



# **OCCUPATIONAL THERAPY ASSISTANT PROGRAM STUDENT HANDBOOK**

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## I. Parkland College Occupational Therapy Assistant Program

### Specific Required Accreditation and Related Organization Information

The Parkland College Occupational Therapy Assistant Program is accredited by the **Accreditation Council for Occupational Therapy Education (ACOTE)** a recognized accrediting body by both the United States Department of Education and the Council for Higher Education Accreditation. ACOTE can be contacted at 301.652.6611x2914 or 7501 Wisconsin Avenue, Suite 510E Bethesda, MD 20814.

### Parkland College Mission and Purposes

The mission of Parkland College is to engage the community in learning. The following purposes are of equal importance in fulfilling the mission of Parkland College.

- Serve student by providing:
  - High-quality and responsive developmental, technical-vocation, transfer, and lifelong education programs
  - High-quality and responsive support services
  - A climate throughout the college that values and promotes integrity, inquiry, diversity, inclusion, active citizenship, global awareness, and academic freedom.
- Serve employees by providing a supportive and responsive work environment.
- Serve the larger community by providing services and resources that promote the intellectual, cultural, and economic development of Illinois Community College District 505.

### OTA Program Mission Statement

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

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

1. Actively assume the ethical, self-disciplined roles and responsibilities of an entry-level Certified Occupational Therapy Assistant by abiding by the OT scope of practice and state licensure laws.
2. Demonstrate entry-level OTA competence in knowledge and performance to implement relevant OT interventions that promote a person's engagement in occupation and enhance quality of life for individuals and populations.

3. Engage in effective clinical reasoning skills for clinical problem-solving and effective selection of interventions for individuals and populations in both traditional practice settings and emerging practice areas.
4. Function as an advocate for occupational justice and the occupational rights of individuals, and populations.
5. Effectively collaborate, communicate, and engage in working partnerships with occupational therapists and other service providers.
6. Actively engage in activities that promote personal growth, professional growth, and behavior through lifelong learning.
7. Develop community-based programs to meet the occupational and cultural needs of the community at large.

The Occupational Therapy Assistant Program's mission is consistent with the **Parkland College Mission and Purposes** and the **2023 Standards for an Accredited Educational Program for the Occupational Therapy Assistant**, Accreditation Council for Occupational Therapy Education (ACOTE), American Occupational Therapy Association, Inc. The program is committed to meeting or exceeding professional program accreditation standards.

### Parkland Statement of Core Values

As an institution of learning, Parkland College cultivates inquiry, practical application of knowledge, and broad enrichment across our community. The following values are important to the fulfillment of Parkland College's mission to provide programs and services of high quality to our students and community.

- **Honesty and Integrity**  
In our daily operations, our classrooms, and all of our interactions, it is essential that we communicate openly, truthfully, and without hypocrisy.
- **Fairness and Just Treatment**  
We advocate and strive for respect, equity, and justice in all of our operations and proceedings.
- **Responsibility**  
We believe that employees and students are personally and mutually accountable for their actions as they carry out their duties. We understand the need to balance the pursuit of our own well-being with concern for others. Likewise, we understand the importance of balancing personal accountability with graciousness in the acceptance of help from others.
- **Multiculturalism**  
We celebrate the diversity in both our community and our world. Our goal is to recognize, promote, utilize, and educate one another regarding the unique qualities and shared humanity of all people and cultures.
- **Education**  
We provide a forum for innovation, critical thinking, open inquiry, and lifelong learning opportunities.
- **Public Trust**  
In our efforts to serve the community, we honor the trust placed in us by our citizenry. We also rely on our community to guide and advise us as we continue to serve its needs.

## OTA Program Statement of Core Values and Philosophy

The philosophy of the Parkland College Occupational Therapy Assistant Program is consistent with the *Philosophical Base of Occupational Therapy* (American Occupational Therapy Association [AOTA], 2017), and the *Occupational Therapy Fieldwork Education: Value and Purpose* (2016) and is congruent with the *Mission and Purposes, and Statement of Values of Parkland College*, and the *Mission and Purposes of the OTA Program*. The philosophy assumes incorporation of all tenets within these documents as well as those articulated in the *Occupational Therapy Code of Ethics* (AOTA, 2020), the *Guide to Occupational Therapy Practice* (Moyers & Dale, 2007), and the *Occupational Therapy Practice Framework*, Fourth Edition (AOTA, 2020). The Parkland College OTA Program Philosophy Statement is comprised of three parts outlining beliefs about people, occupational therapy and the educational process.

Each **person** is a unique, complex being with innate dignity and worth comprised of interdependent, dynamic cognitive-psycho-physiological and spiritual processes which evolve and change across the life span. People have an innate drive to explore and master the environment, comprised of objects, occupational forms/tasks, social organizations and cultures (Kielhofner, 2008), which both influence and are influenced by person-task-environment transactions (Baum & Christiansen, 2014). Humans are occupational beings (AOTA, 2015).

Occupations are comprised of goal-directed actions that have meaning and purpose that are integral to a person's daily habits, routines, roles, and behavior (AOTA, 2020). Occupations provide form, function and meaning to each person's life (Rowles, 2000) and successful participation in meaningful occupations has a positive influence on a person's health (Black & Wells, 2007). Optimum integrity and function are contingent upon each person's capacity for lifelong adaptation to internal and external changes as reflected in their occupational choices, behavior, roles, and achievements. People can accept, reject, and modify their occupational tasks and environments and have the potential to create, destroy, or modify linkages between themselves and their engagement in the environment (Gillen & Brown, 2023; Dunn, Brown, & McGuigan, 1994). Each person's capacity for intellect, choice and action are associated with specific corresponding rights and responsibilities through which each person assumes accountability for his or her behavior and health.

The program's **philosophy of occupational therapy** is congruent with the descriptions of the profession's domain and process as presented in the *Occupational Therapy Practice Framework* (AOTA, 2020) and the *Guide to Occupational Therapy Practice* (Moyers & Dale, 2007). Occupational therapy interventions are directed towards maximizing clients' potential for health and wellness through the profession's unique focus on the dynamic relationship of human health and occupational behavior. Occupational therapy uses the dynamic interaction between the therapist, the client, and valued occupations, activities, contexts, and environments to promote a person's participation and satisfaction in life (AOTA, 2020). Occupational therapy is based on the belief that purposeful activity and occupations, with their organizing qualities, may be used to influence human performance and the effects of disease and disability, and to elicit maximal adaptation (Moyers, 2007; Gillen & Brown, 2023). Occupational therapy practitioners



(occupational therapists and assistants) collaborate to provide specialized client-centered, planned interventions through the therapeutic use of self, the use of preparatory methods and tasks, purposeful activities, occupation-based activities and client-caregiver education and training (AOTA, 2020). There are six primary occupational therapy intervention strategies:

1. **Establish/restore:** Interventions focus on correction and change in client factors, performance skills, habits, routines and roles through use primarily preparatory techniques/modalities and purposeful activities to restore occupational performance.
2. **Adapt/modify:** Interventions emphasize changing procedures, objects, tasks, environments, and interactions within occupational performance skills, roles, contexts, and areas.
3. **Alter:** Interventions are selected to find “best fit” to afford access to and pursuit of occupational choices and interests.
4. **Maintain:** Interventions focused on sustaining regained skills and occupational participation. The assumption is that the client’s abilities would decline without maintenance.
5. **Prevent:** Interventions emphasize facilitation and support of new learning in a person’s life skills and the promotion of on-going lifestyle changes through the use of occupational strategies which promote wellness, satisfaction, and life-long learning.
6. **Create:** Focus is on enhancing occupational performance and pursuits in different social and physical environments (AOTA, 2020; Brown, 2014; Dunn, Brown, & McGuigan, 1994).

We believe that to provide effective evaluation and treatment that the occupational therapy practitioners (OTPs) should consider each of these levels of intervention for recipients of occupational therapy. We believe that OTPs function as advocates for occupational justice, health promotion and well-being for individuals and populations. We value these principles as essential to actualize our unique professional role and responsibilities as practitioners in occupational therapy, as elucidated in the *Philosophical Base of Occupational Therapy* (2017).

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

1. Good practice encourages student-faculty contact.
2. Good practice encourages cooperation among students.
3. Good practice encourages active learning.
4. Good practice gives prompt feedback.
5. Good practice emphasizes time on task.

6. Good practice communicates high expectations.
7. Good practice respects diverse talents and ways of knowing (p.7-8).

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

We believe that the development of an OTA **learning community** is essential for our students' learning, for their growth as professionals, for collaboration with fellow students and instructors, and for our functioning as a vital living experience. The OTA curriculum design is a well-integrated curriculum model that supports a learning community that links faculty and students, OTA courses to each other, and the academic setting to community contexts. According to MacGregor, Smith, Matthews, and Gabelnick, (2002), learning communities intentionally link courses into integrated curriculums that foster a coherent collaborative learning environment that has a shared sense of purpose and group identity, encourages active and collaborative learning, and creates a transactional approach to teaching and learning. The OTA faculty intentionally promotes the development of a learning community within each class of students and between the first and second year students and faculty. Diversity in learning, cultural backgrounds and roles are recognized and valued for the different perspectives they bring to the learning experience and to our personal and professional growth.

The OTA Program's instructional philosophy and methodology incorporates concepts from **cognitive and learning theories** that foster use of research on the brain and its functioning, application of cognitive, learning and social constructivism (Bruffee, 1999, McCombs, 1997), mastery learning (Bloom, 1956; Morrison, Ross, & Kemp, 2001) and recognition and facilitation of connected and separate knowing (Marrs & Benton, 2008). Small group, **active learning activities** and "learning stations" are used to promote whole-brain learning, and the relational context for shared meaning-making and associative learning. Structured class notes and lecture material contain **critical thinking** exercises. The use of technology in both the hybrid and classroom environment allows students to engage in non-linear learning and shared connectedness through discussion forums requiring on research, assessment, and elaboration on specific, assigned topics (McCombs & Vakili, 2005). The topical outlines provide clear structure and direction while the assignments, discussions, laboratory, and fieldwork experiences foster the exchange of ideas and learning and motivational strategies, as well as they aid development of personal and professional teams and networks.

We believe that the integrated curriculum model is a highly effective way to teach and learn. The OTA curriculum's spiral dynamic matrix organizes learning using repetition, elaboration and organization strategies described by Weinstein and Meyer (1991), and thematic maps and redundancy described by Caine & Caine (1997). A variety of instructional approaches are incorporated to promote guided, independent learning. Community resourcefulness and initiative are valued and promoted. The program engages students in a **collaborative**

**learning** process includes “active and diverse learning within and beyond the classroom; a collaborative process builds on prior knowledge and experience; continuous professional judgement, evaluation, and self-reflection; and lifelong learning” (AOTA, 2015, p. 1). **Self-reflective journals** are required during all levels of fieldwork education to facilitate developing a new perspective on oneself and how one learns through service-learning experiences.

The OTA faculty assists students in recognizing and strengthening their use of **self-regulated learning strategies**. Self-regulated learning is characterized by awareness of thinking, use of strategies, and situated motivation to enhance self-directed learning (Zimmerman & Schunk, 2001). Self-regulated learning strategies such as resource management, goal setting, self-assessment, motivational strategies, and use of metacognitive strategies are presented during classroom and advisement sessions. The OTA Program applies **sensorimotor self-regulation** learning strategies based on the Alert Program (Williams & Shellenberger, 1996) to the college classroom to promote autonomy in maintaining effective attentional levels for learning at home and school. Through self-assessment and the student is in charge of identifying effective and ineffective learning strategies.

The OTA faculty use **formative and summative assessment** approaches to determine the effectiveness of learning. Formative assessment is a self-assessment process that provides valuable feedback to faculty about the students’ formative learning processes, or how well the learning is progressing. OTA formative assessments are regularly used in the assessment of reading comprehension and knowledge-based learning. **Classroom assessment techniques** (Angelo & Cross, 1993) are used to obtain student feedback about how well they are able to understand the content through current instructional methods. This feedback loop system communicates that the students and faculty are responsive to individual needs for clarification and/or other methods of instruction to aid learning. Summative assessments are used to assess the students’ ability to use long-term retention and recall strategies to access knowledge, and their ability to comprehend and apply OT concepts and skills. Formative assessments are also conducted during fieldwork education to accurately coach student’s clinical performance.

Summative assessments are regularly scheduled in the form of exams, homework assignments, papers, projects, and fieldwork performance evaluations.

The OTA Program sponsors the development of a **professional role identity** with its corresponding level of clinical reasoning and responsibilities through role modeling, graded peer instruction responsibilities, and through professional feedback during classroom and fieldwork education.

**Effective work ethics** are facilitated through structured learning activities, professional behavior expectations and feedback. OTA educators are encouraged to foster life-long learning skills such as analysis, critical thinking, problem-solving and application skills as well as professional behavior and service management skills. **Service learning and fieldwork education** build links between classroom learning and community, and student and professional roles. Service learning is differentiated from fieldwork education by their

goals, types of assignments, and the methods of evaluation.

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

### References

- American Occupational Therapy Association. (2020). Occupational therapy practice framework: Domain and process (4th ed.). *American Journal of Occupational Therapy*, 74(Suppl. 2), 1-87. <https://doi.org/10.5014/ajot.2020.74S2001>
- American Occupational Therapy Association. (2020). Occupational therapy code of ethics. *American Journal of Occupational Therapy*, 69(Suppl. 3), 6913410030. <http://dx.doi.org/10.5014/ajot.2015.696S03>
- American Occupational Therapy Association. (2016). Occupational therapy fieldwork education: Value and purpose. *American Journal of Occupational Therapy*, 70(Suppl. 2), 7012410060. <http://dx.doi.org/10.5014/ajot.2016.706S06>
- American Occupational Therapy Association. (2017). Philosophical base of occupational therapy. *American Journal of Occupational Therapy*, 71(Suppl. 2), 7112410045. <https://doi.org/10.5014/ajot.716S06>
- American Occupational Therapy Association. (2015). Philosophy of occupational therapy education. *American Journal of Occupational Therapy*, 69(Suppl. 3), 691341005 . <http://dx.doi.org/10.5014/2ajot.2015.696S17>
- Angelo, T. A., & Cross, K. P. (1993). *Classroom assessment techniques: A handbook for college teachers*. (2<sup>nd</sup> ed.), San Francisco: Jossey-Bass Publishers.
- Baum, C., Christiansen, C. & Bass, J. (2014). Person-environment-occupation-performance model. In C. Christiansen C. Baum and J. Bass (Eds.), *Occupational therapy: Performance, participation, and well-being*. (4<sup>th</sup> ed.), Thorofare, NJ: SLACK.
- Black, R.M. & Wells, S.A. (2007). *Culture & occupation: A model of empowerment in occupational therapy*. Bethesda, MD: American Occupational Therapy Association, Inc.
- Bloom, B.S. (1956). *Taxonomy of Educational Objectives*. New York: David McKay Company Inc.
- Bruffee, K. A. (1999). *Collaborative learning: higher education, interdependence, and the authority of knowledge*, (2<sup>nd</sup> ed.), Baltimore, MD: The John Hopkins University Press.

