manual, in the Saint Francis University catalog, and in the Saint Francis University Student Handbook. Examples of specific student responsibilities include the following:

- Monitor grades in classes and seek appropriate help from advisor, instructor, appropriate others (Center for Academic Success) as soon as you encounter difficulty.
- Be informed of advancement/progression criteria in the Department of Occupational Therapy.
- Keep all graded papers, tests, and assignments (for at least one year).
- Ensure all requirements for graduation are met (including all General Education course work and a minimum of 128 credits are completed). The academic advisor will assist in this process, however it is ultimately the responsibility of the student to ensure all requirements are met.
- Become informed of the class information for each OT course early in the term and in advance of the assignments. Seek clarification as needed.
- Make every possible attempt to attend each class and lab session. Due to the nature of the material presented and the time constraints, it is extremely difficult to make up the class on an individual basis.
- If you need to be absent, telephone the department office and leave a message for the instructor. Also, send an email to the instructor/professor who is responsible for teaching the material the day of the absence.
- If you need to be absent during the day of a test or special assignment, you must inform the instructor in advance PRIOR via email to the start of class and make arrangements to make up the work. This would include doctor's appointments during potential classroom hours (which should be avoided if possible). It is up to the faculty member's discretion whether opportunities for make-up work will be provided. In the event of absence, it is the student's responsibility to promptly obtain the content that was missed.
- If you have special needs in OT classes or on campus, it is your responsibility to notify the accessibility coordinator and/or appropriate instructor, as to your needs. ***We cannot provide necessary and reasonable accommodations if we are not aware of special needs!***

OT Academic Advisor Responsibilities

As an occupational therapy student enrolled at Saint Francis University, s/he is assigned one of the OT faculty members as his/her academic advisor. All OT academic advisors have "open-door" policies regarding student needs. Appointments may be necessary at times (particularly during registration periods), and they can be made through the department office.

Responsibilities of the OT academic advisor include:

- Assist advisee in the registration process.
- Assist and direct advisee in obtaining needed assistance (i.e. finding tutoring).
- Counsel the advisee regarding program planning; approve advisee for registration.

- Counsel to help the student sort issues and decide whether to add or drop courses; approve add/drop of courses.
- Advise student of various consequences should a student earn a grade below a 'C' or if QPA falls below 3.0 and threatens advancement into the professional phase of the MOT program.
- Assist with professional development by discussing plans, interests, and issues with the student, as well as locating resource information and people as indicated.
- Verify records to ensure that all academic records are updated and in good order; reviewing student records prior to graduation.

OT Performance Review Committee (PRC)

The Occupational Therapy Performance Review Committee (OTPRC) is a designated group of faculty and students whose intent is to maximize students' learning opportunities, as well as maintain Occupational Therapy standards. Maintenance of department standards is important to not only protect the integrity of the Occupational Therapy department, but more importantly, safeguard the welfare of patients. Examples of outcomes of the PRC are suspension, termination, probation or other alterations of the student's curriculum plan.

Generally, the Performance Review Committee (PRC) may be convened by the request of the department chair or other faculty to review a student's academic or professional performance, as it relates to their role as an MOT student. However, individual students may also request a review by the committee. To request this review, a student must submit to the department Chair a written request outlining the reasons why a review is necessary. The PRC would then attempt to meet within fourteen days of receipt of the written appeal.

The PRC consists of the Occupational Therapy department faculty, at least one external faculty member, a current student in the MOT program, and other appropriate members, as deemed necessary by the circumstances. The student in question may request to bring another individual to the meeting at the discretion of the department chair.

All decisions rendered or dismissals upheld by the PRC will be final and binding. Students are referred to the university catalog for a complete description on the due process.

PLEASE REFER to related documents:

- 2018 Standards for an Accredited Educational Program for the Occupational Therapist
- MOT Progression and Retention Policy
- Level I & Level II Fieldwork Evaluations
- MOT Professionalism Policy

Effective: 11/2006, updated 5/2020

Occupational Therapy Department Exemption/Substitution Policies

OT 201 - Introduction into OT II

At the discretion of the Department of Occupational Therapy chair, the Occupational Therapy Seminar course(s) may be waived for individuals who demonstrate substantial exposure to Occupational Therapy. The following scenarios are considered substantial exposure in order to waive the Seminar Courses:

1. Completion of a medical terminology course with demonstration of successful completion (“C” or better) of sufficient body systems knowledge.

OT Seminar (OT301 and OT302) Exemption Policy

At the discretion of the Department of Occupational Therapy chair, the Occupational Therapy Seminar course(s) may be waived for individuals who demonstrate substantial exposure to Occupational Therapy. The following scenarios are considered substantial exposure in order to waive the Seminar Courses:

1. Existing credential as a Certified Occupational Therapy Assistant
2. Completion of observation hours including:
 - b. Documentation of at least 50 hours of observation in an Occupational Therapy Department (Refer to **Documentation Form for Occupational Therapy Observation**)
 - c. Interview of two (2) registered occupational therapists in different settings, followed by submission of a paper (500 words or less) summarizing the observation experiences and the various roles of the occupational therapist

NOTE: For students wishing to apply for exemption of one of the above courses, 25 observation hours, along with one interview.

Supporting documents to follow:

- Documentation Form for Occupational Therapy Observation

Verification of Documentation and Interview for OT 301/302 Exemption Policy

Saint Francis University
Department of Occupational Therapy
P.O. Box 600
Loretto, PA 15940-0600
814-472-3899

Documentation Form for Occupational Therapy Observation

(PLEASE PRINT)

Applicant Name: _____

NAME OF FACILITY: _____

ADDRESS: _____ TELEPHONE: _____

PRACTICE SETTING: ___ acute care ___ rehab ___ outpatient
 ___ outpatient ___ pediatrics ___ mental health
 ___ other _____

_____ hours of experience were completed as a: ___ volunteer ___ employee

THESE HOURS (please choose):

- _____ fulfill the 10-hour requirement for admission into the MOT program
- _____ fulfill the 30-hour requirement for progression in the MOT program
- _____ fulfill the 50-hour requirement for *graduate* admission to the MOT program
- _____ **fulfil the 25/50-hour requirement as part of the OT301/302 exemption policy**
- _____ fulfill general observation hours required as part of process of transferring into the OT program (external or internal)

INCLUSIVE DATE(S): _____

Student signature _____

Signature of Occupational Therapy Practitioner _____

FOR OFFICE USE:

Date verified: _____

Signature: _____

Scholarly Project Requirements

Inspired by the spirit of the Goals of Franciscan Higher Education and the Saint Francis University School of Health Sciences and Education, occupational therapy education at Saint Francis University will:

1. Prepare students for practice as ***competent, innovative, equitable, compassionate, and ethical occupational therapists for service to underserved*** populations of Pennsylvania and beyond.
2. Prepare students to actively ***foster the growth and development of the profession of occupational therapy through systematic inquiry, community awareness and action, and professional organization involvement***.
3. Prepare students to ***commit to their own personal and professional growth and development through the quest for life-long learning, critical self-reflection and analysis, and a humble attitude toward learning***.

These three broad goals provide the framework on which the educational philosophy and curriculum design of the program are built.

The curriculum design of the Master of Occupational Therapy program at Saint Francis University follows Webb's Depth of Knowledge (DoK) Framework (1997), with the pre-professional phase encompassing Level I (recall) and the professional phase embracing Level II (skills and concept development), Level III (strategic thinking), and Level IV (extended thinking). As students progress through the DoK levels within our curriculum, they are challenged with assessments that require learning and thinking at a deeper cognitive rigor.

