

College of Health Professions
Department of Occupational Therapy

STUDENT HANDBOOK

Master of Science
Degree Program
In
Occupational Therapy

August 2013

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OCCUPATIONAL THERAPY DEPARTMENT ACCREDITATION STATUS

The Occupational Therapy programs are accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA). Correspondence can be submitted to ACOTE c/o Accreditation Department AOTA, 4720 Montgomery Lane, Bethesda, MD 20824-3449. The AOTA phone number is (301) 652-AOTA. Graduate of the program will be able to sit for the national certification examination for the occupational therapists administered by the National Board for Certification in Occupational Therapy (NBCOT). After successful completion of this exam, the individual will be an Occupational Therapist, Registered (OTR). Most states require licensure in order to practice; however, state licenses are usually based on the results of the NBCOT Certification Examination.

INTRODUCTION TO THE GVSU GRADUATE EXPERIENCE

Welcome to a new venture in your life. This is a special opportunity for you to engage in a most rewarding educational experience - one that combines the elements of a health care profession and the intellectual growth associated with a graduate curriculum.

The primary aim of a professional curriculum is to facilitate the passage of students from preprofessional coursework to active participation in a professional group. Once you have been offered, and accepted, a seat in this program, you have taken the first step in this journey. At this juncture, you assume a new role - that of "colleague-in-training," and with that new role come attendant privileges and responsibilities.

By your acceptance of the offer to attend this program, you automatically agree to comply with these attendant privileges and responsibilities.

As a colleague-in-training, the privileges granted you include: (a) the right to hold a membership in the professional association, (b) the right to work with certain client groups, under appropriate supervision, (c) the right to an "educational partnership" with your faculty, and (d) the right to an education that prepares you effectively for contemporary practice in a changing health care system.

The obligations that go with these rights include: (a) the obligation to maintain a professional demeanor, inside and outside the practice setting, whenever you may be considered a representative of the Occupational Therapy Department, or the profession, (b) the obligation to know and accept the Occupational Therapy Code of Ethics and its application to you, as a colleague-in-training, (c) the obligation to maintain an attitude of compassion and "welfare of the client first", in all of your dealings with consumers of occupational therapy services, and (d) the obligation to commit yourself as an active member of the "community of practice", through which you will become a full-fledged professional, knowing that this commitment will require extra time and work on your part, and the development of a new perspective on the learning process.

Members of the Occupational Therapy Department faculty represent the other half of the partnership in your education, and include full-time educators as well as members of the professional community who serve as adjunct faculty. These individuals are committed to providing you with the knowledge and skills necessary to help you successfully complete the Occupational Therapy Certification Examination, which will allow you to practice as a registered occupational therapist. Our task is to work with you to achieve this goal, and to ensure that you have the professional competencies, attitudes, and values needed to practice as an entry-level occupational therapist.

Because professional education is considered the first phase of your professional development, this is where you can expect to encounter consistent demands for professional behavior and attitudes, similar to the demands of a paid professional position. These behaviors and attitudes include becoming more self-directed in your learning style, taking initiative appropriately, rather than waiting for direction, learning to work comfortably and effectively in collaboration with others, taking responsibility for your decisions, including the consequences of unwise decisions, and maintaining consistent attendance to convey an attitude of enthusiasm as you develop your professional self.

Student Name (please print)	Student Signature	Date

THE MASTER OF SCIENCE IN OCCUPATIONAL THERAPY (MSOT) GRAND VALLEY STATE UNIVERSITY

Vision and Mission of the MSOT

Vision: We envision the Occupational Therapy Department as a leader in developing critical thinking skills and reflective judgment through a transformative approach to education that considers the connection between occupation and health over the lifespan. Through faculty and student scholarship/research and student service in the community, graduates will emerge as professionals prepared to create and lead the future of occupational therapy.

Mission: The mission of the GVSU Occupational Therapy Department is to educate and empower graduates to have a positive impact on the health of individuals and groups in our society through innovation and leadership in occupation-based practice.

The Master of Science in Occupational Therapy will promote and enhance the mission of the University. The Program will provide education consistent with liberal learning.

The MSOT Department Philosophy

The Occupational Therapy Department philosophy is grounded in the American Occupational Therapy Association Philosophical Base of Occupational Therapy (1979), which affirms that:

Occupational Therapy is based upon the premise that occupation, i.e. purposeful activity, physical and mental, provides the primary vehicle for human growth and development. This basic theme is the foundation on which major professional theories are formulated.

Occupation, then, is a vehicle for symbolism, and as such requires an individual engaged in an occupation to be self-aware, to recall and project events, and to elaborate personal and cultural meanings. According to Clark and her colleagues at the University of Southern California, occupation among human beings has a symbolic content, which allows them to attach meaning to activity, and to reflect on the value of their engagement in particular occupations (1991).

The Occupational Therapy Department at GVSU supports the concept that occupation, this symbolically meaningful and purposeful activity, is the primary modality of occupational therapy. Furthermore, it is the use of occupation—common, everyday activities—as treatment, which is the unique and defining contribution that occupational therapy makes to health care. "Occupational Therapy honors the power of ordinary experiences within the context of health care" (Clark et al., 1991, p. 300).

The view of humanity that is supported and implied in this occupational therapy philosophy is that humanity is made up of individuals with distinct needs, goals and perceptions, which must be taken into consideration by those who choose to work in service professions. It is a view of humanity that expects the individual to have his/her own interests, but which also expects the individual to be able to take responsibility for his/her own choices. It is a view of humanity that is applied to students in this program as well as potential consumers of their services.

Curricular Themes

Four curriculum themes were developed to operationalize the mission and reflect current perspectives in health care, as presented by the World Health Organization (WHO) and the American Occupational Therapy Association (AOTA). These themes are described below.

Occupational Perspective of Human Nature and Health

This theme, consistent with the department's mission, reflects the profession's focus on occupation. In this usage, occupation refers to the normal activities that we engage in every day, and which have both a purpose or goal and a uniquely personal meaning to each individual. Development of this perspective requires:

- the ability to understand the holistic nature of occupation
- the ability to see the relationship between health and human occupation
- the ability to generate outcomes that are based on an occupational perspective
- the ability to recognize that meaningfulness is person-centered, and socioculturally driven
- the ability to promote an occupational perspective in partnering with communities through agencies, organizations, affiliations and other entities

Critical Reasoning and Independent Learning

This theme, consistent with the OT Department's desire to create reflective practitioners, has been carried over from the original curriculum. These two skills are necessary for new health care practitioners to survive in a rapidly changing, increasingly technologic health care delivery system and culturally diverse society. This situation requires that practitioners have the following abilities:

- the ability to identify and solve multi-faceted, ill-defined problems
- the ability to use situational reasoning (Brookfield, 1989) based on evidence and sound theoretical foundations
- the ability to make conscious decisions based on critical evaluation of individual circumstances
- the ability to adapt to nuances of individuals, groups, and populations, within their respective contexts
- the ability to be comfortable with ambiguity and unpredictability
- the ability to challenge long-held assumptions that may interfere with critical inquiry
- the ability to initiate learning to enhance knowledge, attitudes and skills
- the ability to recognize the role of emotional-intuitive experiences in influencing reflective judgment

Competent Service Delivery

This theme speaks to the importance of both conceptual and technical competence in the delivery of health care. Graduates of health care programs must provide safe, creative intervention that is based on evidence of effectiveness as shown in the health care research. This competence requires:

- the ability to understand the importance of evidence-based practice in service delivery
- the ability to understand how theory and frames of reference reflect and direct delivery of best practice
- the ability to recognize that education is a lifelong pursuit
- the ability to recognize that competence is a dynamic concept that requires nurturing and self-discipline to maintain
- the ability to correlate service delivery to meet the unique needs of individuals, groups or populations

Socially Responsive Practice

This theme addresses the belief that the role of professionals is to use their knowledge and skills in service to society first and foremost. It also addresses the need for professionals to be actively involved in the support of their professions.

This role requires:

- the ability to recognize the role and importance of advocacy in support of individuals and the profession
- the ability to create equal and just occupational opportunities and accessibility to experience those opportunities
- the ability to understand the importance of participation and leadership in service to their profession and society
- the ability to recognize how legislation impacts health care practices
- the ability to engage in practical scientific inquiry and disseminate their knowledge for the benefit of the profession and society

The MSOT Educational Philosophy

The educational philosophy, which this Occupational Therapy Department embraces, is humanistic and progressive. This philosophy encourages active experimentation along with independent, creative, and critical thinking. This philosophy also defines learning as self-directed, emancipatory and transformative, and presents professional preparation as an interactive, integrated experience which impacts the whole individual to produce a combination of skill and attitude competencies which emerge simultaneously during the educational process. Specific information about learning includes the following statements.

- <u>Active Experimentation</u> refers to learning that allows the learning to actually do something for themselves. It occurs in laboratories or specialized settings where learners can "practice" ideas and skills they have read about and discussed.
- <u>Independent Thinking</u> occurs when learners begin to make "...sense of the world..." based on their own observations and encounters, rather than on the words of others. It is about using personal judgment, based on one's own reasoning and acting in accordance with one's own values/beliefs.
- <u>Creative Thinking</u> is thinking that considers different perspectives for solving common problems. Often referred to as "out of the box" thinking, it looks at issues in new ways.
- <u>Critical Thinking</u> is a self-guided, self-disciplined way to think, using evidence, research, analysis and careful examination of beliefs and assumptions to arrive at accurate conclusions and judgments about specific issues. It is fair-minded and uses the highest level of human reasoning.
- <u>Self-Directed Learning</u> is the process in which student take the initiative, alone or with others, to diagnose their own learning needs, create learning goals, identify learning resources, select and use appropriate learning strategies and evaluate their learning outcomes.
- <u>Emancipatory Learning</u> helps learners to free themselves from influences that narrow our choices; influences we have taken for granted or consider "beyond our control". The process can be difficult and often requires faculty support and encouragement.
- <u>Transformative Learning</u> occurs through critical reflection and self-reflection, helping learners to recognize how unconscious beliefs, values, feelings and judgments assimilated over time have impacted our deepest understanding about personal and professional elements in our lives.

This humanistic and progressive education philosophy is well-suited to professional preparation that intends to exceed that of technical training. It is a philosophy that supports the use of learning objectives that can

be explained using the cognitive, affective, and/or psychosocial realms of learning. The nature of learning activities endorsed by this philosophy includes a wide variety which incorporates learner input, require learners to set their own educational goals, and which encourage student inquiry. This philosophy also supports principles that are adult-oriented, in that the learning experiences are designed to be highly practical, relevant to the learners' experience, appropriate to the attendant outcome, and to build upon the knowledge that learners bring to the learning environment.

Examples of common learning activities that may be used within this philosophical approach include free form discussion, panel discussion, formal debate followed by questions and answers, student presentations that are inquiry based, reflective journaling, faculty and/or guest presentations, evaluative, synthesis, and interpretive tasks, group work, and observation and interview experiences outside the classroom. These examples represent a handful of commonly used learning activities, and are not intended to represent the full scope of activities an educator might use to facilitate learning in the classroom.

Curriculum Design and Goals of the MSOT Degree Program

The MSOT curriculum is built around the concept of occupation as the core knowledge base, which is predicated upon the assumption that occupational therapists must operate from a common base of knowledge, skills, values, and philosophy. The curriculum is designed to produce professional practitioners and socially conscience citizens who appreciate the unique perspective of individuals and the cultures that influence them, value a democratic perspective of health care and social services delivery, and apply problem-solving, critical thinking, and lifelong learning towards meeting the needs of society.

Important concepts that undergird the MSOT curriculum include: a) developing an occupational perspective of health (Wilcock, 1998), b) the evolving discipline of occupational science, (Zemke & Clark, 1996), c) dynamic systems theory (Neuman, 1989; Zemke & Clark, 1996), d) critical reasoning and independent learning (Brookfield, 1987), e) competent service delivery (Stark, Lowther & Hagerty, 1986; Law, 1998), and f) socially responsive practice (Kronenberg, Algado & Pollard, 2005).

The MSOT curriculum has been conceived as a model for professional graduate education that is responsive to the needs of our profession, the health care system and its consumers, and program graduates. The traditional full-time program is a two-year endeavor, and the hybrid program is a 3-year endeavor that leads to a Master of Science (M.S.) degree. They reflect beliefs about graduate education that are supported by The Council of Graduate Schools (1994). One of these beliefs is that the master's degree should help the graduate achieve a level of academic accomplishment and subject mastery that is more extensive than that required by the bachelor's degree.

In order to create a comprehensive graduate entry-level program that meets the criteria set by the Council of Graduate Schools (1994), the program identified three major components. Each of these components is discussed below, so the student can see the structural model of the OT Department.

The first major component of comprehensive graduate education is a curriculum structure that is comprehensive and extensive enough to incorporate knowledge beyond that of the profession, to include elements of the system in which they will be delivering OT services. So, in addition to knowledge about the profession of Occupational Therapy, the curriculum incorporates knowledge about health care systems, societal needs, ethics in treatment, and research in the profession. Students will be expected to integrate these different knowledge areas as part of the graduate educational process.

A second major component of comprehensive graduate education includes a focus on the development of professional graduates who demonstrate the characteristics that are considered desirable by those who will be using our services. These users include other health care professionals, institutions, community groups, and educational institutions, as well as the general public, which represents our clients. These characteristics include: a) contextually appropriate communication and professional behaviors, b) integration and synthesis of knowledge, c) commitment to professional identity, with advocacy and marketing skills, d) ability to solve complex and ill structured problems in the real world, and e) application of disciplinary knowledge for individuals, groups, and communities.