- Caine, R. N. & Caine, G. (1997). *Making connections: Teaching and the human brain*. New York: Innovative Learning Publications.
- Chickering, A. W. & Gamson, Z. F. (1991). Seven principles for good practice in undergraduate education. *New Directions for Teaching and Learning*, 47, San Francisco: Jossey-Bass.
- Cross, K. P. (1997). *Developing professional fitness through classroom assessment and classroom research: The Cross papers*, No.1, Mission Viejo, CA: League for Innovation in the Community College.
- Cross, K. P., (1998). *Opening windows on learning: The Cross papers*, No. 2, Mission Viejo, CA: League for Innovation in the Community College.
- Gillen, G., & Brown, C. (2023). *Willard and Spackman's Occupational Therapy* (14th ed.). Wolters Kluwer Health.
- Kielhofner, G. (2008). *A model of human occupation: Theory and application*, (4<sup>th</sup> ed.), Baltimore: Lippincott Williams & Wilkins, Co.
- MacGregor, J., Smith, B., Matthews, R., & Gabelnick, F. (2002). Learning community models. [On-line]. Available: [http://nw4.caspercollege.edu/lc/downloads/2002\\_lc\\_models.pdf](http://nw4.caspercollege.edu/lc/downloads/2002_lc_models.pdf)
- Marrs, H. & Benton, S. L. (2008). Relationships between separate and connected knowing and approaches to learning. *Sex Roles* 60, 57-66.
- McCombs, B. L. (1997). *Learner-centered psychological principles: Guidelines for school redesign and reform (revised ed.)*, Washington, DC: American Psychological Association, APA Task Force on Psychology in Education.
- McCombs, B. L. & Vakili, D. (2005). Learner-centered framework for e-learning. *Teacher College Record* 108(8), 1582-1600.
- Morrison, G., Ross, S. & Kemp, J. (2001). *Designing Effective Instruction*, 3rd edition. New York: John Wiley and Sons Inc.
- Moyers, P.A., & Dale, L. M. (2007). *The guide to occupational therapy practice*. (2<sup>nd</sup> ed.), Bethesda, MD: AOTA Press.
- Rowles, G. D. (2000). Habituation and being in place. *Occupational Therapy Journal of Research*, 20 (Suppl. 1), 52S-67S.
- Weinstein, C. E. & Meyer, D. K. (1991). Cognitive learning strategies and college teaching. *New Directions for Teaching and Learning*, 45, 15-26.
- Williams, M. & Shellenberger, S. (1996). *How does your engine run?" A leader's guide to the alert*

*program for self-regulation*. Albuquerque, NM: TherapyWorks, Inc.

Zimmerman, B. J., & Schunk, D. (Eds.) (2001). *Self-regulated learning and academic achievement: Theoretical Perspectives*. Taylor and Francis e-Library.

## Parkland College Civility Statement

Parkland College Core Values of fair and just treatment and responsibility serve as guide posts for civility. Parkland College is committed to campus wide civility by cultivating a community where the faculty, staff, and students:

- Respect people and property
- Show empathy and tolerance
- Demonstrate concern for and fairness towards others
- Employ critical thinking and patience
- Accept accountability for their actions

## OTA Program Goals and Objectives

In accordance with the Mission and Purposes of Parkland College, the OTA Program's Mission, and the Description of the Profession Statement (AOTA, 2010), the Parkland College Occupational Therapy Assistant Program's educational program prepares students to:

1. Demonstrate strong clinic reasoning (critical thinking) and problem-solving to effectively use entry-level knowledge and performance skills of the Certified Occupational Therapy Assistant in application, analysis and evaluation of therapeutic interventions based on the philosophy of occupational therapy and well-grounded in the theoretical principles, technology, and standards of practice in occupational therapy.
2. Demonstrate professional ethics and responsible conduct in accordance with the profession's educational, legal, and ethical standards of practice.
3. Effectively utilize professional communication including written, verbal, and non-verbal communication skills in client and team interactions, in therapeutic use of self and in documentation of client services according to reimbursement criteria.
4. Demonstrate civic engagement and professional responsibility for service to communities and populations that are underserved and would benefit from the philosophy, knowledge, and skills of occupational therapy.
5. Advocate, promote and market the profession of occupational therapy and therapeutic interactions for diverse populations across the life span within the variety of practice contexts, both traditional and emerging practices, in accordance with practice framework of occupational therapy and the credentialing bodies.
6. Work collaboratively with persons, caregivers, families, team members and the public to plan, adapt and implement occupational therapy services that promote health and wellness with respect for each person's inherent dignity, occupational nature and right to quality of life.
7. Effective use educational methods and the teaching-learning process with clients, families, significant others, colleagues, other service providers and the public.

8. Engage in evidence-based practice, professional development skills and life-long learning to maintain on-going professional competency.

### Health Professions Structure

Parkland College Health Professions is comprised of 17 career areas. Each career areas is managed by a program director. Didactic (lecture), lab and clinical portions of the career areas are taught by full and part-time faculty. Students have the right to be heard and to appeal decisions made by the program director and/or faculty. Students who wish to appeal a grade or have a situation that needs attention, the student should follow the Health Professions Chain of Command.

1. Course lecture, lab, or clinical faculty
2. Course coordinator (often the lecture faculty in a lecture, lab, and clinical course).
3. Program Director
4. Health Professions Faculty Chair
5. Professional Council on Academic Evaluation/Hearing
6. Health Professions Dean

If not resolved, follow the Parkland College Student Policies and Procedures

found at: [https://www.parkland.edu/Audience/Current-Students/Student-](https://www.parkland.edu/Audience/Current-Students/Student-Policies-Procedures)

[Policies-Procedures](https://www.parkland.edu/Audience/Current-Students/Student-Policies-Procedures)

### Statement on Health Profession Policies and Policy Compliance

The OTA program complies with all student policies and procedures approved by the Parkland College Board of Trustees including the Student Conduct Code, Student Grievance Policies and Procedures, Student Rights and Responsibilities, and Student Dismissal. (Refer to current college catalog and student policies and procedures:

<http://www.parkland.edu/studentLife/policies>)

In addition to College policies, the Health Professions division has developed a set of policies for Health Profession students. The Health Professions division publishes policies that adhere to principles of quality educational practice as well as policies that protect the students, faculty and patients or clients. Health Profession policies are available on Cobra in every Health Professions course. If a policy or procedure changes after publications are printed or viewed, the web version of that document is updated immediately and will be considered the most updated and the version that will be followed.

### Course Content: Curriculum Design, Scope, & Sequence

Curriculum Design:

The Parkland College OTA Program curriculum design is a structured, non-traditional, integrated curriculum model that effectively synthesizes problem-based (bottom-up) approaches with client-centered, occupation-based (top-down) approaches. The characteristics of a problem-based curriculum are considered necessary for effective preparation of the entry-level OTA clinician into



the primarily problem-oriented health care system focused on performance skills, techniques, and client factors. The characteristics of a client-centered, occupation-based curriculum are considered essential to address the unique philosophy, role, and process of occupational therapy in evaluating occupational needs and in fostering improved “engagement in occupation” in the healthcare and community service systems. The client-centered, occupation-based approach guides students to identify and utilize occupation as the focus of all therapeutic interactions.

The OTA courses in this curriculum are sequenced as follows:

- First Year, Fall Courses
  - OTA 111: Introduction to OT
  - OTA 112: Therapeutic Media (includes fieldwork activities)
- First Year, Spring Courses
  - OTA 113: Health and Occupation I
  - OTA 114: Therapeutic Process I
  - OTA 115: Fieldwork I/Clinic II
- Second Year, Fall Courses
  - OTA 211: Health and Occupation II (hybrid course)
  - OTA 212: Therapeutic Process II
  - OTA 213: Fieldwork II/Clinic I
  - OTA 214: OT Theory
- Second Year, Spring Courses
  - OTA 215: Health and Occupation III (hybrid course)
  - OTA 216: Therapeutic Process III
  - OTA 217: Fieldwork II/Clinic II
  - OTA 218: Therapeutic Groups and Populations

This integrated curriculum uses a variety of instructional approaches that are incorporated to promote guided, independent learning. The learning activities are selected, guided, and evaluated by the faculty and students to fulfill the objectives of the program and to address the diversity of student needs and learning styles. To meet these needs, OTA program incorporates an online component using the Cobra Learning System to provide materials each week that include topic outlines, PowerPoint presentations, handouts, discussion boards, quizzes, and links to videos and credible websites thus addressing various learning styles. Additionally, the OTA program has three hybrid courses (OTA 113: Health and Occupation I; OTA 211: Health and Occupation II; OTA 215: Health and Occupation III) that allow the student to learn independently during off-campus weeks and then apply this knowledge through case-based projects and seminars during on-campus weeks.

The **spiral aspect of the curriculum** differentiates its structure from more traditional, linear sequential models. Rather than providing a traditional-based course on a specific lifespan, Parkland College’s OTA Program incorporates pediatrics, adolescence/young adults, middle-aged adults and geriatrics into each Health and Occupation course and Therapeutic Process course.

The various complexities of diagnoses and the impact on occupation are further divided among the semesters using a function/dysfunction continuum. In this design, the sequence of content is graded and linked to all previous content and is accommodated, associated, and differentiated through the progression of learning activities. The course sequence allows for continued teaching throughout the curriculum. The spiral aspect of the curriculum model is reminiscent of similar spiral matrices used to describe models of learning (Caine & Caine, 1994), cognition and cognitive disabilities (Allen, 1992), sensory integration and self-actualization (Bundy, Lane, Fisher, & Murray, 2002), human occupation (Kielhofner, 2008), spatiotemporal adaptation (Gilfoyle, Grady & Moore, 1990) and genetic biology (Marieb, 2004). (Refer to Figure 1). The spiraling aspect carefully provides students with opportunities to “revisit” and “recall” previously learned content each semester through repetition (**built-in redundancy**) so that core concepts and skills are retained. At the same time, the students are learning new related concepts or skill sets, so that core knowledge and skills are further developed, expanded, modified, combined, and elaborated upon for use in problem-solving and application to increasingly more complex case studies. The students are challenged to progressively **synthesize and integrate** previously learned concepts and skills within new applications and new contexts. For example, students learn activity analysis based on the Framework in the following sequence:

- In the first semester in OTA 112: Therapeutic Media students learn the basics of activity analysis.
- Next, activity analysis is “revisited” during the second semester in OTA 114: Therapeutic Process I to be used as a tool for selecting, matching and or modifying therapeutic activities. However, in OTA 114: Therapeutic Process I, new content is linked to the previous concepts used in activity analysis so that the activity analysis process becomes more detailed, refined, and enriched for application to case studies.
- In the third semester, each new frame of reference presented in the OTA 214: OT Theory adds to the core knowledge of activity analysis and further expands, focuses, and modifies the activity analysis process within its domain.
- By the fourth semester, the students are learning how to apply several frames of reference in the selection and modification of the activities and contexts while concurrently learning how to develop group activity analytical skills.

Another example to describe the spiral aspect is noted as follows:

- Students learn basic principles of positioning and mobility during the first semester in OTA 112: Therapeutic Media.
- In the second semester students learn new strategies and techniques of positioning and mobility in OTA 114: Therapeutic Process I for persons with hip fractures.
- During the third semester, OTA 212: Therapeutic Process II further develop this content for persons with cerebral palsy and cerebrovascular accidents and in the same semester, OTA 214: OT Theory expands information on strategies and techniques through the lens of the neurodevelopmental frame of reference
- In the fourth semester, OTA 216: Therapeutic Process III challenges students to use these strategies for persons with severe head injuries.

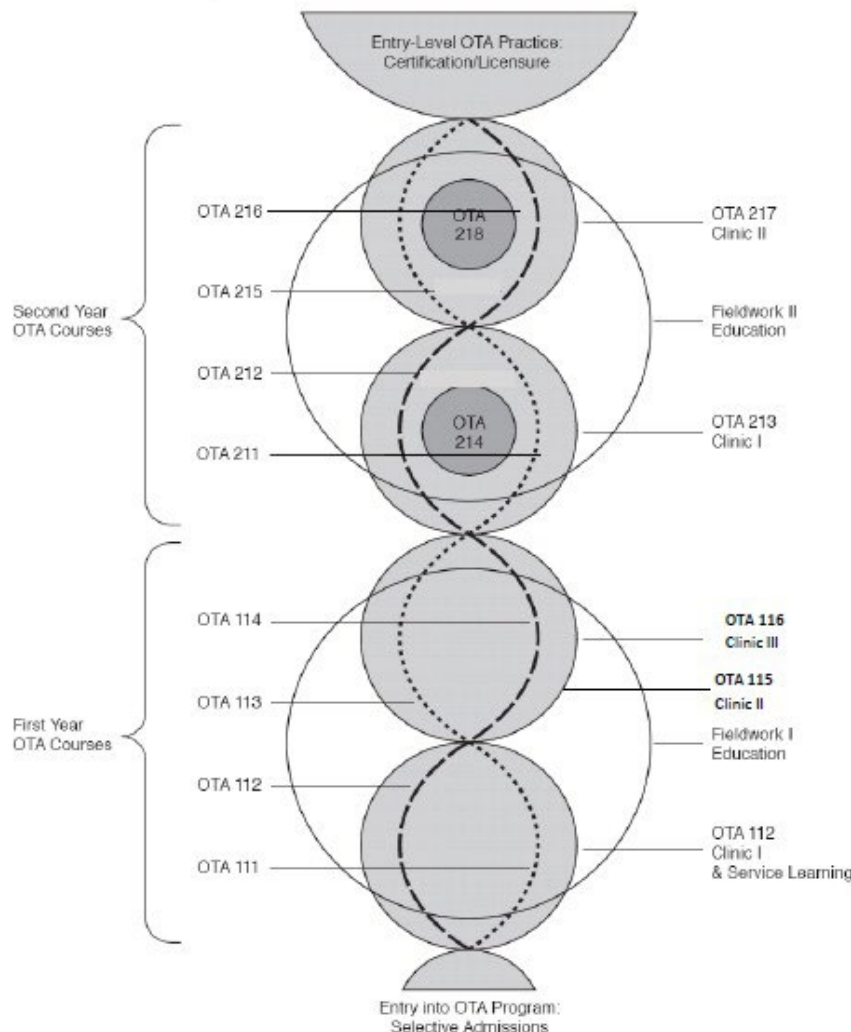
Each semester students revisit the core content of positioning and mobility yet each semester this knowledge is recalled and linked to new skills sets, new options, and new opportunities while applying these composite skills to different situations and different clients.

The curriculum design organizes and sequences content within a dynamic, spiral process along four **Core Curricular Threads** which include:

1. *Occupational Therapy Practice Framework*, 4th Edition (AOTA, 2020)
2. Developmental process across the life span
3. Occupational performance function/dysfunction continuum
4. *Standards of Practice of Occupational Therapy* (2010) and the *Guide to OT Practice* (Moyers & Dale, 2007)

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

Figure 1: OTA Curriculum Model



----- Therapeutic Media and Therapeutic Process Courses

..... Introduction to OT and Health and Occupation Courses

*Note on Figure 1:* This graphic is an overall view of the curriculum showing the intricate, spiral aspect and relationship of each course.