The curriculum modules have been developed to embody the mission of our program, school, and institution. They are as follows:

- The Competent Practitioner
- The Scholarly Practitioner
- The Virtuous Practitioner
- The Engaged Practitioner
- The Innovative Practitioner

The scholarly project is required for all MOT graduates, and is woven throughout the professional coursework, housed in the "Scholarly Practitioner" curriculum module. The scholarly project, which is completed in small groups, is led by an MOT faculty member. MOT faculty lead and facilitate research projects that are meaningful to the students as well as beneficial to the communities that we serve. These communities include the local rural community, the global community of clients with varying diagnoses, as well as the community of health care practitioners of which we are a part.

Themes particularly evidenced within research include *Ethical, Innovative, and Community Awareness and Action*. All research completed within the MOT program is done while upholding ethical principles and beliefs; this is supported through awareness enhanced by completion of required modules within the Collaborative Institutional Training Initiative (CITI) as well as following strict IRB approved protocols. Faculty and student research projects encompass innovative methods and/or innovative equipment. The scholarly projects are developed with awareness of community needs with an effort to fill the gap in that area.

Scholarly projects are developed and implemented in alignment with *Boyer's Model of Scholarship* (1997). Boyer's model includes the following types of scholarship, each with a brief description of their purpose as outlined below:

- Scholarship of Discovery
 - Purpose: Build new knowledge through traditional research
 - Measures of Performance:
 - Publishing in peer-reviewed forums
 - Producing and/or performing creative work within established field
 - Creating infrastructure for future studies
- Scholarship of Integration
 - Purpose: Interpret the use of knowledge across disciplines
 - Measures of Performance:
 - Preparing a comprehensive literature review
 - Writing a textbook for use in multiple disciplines
 - Collaborating with colleagues to design and deliver a core course
- Scholarship of Application
 - Purpose: Aid society and professions in addressing problems

- Measures of Performance:
 - Serving industry or government as an external consultant
 - Assuming leadership roles in professional organizations
 - Advising student leaders, thereby fostering their professional growth
- Scholarship of Teaching
 - Purpose: Study teaching models and practices to achieve optimal learning
 - Measures of Performance:
 - Advancing learning theory through classroom research
 - Developing and testing instructional materials
 - Mentoring graduate students
 - Designing and implementing a program level assessment system

The scholarly project includes completion of the following:

1. Conducting research that will culminate in a master's capstone.
2. Identification of a "community partner" through which the research group and MOT faculty leader will work closely with to address the identified problem, as well as the manner in which the scholarly project will address the identified problem
3. Development, implementation, and evaluation of an occupational therapy service program that addresses the identified problem
4. Dissemination of the scholarly project

As evidenced, the steps involved in the scholarly project parallel those of the scientific method:

- a. selection and definition of a problem
- b. design and implementation of the study
- c. analysis of the data
- d. drawing and stating of conclusions

The sequence of the Scholarly Project is as follows:

Summer I

Students will be enrolled in OT 411 (Organization of Theory, Scholarship, and Evidence-based Practice: Phase I) where they will gain an overview of the research process in conjunction with the essential elements of evidence-based practice through the coursework and classroom learning activities. Students will apply, analyze, and evaluate scientific evidence, theories, models of practice, and frames of reference that underlie the practice of occupational therapy to guide and inform interventions for persons, groups, and populations in a variety of practice contexts and environments as well as be able to explain the process of theory development and its importance to occupational therapy. Additionally, students will critique quantitative and qualitative research in order to analyze and evaluate scholarly activities, which contribute to the development of a body of knowledge, including level of evidence, validity of research studies, strength of the methodology, and relevance to the profession of occupational therapy. They will locate, select, analyze, and evaluate scholarly literature to make evidence-based decisions. Upon completion of this course, students will demonstrate a basic understanding of quantitative and qualitative methods for data analysis including basic descriptive, correlational, and inferential quantitative statistics. *ACOTE standards: B.2.1, B.2.2, B.6.1, B.6.2*

Fall I

Students will be enrolled in OT 506 (Intro to Health Promotion, Planning, and Programing), a community engaged course, that will prepare them to create, implement, and evaluate community-based occupational therapy services. Student groups will identify a community partner as well as a research topic this semester. Students will participate in scholarly activities that align with current research priorities and advance knowledge translation, professional practice, service delivery, or professional issues (Scholarship of Integration and Scholarship of Application). They will begin their literature review, requiring analysis and synthesis of data, which will also provide the foundation for the design and development of a specific occupational therapy service program for their community partner based on an identified need. Throughout the development of their specific occupational therapy service program, they will demonstrate an understanding and apply the principles of instructional design and teaching and learning. *ACOTE standards: B.5.6, B.5.7, B.6.3, B.6.1, B.6.6*

Spring I

Students will be enrolled in OT 518 (Scholarship and Evidence-based Practice: Phase II), also a community engaged course, that encompasses their scholarly project implementation and data collection. Throughout this semester, student groups will continue to participate in scholarly activities that align with current research priorities and advance knowledge translation, professional practice, service delivery, or professional issues (Scholarship of Application and Scholarship of Teaching and Learning). Students will demonstrate the skills necessary to write a scholarly report in a format for presentation or publication as well as demonstrate an understanding of the process of locating and securing grants and how grants can serve as a fiscal resource for scholarly activities and program development. Students will be required to complete all necessary training per IRB requirements; including, but not limited to completion of the Collaborative Institutional Training Initiative (CITI), which will allow them to demonstrate an understanding of the ethical policies and procedures for human-subject research, educational research, or research related to population health. Student groups will be required to complete and submit their application to the IRB for approval, implement their previously created occupational therapy service program with their identified community partner, and complete the data collection process. *ACOTE standards: B.5.8, B.6.1, B.6.2, B.6.3, B.6.4, B.6.5, B.7.1*

Summer II

Students will be enrolled in OT 601 (Scholarship and Evidence-based Practice: Phase III), which is the culminating phase of their scholarly project. Throughout this semester, student groups will continue to participate in scholarly activities that align with current research priorities and advance knowledge translation, professional practice, service delivery, or professional issues. Students will demonstrate the use of quantitative and qualitative methods for data analysis including basic descriptive, correlational, and inferential quantitative statistics as well as analysis and synthesis of qualitative data. Students will demonstrate the skills necessary to write a scholarly report in a format for presentation or publication, as they will complete data analysis and interpretation, and disseminate the results of their scholarly project. Dissemination will take place during an inter-professional poster presentation event on-campus with peers, other academic programs (faculty and students), and local clinicians. Students will be applying the principles of instructional design and teaching and learning throughout creation and dissemination of their presentations. *ACOTE standards: B.2.1, B.6.1, B.6.2, B.6.3, B.6.6*

References

Boyer, E.L. (1997). *Scholarship reconsidered: Priorities of the professoriate*. San Francisco: Josey-Bass.
Webb, N. L. (1997). Criteria for alignment of expectations and assessments in mathematics and science education. Council of Chief State School Officers and National Institute for Science Education Research Monograph No. 6. Madison, WI: University of Wisconsin

Complaint Policy

Scope of Policy: Both the University and the Department of Occupational Therapy recognize and accept the responsibility to handle concerns or complaints about the program and/or program faculty members in a fair and timely manner. Complaints may be received from students, parents of students, department faculty, faculty from other departments, other University employees, personnel from clinical sites, the general public, or any other source.

Definition of complaint: A complaint will be considered bona fide when the maker submits it in written, signed format.

Procedure: The chair of the Department of Occupational Therapy, in consultation with the Dean of the School of Health Science and Education, will be responsible for handling complaints about the program.