A final major component of comprehensive graduate education concerns an approach to teaching and learning that is focused on the teaching of "best practice", innovative and student centered, grounded in adult learning principles, yet academically rigorous enough to be considered graduate level education. This approach to teaching and learning is demonstrated through: (a) faculty shared educational philosophy and goals, (b) immersing students in content with experiential learning, (c) encouragement of critical thinking and self-directed, student-centered learning, (d) creating a challenging environment offering both support and individualized mentoring, and (e) providing a culminating experience with a tangible end product. A graphic of our model for graduate education can be seen on page 13.

Using this model, the department has identified six major goals with attendant descriptive objectives that the curriculum endeavors to facilitate. These are as follows.

<u>Program Goals and Curriculum Objectives</u>:

Program Goals:

The program goals developed from the curricular themes are designed to reflect new health care directions, new professional directions, and accepted professional education theory and practice.

Curriculum Objectives: These objectives represent what the curriculum is designed to foster and encourage in its students, or what the curriculum will do (by its design) to achieve the previously identified goals. The curriculum objectives represent a more explicit focus on occupation, client-centered and evidence-based practice. The Occupational Therapy Department at GVSU will foster the objectives as identified below.

Program Goal I: The graduate will demonstrate a view of humanity that supports the role of occupation as critical to health and wellness, and as uniquely experienced within varied contexts. To this end, the curriculum will foster:

- A. A respectful attitude toward clients' cultural and spiritual values and beliefs.
- B. An understanding of the interaction between the person, the environment, and occupational performance.
- C. An historical perspective on OT practice and its importance to future practice.
- D. An understanding of basic concepts of occupation including occupation as both a science and a therapy, occupational behavior and performance, the role of rules, habits, and skills, and meaning and purpose in occupation,
- E. An understanding of the appropriate use of health and wellness promotion concepts.

- F. An understanding of the individualized meaning of health and wellness and its relationship to life satisfaction.
- G. A commitment to the study and application of occupation as a therapeutic method.
- H. An understanding of basic learning theories, and their relationship to content, individual motivation, and the context in which learning and occupational performance occur.
- I. An understanding of the role that culture and context play in occupational performance.

Program Goal II: The graduate will effectively translate concepts of an occupational perspective of health and wellness to the person-centered delivery of occupational therapy services to individuals, groups, and populations. To this end, the curriculum will foster:

- A. A person-centered approach with clients and the attainment of his or her goals.
- B. The ability to identify populations in need of occupational therapy services and design appropriate services for those populations.
- C. An understanding of occupational science and occupational therapy and the relationship of these to each other.
- D. An understanding of the relationship between human development and occupational performance from a lifespan perspective.
- E. An understanding of the relationship between health and wellness and occupational performance, including the use of occupation to enhance wellness and prevent disease.
- F. An understanding of the effects of disease and disability on occupational performance.
- G. An understanding of how occupation supports and enhances a variety of Occupational Therapy practice models and frames of reference.
- H. An understanding of the importance of a positive, supportive environment to maximize client and/or learner responsiveness to, and synthesis of, knowledge.

Program Goal III: The graduate will demonstrate well-developed reflective judgment, based in critical thinking, rational inquiry, the challenge of assumptions, and appropriate use of emotional-intuitive experiences. To this end, the curriculum will foster:

- A. The development of the critical evaluation of assumptions within multiple contexts.
- B. The understanding and incorporation of emotional-intuitive experiences in clinical reasoning.
- C. The development of the skills necessary to critically analyze the differences among occupational therapy practice models, their theoretical bases, and their appropriate application.
- D. The development of the skills and judgment necessary to interpret therapeutic, interpersonal and/or contextual factors for the appropriate application of the occupational therapy process.

- E. The development of critical thinking and reflective judgment skills to facilitate and enhance personal and professional growth experiences.
- F. The development of rational inquiry skills to identify and solve both well and ill structured problems.

Program Goal IV: The graduate will demonstrate competencies and attitudes required to deliver safe, effective and creative entry-level Occupational Therapy through mastery of the art and science of professional practice. To this end, the curriculum will foster:

- A. Acquisition of the knowledge and skills to facilitate competent occupational performance, commensurate with the individual's environmental and personal structures.
- B. The development of ethical and moral standards for service delivery.
- C. The development of a habit of lifelong learning for continuing competence and professional development.
- D. The development of the knowledge and skills to perform a comprehensive analysis of consumer needs in a variety of contexts.
- E. The development of the skills and knowledge to design intervention to support the individual needs of the client.
- F. The ability to develop, implement and evaluate service delivery systems from an occupational perspective.
- G. The development of evidence-based practice skills.
- H. The development of competence in the role of educator with clients, families, and professional colleagues.
- I. The development of the skills to competently apply the OT process (assessment, intervention and measured outcomes).
- J. An understanding of the basic anatomical structures and functions of the human body and their relationship to occupational performance
- K. An understanding of the physiological mechanisms, which underlie occupational performance.
- L. An understanding of the relationship between neurological function and occupational performance.
- M. An understanding of human sensorimotor, cognitive, and psychosocial abilities and their relationship to occupational performance.
- N. The development of the skills necessary for screening, assessing, and evaluating clients using appropriate occupations and the selection/creation of assessment measures, guided by appropriate practice models.

- O. The development of the skills necessary to critically analyze, interpret, and assess screening, assessment, and evaluation data for the creation of appropriate, occupationally based intervention strategies.
- P. The development of the skills necessary for setting person-centered therapeutic goals, including those for personal perspective transformation, compensation, and primary prevention, within the realm of theory-based practice.
- Q. The development of the skills necessary to work collaboratively with clients, their families, other professionals, services and agencies, in the planning and implementation of appropriate interventions based in Occupational Therapy theory.
- R. The development of the skills necessary for reassessing, grading, and restructuring Occupational Therapy theory-based interventions to enhance meaning and purpose for the client, occupational performance, and therapeutic value.
- 5. The development of the skills to recognize the need to terminate intervention.
- T. The development of the knowledge necessary to determine and facilitate referral to other professions.
- U. The development of necessary communication skills for appropriate oral, written, and nonverbal interchanges with clients, their families, other professionals, and the community.
- V. The development of the skills necessary to report, document, and disseminate pertinent client data appropriately and accurately.
- W. An understanding of the role of professional standards of health, safety, and confidentiality for the protection of the institution, the clients and their families, and the profession.
- X. The use of basic instruction techniques and media to facilitate learning.
- Y. The development of the skills necessary to implement and evaluate an educational plan for a specific learner population.
- Z. The development of the skills necessary to structure an educational program that includes well-defined purposes, organizational threads, and evaluation in its planning.

Program Goal V: The graduate will demonstrate socially conscious citizenship as a representative of the community, through leadership in public service and advocacy for positive change in the profession and in society. To this end, the curriculum will foster:

- A. The ability to develop a comprehensive business plan.
- B. Integration of OT practice with business operations.
- C. The development of skills in identifying and accessing new and varied funding sources.
- D. Advocacy for services to the underserved nationally and internationally.

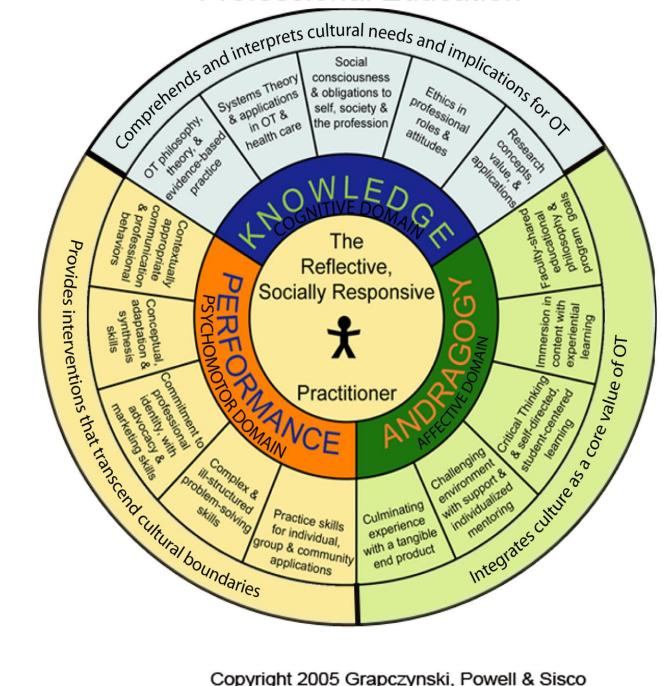
- E. Advocacy for changes that will enhance service delivery.
- F. The importance of participation in professional organizations and engagement in the political processes of the profession.
- G. The development of the skills necessary for effective and efficient management of an Occupational Therapy Department, include both material and human resources.
- H. An awareness of the characteristics of effective leaders, and how to develop and encourage/mentor these characteristics in his/her self and others.
- An understanding of the impact of current trends and issues in health and human service fields on occupational therapy, and how to address these trends and issues for efficient, effective service delivery.
- J. An understanding of the basic principles of health care economics, and the impact of socioeconomic factors on the health and human service industry, and how to use these principles to influence health care delivery.
- K. An understanding of how to generalize one's skills and talents for roles in professional organizations and programs, which help further the goals of occupational therapy and health related service delivery.
- L. The development of a sense of personal responsibility for the direction of the profession, which can be displayed through research, education, and service efforts.
- M. A willingness to take a proactive stance on issues and trends that impact the field of Occupational Therapy and/or health care in general, either directly or indirectly.
- N. The development of an attitude of personal responsibility for lifelong learning.
- O. The development of an attitude of personal responsibility for the dissemination and active promotion of new learnings that will advance and support the field.
- P. An understanding of the value and role of professional organizations as advocates for Occupational Therapy and health care, and how to serve these organizations effectively.
- Q. An understanding and appreciation for the organization as a social system, requiring the use of persuasive and visionary skills to help meet the needs of an ever-changing population and health care delivery system.
- R. An understanding of the value of collaboration with other professionals to establish new programs, goals, etc., for the overall purpose of improving the effectiveness of the health care delivery system.
- 5. An understanding of the basic principles of teaching/learning across the lifespan.

Program Goal VI: The graduate will demonstrate the ability to engage in scientific inquiry to enhance theory and practice for the benefit of the profession and society. To this end, the curriculum will foster:

A. An appreciation of the importance of dissemination of scholarly work.

- B. An appreciation for the importance of research that reflects the critical analysis of significant issues in the field.
- C. An understanding of how to apply research results to Occupational Therapy services, both education and intervention oriented.
- D. The development of the skills necessary to describe and apply basic investigative techniques in professional, clinical, educational, or administrative areas.
- E. The development of the skills necessary to discern significant problems in the field, through a critical examination of the art and science of occupation.
- F. The development of the skills necessary to articulate a specific area for investigation, and apply appropriate methodologies and strategies for data collection and analysis.
- G. The development of the skills necessary to analyze, evaluate, and apply the efforts of critical inquiry, as well as to identify areas for further study.
- H. The ability to design, carry out and disseminate basic research in occupational science and occupational therapy.

A Comprehensive Model For Graduate Entry-level Professional Education



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Occupational Therapy Traditional Program Sequence of Courses

2014-2015

	2014-2013	
Fall I		
	OT 502 Theoretical Perspectives in OT	3 cr.
	OT 551 Meaningful Living Through Occupation	3 cr.
	OT 552 Meaningful Living Laboratory	3 cr.
	OT 553 Level I Fieldwork (Part 1)	2 cr.
	STA 610 Statistics for the Health Professions	3 cr.
	OT 557 Research Design	2 cr.
	o 1 337 Research Design	16 cr.
Winte	n T	20 01 .
** !!!!	OT 505 Limitations on Occupation	3 cr.
	•	3 cr.
	OT 558 Mental Health in Occupational Therapy	1 cr.
	OT 559 Mental Health Laboratory OT 561 Child & Adolescent Practice	
		3 cr.
	OT 562 Child and Adolescent Laboratory	2 cr.
	OT 563 Level I Fieldwork (Part 2)	1 cr.
	OT 564 Occupational Therapy Research Proposal	2 cr.
	/a =	15 cr.
Spring	/Summer I	_
	OT 503 Groups	3 cr.
	PA 535 Grant Writing	3 cr.
	OT 571 Adult Practice	3 cr.
	OT 572 Adult Laboratory	3 cr.
	OT 573 Level I Fieldwork (Part 3)	1 cr.
	OT 568 OT Research Implementation and Analysis	1 cr.
		14 cr.
Fall I		
	IPE 507 Integrated Teams in Health Care	2 cr.
	OT 555 Professional Socialization in Occupational Therapy	3 cr.
	OT 565 Occupational Therapy Services Administration	3 cr.
	OT 651 Older Adult Practice	3 cr.
	OT 652 Older Adult Laboratory	3 cr.
	OT 653 Level I Fieldwork (Part 4)	1 cr.
	OT 693 OT Research Project	2 cr. OR
	OT 695 OT Master's Thesis I	3 cr.
		17-18 cr.
Winte	r II	
	OT 660 Level II Fieldwork (Part 1)	9 cr.
	, ,	
Spring	/Summer II	
- F · · · · · 3	OT 661 Level II Fieldwork (Part 2)	9 cr.
	OT 698 Capstone	1 cr.
		10 cr.
	TOTAL	81-82 cr.
	101/10	J_ J_ J_ JI.