1. The **Occupational Therapy Practice Framework, 4<sup>th</sup> Edition** (AOTA, 2020), also referred to as the *Framework*, provides the core organizational structure for the description of occupational therapy's domain and process delivery model. The concepts, terminology and organizational structure of the *Framework* are introduced in the first semester in OTA 111: Introduction to Occupational Therapy, and in OTA 112: Therapeutic Media. Students learn about each part of the model and generally, how it is applied to evaluation and intervention. Initially, the students develop competency in conducting activity analysis based on the Framework. Later, the students learn that other frames of reference can be integrated with the Framework to further expand and/or to focus activity analysis on selected preparatory methods and tasks and purposeful activities in order to address specific client factors, performance areas, skills, patterns, and contexts.

The Framework is embedded throughout each of the OTA courses as follows:

- OTA 111: Introduction to OT and OTA 112: Therapeutic Media begin the education on the Framework, by teaching the basic information and concepts in OTA 111 and then linking the concepts with wellness and individuals without impairments.
- The Health and Occupation courses (OTA 113, OTA 211, and OTA 215) focus on client factors and their impact on occupational performance areas, skills, and patterns.
- The Therapeutic Process courses (OTA 114, OTA 212, and OTA 216) focus on the occupational therapy intervention process and the types of approaches used to restore, compensate, and maintain occupational performance and role functions, and to prevent occupational dysfunction or deterioration in health.
- The Occupational Therapy Theory course (OTA 214) utilizes the Framework and the *Model of Human Occupation* as the scaffolding for incorporating different frames of reference and models into clinical practice.
- The Therapeutic Groups and Populations course (OTA 218) applies the Framework to evaluation and intervention for client groups in different contexts.
- In the Level I and II Fieldwork courses (OTA 115, OTA 213, and OTA 217), the students apply the Framework in clinical practice. The *Parkland College Fieldwork II Objectives for OTA Students* integrates the Framework to define and evaluate the student's Level II clinical competency in the client-centered, occupation-based approaches to intervention.

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

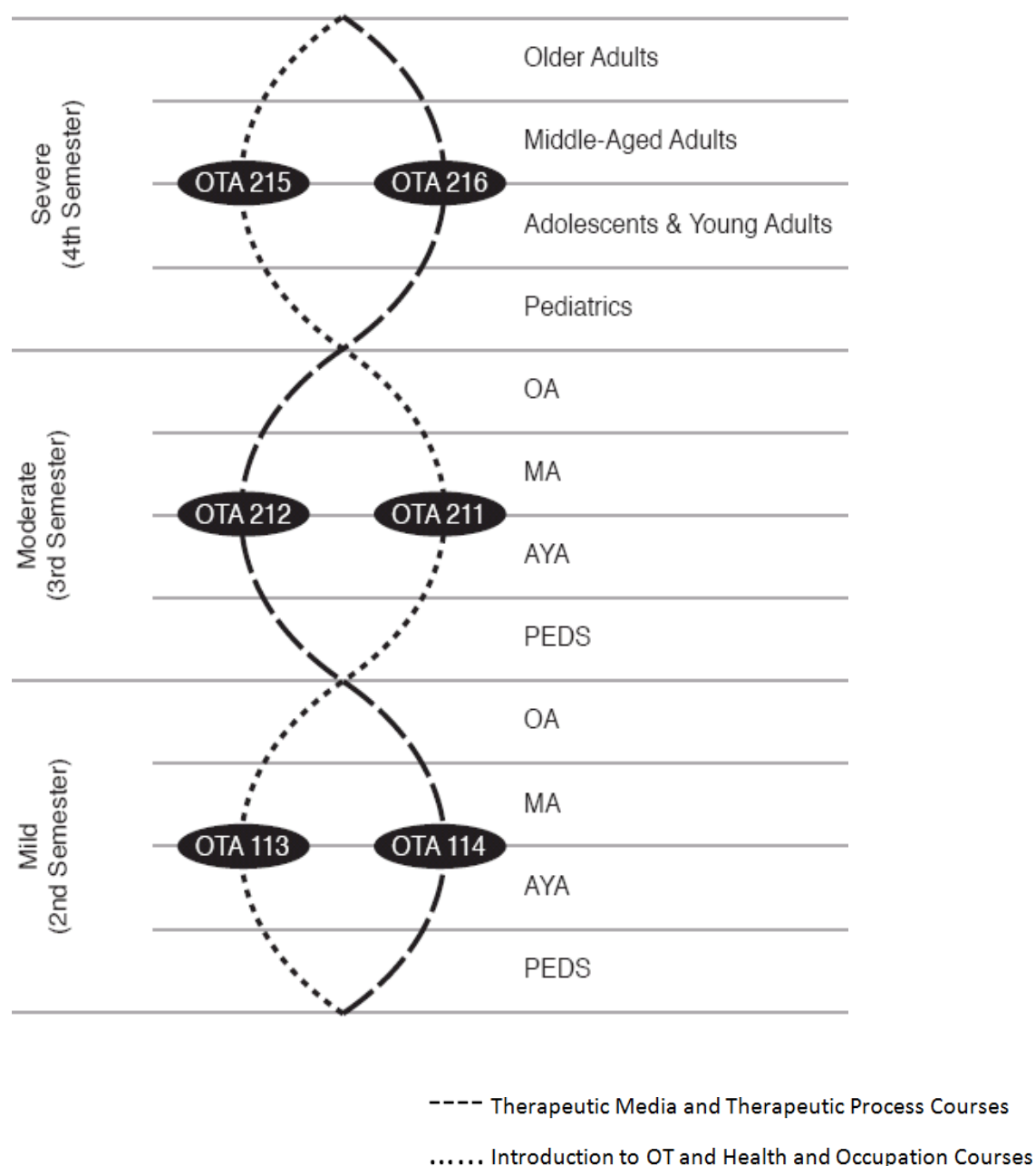
2. The **developmental process across the life span**: The Health and Occupation (OTA 113, OTA 211, OTA 215) and Therapeutic Process (OTA 114, OTA 212, OTA 216) courses are paired courses across three semesters, beginning in the second semester. The developmental core curricular thread organizes course content from pediatrics to

geriatrics, each semester, in each of these courses. (Refer to Figure 2). For example:

- When the students are learning about a specific diagnosis or impairment in the pediatric developmental stage of a Health and Occupation course, they are concurrently learning about the types of occupational therapy interventions used for children with that same impairment in the paired Therapeutic Process course.
- Later in the semester, the students learn about adult and older adult conditions while concurrently learning about intervention for adults and older adults.

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

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



*Note on Figure 2:* This graphic is a closer look at the 2<sup>nd</sup> and 3<sup>rd</sup> curricular threads showing the intricate relationship of the OTA courses.

- The **occupational performance function/dysfunction continuum** core curricular thread sequences OTA courses across the entire curriculum design. The function/dysfunction continuum is identified by well, mild, moderate, and severe occupational performance/dysfunction (Refer to Figure 2). Wellness constructs define occupational performance for people without impairments, activity limitations, or participation restrictions. Mild occupational performance/dysfunction

defines occupational performance for persons with diseases or impairments that may result in minimal activity limitations and restrictions. Moderate occupational performance/dysfunction defines occupational performance in terms of moderate activity limitations and restrictions.

Severe occupational dysfunction defines occupational performance for people with diseases and impairments that may result in severe activity limitations and restrictions. The function/dysfunction continuum progresses from “well” in the first semester to “severe” occupational performance/dysfunction in the fourth semester.

The **occupational performance function/dysfunction continuum** is demonstrated through the following process:

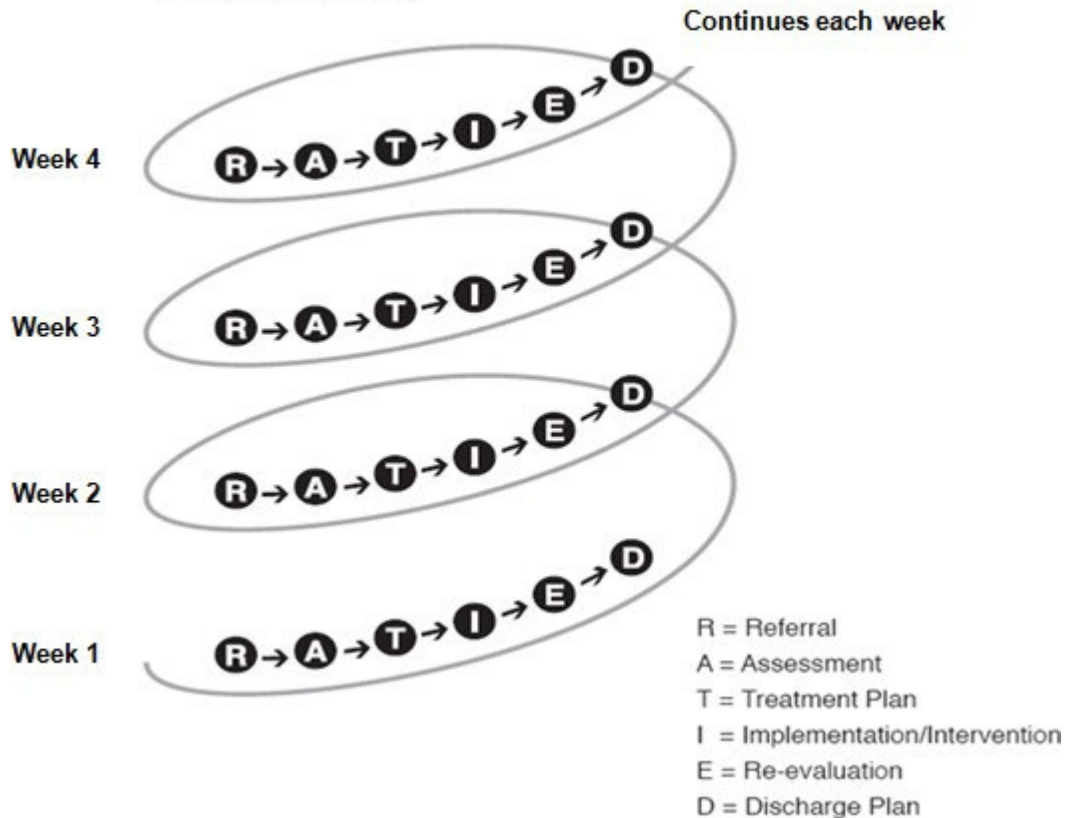
- During the first semester, OTA 112: Therapeutic Media focuses on presenting basic principles and concepts about how people perform occupations, how to prevent impairments, and how to modify objects, spaces, actions and behavior to address basic impairments (e.g.; one-hand function, no grasp, no vision) and basic activity limitations (e.g.: difficulty performing ADL, work, play and leisure activities).
- The Health and Occupations courses (OTA 113, OTA 211, and OTA 215) and the Therapeutic Process courses (OTA 114, OTA 212, and OTA 216) are organized along the mild, moderate, and severe occupational performance/dysfunction continuum across three semesters (refer to Figure 2).
- The Health and Occupations courses and the Therapeutic Process courses focus on presenting specific client factors and interventions for people who have different levels of impairments and limitations (mild, moderate, and severe), within different roles and contexts, along the developmental and occupational performance function/dysfunction continuum.

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

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



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



*Note on Figure 3:* This graphic shows how the 4<sup>th</sup> curricular thread is thread continually addressed throughout the program.

### Linkages Across the Curriculum

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

- A student will learn about basic principles and techniques of biomechanics and therapeutic exercise in OTA 112: Therapeutic Media.
- In the Therapeutic Process and OT Theory courses (OTA 114, OTA 212, OTA 214, and OTA 216), the principles of biomechanics and therapeutic exercises are applied to specific impairments, and new techniques and modifications are added such as exploring the use of physical agent modalities (OTA 114), learning handling techniques for persons with spasticity (OTA 212 and OTA 214), and knowing how to modify exercise when working with clients who have multiple sclerosis (OTA 216).

- From an occupation-based perspective, the students learn basic strategies and methods for teaching activities of daily living, and to assess and modify work sites and homes in OTA 112: Therapeutic Media.
  - In the Therapeutic Process and OT Theory courses, the students learn specific ways to restore, compensate, and adapt for limitations in dressing skills, home management skills and worker roles by modifying methods, tools, and spaces relevant to the specific impairment/occupational performance dysfunction.
- From a professional behavior perspective, the students learn to prepare and conduct oral presentations about their favorite occupations to their classmates in OTA 112: Therapeutic Media.
  - By the second year, the students are required to conduct PowerPoint presentations, and present active learning seminars, health fair projects and posters sessions to the community. The entire curriculum requires the students to develop and use a greater variety skills and different skill combinations of the content and process skills.

**Lateral linkages** connect and integrate content and learning processes in all courses within each semester. Eventually, all courses are integrated by the longitudinal and lateral linkages along the graduated course sequence. Lateral linkages are both direct and indirect. Some examples of **direct lateral linkages** are found in the relationship between the Health and Occupation and Therapeutic Process content sequences. For example:

- A specific disorder that is taught in the OTA 113: Health and Occupation I course will have a direct lateral link with the content on OT intervention for clients with that specific disorder as taught in the OTA 114: Therapeutic Process course.
- The same types of lateral linkages are found between all the Health and Occupation and Therapeutic Process courses each semester.
- General education courses can also have direct lateral links with OTA courses.
  - For example, developmental progression of course content presented in PSY 209: Human Growth and Development coincides with the course content sequences in OTA 113: Health and Occupation I and OTA 114: Therapeutic Process I.
  - Another example of a direct lateral content link is found in linking classroom content with fieldwork assignments. In OTA 114: Therapeutic Process I, the students learn the skills needed to participate in the Level I fieldwork assignments presented in OTA 115: Fieldwork I/Clinic II and OTA 116: Fieldwork I/Clinic III.
    - For instance, in the OTA 114 labs the students learn about specific treatment strategies for people with depression and then they apply this knowledge while leading mental health groups during in OTA 115.
    - A direct lateral link between classroom content and Level II assignments (OTA 213 and OTA 217) can be found throughout the second year. In OTA 214: Occupational Therapy Theory, the students learn a specific frame of reference, such as the Model of Human Occupation, in class. The direct lateral linkage between theory and Level II fieldwork (OTA 213) is presented as a structured homework assignment that requires them to find out how the specific frame of reference is being used or could be used in their current

Level II fieldwork assignment. The term paper in OTA 214 requires the students to find direct evidence of two frames of reference being used in their current Level II fieldwork assignments (OTA 213).

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

Inherent within this design are curricular threads that serve as the linkage among the technical and general education courses. **Indirect lateral linkages** are related to the development of general education and communication skills that are structured and sequenced during each semester and graded across the two years. Examples of indirect linkages are as follows:

- Students take the composition courses (ENG: 101 and ENG 102) to develop written communication skills necessary to communicate their research and clinical reasoning skills in the Health and Occupation and OT Theory courses (OTA 113, OTA 211, OTA 214, and OTA 215).
- KIN 186: Introduction to Human Movement, a prerequisite course for the OTA program, provides the basis for understanding kinesiology and is further linked with the movement analysis activities and assignments found in all Therapeutic Process courses (OTA 114, OTA 212, and OTA 216).
- Content presented in the Anatomy and Physiology courses (BIO 121 and BIO 122) and the content presented in any of the Health and Occupation, Therapeutic Process and OT Theory courses.
  - Obvious linkage exists between musculoskeletal anatomy and learning range of motion, strengthening and other biomechanical techniques in the Therapeutic Process and OT Theory courses.
  - Human anatomy and physiology are linked to understanding diseases, disorders and impairments in Health and Occupation courses. Other lateral threads include communication, interpersonal relations, growth and development, psychosocial behavior alterations, physical disabilities, adaptation, cognition, and the humanities.