1. The complaint will be received by the chair of the Department of Occupational Therapy. The complaint will be photocopied and forwarded to the dean.
2. The chair of the Department of Occupational Therapy may act alone to address the complaint unless the complaint is directed at a department faculty member.

3. In the case that the complaint involves a department faculty member or in the case that the chair perceives a need for assistance in addressing the complaint, the chair and other Occupational Therapy faculty members will meet to discuss the complaint within five days of its receipt. A complaint about the chair will be referred directly to the dean.
4. If the complaint is about a member of the OT faculty, that individual may be excused from the deliberations about the complaint at the discretion of the chair. In any case, the faculty member named in the complaint will not participate in votes taken in the process of the resolution of the complaint.
5. The chair and OT faculty members will review the complaint and any related pertinent documents and, if indicated, will contact the maker of the complaint within 10 days of its receipt.
6. The chair and OT faculty members will recommend ways to address the complaint and, if necessary, will vote to choose a specific pathway of resolution. The proposed resolution will be provided in writing to the maker of the complaint within 15 days of receipt of the complaint.
7. The dean will receive a copy of the proposed resolution.
8. A confidential record of the deliberations and resolve of the complaint will be maintained in the Department of Occupational Therapy.

NOTE: Student issues should be addressed utilizing the Saint Francis University MOT Program Complaint Form available in the department office. Outside parties should direct their written complaints to:

Dr. Lorie Rowles, OTR/L
Interim Chair and Program Director
Department of Occupational Therapy
Saint Francis University
P.O. Box 600
Loretto, PA 15940

To file a complaint with the Accreditation Council for Occupational Therapy Education (ACOTE), please contact:

Accreditation Council for Occupational Therapy Education (ACOTE)
c/o the American Occupational Therapy Association (AOTA)
6116 Executive Boulevard
Suite 200
North Bethesda, MD 20852-4929.
Telephone: (301) 652-6611.
Website: www.acoteonline.org

Effective: 05/2013, updated 5/2022

Resolving Ethical Issues

The American Occupational Therapy Association (AOTA) *Occupational Therapy Code of Ethics* (2015) is a public statement of principles used to promote and maintain high standards of conduct within the profession and is supported by the *Core Values and Attitudes of Occupational Therapy Practice* (AOTA, 1993). Members of AOTA are committed to promoting inclusion, diversity, independence, and safety for all recipients in various stages of life, health, and illness and to empower all beneficiaries of occupational therapy. This commitment extends beyond service recipients to include professional colleagues, students, educators, businesses, and the community (Occupational Therapy Code of Ethics, 2020).

As per the *Guidelines to the Occupational Therapy Code of Ethics*, Occupational Therapy personnel should utilize all resources available to them to identify and resolve conflicts and/or ethical dilemmas. To that end, the following policy has been developed:

- A. All faculty members will acknowledge and understand the 2020 *Occupational Therapy Code of Ethics* and agree to abide by this Code.
- B. If a faculty member or student is presented with a student, faculty, or professional ethical situation, and s/he is uncertain of whether a specific action would violate the Code, s/he should consult with the chair of the Department of Occupational Therapy. If the chair does not have a ready answer, s/he will contact the American Occupational Therapy Association (AOTA) Ethics Commission for consultation.
- C. Every effort will be made by the faculty member /chair to clarify and resolve the situation utilizing internal resources that permits the fullest adherence to the Code.
- D. If the informal resolution is not appropriate or is not effective, the situation will then be directed to the appropriate jurisdiction (university, local law enforcement, state Licensure Board or AOTA Ethics Commission).

Original: 01/2010; Updated 2015, 2021

Professional Occupational Therapy Organizations

American Occupational Therapy Association:

The American Occupational Therapy Association is the professional organization of occupational therapists in the United States. It represents us to the federal government, to various national planning boards and health agencies, and to other professional associations.

The ACOTE (Accreditation Council for Occupational Therapy Education) of the AOTA (American Occupational Therapy Association) sets standards for and accredits occupational therapy curricula.

Student therapists may become non-voting members of AOTA. By doing so, they receive:

1. Membership to the student organization
2. Subscription to the *American Journal of Occupational Therapy* (AJOT)
3. Subscription to *OT Practice*
4. Special mailings
5. Eligibility for AOTA scholarship awards.

Students are required to join AOTA in the Fall I semester as part of OT 507. You will find that you have access to information about the latest developments in our profession. Frequently faculty give reading assignments in AJOT. Further, your journals become an excellent reference for future use. Student membership applications are available in the Department of OT.

Pennsylvania Occupational Therapy Association:

The Pennsylvania Occupational Therapy Association (POTA) is this state's affiliate of the American Occupational Therapy Association. It represents us to state legislators, public boards and agencies, and other professional associations on a state and local level. POTA holds 3 to 4 meetings throughout the year in the Altoona-Johnstown area. The meetings usually entail an educational portion followed by a business meeting. POTA District IV has recently instituted a student scholarship for a student member in the district. Applications are available in the Department of Occupational Therapy. Students are required to join their state OT organization in OT 402.

Saint Francis University Student Occupational Therapy Association (SOTA):

The SFU SOTA was established in 1997 to assist occupational therapy majors in obtaining educational experiences outside the traditional classroom setting while promoting unity in the occupational therapy profession. The Saint Francis University Occupational Therapy Organization has the following goals:

- a) Promote the profession of occupational therapy
- b) Promote a sense of unity to occupational therapy majors at all levels
- c) Promote a pursuit of life-long learning
- d) Provide membership with additional educational support

All OT majors are encouraged to attend meetings held once a month during the fall and spring semesters.

General Policies and Procedures

Many general policies are clearly defined in the [Saint Francis University Student Handbook and University Catalog](#). The Master of Occupational Therapy program also includes the following general policies while students are in the professional phase of the MOT program:

Academic Honesty

Follows University policy (read the entire policy [here](#), which includes the judicial process and appeals)

A. Introduction

Academic honesty is an essential part of the Saint Francis University experience. Dishonesty in any aspect of the life of the University is viewed as being incompatible with the school's moral tradition. Accordingly, Saint Francis University has prepared a policy on academic honesty that will guide students in dealing with such issues in the process of learning regardless of course delivery method.

B. Policy Statement

The Franciscan tradition of Saint Francis University holds that students maintain honesty in all intellectual and academic pursuits, which means they will present as their own only work they have created. In addition, all material must be properly attributed to the original author or source. This includes always conducting oneself with integrity and honesty in all University business. Examples of violations to this policy are outlined in Section C.

All Saint Francis University students will be expected to understand what academic dishonesty is and the associated implications by reviewing the policy and examples provided. It is the responsibility of the chief academic officer and faculty to provide the appropriate information to facilitate familiarity with potential violations of academic integrity

among all Saint Francis University students. To ensure that students are familiar with this policy, the policy will be reviewed during student orientation sessions.

C. Violations of Academic Honesty

There are various practices that are seen as violations of academic honesty. Examples of these, listed below, were developed by the University of Rochester (2011) and are used with permission. Additional examples of violations of academic honesty are based upon a list of unacceptable practices that was provided by Dr. John Watson of St. Bonaventure University. These examples are not intended to be exhaustive.

1. CHEATING

Including, but not limited to undertaking any activity intended to obtain an unfair advantage over other students; using unauthorized notes or other study aids during an examination; using unauthorized technology during an examination, including laptop computers, cell phones, e-readers or others; improper storage of prohibited notes, course materials, and study aids during an exam such that they are accessible or possible to view; looking at other students' work during an exam or in an assignment where collaboration is not allowed by the instructor; attempting to communicate (verbally, nonverbally, or via technology) with other students or persons in order to get help during an exam or in an assignment where collaboration is not allowed by the instructor; improper obtaining (including photographing) or distributing of an examination; altering graded work and submitting it for re-grading; submitting another student's paper or project as one's own; submitting work done in one class for credit in another without the instructor's permission; coaching another student in the preparation of an assignment in part or in-whole, including editing papers, projects, computer programs, etc., unless specifically assigned by the instructor; discussing exam content from one section of a course with students from a different section who have not yet taken the exam; someone other than the students completing the assignment or exam.