Occupational Therapy Research Project Timeline Traditional Program

Fall Semester I

- Identify a Topic
- Complete Chapter 1
- Identify faculty chair for research committee

Winter Semester I

- Complete chapters 2 and 3
- Identify additional faculty for research committee
- Defend research proposal to research committee

Spring/Summer Semester I

- Submit proposal to HRRC if appropriate
- Complete data collection for research
- Complete data analysis

Fall Semester II

- Write chapters 4 and 5 with guidance from chair and committee
- Identify defense date and ensure that all committee members can attend
- Defend research project to research committee
- Submission to scholar works
- Complete all documents associated with final defense, final written copy, and evaluation of Chair

Winter Semester II

- Begin preparing project for presentation or publication
- Work with Research Committee Chair for assistance

Spring/Summer II

- Continue working on preparing project for presentation/publication
- If hoping to present, send proposal to conference planning

Once you have completed your level II fieldworks, and taken the NBCOT exam, you should be able to complete preparation of your project for publication, and it should be <u>submitted by December of the year of graduation</u>, with your name(s) as first author(s) and your research committee chair as contributing author. If you have not submitted your project for publication or presentation <u>by December of the year following graduation</u>, you forfeit ownership of the project to the OT Department, which may then publish the project using the research committee chair as the first author, and your names as contributing author(s).

Occupational Therapy Hybrid Program Sequence of Courses 2014-2015

Fall I		Winter I		Summer I	
OT 502	3	OT 503	3	IPE 507	2
OT 551	3	OT 505	3	OT 555	3
OT 552	<u>3</u>	OT 553	2	PA 535	<u>3</u>
		STA 610	<u>3</u> 11		
	9		11		8 = 28 cr.
Fall II		Winter II		Summer II	
OT 557	2	OT 558	3	OT 571	3
OT 561	3	OT 559	1	OT 572	3
OT 562	2	OT 565	3	OT 573	1
OT 563	<u>1</u> 8	OT 564	<u>2</u> 9	OT 568	<u>1</u>
	8		9		8 = 25 cr.
Fall III		Winter III		Summer III	
OT 651/652	3	Level II FW	9	Level II FW	9
OT 652	3			OT 698	<u>1</u>
OT 653	1				
OT 693/695	2/3				
	9/10		9		10 = 29/29
				T	OTAL = 81-8

Occupational Therapy Research Project Timeline Hybrid Program

Spring/Summer Semester I

- Complete Chapter 1
- · Identify faculty chair for research committee

Fall Semester II

• Identify additional faculty for research committee

Winter Semester II

- Complete chapters 2 and 3
- Defend research proposal to research committee

Spring/Summer Semester II

- Submit proposal to HRRC if appropriate
- Complete data collection for research
- Complete data analysis

Fall Semester III

- Write chapters 4 and 5
- Identify defense date and ensure that all committee members can attend
- Defend research project to research committee
- Bind project; submit copies to Library, OT Department, and Research Committee Members, as well as project group (7-8 copies)
- Complete Evaluation of Research Committee Chair

Winter Semester III

- Begin preparing project for presentation or publication
- Work with Research Committee Chair for assistance

Spring/Summer III

- Continue working on preparing project for presentation/publication
- If hoping to present, send proposal to conference planning

Once you have completed your level II fieldworks, and taken the NBCOT exam, you should be able to complete preparation of your project for publication, and it should be <u>submitted by December of the year of graduation</u>, with your name(s) as first author(s) and your research committee chair as contributing author. If you have not submitted your project for publication or presentation <u>by December of the year following graduation</u>, you forfeit ownership of the project to the OT Department, which may then publish the project using the research committee chair as the first author, and your names as contributing author(s).

GRADUATE SCHOOL AT GRAND VALLEY STATE UNIVERSITY Graduate Academic Policies and Regulations

Academic Review

Please see the 2011-12 GVSU *Undergraduate and Graduate Catalog* for current University polices regarding academic review, credit load, independent study, degree requirements, second Master's degree, and catalog limitations and guarantees.

OCCUPATIONAL THERAPY DEPARTMENT POLICIES

General Program Policies

- 1. Throughout their matriculation in the OT Department, students are expected to demonstrate behaviors and attitudes consistent with that of a professional. The demonstration is specific, using a list of professional behaviors as described in the Professional Behaviors worksheet.
- 2. Professional behaviors and attitudes are attributes and characteristics that are not explicitly part of a profession's core of knowledge and technical skills but are nevertheless required for success in the profession. A professional behaviors worksheet (Appendix F) will be provided to all students at orientation. Students will schedule appointments with their advisors to review professional behaviors each semester.

Failure to meet standards for such behaviors and attitudes, as determined by the OT Department Faculty, will affect academic performance and be reflected in course grades.

- a. Professional behaviors are further defined in Appendix E.
- b. Related breaches of professional behavior in the classroom or in any fieldwork setting, as determined by OT Department faculty, will result in the following progressive corrective action:
 - 1) Verbal warning
 - 2) Written warning
 - 3) Academic probation
 - 4) Dismissal from the program

Each related incident will be documented by faculty, discussed privately with the student, and the documentation form will be signed by the student involved. Record of all of these will be maintained in the student's academic file.

- 3. Classes start on time, both at the beginning of class and after breaks. Students are responsible for timeliness and for material missed. <u>Instances of unexcused tardiness will be considered breaches of professional behavior</u>.
- 4. Assignments are due on the date and time stipulated by the course instructor. Late submissions will have points deducted at the discretion of the instructor of record for the course.
- 5. Competence throughout both OT Programs is measured against the standard of 84% (B) for final course grades. A final course grade lower than an 84% will result in a student needing to retake the course the next time it is offered in the program the student is enrolled in. Revised 2-12-14. Revisions take effect 2-14-14.

- 6. Assignment grades below 74% will require the student(s) to complete a competency contract in order to demonstrate a sufficient level of mastery over the content. Students who are asked to fulfill a competency contract by the instructor cannot earn a grade higher than originally received. The competency contract will outline a plan of action determined by student, instructor, and advisor collaboratively. Revised 2-12-14. Revisions take effect 2-14-14.
- 7. In some courses where a final examination or other culminating assignment is given, a score of 84% or higher is required to demonstrate competence. Failure to earn this grade will result in a competency contract and/or an incomplete in the course. A competency contract will be given in the event that the student has the opportunity to complete the contract prior to final grades being assigned. An incomplete in the course will be given if the time needed to demonstrate competence would extend beyond the final grade deadline for faculty. Revised 2-12-14.

 Revisions take effect 2-14-14.
- 8. If the demands of the competency contract are not fulfilled satisfactorily by the appointed deadline (meaning both the assignment rigor and contract deadline are met), the student will be required to meet with the course instructor and his/her advisor to develop a plan of action to correct the pattern of performance. Revised 2-12-14.

 Revisions take effect 2-14-14.
- 9. Attendance at all classes is expected and anticipated absences need to be cleared with the course instructor <u>at least 2 weeks in advance</u>. It is the student's responsibility to inform the faculty in the event of a planned or unplanned absence. In the event of an absence, it is the student's responsibility to initiate a competency contract plan for make-up work regarding missed content and this must be approved by the course instructor. Students who do not make advance arrangements for needed absences will be considered unexcused. More than <u>two</u> unexcused absences will result in academic probation.
- 10. Students are to make plans in advance for dependent and/or child care during class sessions. Emergency situations may be accommodated by the instructor, on a case-by-case basis.
- 11. All written work is to be submitted in the format preferred by the instructor, using current style manual appropriate.
- Occupational Therapy Department faculty are readily accessible to students through the use of scheduled appointments, regular office hours, and or virtual office hours. However, do not schedule an appointment or drop in to see an instructor during the times you are scheduled to be in class. Please be considerate of the many demands on faculty time by using advance scheduling whenever possible.
- 13. Students <u>will not be placed</u> in fieldwork sits in which they have been employed within five years of the time of entry into the occupational therapy department. This includes employment during their tenure in either the traditional or hybrid program. The purpose of this policy is to avoid potential conflicts of interest, professional boundary issues, and other ethical concerns.
- 14. Fieldwork placement is determined by the program faculty based on a variety of considerations and limitations. Once you have made your wishes known about your fieldwork preferences, a meeting will be scheduled with the Academic Fieldwork Coordinator (AFWC) to discuss any special needs or issues you may have. Once this meeting has occurred, your job is done. The AFWC will let you know when and where you have been placed.

- 15. For security purposes, students are expected to wear their GVSU ID badges in plain view and, at all times, within the building and in the community when representing the program or university.
- 16. Students with disabilities requiring accommodation must register with the Office of Disability Support Services at (616) 331-2490 to generate an official request for accommodation. Any request made during the course of a semester <u>only</u> impacts assignments and expectations form the date the DSS memo is received forward.
- 17. Department policies will be considered in force unless otherwise stipulated by the Department Chair. Failure to adhere to program policies will be considered a breach of professional behavior and will be addressed on a case-by-case basis by the department faculty.

Please recognize that department policies are in place for the general good of all concerned. If you have questions, please make an appointment to see the Department Chair to discuss your concerns.

Fieldwork Experiences

Level I Fieldwork

As stated in the AOTA Standards for an Accredited Educational Program for the Occupational Therapist (2006), the purpose of the Level I fieldwork experience is to provide the student with experiences in relating to and understanding various client populations and various service agencies. The goal of Level I fieldwork is to introduce students to the fieldwork experience, and develop a basic comfort level with and understanding of the needs of clients. Level I fieldwork shall be integral to the traditional and hybrid programs' curriculum structure and include experiences designed to enrich didactic coursework through directed observation and participation in selected aspects of the occupational therapy process. The focus of these experiences is not intended to be independent performance. Level I fieldwork experiences may or may not occur in an occupational therapy setting with an occupational therapist OT. Qualified personnel for supervised Level I fieldwork, called Fieldwork Educators (FWE), include, but are not limited to, occupational therapy practitioners initially certified by NBCOT, psychologists, physician assistants, teachers, social workers, nurses, and physical therapists.

Level I fieldwork for the traditional program will occur in three semesters, beginning with the winter semester of the first professional year, and ending with the fall semester of the second professional year. Level I fieldwork for the hybrid program will occur in three non-consecutive semesters, beginning in the Fall semester of the second professional year, continuing with Spring/Summer semesters of the second professional year and ending in the Fall semester at the third professional year. Students must successfully complete all Level I fieldwork courses in order to meet the eligibility requirements to enter Level II fieldwork. No Level I fieldwork can be substituted for any part of Level II fieldwork.

Students will have on-site fieldwork experiences as part of the fieldwork coursework in all but the first fieldwork course. Each semester is 12 - 15 weeks long, and it is planned that each student will be in a Level I practice setting for a total of approximately 50-80 hours per semester. Actual contact hours, days and times of a fieldwork experience will be determined by the Academic Fieldwork Coordinator (AFWC) and the FWEs, to maximize the benefits for students, and to ensure that FWEs are available to meet student needs. All students must be available for Level I fieldwork weekly (Monday through Friday) at all times outside time spent in academic coursework (in class and with scheduled experiences outside the classroom).

Each student will be assigned a FWE who will supervise the Level I experience and evaluate student performance. Level I performance will be evaluated by the assigned FWE using the GVSU Level I Performance Evaluation. In some instances the student may be assigned to more than one FWE. In this case, the FWEs will share supervisory and training responsibilities and will jointly evaluate the student via the Performance Evaluation.

All fieldwork experiences utilize a service learning model and at least one Level I fieldwork experience will be in a community-based setting. That is, students will provide service to a community agency that will assist that agency in meeting its service needs. Community agencies may include day care programs, respite programs, homeless shelters, nursing homes, support group associations, or any other organizations not associated with a hospital or rehabilitation program. In providing service to the agency, students may work one-on-one with clients, may develop programs for a group of clients, may lead group activities, may conduct surveys or needs assessments, may plan and deliver educational activities, may write proposals for programming, implement new programs, or participate in evaluating the outcomes of a program. Regardless of the specific nature of the service, students will work to identify what services the agency provides, how those services match occupational therapy services, how occupational therapy could compliment what the agency provides, and propose/implement services consistent with occupational therapy's core philosophy. This will be documented via a Service Learning Evaluation to be completed by each student.

Level II Fieldwork

As stated in the AOTA Standards for an Accredited Educational Program for the Occupational Therapist (2006), the goal of Level II fieldwork is to develop competent, entry level, generalist occupational therapists. Level II fieldwork shall include an in-depth experience in delivering occupational therapy services to clients, focusing on the application of purposeful and meaningful occupation and/or research, administration and management of occupational therapy services. The fieldwork experience shall be designed to promote clinical reasoning and reflective practice; to transmit the values and beliefs that enable ethical practice; and to develop professionalism and competence as career responsibilities.

Level II fieldwork is scheduled at what is commonly and widely accepted as traditional, that is, conventional/customary reimbursement driven occupational therapy service delivery sites. The program defines emerging sites as those as outlined by the AOTA's top 10 emerging practice areas for the 21^{st} century and/or new services which are usually fee for service driven and/or new services which are in the process of being verified via evidenced practice and peer-reviewed research studies. Because the purpose the graduate education and the Level II education is to prepare the student to be a competent entry level therapist, the program does not send students to emerging settings. The students are sent to two traditional settings which complement each other and to ensure a balance among the Level I and the Level II experiences to ensure the student becomes a competent entry level therapist. There may be an emerging area of practice at a Level II site and the Fieldwork Educator is encouraged to expose the student to the practice area during the Level II rotation as outlined by the Level II Objectives. Also, the GVSU program does not send students to Level II settings where no occupational therapy services exist.