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

### **Curriculum Design, Pedagogical Styles and Collaboration:**

The curriculum design incorporates sufficient flexibility and responsiveness for quick accommodation and adaptation to the evolution and changes in interventions, contexts, and roles for occupational therapy personnel and the profession. Course instruction is governed by each course's sequential topic outline and learning objectives however each instructor may be creative in the use of various pedagogical styles particularly active and collaborative learning methods, although not exclusively. All courses incorporate the online learning system, Cobra Learning, to provide course materials, website links to pertinent information, and imbed videos from the International Clinical Educators (ICE) Learning Center. Additionally, the OTA program has three hybrid courses where students independently learn the content and then either apply the content to case-based scenarios (OTA 211) or engage in teaching of specific content through presentation-type seminars. Each course functions pragmatically on an autonomous basis, however content and process learning objectives are interwoven with all other required courses through the longitudinal and lateral linkages. A content change in one course is likely to affect a need for change in content and/or sequencing in many or most courses across the curriculum. This curriculum requires effective collaboration and management by the faculty team in order for it function as a whole entity (process) with each course and learning objective being interrelated to other learning objectives in the other OTA courses. A decision to change course content requires an instructional team decision, with the Program Director acting as Curriculum Manager. Administration of the curriculum requires knowledge and maintenance of this dynamic balance of course content across the entire curriculum at all times.

The parameters of this dynamic, spiral process delineate the cognitive (knowledge), intrapersonal (attitudes, beliefs, values, and emotional), social (professional) and performance (technical) constructs and skills required to successfully function as an entry-level occupational therapy assistant. The *Standards of Practice* (2010), *Delineation of the AOTA Standard of Practice for Occupational Therapy* (Boyt-Schell, Cohn, & Gillen, 2013), and the *Guidelines for Supervision, Roles and Responsibilities during the Delivery of Occupational Therapy Services* (2014) and provide the basic guidelines for each construct.

### **References**

- Allen, C., Earhart, C.A. & Blue, T. (1992). *Occupational therapy treatment goals for the physically and cognitively disabled*. Rockville, MD: The American Occupational Therapy Association, Inc.
- American Occupational Therapy Association. (2020). Occupational therapy practice framework: Domain and process (4th ed.). *American Journal of Occupational Therapy*, 74(Suppl. 2), 1-87. <https://doi.org/10.5014/ajot.2020.74S2001>
- American Occupational Therapy Association (2010). Standards of practice in occupational therapy. *American Journal of Occupational Therapy*, 64 (publication pending in November /December).
- American Occupational Therapy Association (2014). Guidelines for Supervision, Roles and Responsibilities during the Delivery of Occupational Therapy Services, *American Journal of Occupational Therapy*, 68(Suppl 3).

- Bundy, A. C., Lane, S. J., Fisher, A. G., & Murray, E. A. (2002). *Sensory integration: Theory and practice*, Philadelphia, PA: F. A. Davis.
- Caine, R. N. & Caine, G. (1994). *Making connections: Teaching and the human brain*. New York: Innovative Learning Publications.
- Gilfoyle, E., Grady, A. & Moore, J. (1990). *Children adapt*, (2<sup>nd</sup> ed.), Thorofare, NJ: Slack, Inc.
- Gillen, G., & Brown (2023). *Willard and Spackman's Occupational Therapy* (14th ed.). Wolters Kluwer Health.
- Kielhofner, G. (2008). *A model of human occupation: Theory and application*, (4th ed.), Baltimore: Lippincott Williams & Wilkins, Co.
- Marieb, E. (2004). *Human anatomy and physiology*, (6th ed.), Redwood City, CA: Benjamin/Cummings Publishing Co., Inc.
- Moyers, P.A. & Dale, L. M. (2007). Guide to occupational therapy practice. *American Journal of Occupational Therapy*, 53 (3), 247-322.

## DESCRIPTION OF THE COURSE SCOPE:

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### PREREQUISITE:

Prior to entering the OTA Program, prospective students are required to successfully complete KIN 186: Introduction to Human Movement course. This course prepares students to engage in conversation and learn about the importance of movement and strength in occupational performance.

### FIRST YEAR COURSES:

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

In the second semester, there are three OTA courses, **OTA 113: Health and Occupation I**, **OTA 114: Therapeutic Process I** and **OTA 115: Fieldwork I/Clinic II**, which are integrated and organized in a developmental progression from pediatrics to geriatrics. In accordance with the OTA curriculum design, the first year focuses on knowledge and skills needed to promote occupational engagement for people with mild limitations or activity restrictions. Each week, students apply the therapeutic practice sequence from referral to discharge planning in the Therapeutic Process course to address the developmental, health and psychosocial conditions presented in OTA 113. In OTA 113, the students learn about the signs, symptoms, and etiology of specific health and developmental conditions, and how the related impairments and limitations impact occupational performance.

Representative disabilities and client factors have been selected to identify mild occupational performance problems and to sequence therapeutic learning activities. In OTA 114, the students learn how to conduct specific interviews and performance assessments, develop treatment objectives, select, modify and grade treatment activities, and perform specific treatment protocols using therapeutic equipment and activities within the context of the specific health problems. Skills learned in the first semester (OTA 112) are expanded and applied to specific case studies in the second semester.

Fieldwork I assignments are presented in OTA 112 and OTA 115. Fieldwork I assignments are developed to aid the students in developing and applying therapeutic skills within the community, to facilitate appropriate professional behavior, and to prepare students for Fieldwork II assignments in the second year. During OTA 112, Fieldwork I assignments are initially conducted with instructor support to access community resources. Additionally, the students are assigned service-learning projects to participate during the semester. Later, the students are assigned to a facility to develop and demonstrate basic therapeutic skills with clients. In OTA 115 and OTA 116, students participate in structured assignments in clinical facilities and within the community. Skills learned in OTA 114 laboratory assignments are applied during OTA 115 fieldwork I assignments. In addition, the academic fieldwork I instructor facilitate student participation in group programs within emerging practice areas in the community. The OTA program further supports Parkland College's mission for community service and outreach through the community groups and community outreach.

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

#### SECOND YEAR COURSES:

In the third semester, there are four concurrent OTA courses that include Fieldwork II education. In **OTA 211: Health and Occupation II (Hybrid Course)**, the focus is on identifying and describing specific client factors associated with selected disabilities and diseases that result in moderate impairment and restrictions of occupational performance. **OTA 212: Therapeutic Process II** focuses on the application of OT principles and OTA practice skills

during assessment and intervention for people with selected health problems presented in OTA 211. Students concurrently apply their knowledge and treatment skills during 18-20 hours per week fieldwork II education in **OTA 213: Fieldwork II/Clinic I**. Fieldwork II education is conducted in participating hospitals, outpatient clinics, school systems, mental health, and community-based programs under the supervision of registered occupational therapists (OTR). Students provide individual and group therapy services in accordance with the OTR's recommendations. **OTA 214: Occupational Therapy Theory** focuses on how different frames of reference and therapeutic models can be used as systems for (1) adaptation and/or refinement of activity analysis, (2) for selective and systematic clinical reasoning and problem-solving, and (3) for organization of treatment strategies used by occupational therapy in a variety of clinical settings.

In the final semester of the program, **OTA 215: Health and Occupation III (Hybrid Course)** addresses specific diseases, disorders and related client factors which result in serious or severe life-long health problems, severe impairments and occupational restrictions. OTA 215 is closely coordinated with **OTA 216: Therapeutic Process III** which emphasizes the OT principles and OTA clinical roles and responsibilities for implementing treatment of people with severe occupational dysfunction.

Students concurrently apply their knowledge and treatment skills during 18-20 hours per week fieldwork II education in **OTA 217: Fieldwork II/Clinic II**. Finally, **OTA 218: Therapeutic Groups and Populations** prepare students to plan and lead group activities, and to further develop interpersonal communication skills, conflict negotiation, and supervisory skills for therapeutic and team relationships in a variety of practice settings. In addition, the students learn how to direct activity programs and design professional development plans for life-long learning and continuing competency.

The OTA promotes Parkland College's mission for community service and outreach through the development of educational and safety videos in OTA 214: Fieldwork II/Clinic I and OTA 217: Fieldwork II/Clinic II. Parkland College also supports the OTA Program's OT Learning Information for Everyday (LIFE) clinic as a level II fieldwork offered during the 3<sup>rd</sup> and 4<sup>th</sup> semesters.

The supportive courses required during the second year include **ENG 102: Composition II**. The composition course further develops students' skills to write research papers and conduct research.

CURRICULUM SEQUENCE AND CATALOG PAGE

[https://catalog.parkland.edu/preview\\_program.php?catoid=3&poid=588](https://catalog.parkland.edu/preview_program.php?catoid=3&poid=588)

## II. Admission Policies

### Selective Admissions Process

The college is committed to a policy of open admission but admission to Parkland College does not guarantee enrollment in any specific program of instruction. When enrollments are limited, preference is given to residents of District 505 (College Policy 8.02).

Admission into most Parkland College Health Professions programs is selective, which means that admissions are competitive, and programs may have their own admissions criteria and minimum scores for admission. You must be accepted into the program prior to taking any courses in the major.

Please check the college catalog or the program websites for detailed information about admission to a Health Profession program.

<https://www.parkland.edu/Portals/3/Global/Documents/Catalogs/CATALOG%2022-23.pdf>

### Scoring Criteria and Prerequisites

It is strongly recommended that you work closely with a Health Professions Academic Advisor, Faculty Chair or Program Director when seeking entrance to a Health Professions program.

Students who wish to apply transfer credit towards a Health Professions degree or certificate should verify acceptable credits before applying to the program by sending official transcripts to Parkland College Admissions and Records and requesting a transcript evaluation. Only undergraduate credit from regionally accredited institutions is accepted for scoring.

Program scoring and prerequisites are individual to each program but general guidelines for scoring are listed in the catalog. Program catalog pages list the selective admissions score that is needed to be eligible for each program.

### Essential Qualifications and Accommodations Guidelines for Health Professions

The Program has an institutional commitment to provide equal educational opportunities for qualified students with disabilities who apply for admission to the program. The College has a responsibility for the safety of the patients and students. Each program has an Essential Qualification list that should be reviewed before applying to the program. The Essential Qualification list in conjunction with academic standards are requirements for admission, promotion, and graduation. Candidates with questions regarding the Essential Qualifications are encouraged to contact Accessibility Services at Parkland College prior to the start of the program. Compliance with state and federal laws and regulations (including the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990) is necessary and admitted candidates with disabilities are reviewed individually, on a case-by-case basis.





## PARKLAND COLLEGE OCCUPATIONAL THERAPY ASSISTANT PROGRAM ESSENTIAL QUALIFICATIONS

Students matriculating in and graduating from a Parkland College Occupational Therapy Assistant (OTA) health career program must be able to meet the Essential Qualifications of the academic program and must not pose a threat to the well-being of patients, other students, staff, or themselves. As an incoming OTA student you will need, at a minimum, the following types of skills and abilities and will need to maintain and demonstrate these abilities throughout the program.

**Students are encouraged to discuss their specific academic needs with the course instructor/program director prior to beginning a course of study. Consultation between Accessibility Services, the student and the program director are encouraged in order to address concerns.**

Essential Qualifications	Behaviors
Cognitive	<ul style="list-style-type: none"> <li>Engage in decision-making and problem-solving for use in clinical reasoning and safe practice</li> <li>Effectively use a variety of teaching/learning methods and strategies in both individual and collaborative learning situations</li> <li>Access, evaluate, and use a variety of information resources such as library services, electronic catalogs, databases, in an efficient, ethical and legal manner.</li> <li>Locates, evaluates, and utilizes evidence-based practice for effective implementation of therapeutic interventions.</li> </ul>
Affective	<ul style="list-style-type: none"> <li>Respectful of individuals and their cultural values and beliefs.</li> <li>Collaborates effectively with colleagues and other professionals.</li> <li>Demonstrates OT Core Values, to include altruism, equality, freedom, justice, dignity, truth, and prudence.</li> </ul>
Psychomotor	<ul style="list-style-type: none"> <li>Utilize fine skilled movements to perform or demonstrate therapeutic interventions</li> <li>Ability to move a person to different positions or surfaces safely</li> <li>Walk and stand for prolonged periods of time (up to 4 hours at a time).</li> <li>Ability to assume multiple positions (such as kneeling or crawling) during therapeutic intervention</li> </ul>
Communication	<ul style="list-style-type: none"> <li>Utilize English written and spoken language skills for effective communication with individuals in all health care professions, clients, family members and care providers.</li> <li>Utilize basic computer, word processing, electronic communication and on-line course skills on a regular basis</li> <li>Educate clients, colleagues, and the public about the purposes and benefits of occupational therapy.</li> </ul>
Sensory/Observation	<ul style="list-style-type: none"> <li>Functional visual abilities (with correction, as needed) sufficient to closely observe one or more persons at a 10 foot distance, and closely monitor facial expressions, skin coloration, muscular tension, and detailed workmanship.</li> <li>Functional auditory acuity (with correction, as needed) sufficient to comprehend one or more persons engaged in conversation, and to hear monitoring, communication and safety device signals.</li> <li>Spatial reasoning abilities sufficient to plan and implement modifications of tools, materials and the environment, and to observe human movement.</li> <li>Effectively attend to multiple features of a task, personal interaction, and/or group to include ability to selectively focus and attend to key features, use divided and alternating attention between two or more features, in a quick, safe manner.</li> </ul>
Behavioral/Emotional	<ul style="list-style-type: none"> <li>Adapt effectively to fluctuations in emotional and physical stress levels to include ability to maintain composure in moderate to high levels of stress in emergency situations.</li> <li>Ability to maintain stable emotional and physical health throughout the duration of the program and in subsequent practice.</li> </ul>

### Required Spoken and Written English

Spoken and written language skills are critical to student success in clinical courses. Accurate communication between students, patients and families, care providers, physicians, all hospital employees, and faculty is essential to patient safety. It is always with the safety of the patient in mind that the Spoken and Written English Policy/Procedure was developed. The Spoken and Written Policy is available on all Health Professions Cobra courses or available upon request.

Students will be required to take the TOEFL iBT or IELTS Assessment prior to admission to most Health Professions programs. Students must meet the minimum subset scores required by the program in reading, listening, speaking, and writing in order to qualify for the program. See the catalogue for the minimum subset numbers. Students are not accepted to a Health Profession Program until they have qualified by meeting all requirements of the program.

Because English language skills develop with practice over time, TOEFL scores will only be accepted six months apart, and after the student's performance plan is implemented. Any scores more frequent will not be accepted.

## III. Academic Policies

### Grading Scale

All OTA courses use the same grading system.

**A = 93 - 100**

**B = 85 - 92**

**C = 75 - 84**

**F = 0 - 74**

### A with Honors

Students who feel like they will be obtaining an A in a course can apply for an A with Honors project in collaboration with their instructor and the Parkland College A with Honors Advisor.