2. PLAGIARISM

Using whether deliberate or unintentional, an idea, phrase, or other materials from a source without proper acknowledgment of that source (electronic or other) in work for which the student claims authorship, including direct copy/paste from online or print sources without using quotation marks; inadequately or incorrectly documenting source materials; misrepresenting sources used in a work for which the student claims authorship; improperly using course materials in a work for which the student claims authorship; using papers purchased or obtained online or through other means and turned in as one's own work; submitting written work, such as laboratory reports, computer programs, or papers, that has been copied from the work of other students, with or without their knowledge and consent. *The risk of plagiarism can be avoided in written work by clearly indicating, either in footnotes, in-text citations, or other accepted methods, the source of any major or unique idea or wording that you did not arrive at on your own. In addition, the majority of any written work should consist of the original ideas of the student. When material is directly copied from a source, the material must appear in quotes to show that the wording is not the student's own. Sources must be correctly cited regardless of whether the material is quoted directly, summarized, or paraphrased.

3. FABRICATION

Falsifying or inventing any information, citation, or data; using improper methods of collecting or generating data and presenting them as legitimate; submitting contrived or altered data, quotations, or documents with an intent to mislead; or deliberately misattributing material to a source other than that from which the student obtained it; misrepresenting oneself or one's status in the University; perpetrating hoaxes unbecoming to students in good standing or potentially damaging to the University's reputation or that of the members of its academic community of students and scholars.

4. FACILITATING ACADEMIC DISHONESTY

Aiding another person in an act that violates the standards of academic honesty; allowing other students to look at one's own work during an exam or in an assignment where collaboration is not specifically allowed by the instructor; providing information, material, or assistance to another person verbally or by electronic means knowing that it may be used in violation of course, departmental, or University academic honesty policies; providing false information in connection with any academic honesty inquiry.

5. DENYING OTHERS ACCESS TO INFORMATION OR MATERIAL

Any act that maliciously hinders the use of or access to library or course materials, such as the removal of pages from books or journals or reserve materials, the removal of books from libraries without formally checking out the items, the intentional hiding of library materials, and the refusal to return reserve readings to the library. All of these acts are dishonest and harmful to the University community.

6. FALSIFYING RECORDS AND OFFICIAL DOCUMENTS

Forging signatures or falsifying information on official academic documents (paper or electronic), such as drop/add forms, incomplete forms, petitions, letters of permission, or any other official University document, is considered a violation of policy. Knowingly making false statements or presenting false evidence at any time throughout the academic honesty process is as well. In cases where the student has been accused of other unacceptable practices, knowingly making false statements or presenting false evidence will be treated as an additional offense for purposes of determining the proper penalty category.

After Hours Lab Availability

Due to the nature of the active learning of occupational therapy students, the OT lab is a learning environment that is permitted to be open after class hours. Students interested in practicing transfer and other techniques should contact the administrative coordinators and request the lab to remain open. The coordinator will then contact University Police regarding unlocking/locking the lab based on the hours requested by students.

Assistance:

Students who request accommodations based on a disability, in this or any other course, must contact Ms. April Fry in Accessibility Services in Scotus Hall 323C at [814-472-3176](tel:814-472-3176) or afry@francis.edu. After the proper documentation is approved by that office, students should then schedule individual meetings with individual faculty in their offices to discuss the specific needs for courses.

Students seeking accommodations based on documented disabilities will meet with a staff member of CAS to complete a Student Academic Accommodation Request Form, and then meet privately with each faculty member to plan for the accommodations. Any requests for special needs or special accommodations should be made at the beginning of the semester or as soon as you become aware of your needs.

We cannot provide necessary and reasonable accommodations if we are not aware of special needs.

Attendance:

MOT students have an obligation to attend all classes as scheduled. Due to the nature of the material being presented (particularly in lab sessions), it is very difficult to make up missed material. If you have a legitimate excuse (i.e. illness, death in family) to miss class, it is **your responsibility** to contact the instructor(s) in order to be excused and to make up the assignments. Illness lasting more than three (3) days will require a physician's excuse. The instructor(s) will then assist the student in making up the material. Roll will be taken in the morning and afternoon.

Unexcused Absences: Points will be deducted for unexcused absences accordingly from the Personal Growth & Development Module dependent upon the number of class absences.

- First Offense: Verbal Warning
- Second Offense: 0 - 25 points
- Third Offense: 25 or more points

The involved faculty member(s) may deduct points from the overall course grade under the "professionalism" category following the verbal warning policy. This will be reported the department chair for inclusion in the student's department file. The student has the right to appeal through due process as outlined in the Saint Francis University Student Handbook. **If the behavior(s) is(are) severe enough, they may result in a failure of the Personal Growth and Development Module** (refer to *MOT Progression and Retention Policy*).

Cancellation or Delay of Classes:

This policy is designed to ensure the safety of our students, faculty, and staff during periods when traveler's advisories are in effect for local highways, to arrive at a decision to cancel or delay classes at the earliest possible time, and to adequately communicate the decision.

On a college-wide basis, a decision to cancel or delay classes will be made only under extraordinary circumstances. Predictions or announcements of traveler's advisories should not be taken to mean that classes will be canceled or delayed. Students, faculty, and staff are encouraged to take precautions and exercise extreme care when roads become hazardous.

Students should exercise judgment as whether to attend classes if the weather in their immediate geographic area is hazardous. If classes are not officially canceled and the student is unable to attend, s/he should contact the OT Department at (814) 472-3899 to report off. If Saint Francis University does not cancel or postpone classes, but the OT instructor needs to cancel or postpone classes, he/she will post an announcement on Canvas or other course management tool.

Causes for Program Disciplinary Action:

All of the following offenses are serious violations of conduct and will engender swift disciplinary action and/or possible dismissal from the program. This list is not intended to be comprehensive.

1. Cheating or plagiarism
2. Forgery; altering or misuse of department and/or medical documents or knowingly furnishing false information
3. Misrepresentation of oneself as a graduate of the department or in a capacity which exceeds the student's level of training
4. Obstruction or disruption of the department's educational process or other university and department functions while on or off university and department property
5. Physical or verbal abuse or the threat of physical violence against a department member or member's family
6. Entry into an unauthorized area of the department or university property or the property of a department member
7. Theft or non-accidental damage to department or university property
8. Possession of explosives, dangerous chemicals, or deadly weapons on university or department property without proper authorization
9. Engaging in lewd, indecent, or obscene behavior on department or university property or at a department-sponsored event.
10. Use, possession, sale, or provision to others of controlled or unlawful substances during department functions.
11. Soliciting or assisting another to do any act which could subject a student to discipline as cited in this section.
12. Any time a student has proven to be a danger to patients or has deficiencies in patient care.
13. Any student behaviors that do not reflect the philosophy of the department and that are considered by the faculty to be actions unbecoming of a Saint Francis University MOT student.

Classroom Environment:

In order to maintain an effective learning environment, it is necessary for learners to observe these guidelines for classroom etiquette. Please check individual course syllabi for other guidelines. Please see the course instructor with any questions.