Level II fieldwork for the traditional program is scheduled to occur in the Winter and Spring/Summer semesters of the second professional year of the program, on a full-time basis, for 12 weeks each semester, a total of 24 weeks full time. Level II fieldwork for the hybrid program is scheduled to occur in the Winter and Spring/Summer semesters at the third professional year, on a full-time basis, for 12 weeks each semester, a total of 24 weeks full time. Level II fieldwork may be completed on a part-time basis as determined by the AFWC fieldwork placement in accordance with the fieldwork placements usual and

customary personnel policies as long as it is at least 50% of a full-time equivalent at that site. Alternative scheduling will be considered in extenuating circumstances, on a case-by-case basis.

Each student will be assigned a (FWE) who will supervise the Level II experience and evaluate student performance. Level II performance will be evaluated by the assigned FWE using the AOTA Fieldwork Performance Evaluation (FWPE). In some instances the student may be assigned to more than one FWE. In this case, the FWEs will share supervisory and training responsibilities and will jointly evaluate the student via the FWPE.

Level II fieldwork will occur following successful completion of the student's didactic course work to include thesis or research projects. After successful completion of Level II fieldwork and the Capstone course (OT 698) the Registrar will be notified and will then complete the NBCOT credentials form. Once this is sent to NBCOT students will be eligible to take the National Board examination.

General Fieldwork Policies

The fieldwork portion of the academic program is the most important practice element of the curriculum, because it is the element that allows students to have intensive and extensive contact with clients and to move toward professional competence. It is the goal of the Occupational Therapy Department to provide students with a variety of experiences, which support the occupational science focus of the program. Thus, each student will experience the following.

- A. Either a Level I or a Level II experience with a fieldwork site with a focus on the psychosocial aspects of occupational therapy.
- B. In addition, each student will have at least one Level I community-based, service learning experience, one in pediatrics and one in a traditional clinical setting. The Level I community-based experience may occur at a site without an occupational therapist.
- C. All Level I and II experiences that have supervision by an occupational therapist will have the OT originally certified by NBCOT and licensed by their respective state or country.

This approach has been taken to ensure that students experience client contact in some of the major areas of occupational therapy intervention. We are aware that these areas do not cover every possible treatment environment in which occupational therapists work, however, we hope that we will give students maximum general exposure to the most common environments. To this end the following policies have been developed.

- 1. All didactic courses must be satisfactorily completed, demonstrating a 3.0 competency in order for students to proceed to the next level.
- 2. Because fieldwork facilities will not take responsibility for an injury sustained on their premises, it is strongly recommended that all students have health insurance prior to participating in any fieldwork experiences. Students who do not have health insurance will be financially responsible for any treatment related to an injury sustained while at a fieldwork site. GVSU does offer a student health insurance policy for those who have no other coverage.
- 3. Level I fieldwork placements will be made by the AFWC based on the nature and availability of fieldwork sites. The AFWC will work to ensure student placement in a quality Level I site. Students will be informed of these assignments no later than the first week of each semester in which Level I fieldwork is to occur.

- 4. Every effort will be made to provide students with a Level I fieldwork experience that is no more than a 2 $\frac{1}{2}$ hour drive time from their place of residence and a Level II experience that is no longer than a 1 $\frac{1}{2}$ hour drive from their place of residence. However, due to the utilization of fieldwork sites, the number of students needing placement, and facility staffing requirements, the AFWC may have to arrange for sites that are more distant, regardless of the students' residence. Students will have an opportunity to discuss their needs individually with the AFWC, who will make all final decisions.
- 5. Students involved in Level I and II fieldwork are expected to invest time researching and reading to understand the role of occupational therapy in a particular setting. Students are expected to be self-directed and goal-oriented in each placement in order to maximize their own learning and development.
- 6. Students will be asked for a geographic preference for Level II placement and every effort will be made to arrange a placement in the requested geographic area. Hybrid students who are out of the local area for Level I and II placements will be asked for a geographic preference and every effort will be made to arrange a placement in the requested geographic area. However, due to the utilization of fieldwork sites, the number of students needing placement, and facility staffing requirements, it is may be impossible for every student to be assigned to their preferred area. The AFWC will work to ensure placement in a quality Level II site that will meets the program's requirements. The type of placement setting assigned for each student is at the discretion of the AFWC. Level II fieldwork sites can be completed at any location worldwide. However, the FWE must be a graduate of a World Federation of Occupational Therapist approved school/program and have at least one year of experience in practice after initial certification. The AFWC must review and approve every site selected for Level II fieldwork.
- 7. For a Level I or II experience, if a student wishes to be assigned to a particular facility with which GVSU does not have a contract; it is possible for that site to be developed. Students are not to contact a potential Level I and/or II Fieldwork site and/or supervisor on their own until they have consulted with the AFWC. Once approved the student will be asked to contact the site and inquire if the site takes Level I and/or Level II students. The student is not to request a placement at the site. If affirmative, the student will then obtain the site name and address, the fieldwork coordinator's name, e-mail, and phone number and provide the information to the AFWC. The AFWC must determine if the site meets GVSU OT Department fieldwork standards. If the site is subsequently developed and the assignment is arranged for the student, that student is obligated to use that assignment as his or her fieldwork placement. Exceptions to this policy will be made only in the most extreme circumstances, as determined by the AFWC and the Department Chair. Attempts to bypass this process will be considered a breach of professional behavior, and dealt with accordingly per the policy and guidelines in the Student Handbook.
- 8. Every effort will be made to inform students about Level II placements within three months prior to beginning Level II fieldwork. However, there are often extenuating circumstances in which placements are not finalized until much nearer the Level II fieldwork start date.
- 9. Consistent with AOTA recommendations, all Level II Fieldwork must be completed within 24 months of completion of the didactic program.

- 10. In order to provide accessibility to Level I and Level II Fieldwork sites for students with differing circumstances the following priorities will be in place in assigning students to local sites (those within two hours of Grand Rapids):
 - 1. A student with documented special needs.
 - 2. A single student with documented special needs and legal dependents.
 - 3. A married student with documented special needs and legal dependents.
 - 4. A single student with legal dependents.
 - 5. A married student with legal dependents.
 - 6. A married student.
 - 7. A single student.

The program offers <u>no guarantees that a Level II will be at a "local" site in the Grand Rapids area.</u>

- 11. The assignment to some fieldwork sites is competitive and also may require interviews for approval. Students may be asked if there is interest in specific competitive sites. The AFWC with input from the faculty will make the final decision regarding student placement at competitive sites. Selection will be based on student performance in the program (didactic coursework, fieldwork, and overall professional behavior) in relation to the demands and needs of the competitive site.
- 12. Once a fieldwork assignment has been made, it will not be changed, except in the event of extreme extenuating circumstances, as determined by the AFWC and the Department Chair.
- While students are on fieldwork, the policies of the fieldwork facilities in use will apply to them, such as requirements for dress, professional behavior, health, safety, hours of practice, etc. Students are to make themselves aware of any such policies, and be prepared to comply, prior to the start of their fieldwork experiences.

Students will comply with the GVSU OT Department's social media policy while in fieldwork (see Appendix F). Additionally, the use of cell/smart phones is prohibited at the fieldwork site unless specifically authorized by the fieldwork site. Also, the use of site computers/tablets for personal use (e-mail, web surfing, social media, etc.) is prohibited unless specifically authorized by the fieldwork site.

Confidentiality is a must in fieldwork and patient's rights must be protected at all times. Discussion of specific patients and clinical/personal interactions may be discussed with other health care professionals as part of your professional clinical duties. At no time will a student discuss specific patient information with a non-health care professional or via electronic means (e-mail, cell/smart phone, computer/tablet). This includes social media such as Facebook, Twitter, etc.

- The objectives of the Level I and II Fieldwork experiences, and the learning activities designed to meet these objectives, are developed collaboratively between the site fieldwork supervisor, the fieldwork educators and the AFWC. This ensures that fieldwork objectives are collaboratively developed, and are appropriate and adequate to prepare students for entry-level competency, as required in the current *Standards* (ACOTE, 2012).
- 15. Students are expected to be in attendance for all assigned fieldwork hours. Ther are no "days off" in Level I or II fieldwork.

A. In the case of illness or other circumstances, which cause an absence in a Level I or Level II setting, students must contact (FWE) to be granted an excused absence. Make-up requirements for excused absences are to be negotiated with the FWE and approved by the AFWC. Unexcused absences will not be tolerated in fieldwork, and more than one unexcused absence will result in a grade of NO CREDIT for that fieldwork experience. An unexcused absence will result in a remediation plan and counseling from the AFWC.

B. Lateness will not be tolerated in fieldwork. In the case of lateness at either Level I or Level II settings, the student must contact the FWE via phone, to inform him/her of the lateness. ONE episode of lateness will result in a counseling session with the FWE. A SECOND episode of lateness at fieldwork will result in a counseling session with the AFWC, and a remediation plan developed collaboratively by the FWE and AFWC. A THIRD episode of lateness will be evaluated by the FWE and the AFWC and could result in termination of the fieldwork placement, resulting in a NO CREDIT grade.

16. The determination of passage or failure of a fieldwork experience is ultimately the purview of the AFWC, with input from the FWE. This determination is based upon performance in the fieldwork placement per documentation provided by the FWE and as documented on the appropriate performance eval and in related clinical reasoning demonstrations/discussions.

Professional Behaviors and Attitudes

Professional behaviors and attitudes are attributes and characteristics that are not explicitly part of a profession's core of knowledge and technical skills but are nevertheless required for success in the profession. A professional behaviors worksheet (Appendix F) will be provided to all students at orientation. Students will schedule appointments with their advisors to review professional behaviors each semester.

More than two breaches of professional behavior in the classroom or in fieldwork, as determined by OT Department faculty, will result in dismissal from the Program.

Felony Conviction Statement

A felony may affect a graduate's ability to sit for the NBCOT certification examination or attain state licensure. Students are required to contact NBCOT directly if this condition applies.

Outside Employment and Activities while Attending the Traditional Full-Time Program

It is understood that school is expensive, and many students need to work to support themselves and/or families. The traditional program recommends not more than 20 hours per week of employment, and it must be flexible enough for students to take advantage of short notice learning opportunities that may come available. The Occupational Therapy Department expects that graduate education will take a reasonable priority in the lives of students', in order to insure success in the program. Students may need to limit outside activities if they interfere with study time or other Program commitments.

It is understood that students enrolled in the hybrid program may need to work as many as 40 hours per week. It is imperative, however, that students have the flexibility in their employment to take time off for Level I FW experiences, and other unique learning activities, as appropriate.

Occupational Therapy Degree Program Requirements

- 1. Students must successfully complete all 79-80 credits of the occupational therapy curriculum, including all level I and level II fieldwork, in order to earn the Master of Science Degree in Occupational Therapy. Fieldwork correlates to the university requirement for demonstration of ability to integrate and synthesize curriculum content. Level II Fieldwork must be completed within 24 months after the end of the academic portion of the program, as required by AOTA.
- 2. All 79-80 credits must be taken at Grand Valley State University unless other arrangements have been made with the Department Chair. As a rule, credits from other occupational therapy programs are not accepted for transfer into either of the GVSU programs.
- 3. Students are expected to earn a minimum grade of "B" (3.0 or 84%) in all professional course work in order to qualify for the master's degree. Any course grade less than 3.0 will require the student to repeat the course. Students must earn a B (84%) or better in the repeated course in order to progress in the curriculum. A second final grade lower than 84%, whether the same course or a different course, will result in Academic Dismissal from the program.

Occupational Therapy Department Grading Scale

Α	(4.0) = 94-100	С	(2.0) =	74-77
A-	(3.7) = 90-93	C-	(1.7) =	70-73
B+	(3.3) = 88-89	D+	(1.3) =	68-69
В	(3.0) = 84-87	D	(1.0) =	64-67
B-	(2.7) = 80-83			
C+	(2.3) = 78-79	Failure	= (0.0) =	∢ 60

All candidates for the Master of Science Degree in Occupational Therapy must do research which culminates in a thesis or research project of presentable or publishable quality, as determined by the faculty of the Occupational Therapy Department. The thesis or research project must be completed before students go to their Level II fieldwork placements. The research expectation correlates to the university's graduate requirement for students to demonstrate the ability to generate new knowledge and/or apply existing knowledge to specific practical situations. Research projects/theses may be submitted for publication and/or a professional presentation by a student, with the major research advisor as co-author. Committee members may also be co-authors as negotiated at the final defense of a project or thesis.

Graduation, Certification and Credentialing Requirements

- In order for students to graduate from GVSU and the Occupational Therapy Department, all
 incomplete grades, deferred grades and other academic restrictions must be converted or lifted.
 Students must have all fees completely paid in order to have the degree posted on the transcript.
- 2. When competency has been successfully demonstrated in all didactic **and** all required fieldwork courses, **and** no other restrictions apply, students are ready to graduate from the program.
- 3. It is the responsibility of students to complete the *Application for Degree* card and submit it to the Student Assistance Center the semester before graduation is expected. Degree candidates

have 30 days from the last day of the semester to complete all course requirements and provide evidence of satisfactory completion to the Registrar. More details are provided in the *University Catalog* under **Application for Degree**.

4. Following graduation from the OT Program, graduates may apply to take the NBCOT Certification Examination. Students must complete the NBCOT verification form, and submit it to the Department Chair for approval. It then goes to the Registrar. At this time students must request a final transcript "held for degree verification" in order for the verification form to be sent to NBCOT. Additional Information about the application process can be found on the NBCOT website, www.nbcot.org. This site provides information about documents required for eligibility determination, testing, and government recognition through registration, licensure or certification.

Academic Probation in the Occupational Therapy Department

Revised 2-12-14.
Revisions take effect 2-14-14.