### Teaching & Evaluative Methods

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

TEACHING METHODS	EVALUATIVE METHODS
Lecture-Discussion	Objective written exams

Small group discussions/assignments	Case studies, class participation, lab proficiency exams
Active/collaborative learning exercises	Activity Analysis, case studies, group presentations
Fieldwork I and II experiences	Fieldwork I and II Performance Objectives
Peer instruction	Final Student Projects, Poster Sessions
Laboratory Experiences	Lab proficiency exams, Lab Check Offs
Demonstrations	Case Study/Intervention Plans
Writing treatment plans	Case study assignments, fieldwork education assignments
Practice skills	Fieldwork objectives
Audiovisual materials	Group projects
Computer-assisted instruction	On-line testing
Required reading assignments	On-line weekly objective quizzes
Community Observations	Fieldwork homework
Investigative learning	Research papers, problem-solving assignments
Fieldwork Partnerships	Peer feedback and mentoring

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

### Grades, Course Enrollment and Progression

1. A student may progress in the OTA program by obtaining a “C” or higher in all required courses. Each required course functions as a prerequisite to the next semester of required courses. If a student obtains less than a C in any required course, the student has not completed the prerequisite requirements to progress. Therefore, the student must retake the course in order to progress in the OTA program. A grade of “C” or better must be obtained in all required courses of the Associate in Applied Science degree in Occupational Therapy Assistant in order to graduate.
2. Grades of “I” must be completed in accordance with the terms outlined on the **Incomplete Grade Form**, by the designated due date. An Incomplete Grade Form must be completed by the instructor and student for all grades of “I.” Any incomplete assignments in OTA courses are to be completed prior to the first week of classes in the next semester to determine eligibility to progress. Grades of “I” are given based on the instructor’s decision in accordance with the policies and procedures outlined in

- the college catalog. A student should not assume that a grade of "I" will be given for any assignment or course prior to meeting with the instructor. In order to be considered for an incomplete grade, the student must have 80% of assignments completed by the time the student meets with the instructor and/or program director.
3. A student who receives a grade lower than a "C" in any occupational therapy assistant course must drop out of the program. The student who has been unsuccessful in an OTA course is required to meet with the class instructor and/or Program Director to develop an individualized **Academic Advising Plan** (AAP). Refer to the *Student Withdrawals and Readmission* sections of this handbook. The student may re-enter the program to re-take the failed course, pending eligibility, in one year.
  4. An **Academic Advising Plan** includes a description of the factors that appear to have led to the student's unsuccessful performance, identification of academic needs, measurable academic goals, a plan of actions for a set period of time, and a description of the consequences in the event of non-compliance with the AAP. Often, the student, class instructor and/or Program Director will collaborate with the **Center for Academic Success** in the development and implementation of goals in the Academic Advising Plan.
  5. A returning student who plans to retake the OTA course must notify and meet with the Program Director to discuss his/her intention to retake the course at least 2 months prior to the anticipated re-entry date. There will be a review student's progress on the Academic Advising Plan and determination of eligibility. An **OTA Faculty Committee** may be organized to assist in the review of a student's progress and request to re-enter the OTA Program. The returning student will be assigned a fieldwork II Alternate status upon reentry.
  6. Upon satisfactory completion of the OTA course after the second attempt, then the student will be able to progress into the next semester of the OTA curriculum. For more information, refer to the sections on **Student Withdrawals and Readmission** section in this handbook for clarification of program policies.
  7. If a student fails an OTA course two times the student must meet with the Career Center, Counseling and Advising and/or the Center for Academic Success to develop an academic and career plan within a different focus of study or career path.
  8. A student who fails a Fieldwork II course may repeat the course one time following a period of remediation based on an individualized Academic Advising Plan. If the student is unable to pass a fieldwork II course for a second time, then the student will be ineligible to complete the OTA Program. The student will be advised to seek career advisement from representatives at the Career Center, Counseling and Advising Center, and/or from other community resources.
  9. Criminal background checks are required for several fieldwork practice areas during Level I and Level II fieldwork education. If a student does not pass the criminal background check, then the student will not be able to attend the fieldwork

assignment. It is recommended that the student contact the Illinois Department of Financial and Professional Regulation [[www.IDFPR.com](http://www.IDFPR.com); 217.782.8556] to determine if the conviction will prevent him or her from becoming licensed to practice.

### OTA Student-Faculty Advisement

1. Registration for courses can be made on-line. The OTA Faculty Advisor will “lift” the registration flags after reviewing the student’s records so that the student may register for classes.
2. All OTA faculty are required to provide weekly scheduled office hours for individual learning strategies and advisement sessions. Students should feel free to take the opportunity to contact their advisors and/or instructors as needed during these scheduled hours. Special appointments may be made for meetings at other times.
3. OTA students are required to meet with the OTA Instructor and/or OTA Program Director when they are:
  - receiving a C or below in any OTA course,
  - failing any OTA assignment,
  - demonstrating repeated work ethics problems, and/or
  - demonstrating unsatisfactory fieldwork performance.These conferences may be scheduled at midterm or at anytime during the semester. The purpose of the conference is to provide 1:1 advisement on individual student performance, and exchange feedback.
4. The OTA course instructors are available to provide advisement and/or referral to other college and community resources for students in need of additional assistance, such as:
  - **Financial Aid** for financial assistance/scholarships
  - **Center for Academic Success** for assistance in study skills, test taking, note writing, writing papers and related academic skills.
  - **Tutorial assistance** for OTA courses
  - **Counseling/Self-Help Programs**
5. Professional behaviors are observed by the faculty throughout the OTA program. The faculty will complete a student Professional Behavior Checklist. The checklist and feedback is shared with the student. If inappropriate professional behaviors are identified, the faculty will schedule a meeting with the student to develop an Academic Advising Plan to develop remediation plan.
  - The faculty will notify the Program Director about identified concerns and remediation plan.
  - The Program Director may schedule a meeting with the student to review and follow-up on the remediation plan.
6. A student may be eligible for **Perkins Tutor** based on the Perkins criteria. Frequently, tutors are graduates of the Parkland College OTA program. Contact the instructor to determine if you are eligible for a Perkins Tutor and if a tutor is available.

## Grade Appeal

According to College policy 8.15.03, the awarding of grades for work done in courses is the domain of the faculty. Only a faculty-led committee has the authority to override a grade on appeal, except in cases of approvals for drops without record, late withdrawal, and medical withdrawals.

A student who is not satisfied with a grade, grading process or final grade that he or she received, is advised to first meet with the course instructor. If the student is dissatisfied with the procedures used to calculate the grade, then the student may ask to meet with the Program Director.

If the student disagrees with the assigned grade, and feels the grade assigned meets one of the criteria for a grade appeal, the student goes immediately to the Faculty Chair and requests a Health Professions Professional Council on Academic Evaluation (PCAE) hearing for the grade appeal process. If the PCAE hearing does not resolve the situation, the student will proceed with the College Grade Appeal process as stated in the College Student Policies and Procedure Manual.

## Academic Advising and Clinical Progression Longitudinal Record

It is a shared responsibility of the student and program director to maintain a longitudinal record of the requirements to complete the OTA program. Graduation requirements and required courses are published in the College catalog. If a student changes an academic plan or fails to complete a required component in the timeframe scheduled, the student should notify the program director immediately. The program director will maintain records to show completion of the graduation requirements.

Clinical Progression: Program students are expected to retain knowledge from previous semesters. The evaluation of clinical performance is based on the application of previously learned knowledge and skills as well as the comprehension and application of new skills and information each semester. Each student will have a longitudinal record of her/his clinical performance. Identified areas of concern from previous semesters will be taken into account in the summative evaluation of each student's performance. The faculty will assess patterns and trends of learning and will take this into account in each course evaluation. The record includes clinical evaluations, any action/remediation plans that have been written for circumstances that resulted in a grade of "unsatisfactory" being assigned, and any other information related to the student's progression/performance in the program.

Students may review their record with the program director by making an appointment. Students will inform the program director in advance that they wish to review their record so their record will be available at the time of the appointment.

## Course Registration

Once a student confirms acceptance to the OTA program and as they progress in the program each semester, the program director and administrative assistant will register students into the OTA specific courses. The student is responsible for registering for all general education courses.



## Course Withdrawal and Drop

The College publishes the regulations concerning course withdrawal and drop in the catalog and on the College website under Admissions and Records. The dates within which students may withdraw from the course are published in the College calendar on the Parkland website.

Students who never attend or cease to attend, any class in which they have enrolled must be dropped by the instructor. Instructor initiated withdrawals can only be performed between the end of the student drop period and midterm. Please see the *General College Syllabus* that is posted on Cobra for further detail on Instructor Withdrawal and Student Withdrawal from a class section.

For students in Health Professions, withdrawing or dropping a course can have an impact on the status in the program. Students should notify the lead faculty of the intent to withdraw from the course and obtain information about current status in course (passing all portions or failing any portion of the course). If the course is a pre- requisite and/or co-requisite for another course, the student will be advised as to what impact that may have on his/her program status.

Course Withdrawal Process: <https://www.parkland.edu/Main/About-Parkland/Department-Office-Directory/Admissions-Records/Drop-Withdraw-a-Class>

## Program Withdrawal

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

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

## Reinstatement or Readmission Policy

1. A prospective returning student, who plans to re-enter the OTA program, must **notify the Program Director no later than June 1<sup>st</sup> for the fall semester and November 1<sup>st</sup> for the spring** prior to the anticipated re-entry date. The prospective returning student is required to meet with the Program Director to discuss his/her academic plan. A student must retake a failed OTA course. The program director will review the student's progress on the Academic Advising Plan and determination of eligibility. An **OTA Faculty Committee** may be organized to assist in the review of a student's progress and request to re-enter the OTA Program. The returning student will be assigned a Fieldwork II Alternate status upon reentry.
2. Re-admission to the OTA Program is contingent upon the student's satisfactory performance of the terms outlined in the Academic Advising Plan (AAP), and the availability of class seats and Fieldwork II assignments. Students who do not complete the AAP will not be eligible for readmission.
3. Students who demonstrated a history of **unsatisfactory work ethics or professional behavior** may not re-enter the OTA Program. See the **Intent to Dismiss** policy for further explanation.
4. The **OTA Program Re-Application Level I Status** signifies that the student has withdrawn from the program and plans to continue within one academic calendar year to satisfactorily complete outstanding OTA course work. A student who leaves the OTA program must meet with the Program Director to develop an **Academic Advising Plan**.

The prospective returning student will be assigned a probationary Re-Application Level I Status for a **one year period only**.

- If the student does not return to the OTA program within the one academic year, then the student's status will be changed to Re-Application Level II status and an AAP will be further developed to determine next action step.
- A Re-Application Level II status is based on availability and may require the following:
  - Re-application to the program
  - Skill and content competencies
  - New physical by physician
- If the student is out of the OTA program for more than one year and less than two years, the student must meet with the OTA Program Director.
- If the student is out of the OTA program for more than two years, reapplication to the program is required.

### **EXAMPLES:**

- 1) **Personal/Health problem:** The OTA student who withdraws from the OTA Program due to personal or family issues and is in good standing (satisfactory grades and course work prior to withdrawal), obtains a Re-entry status. The prospective returning student meets with the Program Director prior to the



projected start date. Eligibility for re-entry into the OTA Program is pending availability of seats and advisement with the Program Director.

- 2) **Unsuccessful Completion of a Required Course:** The OTA student who has failed one OTA course or one required support course is ineligible to progress until these pre-requisites are satisfactorily completed. The student must meet with the Program Director to develop an Academic Advising Plan that addresses the factors that led to the failure and describes the actions to be taken to address these problems. The student must withdraw from the OTA Program.
  - If the required course was a non-OTA course, then the student must pass it prior to consideration for re-entry into the OTA Program.
  - If the student did not pass an OTA course, then the student must meet with the Program Director who will review the student's progress on the Academic Advising Plan and determine eligibility for re-entry.
  - If the student fails to comply with the Academic Advising Plan, then the student may be identified as ineligible to re-enter the OTA Program at that time.
5. The **OTA Program Re-Application Level II status** signifies that the student has been inactive in the program for more than a year (more than two semesters).
  - a) **Re-Application Level II status** is obtained when the prospective student has been an inactive participant in the OTA program for greater than one academic calendar year or two semesters.
    - A prospective student who has been withdrawn from the OTA Program for greater than one academic calendar year will be required to sit for **Proficiency Content and Clinical Exams** based on OTA course work completed prior to withdrawal. Satisfactory completion of all Proficiency Exams is required for consideration of readmission into the OTA Program.
    - If the applicant continues to be interested in seeking a degree in the Occupational Therapy Assistant Program will need to reapply to the program and start the OTA Progression in the first semester.

### Intent to Dismiss

#### **Academic Dismissal from a Program:**

When the student's performance falls below standards and shows no improvement and/or the faculty trust in the student is broken by a severe breach, the faculty may recommend suspension and/or dismissal.

When deciding to make a recommendation, examples considered by faculty include, but are not limited to, what has been covered in the curriculum, where the student is within the curriculum, the expectations at that stage of the curriculum, documentation of past performance, what the student has done/not done, and the severity of the infraction.

When a recommendation for dismissal occurs, it means that a student will be dropped from any health professions specialty classes (classes designated as in the major). The student will be able to continue to attend any general college courses in which they are enrolled. Program dismissal does not necessarily preclude re-admission into the program later. Health Professions program dismissal is a separate process from, and not necessarily related to the college's disciplinary procedures for suspension, dismissal, and expulsion from the college. Recommendation for dismissal can include but are not limited to impaired practice, failure to maintain grades, student performance, non-compliance with clinical, course or program policies, non-compliance with Essential Qualifications, academic dishonesty, plagiarism, professionalism, and patient safety.

Suspension does not necessarily lead to dismissal in every situation. An interim suspension can be used pending the outcome of an investigation.

Chain-of-command: For the purposes of this policy the chain of command is as follows:

1. Course lecture, lab, or clinical faculty
2. Course coordinator (often the lecture faculty in a lecture, lab, and clinical course)
3. Program Director
4. Health Professions Faculty Chair
5. Professional Council on Academic Evaluation
6. Dean
7. Vice President

Please refer to Health Professions Essential Qualifications, Code of Conduct, and Intent to Suspend or Dismiss Policy and Procedures for complete information. Policy can be found on Cobra Health Profession courses.

### Student Hearings and Due Process

Students who face recommendation for clinical suspension and/or program dismissal will be afforded due process through established procedures. Before dismissal, every student will receive:

- Written notice of academic expectations.
- Each Health Profession's program will include their Essential Qualifications in the student handbook and the process and procedures for program probation, clinical suspension, and program dismissal in the program handbook. The handbook will be available on the program web site, Cobra online or printed.
- Written notice of their deficient performance each time the performance is deficient.
- An informal give-and-take face-to-face meeting with the faculty decision-maker after every noted instance.
- When possible, reasonable time to change/improve their deficient performance. Reasonable time to change or improve performance may not be possible for patient safety situations.
- Notice of potential consequences such as delay of graduation, suspension and dismissal from the program that may result as a failure to correct deficiencies.
- Exceptions for notice or giving a reasonable time for improvement may include violations of patient's rights, safety, or egregious violation of professional standards.
- If performance is not according to standard or falls below expectations, the faculty may recommend dismissal.

The student must be afforded the opportunity for a PCAE hearing. Professional Council on Academic Evaluation: (PCAE) is the Health Professions Council on Academic Evaluation and is the fourth step in the chain of command in the Health Profession's formal process for this policy. It is the division philosophy that issues between students and faculty are solved as close to the classroom as possible. When that is not possible, the PCEA is part of the formal process for resolving these issues.