- Any computers or other technologies maintained at the desk during class time are adjuncts to the learning environment. Web surfing, messaging, texting for non-related materials are contrary to these purposes and prohibited.
- Breaks are given before and after each classroom session. Students are encouraged to take advantage of these breaks to attend to necessary tasks. Only on extremely rare occasions should it be necessary to leave the classroom and return during the class session.
- Students who are not able to stay for the entire class session should seek the permission of the instructor prior to class to leave early. If the student is unable to attend the entire class session the faculty member has the prerogative to indicate that the student not attend the session at all. In this case, the student should obtain notes from a fellow student and obtain additional assistance from the faculty member as needed at a later date.

- Any cell phones that are in your possession during class must be switched off or kept on silent mode.
- You must refrain from bringing your children to class.
- Out of respect for fellow students and the instructor, please refrain from unnecessary talking during the lecture. If you have questions, you are encouraged to ask them of the instructor as often others have similar inquiries. Interpersonal communications of a non-topic related manner prove distracting for others and are subsequently discouraged.
- Active participation is an expectation during class.

Computer Use:

Technology has a significant place in the MOT curriculum. Students are expected to bring their laptops to class on a daily basis but will only be used if directed by the instructor. Computer use is to be kept to in-class work only. Use of email and social networking activities should be reserved for breaks and out-of-class times only. Any abuse of this policy could result in non-use of laptop during classroom time for the individual or entire cohort.

Confidentiality:

Students are expected to maintain complete confidentiality of all personal, social, and medical history, etc. of the clients/patients with whom they work. While pertinent patient information is required for educational purposes, it shall never include ANY identifying information such as names, identifying numbers, etc. When documenting information for academic purposes, use ONLY the patient's first initial or a fictional name.

Copier and Printer Use:

Students are not permitted to use the department printers or copy machine unless directed by OT faculty or staff. Students may print at the student-use printers located at various locations on campus.

Dress Code:

Students entering the professional phase must adhere to the departmental dress code policy. The default uniform includes an embroidered solid color polo shirt, khaki/black or navy pants and tennis shoes. Many days, scrubs and OT tee shirts may be worn as well. Faculty are responsible for communicating any dress code alterations. The dress code was implemented so that students would be appropriately dressed for any lab activities, guest speakers, etc. Failure to adhere to the departmental dress code may result in points deducted from professionalism in any course.

Drug Screening Policy for Health Science Students:

Scope: UPMC MyHealth@School (Student Health Center) recognizes that the health science students may be subjected to drug screening prior to any clinical experiences, as required by their department. This policy has been developed to ensure that health science students, in a position affecting the health and safety of other human beings, are able to perform their duties without impairment. It is the goal of the Student Health Center to provide the student with the most appropriate care, while ensuring the safety of the patients under the care of the students during clinical experiences.

A. Student Selection:

1. Students who are required to submit urine for drug testing purposes will be notified by the academic department.
2. In keeping with Pennsylvania law, students will not be randomly selected for urine drug screening.
3. Drug screening procedures will be applied consistently to all students' subject to testing.
4. Students subjected to drug testing will be provided a copy of this policy.

B. Academic Department Responsibilities:

1. Determining if their students will be required to undergo drug testing.
2. Determining the timing of the drug test.
3. Determining the extent of drug testing needed (5 panel, 10 panel, etc.)
4. Informing students of the need and timing of drug tests.

C. Testing procedures:

1. Testing may be done on site by the Student Health Center.
2. The department may choose to have an outside company come on site to do the testing.
3. If testing is not done on site, the students will be informed of laboratories approved to offer drug testing in the area.
4. Results of drug testing performed by outside agencies shall be sent directly to the Student Health Center.
5. The results will be kept in the student's confidential medical record at the Student Health Center.

D. Positive Results:

1. All positive drug screen results will be reviewed by a certified Medical Review Officer.
2. The student will then be brought into the Student Health Service to have a consultation with the Medical Review Officer.
3. If the student has a valid prescription to justify the positive result, the result will be determined as "negative".
4. If no valid justification is present, the student will immediately have an evaluation with an approved chemical dependency program.
5. The treatment program will be determined by the chemical dependency program.
6. The Student Health Center must be informed of the expected completion date of the program.
7. The Student Health Center must be informed when the student successfully completes the program, or if the program is not completed.
8. The student is responsible for any costs associated with the counseling and treatment in the chemical dependency program.
9. During the time of treatment, progression in the academic program will be determined by the amount of time missed and the ability of the student to achieve the course objectives.
10. Negative follow-up testing is required before students are permitted to return to participation in the clinical component of the program.
11. Students who successfully complete the substance abuse program are required to submit to follow-up random drug testing for up to twelve (12) months.
12. A refusal to participate in a substance abuse treatment program and/or follow up drug testing will result in Student Health Center informing the clinical coordinator of the academic department.

E. Second Positive Test:

1. A second positive drug test will result in Student Health Center informing the clinical coordinator of the academic department.
2. The academic department is responsible for determining the academic status of the student.

F. Refusal of Testing:

1. A refusal to cooperate with drug testing will result in Student Health Center informing the clinical coordinator of the academic program.
2. The academic department is responsible for determining the academic status of the student.

G. Failure to Appear:

1. A student who fails to appear for drug testing will be given an opportunity to explain the absence.
2. If the student agrees to be tested, another collection will be scheduled.
3. If the student fails to appear for the second time, the failure to appear will be treated as if a positive result occurred.
4. The clinical coordinator of the academic department will be informed after the second failure to appear.
5. The academic department is responsible for determining the academic status of the student.

H. Confidentiality

1. The clinical coordinator will not be notified of specific drug testing results. Reports will only be made to the clinical coordinator as to whether or not the student is cleared for clinical participation, in combination with the other medical requirements placed on students by the department.
2. As stated above, the clinical coordinator will be notified if a student refuses testing after a positive, refuses treatment, or fails to appear for drug testing. This is done to ensure the safety of the patients that would be under the care of the student during clinical experiences.
3. Drug testing results will not routinely be shared with law enforcement officials.
4. Urine drug screen results will be provided to clinical sites requiring testing for the health science students on clinical rotations at their site, as part of the student's educational record under the Family Educational Rights and Privacy Act (FERPA).

Effective 05/2018

Environmental Safety:

Emergency Response:

- **Fire or Disaster**
 - Pull the building fire alarm. This will sound an alarm at the 911Center and the fire department will be dispatched.
 - Telephone the University Police (x3360) to report the location of the fire, building, floor area and intensity.
 - Evacuate the building immediately. Do not attempt to fight a fire. Fire extinguishers are to be used only on very small fires. Do not use the elevator.
- **Medical Emergency**
 - Dial 911. State the nature of the medical problem, location of the victim (street address, building name, and room number), and medical assistance needed.
 - Assist the victim until help arrives – check breathing, stop bleeding, and do not move unless necessary.
 - First aid: Students in need of first aid should report in person to the Student Health Center Monday through Friday 8:30am to 4:30pm. During evening hours, dial University Police at extension 3360.

Laboratory and practicum instructors will reinforce these procedures with students in their courses.

Hazard Control:

The hazardous materials which are used in the Department of Occupational Therapy fall into the major categories of hazardous substances and appliances as follows: 1) solvents (turpentine, paint thinners, etc.); surface preparations (paint, grout sealant, etc.); chemicals (toner); and the implements used to apply these materials, and 2) Heated appliances.

The following guidelines for the control of hazardous substances/appliances must be followed:

1. Solvents, surface preparations must be stored in metal cabinets.
2. Implements, such as brushes used to apply solvents and surface preparations, must be cleaned after use and stored as directed by the laboratory supervisor.
3. Solvent soaked rags, sponges, and the like must be discarded in covered, red metal containers which are provided for this purpose.
4. Heated appliances must be plugged into appropriate voltage. Precautions and appropriate use of appliances will be reinforced by the instructor.