- 1. Students placed on academic probation due earning a grade below a "B" (3.0) in any academic course or fieldwork placement in either of the Occupational Therapy Programs will result in academic probation and the need to retake the course of fieldwork placement as stated above in 'OT Degree Requirements' #3.
- 2. A cumulative GPA below a 3.0 for any semester will result in academic probation.
- 3. A grade of NC for any fieldwork experience, level I or II, will result in academic probation.
- 4. Academic probation will result from a third documented breach of related professional behaviors, as stated above in 'General Program Policies' #2b.
- 5. Academic probation could be one of the alternatives imposed if a student has broken the GVSU Student Code or the University policy on academic dishonesty, per the GVSU Undergraduate and Graduate Catalogs or the 2010 Occupational Therapy Code of Ethics & Ethics Standards.

Dismissal from the Occupational Therapy Department

Revised 2-12-14.

Revisions take effect 2-14-14.

The following situations will result in dismissal from the program:

- 1. Academic Dismissal may result from:
 - a. More than one semester of academic probation.
 - b. The need to repeat any two of the Occupational Therapy Professional Programs' courses or the need to repeat any fieldwork experience more than once.
 - c. Failure to earn above an 84% in a course being retaken, as this will entail not passing a course for the second time (see 'b' above).
- 2. Professional Behavior Dismissal will result from more than three documented breaches of professional behaviors, as determined by OT faculty and described in 'General Program Policies' #2b.

3. Any violation of the GVSU Student Code, the Occupational Therapy Code of Ethics & Ethics Standards, or policy related to academic dishonesty, as outlined in the GVSU Undergraduate and Graduate Catalog, deemed "flagrant" by the course instructor or Academic Fieldwork Coordinator, in conjunction with the Department Chair.

Academic Review for Students Challenging Academic Decisions

- 1. An Academic Review Committee will be organized, after a written memorandum challenging the decision is received by the Department Chair. The Committee will include:
 - a. Occupational Therapy Department Chair
 - b. An academic full-time faculty member in Occupational Therapy
 - c. A faculty member of the student's choice to represent the student (must be faculty in the College of Health Professions)
 - d. If appropriate, the Academic Fieldwork Coordinator.
- 2. The Committee will convene to review the academic information, determine the facts of the student's situation, and assess whether there may be legitimate mitigating circumstances to consider. The student will be required to present appropriate documentation to the Committee, through their chosen faculty representative, or by petitioning to appear before the Committee.
- 3. If it is determined that there may be mitigating circumstances operating, the Committee will then consider and offer alternatives as appropriate.
- 4. Once the Committee has identified the alternative action, a plan for implementation will be developed, including specific requirements and time lines as necessary for the student to be readmitted or to continue in the program. This plan must be approved by the Chair of the OT Department, prior to presentation to the student.
- 5. The approved plan must then be signed by the student and the Committee members.
- 6. A student's refusal to sign the plan, or failure to follow the plan as agreed upon, including adherence to deadlines, will void the appeal and the original academic decision will stand.
- 7. Students who wish to appeal an academic decision (either grade or program dismissal) shall follow Grievance Procedures as outlined in the GVSU Undergraduate & Graduate Catalog.

Leave of Absence

Students may be granted a leave of absence in cases of illness or other extenuating circumstances. To request a leave of absence, the student must submit a letter of request to the Department Chair detailing the length of leave requested, and the reason for this request. The chair will then review the request with faculty and inform the student within 15 days of receipt of the request. If a leave of absence is granted, the student will be informed of the steps necessary to move the process forward. Leave of Absences will be determined on a case-by-case basis, as well as determination of any remedial work needed.

Readmission to the University

The Occupational Therapy Department is under no obligation to assist students who have been dismissed from the university and wish to be readmitted. The Program may decide, however, to support a student's application for readmission, if determined that circumstances warrant such action. Regardless, the student has the right to appeal for readmission to the university with or without the Department's support.

STUDENT-FACULTY COMMUNICATION

Confidentiality

The Occupational Therapy Department adheres to Federal law ensuring confidentiality of information regarding students. Accordingly, we do not release lists of names, grades, or status in the program to any individual other than the involved students. We also release **NO INFORMATION OVER THE**TELEPHONE, since specific identification is not possible.

It is understood, however, that the faculty can and must discuss student performance among themselves in the privacy of faculty meetings. It is necessary for all faculty members to be apprised of any information that may affect academic performance, and it is in the best interest of students since not all faculty share the same perspective on student issues.

Students are also responsible for maintaining confidentiality appropriately. Avoid sharing academic or any information of a personal nature unless you are willing to have it known by all. Any information that is shared in the classroom under the auspices of confidentiality may also not be shared elsewhere. In all written or oral work, do not use any client names. Use only first initial or first names. Do not use any other identifying information related to the client, such as name of institution where the client was seen. Breaches of confidentiality may be considered a violation of ethics and possibly grounds for dismissal from the Program.

Advisor/Mentor Assignment

Each student who is admitted to one of the Occupational Therapy programs will be assigned an advisor/mentor who is a member of the Occupational Therapy faculty. Advisee assignments will be announced at student orientation. Students will be asked to meet with their advisor/mentor at the beginning of the program, and each semester of the academic portion of the program, to address program planning and professional development issues, as necessary. Advising sessions will be confidential, documented, signed by both faculty and student, and kept in the student's file.

Advising/Mentoring Appointments

The purpose of advising is to, 1) review professional behavior progress and goals, 2) discuss academic progress, 3) discuss progress in fieldwork, 4) mentor in the profession of occupational therapy. All students are encouraged to set up appointments to see their advisor at least once per Semester. It is the student's responsibility to arrange that appointment with the individual faculty member. Advising hours of faculty will be posted on their door, or written in course syllabi. The faculty is willing and able to provide additional mentorship to the students upon request.

Email Usage

Faculty will regularly check email during business hours <u>only</u>. <u>DO NOT</u> send email after hours and expect an immediate reply. You are provided with a Grand Valley e-mail account, <u>which you must use in all correspondence with the University</u>. The Department faculty will use University student e-mail addresses only to contact students. Please make sure you are acquainted with how to access and use your assigned email account. Many messages and important communications will be sent to you via this method. There will be many times when Occupational Therapy Department faculty will need to get messages to you. **This policy will be firmly enforced**.

Telephone and Address Changes

You must complete a student information change form if you have a new address or telephone number, and it must be delivered to CHS 247 to ensure it is changed within the program.

Mail Boxes

Check your student mail box regularly for faculty messages, returned work, etc.

Office Behavior

The CHP Graduate Programs Office (Suite 247) is the home of three departments, of which occupational therapy is only one. Because space is at a premium, noise level and congestion can become an issue for faculty and staff. Please be courteous in your use of the office by following these simple rules:

- 1. Refrain from using the office unless you have a specific purpose or appointment.
- 2. If the office is crowded, please come back at another time to complete your business.
- 3. Remember that the office copy machine is not available for student use. Please arrange to use a copy machine elsewhere on campus designated for student use.

Housekeeping Issues

- 1. Please take care of personal garbage in your classroom and Model Living Suite.
- 2. Wash any dishes that you use.
- 3. Throw away old food in the refrigerator.
- 4. Return all items cleaned to their original location at the end of class.
- 5. The Model Living Suite is not a student lounge. Please do not use for lunch or relaxation.

OCCUPATIONAL THERAPY STUDENT EXPENSES

Tuition and Fees

Tuition is calculated based on whether you are a graduate resident or nonresident. All hybrid students regardless of their home location are considered residents due to the extensive on line component. Please see the *Grand Valley State University Undergraduate and Graduate Catalog* for a current outline of tuition costs. Variable fees are assessed for each course by the GVSU Registrar.

Books

Expect that first semester books will be costly because you will purchase books to be used throughout the program. Please be very careful if you decide to purchase textbooks off campus. You risk purchasing the wrong books and they are often not returnable. Your instructors will advise you as to what texts you need for your courses and these will be available at the University Bookstore. Be careful you do not "sell back" texts that are planned for use in upcoming courses. Many of these texts are considered appropriate for the development of a personal library, and selection is often based on the potential for that future use in mind.

Approximate Related Expenses

Health Insurance GVSU students may subscribe to a

commercial health insurance company.

CPR License Check providers for costs

Student membership in AOTA Check AOTA website for costs

(www.aota.org)

Student membership in MiOTA (includes association publications, and

special fees for conference

attendance)

Fieldwork Housing and/or transportation Variable

Financial Aid

There are a number of types of financial aid available for students, including student loans, grants and scholarships. Most of this information can be found in the *Grand Valley State University Undergraduate* and *Graduate Catalog* or from the Office of Financial Aid. In addition, there are specific scholarships that are designed for Occupational Therapy students, which may be available if you meet the criteria. Some of these are offered by potential employers, some are offered by private organizations and foundations, and some are offered by the State or Federal government. The Department will attempt to have some of this information available to students, however, it is important to remember that we may not be fully current in this area, so it is to your advantage to apprise yourself of what kind of scholarships might be available, by checking at the Library, and following up on any other potential scholarship leads through the Office of Financial Aid.

INCLUSION AND EQUITY

Grand Valley State University is committed to equal opportunity, affirmative action, and nondiscrimination on the basis of race, creed, age, sex, national origin, handicap, disability, or other prohibited matters, in all educational programs, activities, and conditions of employment. Questions and concerns should be directed to the Vice President of Inclusion & Equity, 200 Student Services Building, extension 1-3585. If you believe any accommodation of a handicap or disability is necessary, Michigan and Federal law requires that you notify GVSU after you know or should have known that the accommodation was needed. Questions and concerns regarding an accommodation should be directed to the Disability Support Services Coordinator, 200 Student Services Building, extension 1-2490.

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Approved: August, 1996, Revised: 7/04, 7/05, 7/06, 7/07, 7/08, 7/09, 8/10, 7/11' 7/12

APPENDIX A

Core Values and Attitudes of Occupational Therapy Practice

Elizabeth Kanny, MA, OT

for Standards and Ethics Commission – Ruth A. Hansen, Ph.D., OT, FAOTA, Chairperson

Introduction

In 1985, the American Occupational Therapy Association funded the Professional and Technical Role Analysis Study (PATRA). This study had two purposes: to delineate the entry-level practice of OTs and OTAs through a role analysis and to conduct a task inventory of what practitioners actually do. Knowledge, skills, and attitude statements were to be developed to provide a basis for the role analysis. The PATRA study completed the knowledge and skills statements. The Executive Board subsequently charged the Standards and Ethics Commission (SEC) to develop a statement that would describe the attitudes and values that undergird the profession of occupational therapy. The SEC wrote this document for use by AOTA members.

The list of terms used in this statement was originally constructed by the American Association of Colleges of Nursing (AACN) (1986). The PATRA committee analyzed the knowledge statements that the committee had written and selected those terms from the AACN list that best identified the values and attitudes of our profession. This list of terms was then forwarded to SEC by the PATRA Committee to use as the basis for the Core Values and Attitudes paper.

The development of this document is predicated on the assumption that the values of occupational therapy are evident in the official documents of the American Occupational Therapy Association. The official documents that were examined are: (1) "Dictionary Definition of Occupational Therapy" (April 1986), (2) The Philosophical Base of Occupational Therapy (AOTA, Resolution C #531-79), (3) Essentials and Guidelines for an Accredited Educational Program for the Occupational Therapist (AOTA, 1991a), (4) Essentials and Guidelines for an Accredited Educational Program for the Occupational Therapy Assistant (AOTA, 1991b), and (5) Occupational Therapy Code of Ethics (AOTA, 1988). It is further assumed that these documents are representative of the values and beliefs reflected in other occupational therapy literature.

A **value** is defined as a belief or an ideal to which an individual is committed. Values are an important part of the base or foundation of a profession. Ideally, these values are embraced by all members of the profession and are reflected in the members' interactions with those persons receiving services, colleagues, and the society at large. Values have a central role in a profession, and are developed and reinforced throughout an individual's life as a student and as a professional.

Actions and attitudes reflect the values of the individual. An attitude is the disposition to respond positively or negatively toward an object, person, concept, or situation. Thus, there is an assumption that all professional actions and interactions are rooted in certain core values and beliefs.

Seven Core Concepts

In this document, the **core values and attitudes** of occupational therapy are organized around seven basic concepts--altruism, equality, freedom, justice, dignity, truth, and prudence. How these core values and attitudes are expressed and implemented by occupational therapy practitioners may vary depending upon the environments and situations in which professional activity occurs.

Altruism is the unselfish concern for the welfare of others. This concept is reflected in actions and attitudes of commitment, caring, dedication, responsiveness, and understanding.

Equality requires that all individuals be perceived as having the same fundamental human rights and opportunities. This value is demonstrated by an attitude of fairness and impartiality. We believe that we should respect all individuals, keeping in mind that they may have values, beliefs, or life styles that are different from our own. Equality is practiced in the broad professional arena, but is particularly important in day-to-day interactions with those individuals receiving occupational therapy services.

Freedom allows the individual to exercise choice and to demonstrate independence, initiative, and self-direction. There is a need for all individuals to find a balance between autonomy and societal membership that is reflected in the choice of various patterns of interdependence with the human and nonhuman environment. We believe that individuals are internally and externally motivated toward action in a continuous process of adaptation throughout the life span. Purposeful activity plays a major role in developing and exercising self-direction, initiative, interdependence, and relatedness to the world. Activities verify the individual's ability to adapt, and they establish a satisfying balance between autonomy and societal membership. As professionals, we affirm the freedom of choice for each individual to pursue goals that have personal and social meaning.

Justice places value on the upholding of such moral and legal principles as fairness, equity, truthfulness, and objectivity. This means we aspire to provide occupational therapy services for all individuals who are in need of these services and that we will maintain a goal-directed and objective relationship with all those served. Practitioners must be knowledgeable about and have respect for the legal rights of individuals receiving occupational therapy services. In addition, the occupational therapy practitioner must understand and abide by the local, state, and federal laws governing professional practice.