### Name and Address Changes

It is the student's responsibility to ensure that the student's legal name is in the Parkland system. Students should also update the address with Parkland College. The student's name used to register for NBCOT must match Parkland College official student records.

### Attendance and Punctuality

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

<b>Absence</b>	<b>Lectures and Labs</b>
<b>2 missed class periods in a course</b>	2 points deducted from the course final grade.
<b>3 missed class periods in a course</b>	3 points deducted from the course final grade.
<b>4 missed class periods in a course</b>	4 points deducted from the course final grade.
<b>5 or more missed class periods in a course</b>	5 points deducted from the course final grade. Students may be advised to withdraw from the OTA program.

2. Any student who is absent from class, clinical, or laboratory periods must contact the instructor **prior to the scheduled time via email**. Students are responsible for making arrangements with either their peers and/or the instructor to obtain the information that was missed during the absence.

3. Lab times are essential skill training sessions. These sessions require actual participation in order to learn to handle materials, equipment, devices, behaviors, and routines. Lab make up opportunities are not required and are at the discretion of the instructor for that course.

4. Punctuality to scheduled classes and clinical assignments is expected. Habitual tardiness is an attendance problem. A student who is late to class more than two times may be required to meet with the course instructor to develop a written attendance plan that outlines the consequences for continued absence. One point may be deducted from the final grade for each day tardy.

5. Sleeping in class constitutes an absence. If a student sleeps in a class period or requires frequent reminders to remain awake, then the instructor may request that the student leave the class for that session in order to obtain proper rest for academic performance. The student will be marked as absent for that class period.
6. Personal vacations are not to be scheduled during required class, laboratory or clinical times and are considered unexcused absences.
7. Technology use during class should be class related. Social media use and personal messaging on cell phones is not allowed.

### Assignment Completion & Deadlines

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

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

### Assessment and Examinations

1. Most quizzes are **formative assessments** administered through Cobra and can be taken when the student chooses. All quizzes are timed (e.g.; 15 questions in 30 minutes). The student should read all required readings prior to taking the quiz and can use textbooks while taking the quiz. It is cheating to take quizzes together. If there is streaming problems during a quiz, the student must contact the instructor to address the incomplete quiz.
2. **If a quiz is missed**, you will be allowed to retake it if you have contacted the instructor prior to the absence. Late penalties apply per individual class syllabi. If a student misses more than two quizzes, then the student will be required to meet with the instructor

and/or the Program Director to develop an Academic Advising Plan.

3. **Extended test and quiz times** are granted for students who have documented requests obtained through Accessibility Services.
4. **Cheating:** It is cheating to copy other students' work on assignments or to copy answers during quizzes and exams. The student will be notified by the instructor if the student is suspected of engaging in dishonest behaviors such as cheating. The student will receive a 0 for the assignment, quiz or exam and the student will be required to meet with the Course instructor, the OTA Program Director and/or the Office of the Vice President of Student Services. Review the *Parkland College Student Handbook* about Academic Honesty.
5. **Final examinations** in any OTA course must be taken during the scheduled examination period. No student will be allowed to take an exam prior to the regularly scheduled and published times. Be sure to check the calendar prior to making any holiday arrangements.
6. **If an exam is missed** due to absence, then the instructor will determine the makeup policy. Students are required to contact to instructor before missing the exam, and to schedule a time to take the exam. The exam must be taken within 48 hours of the previously scheduled exam time. Students may not make up exams based on unexcused absences.

### Student-Faculty Evaluations

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

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

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

### Technology Requirements

Parkland College uses email as an official means of communication. All students and faculty are issued an official Parkland email account. According to Parkland policy, 3.41, Parkland email services are the official email services to be used for instruction, instructional support, advising, service, administration, and college-related correspondence in support of the College's mission. The College has the right to send communications via email and expect those communications to be read in a timely fashion. Students are expected to check email prior to a class session in order to get latest updates or changes for that class period. Microsoft Teams will also be used for communication.

The College has the right, when required by applicable law to access, review, and release all electronic information that is transmitted or stored by the College whether or not such information is private in nature. Confidentiality or privacy of electronic mail cannot be guaranteed.

Email is subject to all pertinent laws regarding sharing or transmission of sensitive information such as Freedom of Information Act (FOIA), Family Educational Rights and Privacy Act (FERPA) and Health Insurance Portability and Accountability Act (HIPAA). All student records are protected by FERPA and faculty do not provide access to student information within the course without a need to know.

All course material included on the course Learning Management System (Cobra) requires a student to utilize a secure log in and password to access their content. Email policy, 3.41 ensures

that students protect their user information and do not share with anyone. "Users are responsible for safeguarding their username and password and for using them only as authorized. Sharing email accounts and/or passwords with another person or attempting to obtain access to another person's account is prohibited. Each user is responsible for all email transactions made under the authorization of his or her Parkland email username." Verification processes are used to protect student privacy.

For online courses in which tests are proctored, a photo ID that matches the user at the computer is required; or students may be required to go to a testing center in person with photo ID.

Students in the OTA Program should have computer access to complete online and computer assignments and assessments. If the student does not have access to the internet or a computer at home, it is suggested the student utilize an open lab at Parkland prior to leaving campus.

Basic computer skills required to participate in the OTA Program include ability to use Word, to write single and group e-mails, to use the Internet, to conduct on-line research, to use PowerPoint, to access grades from Self-Service, and ability to participate in on-line instruction and assessment using Cobra.

The Tech Service Desk is a one-stop shop for Parkland students seeking assistance with Parkland technologies, including my.parkland.edu, email, Cobra Learning, Wi-Fi, ParklandOne, Microsoft Office 365, and more. See General College Syllabus. **OTA** Program students are required to demonstrate basic computer competency skills as a requirement for graduation.

### Cell Phone and Lab Policies

Cell phones can be invaluable tools for students to use while they travel to and from classes and while traveling to fieldwork sites. The student will be asked to leave the classroom if there is repeated use of a cellphone that is causing a distraction to learning. **Texting, taking pictures or videos during class and lab time is prohibited.**

Parkland College has Wi-Fi so that students may access the Internet with a laptop. Laptops may be used during class time for **educational purposes only** such as taking class notes, using Cobra to access class and lab materials, and for research to address course related questions. If a student is found to be using his/her laptop during the scheduled class time for non-course activities such as emailing, Facebook, Snapchat, tweeting, shopping, or participating in similar activities, then the student may be considered to be not in attendance. Students are not allowed to work on classwork for other classes during lectures or labs.

**Assignments submitted to other OTA classes during another OTA class period may be given a zero.**

### Recordings in the Classroom

College policy 5.01.03 states that students who wish to record classroom learning activities must require permission from the instructor prior to doing so. The policy covers all forms of recording using available technology. The instructor has the right to deny or limit the request. Students are allowed to record learning activities as an accommodation under the American with Disabilities Act (ADA) if the Accessibility Services ID card is issued and presented to the instructor. Students who request recording permission under the ADA must not be denied permission.

Violations of this policy are subject to disciplinary action. Lastly, students in the classroom have the right to know that their class is being recorded. The instructor will notify the class that permission has been given for a recording without identifying the individual student(s) requesting permission.

### Social Media

Using social media can facilitate communication within the learning facility. Student groups who use Facebook, Snapchat for communication about classes and assignments are prohibited from posting pictures or videos from class unless authorized by the instructor of the course and/or program director. Use of social media during class time is prohibited.



## Equipment Needed or Required

- Daily computer access
- Clinical attire
- Closed toe shoes
- Physical
- American Heart Association Basic Life Support for Healthcare Certification
- Student name tag (first is issued by Parkland)

## Student Records and Student Confidentiality

Faculty are required to maintain student's privacy in accordance with the Family Education Rights to Privacy Act (FERPA). The Family Educational Rights and Privacy Act of 1974, also known as the Buckley Amendment, helps protect the privacy of student records. The Act provides for the right to inspect and review education records, the right to seek to amend those records and to limit disclosure of information from the records. The Act applies to all institutions that are the recipients of federal funding.

Records, files, documents and other materials which contain information directly related to a student and maintained by Parkland College or by someone acting for the College. Only the student or entities that the student has given written consent can receive information about the student's grades or progress. Please refer to FERPA information on the Parkland website: <http://www.parkland.edu/about/ferpa.aspx>

## Final Examination Requirement

A final exam is expected in each credit course at Parkland College. Final exams for all courses will be given during final exam week according to the official published schedule. These final exams are not to be given early (during regular class periods). Final exams for all other courses (courses with earlier end dates) will be given at the last regularly scheduled class meeting.

All requests from faculty to alter scheduled final exam times or dates must be reviewed and approved by the Faculty Chairs, Division Dean, and the Vice President for Academic Services.

In courses where a final exam is not appropriate, as determined by the Health Professions administration, an educational alternative scheduled during the week of final exams is expected.

Students: These official College guidelines were established to more fully ensure that you receive the full set of instructional class periods for which you paid and to which you are entitled and that you have the appropriate amount of time to prepare adequately for your final exams. If your final exam is given earlier than scheduled, please contact the Faculty Chair or Division Dean.

Three final exams scheduled on the same day may be considered a conflict. Conflicts may be resolved by arrangement with the faculty of these courses.

Questions or concerns about these guidelines should be directed to the Faculty Chair or Division Dean.



## IV. Graduation Requirements

### OTA Program Graduation Requirements

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

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

1. Parkland College provides a college-wide Commencement Ceremony which is scheduled for Thursday evening of final exam week in the spring semester. All students who are planning to march at commencement are required to be fitted for a cap and gown by the due date. There is a rental fee for the cap and gown.
2. OTA Program students that have completed graduation requirements may wish to organize a semi-formal “pinning” ceremony at Parkland. The ceremony must include invitations of key Parkland College Administrators and managers. In addition, the program agenda must include speakers to:
  - express gratitude for the past
  - recognition and celebration of the present
  - profess a vision for the future of the profession and your new roles as Occupational Therapy Assistants.
  - Full description of the requirements needed for this type of event planning will be available in the 4<sup>th</sup> semester. The Program Director must approve the ceremony. The student’s attendance is optional.

Parkland College encourages persons with disabilities to participate in its programs and activities. If you anticipate needing any type of accommodation, such as a sign language interpreter, or have questions about the physical access provided, please contact the Accessibility Services by phone at 217-353-2338, or by email at [accessibilityservices@parkland.edu](mailto:accessibilityservices@parkland.edu). To provide seamless access please submit all requests two weeks in advance of your participation or visit.

### OTA Licensing or Board Exam Information

National Board for Certification in Occupational Therapy (NBCOT)

After successfully completing and graduating from an OTA program, students are eligible to take the certification examination given by NBCOT. The exam is a four hour exam which requires at least a score of 450 to pass. A felony conviction may affect a graduate’s ability to sit for the NBCOT exam and attain a license. For questions about the examination and eligibility, contact:

National Board for Certification in Occupational Therapy  
One Bank Street, Suite 300

Gaithersburg, MD 20878  
Telephone: 301-990-7979  
Email: [info@nbcot.org](mailto:info@nbcot.org)  
Website: <https://www.nbcot.org/>

### State Licensure

All OTAs are required to be both certified and licensed to practice in Illinois as well as most other states. After graduating from an accredited OTA program and successfully passing the NBCOT exam, graduates will apply for a license. For more information on licensure in the state of Illinois, contact:

Illinois Department of Financial and Professional  
Regulation 320 West Washington, 3<sup>rd</sup> floor  
Springfield, IL 62786  
Telephone: 1-888-473-4858  
Website: <https://www.idfpr.com>

### Petition to Graduation

Students will complete the Admissions form, Petition to Graduate at the start of the last semester of the program. Results of the graduation requirement audit are emailed to the student from an Admissions representative. It is the student's responsibility to report any deficiencies to the program director.

### Employment

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

### Program Pinning and Recognition Ceremonies

OTA Program students that have completed graduation requirements will have the opportunity to participate in the Recognition Ceremony in at Parkland. The Recognition Ceremony is held on the Friday after finals in the spring and the student's attendance is optional.

## VI. Health and Safety Policies

### Student Health, Immunization, Drug Screen and Background Procedures

The conduct standards for Healthcare Professionals and students are higher than those of the ordinary student or citizen because of the inherent responsibilities assumed by their role with patients, and the trust the public places on their profession to do no harm.

#### Health Records

In order to be admitted to the program, immunization records and evidence of physical examination must be complete and on record on Castle Branch or Viewpoint website. Background and Drug Screens must also be complete. The student will be dropped from program courses if non-compliant. Follow program procedures for re-enrollment and status in the program. If a student has a second incident of non-compliance, the student will take a year leave from the program.

Once admitted to the program, all health record requirements must be up to date to remain in program courses. Students with incomplete health records will be prohibited to attend clinicals and the missed time will be counted as a clinical absence for each day missed. Make up hours are not available for clinical absences. Students must be current through the entire semester of the course. The student may need to renew before it is actually due and before you are notified by Castle Branch or Viewpoint to renew.

Due dates to stay current and compliant for each semester are: July 15 for fall courses, December 15 for spring courses and May 15 for summer courses.

Required vaccinations and immunizations are specific to the Health Professions Program. Each student will submit health records according to the program guidelines. The most updated information for all vaccinations and immunizations can be found on the Health Professions website: [Health Records and Covid Vaccination Information](#)

Parkland College (PC) Health Professions is committed to maintaining a drug-free workplace and academic environment in compliance with the Federal Drug Free Workplace Act of 1988 and in Accordance with Parkland College Policy 3.24 Drug-Free Workplace.

For health and safety concerns, all students involved in Parkland College's Health Professions Programs which have a clinical contract requiring drug and background must be processed through clinical clearance and compliance through a health record, drug screen and background check.

The presence of alcohol and/or drugs, lawfully prescribed or otherwise, which interfere with student's judgment or motor coordination in a healthcare setting poses an unacceptable risk to patients, faculty, other students, the College and affiliated clinical agencies. The College recognizes its responsibility to provide for a safe academic environment for College students, faculty, and staff, as well as a safe clinical setting for students, faculty, patients and employees of affiliated clinical agencies. For the foregoing reasons, Health Professions students will be cleared for clinical courses prior to the start of the program or in some programs, prior to the start of the first clinical course.

Please read through Health Professions Intake and Clearing Procedures:

<https://www.parkland.edu/Portals/3/Health%20Professions/Documents/Student%20Health%20Immunization.pdf?ver=2020-02-28-162929-537&timestamp=1582929224580>

### Random and Reasonable Suspicion Testing

While enrolled in a Health Profession Program that requires a drug screen, if there is objective evidence exists to support the conclusion that a student may be impaired, random drug screening for reasonable suspicion may be necessary. Information regarding this policy can be found here:

<https://www.parkland.edu/Portals/3/Health%20Professions/Documents/Student%20Health%20Immunization.pdf?ver=2020-02-28-162929-537&timestamp=1582929224580>

### Title IX

#### Sexual Harassment, Violence, and Misconduct

Parkland College is committed to assuring a safe and productive educational environment for all students. To meet this commitment and to comply with Title IX of the Education Amendments of 1972 and guidance from the Office of Civil Rights, the college requires faculty members to report incidents of sexual violence shared by students to the college's Title IX coordinator, Vice President of Student Services, Michael Trame. The only exceptions to the faculty member's reporting obligation are when incidents of sexual violence are communicated by a student during a classroom discussion, in a writing assignment for a class, or as part of a college-approved research project. Faculty members are obligated to report sexual violence or any other abuse of a minor (any person under 18 years of age) to the Illinois Department of Children and Family Services (DCFS).