Laboratory and practicum instructors will reinforce these procedures with students in their courses.

Health and Safety of Students, Faculty and Clients:

Refer to the Saint Francis University Student Handbook. In addition, when representing the Department of Occupational Therapy off campus (i.e., scheduled observation, Level I & II fieldwork experiences) students are expected to follow the policies and procedures established by the individual facility. Prior to field work experiences, students are trained in and demonstrate competency in: Fire Safety; Bloodborne Pathogens; Hand Hygiene; Age-Related Competencies; CPR (Infant and Adult); Vital Signs; and Infection Control Techniques. Students are expected to take necessary and appropriate precautions when working with clients.

It is the policy of the Department of Occupational Therapy to ensure student safety during classroom and laboratory experiences. Appropriate safety precautions (i.e. tying back of long hair, no dangling earrings, wearing goggles) are stressed. During sessions when there is increased possibility of student injury (i.e. splinting, cast removal) additional faculty/staff are present.

Students should inform faculty immediately upon noticing any unsafe situations (i.e. frayed cords, overloaded circuits, faulty equipment)

Client safety issues are incorporated into all appropriate lectures, laboratory experiences, and activity analyses, and include such things as precautions, cognitive concerns, etc. Please refer to the Health Policy in the Fieldwork Section of this handbook.

Food & Drink in Classrooms/Lab:

Drinks in closed containers are permitted in the OT lab and classroom. Small snacks are permitted during class break periods as long as there is no distraction to others in the class (i.e. crunchy food, noisy plastic bags). Food and drink must not interfere with learning. Students are to keep the classroom and lab areas neat. Food and drinks are not permitted during testing.

Grading System:

Refer to the Grading System section of the Academic Policy included in the Saint Francis University Catalog for pre-professional classes. During the professional phase of the MOT program, the grading system is as follows:

A	=	96%
A -	=	92%
B +	=	88%
B	=	84%
B -	=	80%
C +	=	76%
C	=	72%
D	=	62%
F	=	< 62%

Grammar/Spelling:

In addition to content, utilization of correct grammar and spelling are essential in the MOT curriculum. Therefore, on written assignments, 5 of the total points will evaluate grammar/spelling (i.e. if an assignment is worth 25 total points, 20 points will be for content and 5 points will be for grammar/spelling). One half (1/2) point will be deducted from the 5 grammar/spelling points for each error. If consistently low scores are noted in grammar/spelling, students will be referred to the Center for Academic Success (CAS) and/or The Writing Center.

Institutional Review Board (IRB):

Saint Francis University approved formation of an Institutional Review Board in May 1999. The role of the IRB is to ensure human subject rights while engaged in research studies. ANY research involving the use of human subjects must go through the Institutional Review Board prior to commencement of research. Students are to check with their committee member /mentor regarding the procedure. Full information can also be obtained at: <http://info.francis.edu/Institutional-Review-Board/>

Late Assignments:

Every effort is made by the course instructors to design due dates for projects, papers and presentations so that students have ample time for completion. This requires effective time management on the part of the students.

Assignments are expected to be turned in on time. An assignment is considered late when it is not turned in by the date and time specification. Any assignment not received by the date and time specification will receive **0 POINTS**. In the event that a student misses an assignment deadline, the student must contact the instructor of that assignment via his/her university email within 24 hours of assignment deadline for arrangement to submit the assignment. Instructors reserve the right to grant or deny acceptance of late assignments based on individual cases, and in extenuating circumstances, the student *may* be allowed to earn up to the lowest 'C' on the assignment. It is the student's responsibility to ensure all assignments have been correctly submitted, in correct format, to the correct instructor.

Failure to contact the faculty within 24 hours of the missed assignment deadline will result in an automatic zero (0) for that assignment.

Nondiscrimination and No Harassment:

Saint Francis University does not discriminate on the basis of gender, gender identity, age, race, color, ethnicity, religion, sexual orientation, marital status, disability, pregnancy status, veteran status, predisposing genetic characteristic or any protected classification. This policy applies to all programs and activities of the University, including, but not limited to, admission and employment practices, educational policies, scholarship and loan programs and athletic or other University sponsored programs. The following person has been designated to handle inquiries regarding the University's nondiscrimination policy: Jeffrey Savino, Vice President for Finance and Administration (814) 472-3261, jsavino@francis.edu.

If you have been the victim of sexual harassment/misconduct/assault you are encouraged to report this. If you report this to a faculty member, he/she must notify the Saint Francis University Title IX coordinator about the basic facts of the incident. The following person has been designated to address inquiries about harassment, sexual misconduct, stalking and relationship violence and to assist the student in connecting with resources both on and off campus: Lynne Banks, Associate Dean of Students/Title IX Coordinator, (814) 472-3002, lbanks@francis.edu

Read our full [Equal Opportunity, Nondiscrimination, Harassment, Sexual Misconduct, Stalking and Relationship Violence Policy](#).

Occupational Therapy Departmental Awards:

The Department of Occupational Therapy bestows several student awards at the undergraduate level.

- **Academic Excellence Award:** awarded to the student with the highest GPA at the start of the spring semester of the senior year (student enrolled in OT403). If there is more than one student with the highest GPA, all students are bestowed this award.
- **Outstanding Occupational Therapy Student Award:** recognizes a Fourth Year Occupational Therapy Student who has demonstrated excellence in academics, leadership, campus involvement and promotion of the Occupational Therapy Profession. Only one award will be granted each year. Once a ballot of nominees is confirmed by the Chairman of the Department of Occupational Therapy, the Occupational Therapy Faculty and

Fourth Year Students will vote for one nominee. Ballots with more than one vote will be discarded. In the case of a tie, Occupational Therapy Faculty and Staff will decide the finalist. The winner will be announced and the award will be presented on Senior Awards Night in April.

ALL of the following criteria must be achieved in order to be eligible for nomination.

1. 3.25 Minimum Grade Point Average

Successful candidates must have a minimum GPA of 3.25 at the end of the Fall 2020 Semester. You may still nominate a candidate if you are uncertain of the GPA. The Chairman of the Department of Occupational Therapy will verify all GPAs to determine the nominee's eligibility.

2. Leadership Qualities

Successful candidates will have held Leadership positions on campus or off campus. This may also include demonstrated in-class leadership qualities on group projects, open houses, etc.

3. Maturity Level

Successful candidates will have demonstrated a level of maturity by handling difficult situations in a mature manner, accepting responsibility for one's own actions, being respectful of others, etc.

4. Professionalism

Successful candidates will have demonstrated and presented themselves in a manner acceptable to faculty and peers, used positive verbal and nonverbal language, and conveyed a positive attitude toward work and others.

5. Campus / Community Service

Successful candidates will have participated in activities which may include, but are not limited to: SOTA involvement, Special Olympics, various clubs/events/organizations, Dorothy Day Center, church or other civic involvement, etc.

6. Potential to be a Leader in the Field of OT

Successful candidates will have been able to analyze, interpret and synthesize information regarding Occupational Therapy, displayed ethical behaviors, served as a role model for peers, been an advocate for the profession, been involved in the OTO and/or POTA, etc.

● **The Outstanding Franciscan Excellence Award in Occupational Therapy**

In commemoration of Ethan Sumner, a former SFU MOT student, the Outstanding Franciscan Excellence Award in Occupational Therapy will be presented to a 5th year occupational therapy student at the Department of Occupational Therapy Pinning Ceremony. The student honored with this accolade will have exemplified excellence in the field of occupational therapy and beyond while championing professionalism, respect, leadership, integrity, and a commitment to making a difference in alignment with the guiding themes espoused in the Goals of Franciscan Higher Education. The recipient is one destined for leadership and possesses the Franciscan spirit that will positively influence their workplaces and the world through character, passion, and grit.