Dignity emphasizes the importance of valuing the inherent worth and uniqueness of each person. This value is demonstrated by an attitude of empathy and respect for self and others. We believe that each individual is a unique combination of biologic endowment, sociocultural heritage, and life experiences. We view human beings holistically, respecting the unique interaction of the mind, body, and physical and social environment. We believe that dignity is nurtured and grows from the sense of competence and self-worth that is integrally linked to the person's ability to perform valued and relevant activities. In occupational therapy we emphasize the importance of dignity by helping the individual build on his or her unique attributes and resources.

Truth requires that we be faithful to facts and reality. Truthfulness or veracity is demonstrated by being accountable, honest, forthright, accurate, and authentic in our attitudes and actions. There is an obligation to be truthful with ourselves, those who receive services, colleagues, and society. One way that this is exhibited is through maintaining and upgrading professional competence. This happens, in part, through an unfaltering commitment to inquiry and learning, to self-understanding and to the development of an interpersonal competence.

Prudence is the ability to govern and discipline oneself through the use of reason. To be prudent is to value judiciousness, discretion, vigilance, moderation, care, and circumspection in the management of one's affairs, to temper extremes, make judgments and respond on the basis of intelligent reflection and rational thought.

Summary

Beliefs and values are those intrinsic concepts that underlie the core of the profession and the professional interactions of each practitioner. These values describe the profession's philosophy and provide the basis for defining purpose. The emphasis or priority that is given to each value may change as one's professional career evolves and as the unique characteristics of a situation unfold. This evolution of values is developmental in nature. Although we have basic values that cannot be violated, the degree to which certain values will take priority at a given time is influenced by the specifics situation and the environment in which it occurs. In one instance dignity may be a higher priority than truth; in prudence may be chosen

over freedom. As we process information and make decisions, the weight of the values that we hold may change. The practitioner faces dilemmas because of conflicting values and is required to engage in thoughtful deliberation to determine where the priority lies in a given situation.

The challenge for us all is to know our values, be able to make reasoned choices in situations of conflict, and be able to clearly articulate and defend our choices. At the same time, it is important that all members of the profession be committed to a set of common values. This mutual commitment to a set of beliefs and principles that govern our practice can provide a basis for clarifying expectations between the recipient and the provider of services. Shared values empower the profession and, in addition, build trust among ourselves and with others.

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FROM: The American Journal of Occupational Therapy, December 1993, Vol. 47, No. 12, pp. 1085-1086

APPENDIX B

Occupational Therapy Code of Ethics and Ethics Standards (2010)

PREAMBLE

The American Occupational Therapy Association (AOTA) *Occupational Therapy Code of Ethics and Ethics Standards* (2010) ("Code and Ethics Standards") is a public statement of principles used to promote and maintain high standards of conduct within the profession. 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.

Fundamental to the mission of the occupational therapy profession is the therapeutic use of everyday life activities (occupations) with individuals or groups for the purpose of participation in roles and situations in home, school, workplace, community, and other settings. "Occupational therapy addresses the physical, cognitive, psychosocial, sensory, and other aspects of performance in a variety of contexts to support engagement in everyday life activities that affect health, well being, and quality of life" AOTA, 2004). Occupational therapy personnel have an ethical responsibility primarily to recipients of service and secondarily to society.

The *Occupational Therapy Code of Ethics and Ethics Standards (2010)* was tailored to address the most prevalent ethical concerns of the profession in education, research, and practice. The concerns of stakeholders including the public, consumers, students, colleagues, employers, research participants, researchers, educators, and practitioners were addressed in the creation of this document. A review of issues raised in ethics cases, member questions related to ethics, and content of other professional codes of ethics were utilized to ensure that the revised document is applicable to occupational therapists, occupational therapy assistants, and students in all roles.

The historical foundation of this Code and Ethics Standards is based on ethical reasoning surrounding practice and professional issues, as well as on empathic reflection regarding these interactions with others (see e.g., AOTA, 2005, 2006). This reflection resulted in the establishment of principles that guide ethical action, which goes beyond rote following of rules or application of principles. Rather, *ethical action* it is a manifestation of moral character and mindful reflection. It is a commitment to benefit others, to virtuous practice of artistry and science, to genuinely good behaviors, and to noble acts of courage.

While much has changed over the course of the profession's history, more has remained the same. The profession of occupational therapy remains grounded in seven core concepts, as identified in the Core Values and Attitudes of Occupational Therapy Practice (AOTA, 1993): altruism, equality, freedom, justice, dignity, truth, and prudence. Altruism is the individual's ability to place the needs of others before their own. Equality refers to the desire to promote fairness in interactions with others. The concept of *freedom* and personal choice is paramount in a profession in which the desires of the client must guide our interventions. Occupational therapy practitioners, educators, and researchers relate in a fair and impartial manner to individuals with whom they interact and respect and adhere to the applicable laws and standards regarding their area of practice, be it direct care, education, or research (justice). Inherent in the practice of occupational therapy is the promotion and preservation of the individuality and dignity of the client, by assisting him or her to engage in occupations that are meaningful to him or her regardless of level of disability. In all situations, occupational therapists, occupational therapy assistants, and students must provide accurate information, both in oral and written form (truth). Occupational therapy personnel use their clinical and ethical reasoning skills, sound judgment, and reflection to make decisions to direct them in their area(s) of practice (prudence). These seven core values provide a foundation by which occupational therapy personnel guide their interactions with others, be they students, clients, colleagues, research participants, or communities. These values also define the ethical principles to which the profession is committed and which the public can expect.

The Occupational Therapy Code of Ethics and Ethics Standards (2010) is a guide to professional conduct when ethical issues arise. Ethical decision making is a process that includes awareness of how the outcome will impact occupational therapy clients in all spheres. Applications of Code and Ethics Standards Principles are considered situation-specific, and where a conflict exists, occupational therapy personnel will pursue responsible efforts for resolution. These Principles apply to occupational therapy personnel engaged in any professional role, including elected and volunteer leadership positions.

The specific purposes of the Occupational Therapy Code of Ethics and Ethics Standards (2010) are to

1. Identify and describe the principles supported by the occupational therapy profession.

- 2. Educate the general public and members regarding established principles to which occupational therapy personnel are accountable.
- 3. Socialize occupational therapy personnel to expected standards of conduct.
- 4. Assist occupational therapy personnel in recognition and resolution of ethical dilemmas.

The *Occupational Therapy Code of Ethics and Ethics Standards (2010*) define the set of principles that apply to occupational therapy personnel at all levels:

DEFINITIONS

- Recipient of service: Individuals or groups receiving occupational therapy.
- Student: A person who is enrolled in an accredited occupational therapy education program.
- **Research participant:** A prospective participant or one who has agreed to participate in an approved research project.
- **Employee:** A person who is hired by a business (facility or organization) to provide occupational therapy services.
- **Colleague:** A person who provides services in the same or different business (facility or organization) to which a professional relationship exists or may exist.
- Public: The community of people at large.

BENEFICENCE

Principle 1. Occupational therapy personnel shall demonstrate a concern for the well-being and safety of the recipients of their services.

Beneficence includes all forms of action intended to benefit other persons. The term *beneficence* connotes acts of mercy, kindness, and charity (Beauchamp & Childress, 2009). Forms of beneficence typically include altruism, love, and humanity. Beneficence requires taking action by helping others, in other words, by promoting good, by preventing harm, and by removing harm. Examples of beneficence include protecting and defending the rights of others, preventing harm from occurring to others, removing conditions that will cause harm to others, helping persons with disabilities, and rescuing persons in danger (Beauchamp & Childress, 2009).

Occupational therapy personnel shall

- A. Respond to requests for occupational therapy services (e.g., a referral) in a timely manner as determined by law, regulation, or policy.
- B. Provide appropriate evaluation and a plan of intervention for all recipients of occupational therapy services specific to their needs.
- C. Reevaluate and reassess recipients of service in a timely manner to determine if goals are being achieved and whether intervention plans should be revised.
- D. Avoid the inappropriate use of outdated or obsolete tests/assessments or data obtained from such tests in making intervention decisions or recommendations.
- E. Provide occupational therapy services that are within each practitioner's level of competence and scope of practice (e.g., qualifications, experience, the law).
- F. Use, to the extent possible, evaluation, planning, intervention techniques, and therapeutic equipment that are evidence-based and within the recognized scope of occupational therapy practice.
- G. Take responsible steps (e.g., continuing education, research, supervision, training) and use careful judgment to ensure their own competence and weigh potential for client harm when generally recognized standards do not exist in emerging technology or areas of practice.
- H. Terminate occupational therapy services in collaboration with the service recipient or responsible party when the needs and goals of the recipient have been met or when services no longer produce a measurable change or outcome.
- I. Refer to other health care specialists solely on the basis of the needs of the client.
- J. Provide occupational therapy education, continuing education, instruction, and training that are within the instructor's subject area of expertise and level of competence.
- K. Provide students and employees with information about the Code and Ethics Standards, opportunities to discuss ethical conflicts, and procedures for reporting unresolved ethical conflicts.
- L. Ensure that occupational therapy research is conducted in accordance with currently accepted ethical guidelines and standards for the protection of research participants and the dissemination of results.

- M. Report to appropriate authorities any acts in practice, education, and research that appear unethical or illegal.
- N. Take responsibility for promoting and practicing occupational therapy on the basis of current knowledge and research and for further developing the profession's body of knowledge.

NONMALEFICENCE

Principle 2. Occupational therapy personnel shall intentionally refrain from actions that cause harm.

Nonmaleficence imparts an obligation to refrain from harming others (Beauchamp & Childress, 2009). The principle of nonmaleficence is grounded in the practitioner's responsibility to refrain from causing harm, inflecting injury, or wronging others. While beneficence requires action to incur benefit, nonmaleficence requires non-action to avoid harm (Beauchamp & Childress, 2009). Nonmaleficence also includes an obligation to not impose risks of harm even if the potential risk is without malicious or harmful intent. This principle often is examined under the context of *due care*. If the standard of due care outweighs the benefit of treatment, then refraining from treatment provision would be ethically indicated (Beauchamp & Childress, 2009).

Occupational therapy personnel shall

- A. Avoid inflicting harm or injury to recipients of occupational therapy services, students, research participants, or employees.
- B. Make every effort to ensure continuity of services or options for transition to appropriate services to avoid abandoning the service recipient if the current provider is unavailable due to medical or other absence or loss of employment.
- C. Avoid relationships that exploit the recipient of services, students, research participants, or employees physically, emotionally, psychologically, financially, socially, or in any other manner that conflicts or interferes with professional judgment and objectivity.
- D. Avoid engaging in any sexual relationship or activity, whether consensual or nonconsensual, with any recipient of service, including family or significant other, student, research participant, or employee, while a relationship exists as an occupational therapy practitioner, educator, researcher, supervisor, or employer.
- E. Recognize and take appropriate action to remedy personal problems and limitations that might cause harm to recipients of service, colleagues, students, research participants, or others.
- F. Avoid any undue influences, such as alcohol or drugs, that may compromise the provision of occupational therapy services, education, or research.
- G. Avoid situations in which a practitioner, educator, researcher, or employer is unable to maintain clear professional boundaries or objectivity to ensure the safety and well-being of recipients of service, students, research participants, and employees.
- H. Maintain awareness of and adherence to the Code and Ethics Standards when participating in volunteer roles.
- I. Avoid compromising client rights or well-being based on arbitrary administrative directives by exercising professional judgment and critical analysis.
- J. Avoid exploiting any relationship established as an occupational therapist or occupational therapy assistant to further one's own physical, emotional, financial, political, or business interests at the expense of the best interests of recipients of services, students, research participants, employees, or colleagues.
- K. Avoid participating in bartering for services because of the potential for exploitation and conflict of interest unless there are clearly no contraindications or bartering is a culturally appropriate custom.
- L. Determine the proportion of risk to benefit for participants in research prior to implementing a study.

AUTONOMY AND CONFIDENTIALITY

Principle 3. Occupational therapy personnel shall respect the right of the individual to self-determination.

The principle of autonomy and confidentiality expresses the concept that practitioners have a duty to treat the client according to the client's desires, within the bounds of accepted standards of care and to protect the client's confidential information. Often *autonomy* is referred to as the *self-determination* principle. However, respect for autonomy goes beyond acknowledging an individual as a mere agent and also acknowledges a "person's right to hold views, to make choices, and to take actions based on personal values and beliefs" (Beauchamp & Childress, 2009, p. 103). Autonomy has become a prominent principle in health care ethics; the right to make a determination regarding care decisions that directly impact the life of the service recipient should reside with that individual. The principle of autonomy and confidentiality also applies to students in an educational program, to participants in research studies, and to the public who seek information about occupational therapy services.