Information regarding the reporting of sexual violence and the resources that are available to victims of sexual violence is available at <https://parkland.edu/Main/About-Parkland/Safe-Campus-Procedures/Title-IX-Harassment-Discrimination>

#### Pregnancy

Title IX of the Education Amendments of 1972 provides pregnant students with certain rights regarding their education. For information, contact Dr. Marietta Turner, Dean of Students at 217- 351-2505 or via email at [mturner@parkland.edu](mailto:mturner@parkland.edu).

It is recommended if a student is in a program with occupational hazards or risks, the student reports a pregnancy to the program director so that the student can be educated about any occupational risks during clinical, labs or practicums. Confidentiality will be maintained, but the safety of the student/fetus is most important.

#### Communicable Diseases and Communicable Disease Policy

Parkland Policy 3.05

The Illinois Department of Public Health (IDPH) has specified disease which are contagious, infectious, communicable, and dangerous to the public health in Section 690.100 of the Rules and Regulations for the Control of Communicable Diseases. The purpose of this policy is to insure College compliance with those and other existing state and federal rules, regulations, and laws.

Parkland College places a high priority on protecting the health and safety of its campus community and aims to reduce communicable disease exposure risk without unlawfully discriminating in enrollment or employment practices. To that end, Parkland College will adhere to the following guidelines:

1. Parkland College will be in full compliance with the Americans with Disabilities Act (ADA) as it relates to those students and employees who have communicable diseases. Any college decisions made resulting from a student or employee's health-related circumstances will be made with input from the office of Disability services and will depend on each unique instance, applicable confidentiality considerations, and relevant medical facts.
2. Parkland College will follow guidelines as directed by the Illinois Department of Public Health.
3. Parkland College will consider the welfare of the campus community while respecting the privacy and needs of the individuals involved.
4. Parkland College will make available to all members of the college community educational opportunities about disease transmission and prevention and will encourage preventive measures including, but not limited to, immunizations against meningitis and flu as recommended by the Centers for Disease Control and the American College Health Association.
5. Parkland College will provide appropriate and non-discriminatory services for persons living with infectious disease(s).
6. Parkland College will comply with NCAA regulations to reduce infection risk for those students involved in varsity and intramural contact sports.
7. Parkland College will follow occupational safety and health standards mandated under federal and state law with regard to the transmission of blood-borne pathogens in an effort to prevent transmission of disease in classrooms, laboratories, and work spaces as outlined in the Exposure Control Plan. This compliance will be coordinated by the Wellness Coordinator.
8. Parkland College will, when necessary, isolate infected persons and/or quarantine their contacts in accordance with the Illinois Department of Public Health guidelines and within the parameters of the College Emergency Plan as managed by the Crisis Management Team.
9. The Vice President for Student Services will administer this policy subject to applicable personnel policies and collective bargaining agreements. Any actions undertaken pursuant to this policy will be in accordance with applicable federal and state laws. Parkland College policies and the best interest of all parties involved. The Vice President for Student Services will also act as a spokesperson for the campus regarding all communicable disease policy-related decisions and/or changes.

Any possibility of harboring contagious diseases must be reported to the clinical instructor prior to attending clinical. Students who pose health risks to personnel or patients or to themselves will not attend clinical. Examples: chickenpox, pink eye, fever, uncontrolled cough, open lesions on the skin.

If a student has a sore throat with fever, he/she must contact the instructor prior to coming to the clinical facility. In cases of strep throat, the student must be on an antibiotic for a minimum of 24 hours before returning to the clinical facility. It is advised that the student contact the fieldwork educator if any of he or she notices any of the following:

Fever >100.4	Conjunctivitis
Diarrhea lasting more than 12 hours	Group A Strep-diagnosed by a physician
Jaundice	Vomiting
Covid-19	Cold sores (herpes)
Active measles, pertussis, rubella, or chicken pox	Upper respiratory infection (cold)
Tuberculosis (TB)	Shingles or rash of unknown origin
Head lice	Scabies
Mononucleosis	Impetigo

Clinical instructors have the right to initiate communication with a student who exhibits the signs or symptoms of a communicable disease who has not come forward. This will only occur if the individual has the potential to pose an imminent risk to others or are unable to perform required tasks. All HIPAA and FERPA laws will be abided by, and the individual is assured of confidentiality regarding the matter.

### Health Records

In order to be admitted to the program, immunization records and evidence of physical examination must be complete and on record on Castle Branch or Viewpoint website. Background and Drug Screens must also be complete. The student will be dropped from program courses if non-compliant. Follow program procedures for re-enrollment and status in the program. If a student has a second incident of non-compliance, the student will take a year leave from the program.

Once admitted to the program, all health record requirements must be up to date to remain in program courses. Students with incomplete health records will not attend clinical and the missed time will be counted as a clinical absence for each day missed. Make up hours are not available for clinical absences. Students must be current through the entire semester of the course. The student may need to renew before it is actually due and before you are notified by Castle Branch or Viewpoint to renew.

### Student Health Status and Health Changes While in the Program

A student that has had any change in his/her physical and/or psychological condition (including pregnancy and the postpartum period) that require medical attention and or could have an effect of their physical or emotional endurance, are still required to maintain Essential Qualifications. Some situations will require a release from your health care provider.

If a student develops a health issue that may result in incapacitation in the clinical area or types of conditions that may jeopardize patient safety, the student must notify the clinical instructor as soon as the health issue becomes known to the student. In order to protect the patient and the student, the student may be removed from clinical. Students will still be required to perform all the functional abilities outlined in the Essential Qualification in order to attend clinical.

### Inclement Weather

The basic philosophy of the College is to keep the campus open if at all possible during inclement weather. Closing the College is always a difficult decision to make in view of the large geographical area which is served by Parkland. We also know that timing is important

during the day AND evening, as students and/or faculty and staff may already be in route to the campus at the time the decision is made. The decision to close does include classes offered by Parkland at area learning centers throughout the District.

The conditions both on campus and in surrounding areas are monitored very closely during inclement winter weather. If it becomes necessary to close the campus during the day and/or evening when classes are in session, an announcement will be made over the public address system, to local radio/tv and on our website by 3:00 p.m. If weather conditions deteriorate overnight, a decision is made by 5:00 a.m. Monday through Saturday.

Radio and television stations are notified if campus is closed due to weather conditions. Parkland College will announce college closings on the Parkland Facebook page and other social media outlets. Parkland College will send texts and calls to all students and faculty to notify of the closing.

Safety and the ability to drive or walk in inclement conditions ultimately needs to be determined by the student. If the student has concerns because it is dark outside or the student expects the conditions may improve, the student should follow syllabus directions for calling in late or absent as soon as possible.

### Public Safety and Escorts

The Parkland College Police Department, also known as Public Safety, is a full-service police agency covering the campus 24 hours a day, including holidays. The officers are trained as EMTs and First Responders to provide emergency medical care. The Police Department offers many services which include escorts, lost and found, and vehicle assists. The college hours are 7 a.m. to 10 p.m. Monday through Friday and 7 a.m. to 4 p.m. on Saturdays. The campus is closed on Sundays and holidays.

Public Safety also offers escort service to the Parkland parking lots. Please use the information below if you would like an officer to walk you to your vehicle.

You can reach this department by:

- Visiting the main Public Safety office at A160
- Call 217-351-2369
- Using emergency call boxes conveniently located throughout the campus

### Classroom and Lab Emergencies

Students will be oriented on the College 911 system. Students are instructed to activate Classroom 911 Icon on computer screen anytime the student senses an emergent situation.

Evacuation procedures include:

In case of tornado, students, faculty, and staff should find shelter in H109, H111, the men's bathroom or the women's bathroom.

In case of a fire, students, faculty and staff should evacuate outside through either the front of the building or down the back hallway through the back door.

A classroom and lab manual is located in both H-121 and H-122 that addresses equipment, appliances, supplies, and instructional items (See Table of Contents below). For more information see the *Parkland College OTA Classroom & Lab Policies and Procedures* in the lime green binder.

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## Medical Liability Insurance

Students registered in Parkland clinical courses will be covered by a college issued liability insurance. A course fee will be added to a clinical course. The student is covered while at clinical on scheduled days of clinical. Activities or class sessions that take place outside of the published course schedule will not be covered by the college liability insurance.

It is recommended that students carry personal medical insurance to cover accidents including on-the-job related incidents in the clinical area. Cooperating agencies provide treatment for emergency services in cases of accidents at the student's own expense.

A student who is injured in the classroom, lab or clinical must immediately report it to the instructor. Emergency medical procedures will be provided on campus as needed.

A student who is injured while at the clinical site must immediately report it to lead preceptor or clinical instructor. The student will be asked to present personal medical insurance to the health care facility providing care to the student. The student will be required to complete an Incident Report at the facility and the college.

## Medical Leave

OTA students who withdraw from the program due to medical reasons and are in good standing with the program can return the following year with a **Re-Application Level I Status**. See the section on **Reinstatement or Re-admission to the OTA Program or OTA Course** (page 36).

Students who take a leave of absence due to medical reasons are advised to meet with Dean Turner. If a student is pregnant, they are required to meet with Dean Turner due to Title IX Educational Amendment of 1972 to review their rights as a student. For information, contact Dr. Marietta Turner, Dean of Students at 217-351-2505 or via email at [mturner@parkland.edu](mailto:mturner@parkland.edu).

## Emergency Alert System

Parkland College uses an emergency alert system designed to send out a message in the case of an on-campus emergency. This system will be triggered in the case of a natural disaster or public safety emergency. When you register for classes, you are automatically signed up for this service. Be sure that your contact information is up to date with the college.

Students are encouraged to add Public Safety phone number into their personal cell phones. Students should leave the building immediately upon notice of evacuation. Students should not return to campus until notified as all clear.

## Smoke and Vape Free Campus

In compliance with the Smoke-Free Campus Act (110 ILCS 64/), all tobacco use will be

prohibited on the Parkland College campus effective July 1, 2015. For the purpose of this policy, "campus" means all property owned and leased by, or leased to the College, including buildings, grounds, roads, parking lots, and vehicles.

All clinical sites (hospitals) are also smoke free campuses. Please make adjustments prior to the first day of clinical to reduce the need for smoking. Parkland offers smoking cessation programs through the Counseling Center.

## VII. Fieldwork

### Instruction

#### Fieldwork I & II Policies

##### Fieldwork I Policies:

1. Satisfactory completion of all Fieldwork Level I assignments is mandatory before the student is determined to be eligible to progress to Fieldwork Level II. The student must obtain 80% or better on all FWI assignments to satisfactorily complete FWI requirements.
2. There is a close correlation between FWI and FWII experiences. Therefore, a failure in Fieldwork I experiences constitutes a failure in the course and prohibits progression in the OTA curriculum. A student may fail OTA 115 Fieldwork I course if he or she fails one assignment or has significant professional behavior and work ethics problems.
3. Students are expected to plan, execute, and complete all FWI assignments according to the guidelines outlined in the OTA 112 and OTA 115: FWI assignments. Transportation to the FWI facility is the student's responsibility.
4. The Fieldwork I Coordinator makes the community group assignments. No assignments will conflict with other required courses. However, students may be required to modify their work schedule to participate in Level I fieldwork assignments.
5. FWI Clinical Instructors, either OT clinicians or other designated professionals, will conduct an objective written evaluation of the student's work ethics and clinical performance. A combination of clinical instructor and course instructor evaluations will contribute to the FWI Performance Evaluation and grade.
6. Students are expected to adhere strictly to each facility's policy and procedures. A student may be asked to leave a facility if there is any misconduct or lack of preparation for the assignment.
7. Fieldwork I Attendance is mandatory. If the student is unable to attend the scheduled fieldwork assignment, then the student is required to immediately contact the academic fieldwork instructor and the fieldwork educator at the assigned facility. Many Fieldwork I assignments cannot be made up and have special conditions for missed attendance outlined in the assignment. If a student misses a Fieldwork I appointment on two occasions then the student is in jeopardy of failing the course.
8. No part of Level I Fieldwork shall be substituted for nor counted as any part of

Level II fieldwork.

#### Fieldwork II Policies

1. Students must have completed a current physical exam, all required immunizations, drug screen, background check, TB test and a current BLS/CPR card uploaded and posted in Castle Branch or Viewpoint/Viewpoint by the designated due date otherwise the student will be dropped from the Fieldwork II course. Failure to complete the health requirements will lead to withdrawal from the fieldwork course and may lead to dismissal from the OTA Program. Castle Branch or Viewpoint/Viewpoint must be kept up to date. It is the student's responsibility to open emails from Castle Branch or Viewpoint/Viewpoint regarding upcoming health requirements and check their Castle Branch or Viewpoint/Viewpoint account to verify they are up to date with all requirements.
2. Students prepare for Fieldwork II participation by completing a Fieldwork II Preference Format the end of the second semester. It is recommended that each student complete an adult and pediatric Level II Fieldwork placement if scheduling allows. Students may not always get their preferred choices due to limitations in availability of fieldwork sites. The following criteria are used to make Fieldwork II assignments:

Type of Field Sites Available	Student FW Preferences
Duration of Assignment (8 or 16 weeks)	Academic Skills
Travel Distance from permanent address	Professional Behavior/Work
Ethnic Clinical Instruction Experience/Teaching Style	No < than 2 and no > than 3 Clinical sites
FW Educator Availability	No Duplicate Practice Areas
Organizational Changes	

3. Fieldwork II assignments are arranged by legal contracts developed between Parkland College and each community agency. Students should be aware of the legal/ethical relationship that is established and the ensuing responsibilities. Thus, students are not at liberty to arrange or change their fieldwork assignments.
4. FWII assignments are developed for 8-week or 16-week sessions for a minimum total of 32 weeks during the second year. Students are required to attend FWII assignments for a minimum of 18 hours per week up to a maximum of 20 hours per week.
5. Transportation to the FWII facility is the student's responsibility. Students are not guaranteed that FWII assignments will be in or near their residence.
6. Students may not be assigned to more than three different fieldwork sites in the second year according to the *2023 Standards for an Accredited Educational Program for the Occupational Therapy Assistant*. The only exception to this rule is for a student who has failed one fieldwork II assignment. The returning FWII student would be reassigned to a new fieldwork II assignment which could result in a maximum of four settings. Students cannot complete two of the same kind of practice areas.
7. In most cases, students and Fieldwork Educators will obtain Fieldwork II assignments at least four weeks prior to the date scheduled for the FWII assignment to begin.
8. Students must abide by the policies and procedures of the Fieldwork II facilities.

Students will be informed in writing about the health and safety procedures for each facility during the first week of the fieldwork assignment. The students are to observe the regulations regarding client and staff (student) safety and welfare.

9. All Level II Fieldwork requirements for OTA 213 and/or OTA 217 must be completed by the end of the following semester in order to progress and/or graduate from the program.