General Information & Procedures

- Nominees for all awards shall be considered each year, but the award will be conferred only when recognition is merited. Nominations shall be considered by any 5th year MOT student, MOT faculty, and/or staff. Self-nominations are not permitted. Individuals who are nominated for this award shall then have their respective names registered for voting by all 5th year MOT students, OT faculty, and staff.
- The award winner (attaining the majority of votes) will be evaluated by the MOT faculty to confirm all criterion are achieved.

- The award winner achieving all criterion will be named at the SFU Department of Occupational Therapy Pinning Ceremony.
- If criterion is not achieved by the student receiving the most votes, then the student receiving the second most votes will be evaluated by the MOT faculty to confirm all criterion are achieved, and so on until criterion is achieved.
- If criterion is not achieved by any of the nominees, then the award will not be merited to any of the nominees.

Criterion

- **Catholic Character**
 - Along their occupational therapy journey, they consistently seek out opportunities with grace and kindness.
 - Emanates responsibility and accountability by fulfilling and delivering on commitments, accepting consequences and outcomes, processing constructive criticisms in a positive manner, and concedes to decisions generated
 - **Humble and Generous Attitude Towards Learning**
 - Generously and humbly shares intellectual knowledge without arrogance to all in efforts to thrive together to serve populations
 - Strives for excellence while living mindfully in the presence of God
 - Encourages a free and open exchange of knowledge with a goal to reflect upon a deeper understanding for application and purpose of serving all populations in need
 - Exudes a good work ethic, exhibits continuous improvement within and beyond the classroom, and displays initiatives above and beyond basic requirements
 - **Community of Faith and Prayer**
 - Seeks to foster the spirit of prayer and devotion through occupational therapy studies
 - Inspires and motivates others to positively impact the future around an idea and shared vision
 - **Respect for the Uniqueness of Individual Persons**
 - Affirms the goodness of all human life
 - Seeks to foster the spiritual, intellectual, emotional, and physical health of the entire University Community
 - Displays the qualities of citizenship, honesty, trustworthiness, empathy, and virtuous attitude towards all
 - **Service to the Poor and Needy**
 - Exercising your gifts and talents to serve the poor and needy both at home and/or abroad with confidence
 - **Solidarity and Reconciliation**
 - Takes up the ministry of reconciling the world to God both through their professional occupational therapy work and the example of their lives
 - Serves or served in a variety of leadership roles on campus and encouraged others to become involved in campus life.
 - Made a significant impact in the campus community throughout their college career
 - **Reverence for All Life and Care for Creation**
 - Acknowledges a reverence for all human life, to treat all persons in accord with their inherent dignity, to work together for the common good, and to care for our common populations and environment
 - **Spirit of Simplicity and Joy**
 - At all times and in all situations, believes that nothing and no one is beneath oneself
 - Serves as a role model for their peers and demonstrates pride in Saint Francis University
- **Fieldwork Excellence Award:** this is bestowed upon a 5th year student during the MOT Pinning Ceremony. The student who receives this award will have demonstrated the highest scores on all fieldwork evaluations (OT401-OT502) and positive feedback from the fieldwork educators.
 - **Pi Theta Epsilon Recognition:** a specialized honor society for occupational therapy students and alumni. The mission of PTE is to support the practice of occupational sciences and the practice of authentic occupational

therapy by promoting research, leadership, and scholarly activities. The purpose of PTE is to recognize and encourage scholastic excellence of occupational therapy students.

- Membership to PTE is limited to those with at least a 3.5 cumulative QPA and must be in the top 35% of their graduating class.
- Students are required to submit scholarly work in order to be considered, so the MOT department accepts your efforts towards your thesis/scholarly project to satisfy this requirement.
- If invited for membership based on the above criteria and you accept the invitation to join PTE, then you will receive recognition and a pin from the department of occupational therapy at the pinning ceremony.

Occupational Therapy Departmental Honors:

Students may apply for departmental honors through the Independent Study process. Students may be granted departmental honors at the time of undergraduate graduation if they have successfully completed the following: at least six (6) credits of independent study research guided by an occupational therapy faculty mentor, a letter stating the intention of receiving departmental honors that is acknowledged and signed by the faculty mentor, the department chairperson, and the Dean of the school, a grade of an A in the independent study research.

Professionalism Policy:

Professional behaviors are critical both in our work and personal lives. They reflect who we are, how we act, and our beliefs and values.

Kasar and Clark (2000) note that "*professional behaviors*" are "timely and important topics with a focus on dependability, professional presentation, initiative, empathy, cooperation, organization, clinical reasoning, supervisory process, verbal communication and written communication". These behaviors can be further clarified:

- **Dependability:** Health care professionals are expected to be on time and responsible in carrying out their duties and responding to client/patient needs. Functioning as a member of a health care team requires participants to meet deadlines and adhere to schedules.
- **Professional Presentation:** Demeanor, professional presentation, and manner are essential and highly valued. Students, like practitioners, are expected to present themselves in a way that is accepted by peers, clients and employers. Genuine interest in providing your services to others is demonstrated through focused attention and positive regard.
- **Initiative:** Employers are increasingly requiring their employees to be highly motivated and self-directed. Valued employees are the ones who demonstrate a positive, energetic, and motivated manner. They take responsibility for starting projects and contribute to the development and enhancement of programs and services.
- **Empathy:** An important and necessary prerequisite to building therapeutic relationships is empathy. In order to establish empathetic relationships, you must demonstrate the ability to listen, understand, share, and be sensitive to another person's perceptions of a situation.
- **Cooperation:** In the healthcare industry today, teamwork is a way of life. Health care professionals will need to work collaboratively in interdisciplinary, multidisciplinary, and transdisciplinary teams. The healthcare environment requires individuals to be cooperative, flexible, and adaptable.
- **Organization:** The quality and efficiency of your services as a professional are improved by your organizational abilities. Clients/patients and colleagues will often make value assessments of the service you are providing based on the perception of how well you are organized. Also, how well a team performs is inherently dependent upon the organizational abilities of its members.
- **Clinical Reasoning:** The dynamic process of inquiry that takes place within the context of clinical practice is called clinical reasoning. Problem-solving skills, knowledge and experience are needed to reason through problems encountered in practice situations. Students are required to enhance and refine their problem-solving and critical-thinking skills in order to develop clinical reasoning abilities.
- **Supervisory Process:** Health care professionals need to make use of the supervisory process and must be ready to give and receive constructive and productive feedback. They are expected to serve as mentors for newcomers to their profession, as well as to work positively with assistants, aides, and other professionals. Interpersonal and supervisory abilities are required to guide and mentor others.

- **Verbal Communication:** Verbal proficiency is one of the most outward personality traits of a professional that can be used to market your service and your profession. Being articulate will certainly have a positive influence on your clients/patients, colleagues and employer. Health care professionals are required, and students are expected to make contributions to discussions at staffing meetings, conferences, rounds, in-services, and other pertinent meetings.
- **Written Communication:** Writing is the most important non-verbal personal trait of a professional that can be used to market your service and your profession. In the healthcare industry today, written documents must be produced according to a particular institution's standards and must stand up to review and scrutiny by departments, facilities, quality assurers, third party payers, and the legal system.