Occupational therapy personnel shall

- A. Establish a collaborative relationship with recipients of service including families, significant others, and caregivers in setting goals and priorities throughout the intervention process. This includes full disclosure of the benefits, risks, and potential outcomes of any intervention; the personnel who will be providing the intervention(s); and/or any reasonable alternatives to the proposed intervention.
- B. Obtain consent before administering any occupational therapy service, including evaluation, and ensure that recipients of service (or their legal representatives) are kept informed of the progress in meeting goals specified in the plan of intervention/care. If the service recipient cannot give consent, the practitioner must be sure that consent has been obtained from the person who is legally responsible for that recipient.
- C. Respect the recipient of service's right to refuse occupational therapy services temporarily or permanently without negative consequences.
- D. Provide students with access to accurate information regarding educational requirements and academic policies and procedures relative to the Occupational Therapy Department/educational institution.
- E. Obtain informed consent from participants involved in research activities, and ensure that they understand the benefits, risks, and potential outcomes as a result of their participation as research subjects.
- F. Respect research participant's right to withdraw from a research study without consequences.
- G. Ensure that confidentiality and the right to privacy are respected and maintained regarding all information obtained about recipients of service, students, research participants, colleagues, or employees. The only exceptions are when a practitioner or staff member believes that an individual is in serious foreseeable or imminent harm. Laws and regulations may require disclosure to appropriate authorities without consent.
- H. Maintain the confidentiality of all verbal, written, electronic, augmentative, and non-verbal communications, including compliance with HIPAA regulations.
- I. Take appropriate steps to facilitate meaningful communication and comprehension in cases in which the recipient of service, student, or research participant has limited ability to communicate (e.g., aphasia or differences in language, literacy, culture).
- J. Make every effort to facilitate open and collaborative dialogue with clients and/or responsible parties to facilitate comprehension of services and their potential risks/benefits.

SOCIAL IUSTICE

Principle 4. Occupational therapy personnel shall provide services in a fair and equitable manner.

Social justice, also called distributive justice, refers to the fair, equitable, and appropriate distribution of resources. The principle of social justice refers broadly to the distribution of all rights and responsibilities in society (Beauchamp & Childress, 2009). In general, the principle of social justice supports the concept of achieving justice in every aspect of society rather than merely the administration of law. The general idea is that individuals and groups should receive fair treatment and an impartial share of the benefits of society. Occupational therapy personnel have a vested interest in addressing unjust inequities that limit opportunities for participation in society (Braveman & Bass-Haugen, 2009). While opinions differ regarding the most ethical approach to addressing distribution of health care resources and reduction of health disparities, the issue of social justice continues to focus on limiting the impact of social inequality on health outcomes.

Occupational therapy personnel shall

- A. Uphold the profession's altruistic responsibilities to help ensure the common good.
- B. Take responsibility for educating the public and society about the value of occupational therapy services in promoting health and wellness and reducing the impact of disease and disability.
- C. Make every effort to promote activities that benefit the health status of the community.
- D. Advocate for just and fair treatment for all patients, clients, employees, and colleagues, and encourage employers and colleagues to abide by the highest standards of social justice and the ethical standards set forth by the occupational therapy profession.
- E. Make efforts to advocate for recipients of occupational therapy services to obtain needed services through available means.
- F. Provide services that reflect an understanding of how occupational therapy service delivery can be affected by factors such as economic status, age, ethnicity, race, geography, disability, marital status, sexual orientation, gender, gender identity, religion, culture, and political affiliation.
- G. Consider offering *pro bono* ("for the good") or reduced-fee occupational therapy services for selected individuals when consistent with guidelines of the employer, third-party payer, and/or government agency.

PROCEDURAL JUSTICE

Principle 5. Occupational therapy personnel shall comply with institutional rules, local, state, federal, and international laws and AOTA documents applicable to the profession of occupational therapy.

Procedural justice is concerned with making and implementing decisions according to fair processes that ensure "fair treatment" (Maiese, 2004). Rules must be impartially followed and consistently applied to generate an unbiased decision. The principle of procedural justice is based on the concept that procedures and processes are organized in a fair manner and that policies, regulations, and laws are followed. While *the law* and *ethics* are not synonymous terms, occupational therapy personnel have an ethical responsibility to uphold current reimbursement regulations and state/territorial laws governing the profession. In addition, occupational therapy personnel are ethically bound to be aware of organizational policies and practice guidelines set forth by regulatory agencies established to protect recipients of service, research participants, and the public.

Occupational therapy personnel shall

- A. Be familiar with and apply the Code and Ethics Standards to the work setting, and share them with employers, other employees, colleagues, students, and researchers.
- B. Be familiar with and seek to understand and abide by institutional rules, and when those rules conflict with ethical practice, take steps to resolve the conflict.
- C. Be familiar with revisions in those laws and AOTA policies that apply to the profession of occupational therapy and inform employers, employees, colleagues, students, and researchers of those changes.
- D. Be familiar with established policies and procedures for handling concerns about the Code and Ethics Standards, including familiarity with national, state, local, district, and territorial procedures for handling ethics complaints as well as policies and procedures created by AOTA and certification, licensing, and regulatory agencies.
- E. Hold appropriate national, state, or other requisite credentials for the occupational therapy services they provide.
- F. Take responsibility for maintaining high standards and continuing competence in practice, education, and research by participating in professional development and educational activities to improve and update knowledge and skills.
- G. Ensure that all duties assumed by or assigned to other occupational therapy personnel match credentials, qualifications, experience, and scope of practice.
- H. Provide appropriate supervision to individuals for whom they have supervisory responsibility in accordance with AOTA official documents and local, state, and federal or national laws, rules, regulations, policies, procedures, standards, and guidelines.
- I. Obtain all necessary approvals prior to initiating research activities.
- J. Report all gifts and remuneration from individuals, agencies, or companies in accordance with employer policies as well as state and federal guidelines.
- K. Use funds for intended purposes, and avoid misappropriation of funds.
- L. Take reasonable steps to ensure that employers are aware of occupational therapy's ethical obligations as set forth in this Code and Ethics Standards and of the implications of those obligations for occupational therapy practice, education, and research.
- M. Actively work with employers to prevent discrimination and unfair labor practices, and advocate for employees with disabilities to ensure the provision of reasonable accommodations.
- N. Actively participate with employers in the formulation of policies and procedures to ensure legal, regulatory, and ethical compliance.
- O. Collect fees legally. Fees shall be fair, reasonable, and commensurate with services delivered. Fee schedules must be available and equitable regardless of actual payer reimbursements/contracts.
- P. Maintain the ethical principles and standards of the profession when participating in a business arrangement as owner, stockholder, partner, or employee, and refrain from working for or doing business with organizations that engage in illegal or unethical business practices (e.g., fraudulent billing, providing occupational therapy services beyond the scope of occupational therapy practice).

VERACITY

Principle 6. Occupational therapy personnel shall provide comprehensive, accurate, and objective information when representing the profession.

Veracity is based on the virtues of truthfulness, candor, and honesty. The principle of *veracity* in health care refers to comprehensive, accurate, and objective transmission of information and includes fostering the client's understanding of such information (Beauchamp & Childress, 2009). Veracity is based on respect owed to others. In communicating with others, occupational therapy personnel implicitly promise to speak truthfully and not deceive the listener. By entering into a relationship in care or research, the recipient of service or research participant enters into a contract that includes a right to truthful information (Beauchamp & Childress, 2009). In addition, transmission of information is incomplete without also ensuring that the recipient or participant understands the information provided. Concepts of veracity must be carefully balanced with other potentially competing ethical principles, cultural beliefs, and organizational policies. Veracity ultimately is valued as a means to establish trust and strengthen professional relationships. Therefore, adherence to the Principle also requires thoughtful analysis of how full disclosure of information may impact outcomes.

Occupational therapy personnel shall

- A. Represent the credentials, qualifications, education, experience, training, roles, duties, competence, views, contributions, and findings accurately in all forms of communication about recipients of service, students, employees, research participants, and colleagues.
- B. Refrain from using or participating in the use of any form of communication that contains false, fraudulent, deceptive, misleading, or unfair statements or claims. C. Record and report in an accurate and timely manner, and in accordance with applicable regulations, all information related to professional activities.
- D. Ensure that documentation for reimbursement purposes is done in accordance with applicable laws, guidelines, and regulations.
- E. Accept responsibility for any action that reduces the public's trust in occupational therapy.
- F. Ensure that all marketing and advertising are truthful, accurate, and carefully presented to avoid misleading recipients of service, students, research participants, or the public.
- G. Describe the type and duration of occupational therapy services accurately in professional contracts, including the duties and responsibilities of all involved parties.
- H. Be honest, fair, accurate, respectful, and timely in gathering and reporting fact-based information regarding employee job performance and student performance.
- I. Give credit and recognition when using the work of others in written, oral, or electronic media.
- I. Not plagiarize the work of others.

FIDELITY

Principle 7. Occupational therapy personnel shall treat colleagues and other professionals with respect, fairness, discretion, and integrity.

The principle of fidelity comes from the Latin root *fidelis* meaning loyal. *Fidelity* refers to being faithful, which includes obligations of loyalty and the keeping of promises and commitments (Veatch & Flack, 1997). In the health professions, fidelity refers to maintaining good-faith relationships between various service providers and recipients. While respecting fidelity requires occupational therapy personnel to meet the client's reasonable expectations (Purtillo, 2005), Principle 7 specifically addresses fidelity as it relates to maintaining collegial and organizational relationships. Professional relationships are greatly influenced by the complexity of the environment in which occupational therapy personnel work. Practitioners, educators, and researchers alike must consistently balance their duties to service recipients, students, research participants, and other professionals as well as to organizations that may influence decision-making and professional practice.

Occupational therapy personnel shall

- A. Respect the traditions, practices, competencies, and responsibilities of their own and other professions, as well as those of the institutions and agencies that constitute the working environment.
- B. Preserve, respect, and safeguard private information about employees, colleagues, and students unless otherwise mandated by national, state, or local laws or permission to disclose is given by the individual.
- C. Take adequate measures to discourage, prevent, expose, and correct any breaches of the Code and Ethics Standards and report any breaches of the former to the appropriate authorities.
- D. Attempt to resolve perceived institutional violations of the Code and Ethics Standards by utilizing internal resources first.
- E. Avoid conflicts of interest or conflicts of commitment in employment, volunteer roles, or research.
- F. Avoid using one's position (employee or volunteer) or knowledge gained from that position in such a manner that gives rise to real or perceived conflict of interest among the person, the employer, other Association

- members, and/or other organizations.
- G. Use conflict resolution and/or alternative dispute resolution resources to resolve organizational and interpersonal conflicts.
- H. Be diligent stewards of human, financial, and material resources of their employers, and refrain from exploiting these resources for personal gain.

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Adopted by the Representative Assembly 2010CApr17.

Note. This document replaces the following rescinded Ethics documents 2010CApril18: the Occupational *Therapy Code of Ethics (2005) (American Journal of Occupational Therapy, 59,* 639–642); the *Guidelines to the Occupational Therapy Code of Ethics (American Journal of Occupational Therapy, 60,* 652–658); and the *Core Values and Attitudes of Occupational Therapy Practice (American Journal of Occupational Therapy, 47,* 1085–1086).

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APPENDIX C

Grand Valley State University College of Health Professions Occupational Therapy Department

Grading Rubric for Oral Presentations

50	pts

Content — Major areas of significance should be included here, either as presented in class, or as researched. These include an introduction that relates the presentation to course topics and demonstrates a logical progression through the content. Degree of detail should cover all facets of the topic, to the extent possible. Content of handouts should contain information the audience can use in the future, and include references. Degree of depth presented should provide audience with enough information for them to carry out or otherwise make use of the presentation topic. Presentation must include a summary conclusion and an opportunity for audience to ask questions.

25 pts

Presentation Style/Skill — Includes the basics of a good presentation, including voice adequate to be heard by all, moderate pace, smoothness of transitions, eye contact, enthusiasm, ability to present using brief notes (not reading your presentation), flow of presentation, good posture, appropriate movements, gestures and facial expressions that engage the audience in the presentation, but are not distracting. Attire should be professional (work casual, minimally).

15 pts

Instructional Technology/Handouts — Includes the quality and use of technology selected, which may be slides, overheads, PowerPoint, flipchart, smart board or blackboard, and posters, their size and clarity for easy reading and synopsis by audience, and relationship to topic as presented (it should enhance the presentation, rather than just be added on to meet the requirement). For handouts, grading will consider the quality of the handouts as well as the substance (ability to enhance the presentation), resources and references as appropriate. A printout of the PowerPoint is not an adequate handout.

10pts

Personalization/Uniqueness — Includes ways in which the presentation helped to engage the audience. Could include such things as a unique perspective, a different perspective on the content, appropriate personal experiences, a skit or other humorous element, audience participation, or any number of innovative approaches to the presentation that will make it stand out/memorable.

100 pts

Overall Grade — Based on the scores generated in the above categories, a final grade is calculated, based on 100 points, using the standard OT Department Grading Scale as shown in the <u>Student Handbook</u>.

C. Grapczynski, Ed.D, OTR 2005

Grand Valley State University College of Health Professions Occupational Therapy Department

Grading Rubric for Written Papers

- Content This category needs to be complete and include an appropriate introduction to the paper, indicating what the paper is about and what can be found in it. This should be followed by a well-developed discussion on each of the main topics presented. This would include breadth beyond one's own perspective, depth that allowed the reader to identify underlying assumptions, if appropriate, to see that all of the major aspects of the topic have been covered. Once each section has been completed, the paper should end with a conclusion or summary that tells the reader what this paper has been about, and what implications it has for the course/content being studied.
- Writing Style/Skill This category needs to demonstrate clear, concise sentence structure that allows the reader to follow the train of thought of the writer. All work will be in APA style, unless otherwise indicated by the instructor. Appropriate citations must be made when using the work/ideas of others, and it should be clear in the paper who is speaking (the writer or someone else for whom there is a citation). Plagiarism will not be tolerated (see Student Handbook).
- 25 pts Grammar/Mechanics The final written product should demonstrate good grammar, composition, and form, using words and expressions correctly, matching nouns and their pronouns, singulars and plurals, and structures of sentences in paragraphs or sections of the paper as appropriate. All papers should be corrected for spelling, punctuation and other mechanical flaws. It is recommended that students take advantage of the Graduate Consultants available at the downtown Writing Center at GVSU to get assistance with basic writing if needed. Also, use a dictionary and thesaurus as a matter of course. The writer or others should proofread all final papers prior to submission to the instructor, to ensure that all such errors have been caught and corrected.
- Overall Grade Based on the scores generated above, a final grade is calculated, based on 100 points, and using the standard OT Department Grading Scale as shown in the <u>Student Handbook</u>. Outstanding papers (A) have no mechanical or grammatical errors, use a style that is consistent with program requests, and shows mastery of sentence and paragraph composition and form. Content is well developed, demonstrating a breadth of perspective and depth of thinking appropriate to the topic. One-half point deductions will be made for errors of grammar, style, form and mechanics. Content deficiency will be addressed on a case by case basis, at the instructor's discretion.