It is the policy of the Department of Occupational Therapy to have a zero-tolerance to unprofessional behavior. The Department of Occupational Therapy acknowledges it has a responsibility to educate our students not only with the "practical" skills needed to be an occupational therapist, but also the "people" skills. Each student is therefore expected to display professional behavior both in and out of the classroom. Professionalism is graded on a pass/fail basis.

As unprofessional behavior(s) are observed by the OT faculty, points will be deducted accordingly from the Personal Growth & Development Module as outlined:

- First Offense: Verbal Warning
- Second Offense: 0 - 25 points
- Third Offense: 25 or more points

Any offense will be reported to the Department of Occupational Therapy Chair for inclusion in the student's department file. The student has the right to appeal through due process as outlined in the Saint Francis University Student Handbook. If the behavior(s) is(are) severe enough, they may result in a failure of the Personal Growth and Development Module and require remediation (refer to *MOT Progression and Retention Policy*).

Examples of Unprofessional Behavior:

NOTE: This list is NOT all inclusive.

- Verbal abuse of faculty, staff, or other students
- Inappropriate Language
- Attempting to complain about or manipulate OT faculty against each other (game playing)
- Talking about the OT faculty in negative fashion to others
- Cheating on tests, plagiarism, or other academic honesty violations
- Disrupting class by continued talking
- Physical abuse (i.e. pushing, shoving, throwing books, papers)
- Lying
- Severe emotional lability
- Continued tardiness for class
- Handling stressful situations inappropriately (i.e. screaming, yelling, uncontrollable crying)
- Sleeping in class
- Non-participation in group projects/activities
- Inappropriate Non-verbal behaviors (i.e. eye rolling, lip raising, heavy sighs)
- Walking into faculty offices and starting to talk when faculty is on phone
- Persistent verbal complaints about assignments, grading, exams, etc. at inappropriate times/places (i.e. walking in hallways complaining about certain assignments)
- Not respecting OT staff by demanding to have copies made, to use fax, to get supplies, etc.

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Participation:

Once students are in the professional phase of the occupational therapy program, they are *expected* to actively participate in class, labs, and fieldwork. Points will be deducted accordingly from the Personal Growth & Development Module for students who are not active participants.

- First Offense: Verbal Warning
- Second Offense: 0 - 25 points
- Third Offense: 25 or more points. The involved faculty member(s) will deduct points from the Personal Growth & Development Module for all second-time or greater offenses to this policy. This will be reported to the department chair for inclusion in the student's department file. The student has the right to appeal through due process as outlined in the Saint Francis University Student Handbook. If the behavior(s) are severe enough, they may result in a failure of the Personal Growth and Development Module (refer to *MOT Progression and Retention Policy*).

Social Media Policy:

Social Media is broadly defined as a blending of technology with social interaction. Social media includes a wide variety of tools and formats, such as blogs, social networks, wikis, and video sharing, and other web applications. It is an effective and accepted form of communication that warrants safeguard to prevent misuse and abuse. Social media tools and formats may include, but are not limited to, blogs, discussion boards, list serves, electronic media sharing, collective intelligence tools, podcasts, RSS feeds, social networks (Facebook, Twitter, Instagram, Snapchat, TikTok, etc.), text messaging chats, video sharing, wikis, and virtual worlds.

This policy is developed to provide guidance for the use of social media technologies, both internal and external to Saint Francis University and the Department of Occupational Therapy. It is the intent that through this policy, these systems are used appropriately and lawfully in accordance with all other Saint Francis University Social Media policies and procedures.

As an occupational therapy student, you agree that you will not:

1. Violate any local, state, federal, and international laws and regulations, including but not limited to copyright and intellectual property rights laws regarding any content that you send or receive. Plagiarism applies to online content, including faculty and departmental assignments, assessments, handouts, etc. Refer to the university Academic Honesty Policy for clarification regarding issues related to plagiarism and common student mistakes.
2. Transmit any material (by uploading, posting, email, or otherwise) that is unlawful, disruptive, threatening, profane, abusive, harassing, embarrassing, tortuous, defamatory, obscene, libelous, or is an invasion of another's privacy, is hateful, or racially, ethnically, or otherwise objectionable as solely determined by the Department of Occupational Therapy and administration of Saint Francis University.
3. Impersonate any person or entity or falsely state or otherwise misrepresent your affiliation with a person or entity.
4. Transmit any material (by uploading, posting, email, or otherwise) that infringes any patent, trademark trade secret, copyright or other proprietary rights of any party.
5. Transmit any Unsolicited or unauthorized advertising (by uploading, posting, email, or otherwise) promotional material, "junk mail", "spam", "chain letters", "pyramid schemes", or any other form of solicitation.
6. Transmit any materials (by uploading, posting, email, or otherwise) that contains software viruses, worms, disabling code, or any other computer code, files, or programs designed to interrupt, destroy, or limit the functionality of any computer software or hardware or telecommunications equipment; harass another, or collect or store, or attempt to collect or store personal data about third parties without their knowledge or consent.
7. Transmit (by uploading, posting, email, or otherwise) any client information, names of clinical agency, clinical instructors, SFU faculty; photos, or engage in any clinical discussions. HIPAA laws apply to social media applications and shall not be violated.
8. Violate confidentiality of system accounts, password, personal identification numbers (PINS), and other types of authentication assigned to individual users. These must be maintained, protected, and not shared with others.
9. Utilize SFU logos and trademarks without written consent from the SFU Marketing Department.

It is *strongly* recommended that students keep social media sites set as "private," both for their own personal safety as well as to safeguard their personal information from clinical supervisors and potential employers.

Violation of the Social Media Policy may result in disciplinary action against the student, including actions such as appearance before a Performance Review Committee (PRC), points deducted from the Personal Growth and Development Module, or other action as determined by the Department of Occupational Therapy.

Student Health Services:

Saint Francis University has partnered with UPMC to provide health services to students. MyHealth@School at Saint Francis primarily provides care and treatment for sudden, short-term illness and injuries. The Health Center is staffed by a registered nurse, licensed practical nurse, and medical assistant. We have partnered with UPMC to provide telemedicine for acute illness and injury. The Student Health Center is located in the DiSepio Institute for Rural Health and Wellness building. All students must complete and return a Health History Form (provided upon acceptance to the University) to the Student Health Center before treatment can be received. Furthermore, all students are required to carry health and accident insurance as per University policy.

- **Services:** Services available to students include general medical consultations, dispensing of pharmaceuticals, first aid items and referral to proper agencies. The center treats many physical ailments and diseases, as well as giving allergy injections (with student's own medication) and immunizations. Please see the website for additional information: <https://www.francis.edu/Student-Health-Center/>.
- **After-Hours Medical Emergencies:** If a student becomes ill after hours, s/he should contact a resident assistant. If one is unavailable, the student should contact University Police (x 3360) between 7:30 p.m. and 8:30 a.m. They will call an ambulance. An annual subscription to the Loretto Ambulance Service is strongly advised.

Phone Use Policy:

Taking phone calls during classroom/lab time is not acceptable. Cell phones must be turned off or turned to silence during classroom times. Texting is also not acceptable during classroom/lab times. If a student is expecting an important/emergency call, he/she should inform the instructor and ask for permission to accept the call. Failure to adhere to this policy will result in a verbal warning and possible point loss in the professionalism grade.

Testing:

Academic honesty is held in the highest regard for testing. As such, students are expected to help maintain an environment that supports best effort for testing. As such, students will be expected to power down and secure their phones, smart watch, or any other electronic devices in the lockbox or other specified location. Students should also adhere to alternate seating arrangements to allow for an optimal testing environment. If a student receives accommodations for testing purposes, they must follow the policies for arranging for test-taking in the Center for Academic Success.

Weapons/Explosives:

Refer to the Saint Francis University Student Handbook.