C. Grapczynski, Ed.D, OTR 2005

APPENDIX D

Department of Occupational Therapy Grand Valley State University Competency Achievement Contract

Student:	
Course:	
Competency to be addressed:	
A. Student Action Plan (outline pla	an and steps you feel are needed to achieve competency)
B. Action Plan agreed upon by Cou	urse Instructor and Student
C. Date for Action Plan to be comp	oleted:
D. <u>Signatures</u>	Student/Date
	Course Instructor/Date
	Student Advisor/Date
E. Completion of Contract	Course Instructor/Date

APPENDIX E

GRAND VALLEY STATE UNIVERSITY COLLEGE OF HEALTH PROFESSIONS OCCUPATIONAL THERAPY DEPARTMENT PROFESSIONAL BEHAVIORS WORKSHEET

Name:		Ad	visor		
Dates of review: (1)_		(2)	3)	4)	
,,-	(blue) Fall I	(red) Wint	(green) Spr/Sum		(black) Fall II

Students are expected to demonstrate the professional behaviors as noted with a consistency of 76 - 100% of the time (4) by the last semester of the didactic program (before leaving for fieldwork).

Scoring: Almost Always (76- 100%) 4

Mostly (51 - 75%) 3 Sometimes (26 - 50%) 2 Rarely (1 - 25%) 1

Goal?	I. Pr	ofessionalism				
	Α.	Desirable Personal Attributes I am able to:				
		Work independently	1	2	3	4
		Take responsibility for my share of				
		collaborative work	1	2	3	4
		Demonstrate intrinsic motivation	1	2	3	4
		Take a leader or follower role appropriately	1	2	3	4
		Take responsibility for my own actions & feelings	1	2	3	4
		Recognize my personal strengths	1	2	3	4
		Recognize my personal weaknesses	1	2	3	4
		Display self-confidence without arrogance	1	2	3	4
		Balance my personal and professional obligations	1	2	3	4
		Maintain a generally positive demeanor with clients				
		and colleagues	1	2	3	4
		Maintain an appropriate perspective when				
		under stress	1	2	3	4
		Demonstrate a strong work ethic	1	2	3	4
		Be honest and trustworthy in my dealings with others	1	2	3	4
		Demonstrate the integrity of my moral principles	1	2	3	4
		Demonstrate an appropriate sense of humor	1	2	3	4
		Show respect for the beliefs and values of others	1	2	3	4
		Respond to social cues appropriately	1	2	3	4
		Exhibit empathy for others	1	2	3	4
		Resolve conflicts to the best advantage of most	1	2	3	4
		Set appropriate limits and boundaries with others	1	2	3	4

	Take emotional risks to enhance my learning	1	2	3	4
Goal?	B. Expectations and Protocols - I am able to:				
	Be appropriate in terms of my attitude and				
	demeanor	1	2	3	4
	Advocate for myself appropriately	1	2	3	4
	Arrive promptly for class, breaks, and appointments	1	2	3	4
	Complete and submit <u>all</u> requirements on time	1	2	3	4
	Prioritize my activities effectively	1	2	3	4
	Use my time wisely and productively	1	2	3	4
	Come to class appropriately prepared	1	2	3	4
	Be appropriately professional in my attire	1	2	3	4
	Be safety conscious for peers and clients	1	2	3	4
	Contact faculty in case of absence/lateness	1	2	3	4
	Practice ethical behavior, including fairness, confider	ntiality	у,		
	respect for the rights of others, information ac	curac	у,		
	competence, and policy adherence	1	2	3	4
	Seek and respond appropriately to critical				
	and constructive feedback	1	2	3	4
	C. Communication Skills – I am able to:				
	Oral Communication				
	Verbalize ideas and thoughts clearly and succinctly	1	2	3	4
	Use appropriate professional language and				
	terminology when speaking	1	2	3	4
	Demonstrate active listening skills	1	2	3	4
	Recognize and use non-verbal communication				
	appropriately (no eye rolling, mocking, etc.)	1	2	3	4
	Use assertiveness appropriately	1	2	3	4
	Adapt my language to the level of my audience's				
	understanding	1	2	3	4
	Written Communication				
	Express myself accurately and succinctly in all	٠	_	_	_
	written communications	1	2	3	4
	Structure reports and essays to include an		_	-	
	introduction, a body, and a conclusion	1	2	3	4
	Use proper mechanics, grammar & punctuation	1	2	3	4
	Use APA format appropriately in all my work	1	2	3	4
	Use appropriate professional language and		_	_	•
	terminology in my writing	1	2	3	4
	Adapt my language to the level of my readers'	4	•	_	
	understanding	1	2	3	4
	Address content breadth and depth appropriately	1	2	3	4
	Write legibly for documentation	1	2	3	4
Goal?	II. Higher Order Cognitive Functioning				
	A. Critical Thinking – I am able to:				

·	Identify significant problems in the field	1	2	3	4
	Accurately prioritize problems	1	2	3	4
	Consider all facets of a problem to find solutions	1	2	3	4
	Seek information from a variety of sources	1	2	3	4
	Demonstrate tolerance for ambiguity and				
	uncertainty	1	2	3	4
	Use my observation skills effectively	1	2	3	4
	Integrate theory with practice effectively	1	2	3	4
	Differentiate between thoughts and feelings	1	2	3	4
	Critically reflect on my own thoughts and				
	behaviors currently and from the past	1	2	3	4
	Interpret information accurately	1	2	3	4
	Question & critique my personal assumptions	1	2	3	4
	Be independent of authority and the beliefs of				
	traditions or society	1	2	3	4
	Generalize ideas from one context to another	1	2	3	4
·	Display sound professional judgment	1	2	3	4
	Synthesize and evaluate information effectively	1	2	3	4
В.	Desirable Intellectual Traits - I am able to:				
	Seek out intellectual challenges	1	2	3	4
	Actively explore new learning independently	1	2	3	4
	Ask appropriate questions for clarification and/or				
	guidance	1	2	3	4
	Recognize the need for research in the				
	professions	1	2	3	4
	Willingly devote time and energy to the learning proce	SS			
	as a primary priority in my life at this time	1	2	3	4
	Realize self-directed learning as an adult skill	1	2	3	4
C.	Professional Socialization - I am able to:				
	See the need for, and pursue, additional				
	learning opportunities when presented	1	2	3	4
	Understand and use the OT process effectively	1	2	3	4
	Demonstrate a commitment to the program	1	2	3	4
	Demonstrate my commitment to the profession				
	and to its core concept of occupation	1	2	3	4
	Demonstrate my internalization of OT professional				
	norms and values in my professional encounters	1	2	3	4
	Appropriately advocate for the profession	1	2	3	4
	See the need to be active in the professional				
	organization at both state & national levels	1	2	3	4
	Willingly address the needs of others before my own	1	2	3	4
	Actively participate in service/volunteer work in				
	my community	1	2	3	4

My Professional Behavior Goals

Goals Ach	Prog	Ach	Not
1.			
2.			
3.			
4.			
Commontes			

Comments:

Advi	sor Sig	gnature		Date	Student Signature		Date			
Init	Dte	Init Dte	Init	Dte	Init	Dte	Init	Dte	Init	Dte
Init	Dte	Init Dte	 Init	Dte	Init	Dte	Init	Dte	 Init	Dte
Init	Dte	Init Dte	 Init	Dte	Init	Dte	Init	Dte	 Init	Dte

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APPENDIX F

Grand Valley State University

Occupational Therapy

Social Media Guidelines

As an institution, Grand Valley recognizes the value of social media applications and supports their use. Social media is a powerful communications tool that has a significant impact on organizational and professional reputations. Because social media blurs the line between personal voice and institutional voice, Grand Valley has crafted guidelines to help clarify how best to enhance and protect personal and professional reputations when participating in social media.

Grand Valley maintains official pages on various social media platforms. You can find links to those pages at www.gvsu.edu/socialmedia. These pages are maintained for the purpose of reaching people and engaging them with the university and its services.

Although you are encouraged to use social media in your work, please respect university time and resources as you provide or read content. During office hours your first priority as a Grand Valley employee is to execute the business of the university.

Following are some guidelines for using social media at Grand Valley.

General recommendations

Be Respectful

- Be a leader, exercise good judgment, take the high ground
- Converse like a real person and remember the people who are reading your posts are real people
- Audiences who may be reading your posts could include current and prospective students, faculty members, staff members, donors, alumni, legislators, parents, school counselors, the media, or future employers

Be Transparent

- Clearly state your name, title, department, university don't be a mole
- Admit mistakes and fix them

Add Value

- Share your knowledge
- Be accurate
- Stay on topic
- Don't spam
- Reconsider Before You Post
- Posts can never be eradicated because of archival systems, forwards, retweets, etc., so think before you
 post, especially when discussing something potentially sensitive
- Maintain confidentiality

Be Responsive to Feedback

- Continue the conversation flow
- Build community

Link to Grand Valley Webpages

To provide further information that will remain up-to-date, link to Grand Valley webpages. This also increases the search engine optimization of those pages. Follow Information Technology <u>policies and procedures</u>.

Posting on behalf of Grand Valley

Avatars

The use of Grand Valley logos and protected trademarks (i.e., Louie) as avatars on social media sites is reserved for use on official university sites and should not be used by individuals. Photography showcasing a university location in a positive light is acceptable. See <u>identity standards for social media</u>.

Respect copyrights and fair use

- Make sure you attribute when you borrow content
- Note that Grand Valley <u>logos</u> and <u>names</u> are trademarked so use appropriately

The following are registered trademarks:

GVSU®
Grand Valley State University®
Grand Valley State®
Louie the Laker®

The following are trademarks:

GVSU Lakers™ Grand Valley State University Lakers™ Grand Valley State Lakers™

Note:

The university has additional legal rights in all words, phrases, images, and letters that, when used, give the appearance of a university connection or endorsement including, but not limited to:

Grand Valley
GV
Lakers

Political Statements

Refrain from making them when representing Grand Valley (See 2.2.3 in GVSU's Administrative Manual)

Define Your Role

Check with your supervisor to be clear about when and how you should post or respond to posts as a Grand Valley employee.

Existing Grand Valley Conduct Policies

Social media users acting on behalf of the university must adhere to all Grand Valley policies and procedures including:

- Acceptable use policy
- Copyright information
- IT security
- FERPA/privacy policies
- Student code

Posting Photographs or Videos

Follow the guidelines below when posting photographs or videos on your social media sites.

- Photos of children should not be posted without written consent from the parents or guardians.
- Photos on social networking sites must be appropriate. As a guideline, they should be photos that could be
 posted on the <u>university's official webpage</u>. Examples of photos that should be avoided include but are not
 limited to photos involving: alcohol, nudity, medical and hospital patients, and graphic scenes.
- Give appropriate photo credits.

Use of Social Media Sites for the Placement of Advertising

Grand Valley's web policy regarding advertising and sponsors [http://gvsu.edu/s/4c] applies to official social media pages.

Free Expression

Grand Valley encourages freedom of expression and recognizes the value of diverse opinions. However, page administrators have a responsibility to remove comments, images, or other material deemed inflammatory, vulgar, or otherwise inappropriate, especially when they appear to threaten the welfare or safety of the poster or others.

Application and Enforcement

The purpose of these guidelines is to have a set of standards for social media pages and blogs that can be applied equitably across all areas of the university and can assist department leaders, Web managers, and others in planning future Web use. The standards are designed to protect the reputation of the university and the safety of alumni, students, prospective students, and others. If absolutely necessary, the university, through various offices, has the ability to remove content that does not comply.

Confidentiality and Privacy

Beware of the damages to individuals or the university that can result through inappropriate disclosure of personal or confidential information. Possible damages include:

- Suit for defamation
- Copyright, patent, or trademark infringement claims
- Privacy or human rights complaint
- Workplace grievance under a collective agreement or unfair labor practice complaint
- Criminal charges with respect to obscene or hate materials
- Damage to the university's reputation and business interests

Personal site guidelines

Be Transparent

Feel free to identify yourself as a Grand Valley faculty or staff member, but be clear that your views shared on your personal site are yours and are not necessarily shared by the university.

Liability

You are legally liable for what you post, no matter if it is your own site or that of others. Possible liabilities include:

- Copyright infringement
- Breach of confidentiality
- Defamation
- Libel
- Obscenity

Grand Valley Logos

Do not use any Grand Valley logos or registered trademarks on your personal sites for any reason and especially not to promote any products, causes, or political parties or candidates

Protect Yourself

Be careful not to reveal information that could put you at risk for identity theft (<u>Protecting Reputations</u> Online in Plain English)

Please call Institutional Marketing if you have questions (616) 331-2525

In the spirit of good social media practice, we would like to acknowledge that we especially referenced these three sites while compiling these guidelines:

http://brandresources.depaul.edu/vendor_quidelines/q_socialmedia.aspx

http://webcomm.fiu.edu/2009/05/social-media-guidelines/

http://mashable.com/2009/06/02/social-media-policy-musts/