#### Fieldwork Education and Supervision

1. The Academic Fieldwork Coordinator is required to evaluate the effectiveness of fieldwork experiences according to the *2023 Standards for an Accredited Educational Program for the Occupational Therapy Assistant*. The Academic Fieldwork Coordinator may delegate certain supervisory and educational responsibilities to other academic fieldwork instructors and fieldwork instructors, as needed.
2. The *Fieldwork II Educator* and the Academic Fieldwork Instructor are required to collaborate on developing site-specific objectives and effective clinical learning activities. The *Academic Fieldwork Instructor* conducts regularly scheduled on-site visits to collaborate with the fieldwork educator and to observe interactions between the student, clinical Instructor, and clients. The on-site visits can be designed to assist the fieldwork educator in identifying and developing learning strategies for the students. On-site visits are provided to ensure that the fieldwork assignments are providing quality learning experiences.
3. The *Fieldwork II Educator* is required to provide the student with a written plan for the fieldwork assignment by the first day of the fieldwork assignment. The written plan will provide information about the proposed schedule for learning activities to be conducted on a weekly basis, and the sequence for grading caseload size, supervision, and related responsibilities. The plan will reflect the activities required to develop competence on the performance competence objectives. Plans will either represent eight- or sixteen-week assignments.
4. The *Fieldwork II Educator* is responsible for preparing for the student's arrival by reviewing all written materials presented in the fieldwork packets sent to each fieldwork educator.
5. The *Fieldwork II Educator* is required to provide effective supervision as outlined by the AOTA Practice Advisory for student supervision to "ensure protection of consumers and provide opportunities for role modeling of OT practice" and in accordance with facility and reimbursement requirements such as Medicare and Medicaid.
6. The *Fieldwork II Educator* is responsible for grading supervision to ensure client safety and develop student autonomy. The AOTA Practice Advisory states that the Fieldwork educator must be able to effectively "recognize when supervision is needed and ensure that supervision supports the student's current and developing levels of competence with the OT process."
7. The *Fieldwork II Educator* (OT and/or OTA) evaluate the student's clinical performance using the guidelines and criteria presented in the *Parkland College Fieldwork II Objectives for the OTA Students*. Students will review copies of the specific fieldwork objectives per facility, and the performance evaluation forms at the beginning of each assignment.
8. Meetings will be scheduled with the fieldwork educator and the student to review the written evaluations of the student's performance. Formal meetings are

- required to be conducted at midterm and at the end of the assignment to discuss the performance outcomes and recommendations.
9. Students are expected to cooperate with and work closely with all clinical and staff personnel. Students are recommended to seek guidance from their *fieldwork educator(s)* when questions and problems arise about the performance of tasks or approaches to various client care problems.
  10. Students are encouraged to seek guidance from the assigned *Academic Fieldwork Instructor* and/or the *Academic Fieldwork Coordinator* when they think that they may need assistance in resolving problems at the fieldwork site that they are uncomfortable discussing with the fieldwork instructor.
  11. Students who arrive late or who have not prepared for their fieldwork experiences may be asked to leave the site for that day. This will constitute a fieldwork absence which needs to be made up. Habitual tardiness constitutes a significant work ethic problem that must be reported to the *Academic Fieldwork Instructor* to develop a *Fieldwork II Advising Plan*.
  12. Students are required to complete assignments requested by the fieldwork educator in a timely manner. Be sure to give students advanced notice of assignments so they can plan their time accordingly. If a student has habitual problems with completing written work such as treatment plans, client notes, and/or home programs, then the Fieldwork Educator should contact the Academic Fieldwork Instructor and/or the Academic Fieldwork Coordinator to schedule a meeting to develop a *Fieldwork II Advising Plan*.
  13. Students are required to seek instructor guidance in performing treatment to ensure safe practice.
  14. *Fieldwork II Educators* are required to maintain confidentiality about any OTA student's records, during and after the student's participation in the fieldwork II assignment in accordance with the *Federal Education Rights to Privacy Act* (FERPA).
  15. All correspondence between fieldwork educator, academic fieldwork instructor and the students is to be strictly professional and confidential.
  16. The fieldwork educator is requested to refrain from developing relationships on online social networks until after the student has completed the fieldwork assignment.
  17. Fieldwork Educators receive continuing education credits for Illinois licensure and NBCOT re-certification for their hour of supervisory work and attendance at any Fieldwork Educators Meetings.

#### Fieldwork Attendance Policies

1. Attendance and punctuality in Fieldwork II are mandatory. Students are expected to arrive on time, in proper attire, prepared and ready to work.
2. Students and fieldwork instructors are required to maintain written attendance records using the OTA Program Attendance forms. All forms should be submitted to the Academic Fieldwork Coordinator one time per month. Failure to have all attendance forms submitted by the end of the fieldwork will result in an incomplete for the course until written verification of attendance has been received.
3. On-site fieldwork educators are responsible for ensuring that documentation of

attendance hours is completed daily and accurately. The fieldwork educators should review and initial weekly documentation of attendance. Attendance forms should be kept onsite not in the student's notebook.

4. Students are given Fieldwork II credit for hours in fieldwork education for the following Fieldwork II activities. These requirements are posted each semester in the letter to the fieldwork educator.
  - On-site preparation and planning time for direct treatment (office time)
  - Direct client services
  - Documentation time
  - Observation of other team members' services
  - Team meeting time
  - Required lunchtime meetings
  - Meetings with Fieldwork Educator
  - Travel time required to move from one site to another site
  - Family meetings and educational services
  - In-services and staff training
  - Transitional services: meeting clients or personnel at referral site.
  - Special conditions: (to be defined by FW educator).
  - Required FWII seminar meetings on campus (i.e., midterm meeting)
  - Approved & confirmed attendance at IOTA or AOTA annual conferences
5. Students are *not given credit* for fieldwork II activities for:
  - Time lost due to late arrival
  - Doing preparatory assignments at home
  - Staying overtime due to poor planning or poor time management without prior permission from the *Fieldwork Educator*.
6. Students will comply with established health standards of the fieldwork site. If a student is feeling unwell, then the student is required to contact the fieldwork educator in sufficient time to accommodate adjustments in the work schedule. It is advised that the student contact the Fieldwork Educator if any of he or she notices any of the following:
  - Fever >100.4
  - Conjunctivitis
  - Diarrhea lasting more than 12 hours
  - Group A Strep diagnosed by a physician
  - Jaundice
  - Vomiting
  - Cold Sores (herpes)
  - Active measles, pertussis, rubella, or chicken pox
  - Upper respiratory infection (cold)
  - Tuberculosis (TB)
  - Shingles or rash of unknown origin
  - Head lice
  - Scabies
  - Abscess or boil that is draining

Impetigo  
Mononucleosis  
Covid -19

7. If a student is unable to complete a clinical at the facility to which they were originally assigned for any reason other than those outlined in “Fieldwork Performance Problems” below, the student may, given site availability and approval by the Academic Fieldwork Coordinator, continue their fieldwork at a comparable setting without loss of time already accrued. However, it will be the prerogative of the fieldwork educator at the new site to assign any remedial training and/or extra fieldwork time as deemed necessary by the fieldwork educator and/or Academic Fieldwork Coordinator. Situations covered by this guideline include but are not limited to closure of facility, departure of fieldwork educator, change in staffing company, and/or other situations deemed appropriate by the Academic Fieldwork Coordinator.

It should be noted that if a placement in a suitable facility in the same practice area cannot be found, the student may need to begin a new placement in a different practice area and may lose the fieldwork time accrued at the originally assigned facility.

### Clinical Grading and Evaluation

Evaluation of students will be conducted on a recurrent basis with sufficiency to provide the students and faculty with valid and timely indications of the students’ progress toward clinical competencies.

Evaluation tools permit the student and the instructor to assess, monitor and track the student’s progress. Formative and summative evaluations will be completed in all courses. Formal evaluation of student performance will include cognitive, psychomotor, and affective behavior but deficits in any one area could be determined to be deficient, and the student would not progress to the next clinical course.

Frequency of evaluation may increase when the student is not meeting the objectives of the course. Evaluation of the student will be shared with the student and filed permanently for five years in the student file.

### Blood Borne Pathogen and Infections Disease Policy for Clinical Faculty and Clinical Students

Parkland College Health Professions faculty, staff, and students (“personnel”) have the obligation to maintain standards of health care and professionalism that are consistent with the public’s expectations of the healthcare personnel.

1. All personnel are ethically obligated to provide patient care with compassion and demonstrate respect for human dignity.
2. It is understood that faculty and students that are in clinical facilities will work with patients that may have an infectious disease. No personnel may ethically refuse to treat a patient solely because the patient is at risk of contracting, or has, an infectious disease. These patients may not be subjected to discrimination. Please contact your

- program director if you have questions.
3. Faculty and students are ethically obligated to respect the rights of privacy and confidentiality of patients with infectious diseases.
  4. Parkland College will protect the privacy and confidentiality of any faculty or students who test positive for an infectious disease. Faculty and staff who pose a risk of transmitting an infectious agent must consult with appropriate health care professionals to determine whether continuing in class or clinical represents a risk to patients. The faculty or student should report any infectious disease to the program director or supervisor. Faculty and students are obligated to follow Parkland College Policy 3.05, Communicable Diseases and Communicable Disease Policy. Program Handbooks may also include specific information on bloodborne pathogen or infectious disease policies and protocols.
    - a. The Dean of Health Professions, along with the faculty, has established and enforced written preclinical, clinical, and laboratory protocols to ensure adequate asepsis, infection and hazardous waste disposal. These protocols are consistent with current federal, state, and/or local guidelines, and have been provided to all faculty, students, and support staff. The protocol is complete including the availability and use of gloves, masks, and protective eye wear by faculty, students, and patients in both preclinical and clinical settings. The protocols are reviewed annually by faculty and the Wellness Coordinator to ensure accuracy and compliance.
  5. The Dean of Health Professions requires faculty and students to abide by current immunization standards set by clinical agencies and/or Parkland College. All programs except Veterinary Technology and Dental Hygiene will set up a health record account through Castle Branch or Viewpoint/Certified Profile. All requirements are listed in those accounts. The requirements are updated as they change. For Dental Hygiene and Veterinary Technology students, please check your program handbooks for requirements.

If an OTA student is exposed to a bloodborne pathogen, the following procedure shall be followed:

1. Immediately after an exposure incident (e.g., needle or instrument stick, human bite, or blood splashed in eyes, nose, mouth, or open wound), the student should flood the contaminated area with water and clean any wound with soap and water or a skin disinfectant if available.
2. After cleansing the contaminated area, the student should report the incident to his or her Fieldwork Educator, who in turn will report the incident to the appropriate staff member at the clinical site or school where the incident occurred. In addition to filling out an incident report at the facility, a Parkland incident report should be submitted to the Wellness Coordinator in U112.
3. If warranted, the student will be referred to the appropriate department in the health care facility where the incident occurred for medical evaluation. If the facility does not have a department that handles exposure incidents or if the incident occurred at a community agency or on-campus, the student should follow this procedure:

If it is between 8 a.m. and 5 p.m., Monday-Friday, call the Carle Occupational



Medicine Department (383-3077), 810 W. Anthony Dr. Urbana. The student should identify himself/herself as a Parkland health career student and explain there has been an occupational exposure to blood/body fluids during clinical and s/he wishes to be evaluated. Department personnel will direct the students to proceed.

At other times, the students should go to the Carle Health Emergency Department, 611 W. Park Street, Urbana, and tell the admitting clerk the same.

4. The facility where the incident occurred will determine according to their protocol whether the source (the person whose blood the student was exposed to) should be tested for HBV, HCV, HIV, and/or any other diseases. In situations where the incident occurred on- campus *or* at a facility which does not have a post-exposure protocol, the source should follow the same procedures as stated in #3 above. When speaking with Carle staff, the student should explain that a Parkland student had an occupational exposure with blood/body fluids and needs to be evaluated.
5. If the cost of immediate post-exposure care for the student and source is not covered by the facility where the incident occurred, Parkland College will cover these costs. A bill should be sent to: Wellness Coordinator, Parkland College - Room U112, 2400 W. Bradley Ave., Champaign, IL 61821. *Any medical follow-up beyond that given at the time of the exposure is the responsibility of the student.* The student should consult with his or her primary care physician or Parkland's Wellness Coordinator as soon as possible after the exposure incident to discuss recommended follow-up care. The student is expected to report the incident to the Wellness Coordinator, Parkland College – Room L 234, 2400 W. Bradley Ave., Champaign, IL 61821 to ensure proper payment of the initial evaluation.

Any questions about the information provided or about exposure to bloodborne pathogens should be referred to Parkland's Wellness Coordinator at 217/373-3879. The above procedure was revised from a Parkland College exposure policy from 2012.

### Bloodborne Pathogen and Infectious Disease Exposure or Other Occupational Hazards

According to the Occupational Safety and Health Association (2011), a bloodborne pathogen is an infection in a person's blood that can infect another human.

# OSHA<sup>®</sup> FactSheet

## Personal Protective Equipment (PPE) Reduces Exposure to Bloodborne Pathogens

OSHA's Bloodborne Pathogens standard (29 CFR 1910.1030) requires employers to protect workers who are occupationally exposed to blood and other potentially infectious materials (OPIM), as defined in the standard. That is, the standard protects workers who can reasonably be anticipated to come into contact with blood or OPIM as a result of doing their job duties.

One way the employer can protect workers against exposure to bloodborne pathogens, such as hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), the virus that causes AIDS, is by providing and ensuring they use personal protective equipment, or PPE. Wearing appropriate PPE can significantly reduce risk, since it acts as a barrier against exposure. Employers are required to provide, clean, repair, and replace this equipment as needed, and at no cost to workers.

### Selecting Personal Protective Equipment

Personal protective equipment may include gloves, gowns, laboratory coats, face shields or masks, eye protection, pocket masks, and other protective gear. The PPE selected must be appropriate for the task. This means the level and type of protection must fit the expected exposure. For example, gloves may be the only PPE needed for a laboratory technician who is drawing blood. However, a pathologist conducting an autopsy would need much more protective clothing because of the different types of exposure (e.g., splashes, sprays) and the increased amount of blood and OPIM that are encountered. PPE must be readily accessible to workers and available in appropriate sizes.

If it can be reasonably expected that a worker could have hand contact with blood, OPIM, or contaminated surfaces or items, the employer must ensure that the worker wears gloves. Single-use gloves cannot be washed or decontaminated for reuse. Utility gloves may be decontaminated if their ability to provide an effective barrier is not compromised. They should be replaced when

they show signs of cracking, peeling, tearing, puncturing, or deteriorating. Non-latex gloves, glove liners, powderless gloves or similar alternatives must be provided if workers are allergic to the gloves normally provided.

Gloves are required for all phlebotomies outside of volunteer blood donation centers. If an employer in a volunteer blood donation center judges that routine gloving for all phlebotomies is not necessary, then the employer is required to periodically re-evaluate this policy; make gloves available for workers who want to use them; and cannot discourage their use. In addition, employers must ensure that workers in volunteer blood donation centers use gloves (1) when they have cuts, scratches or other breaks in their skin, (2) while they are in training, or (3) when the worker believes that hand contamination might occur.

When splashes, sprays, splatters, or droplets of blood or OPIM pose a hazard to the eyes, nose or mouth, then masks in conjunction with eye protection (such as goggles or glasses with solid side shields) or chin-length face shields must be worn. Protection against exposure to the body is provided by protective clothing, such as gowns, aprons, lab coats, and similar garments. Surgical caps or hoods, and shoe covers or boots are needed when gross contamination is expected, such as during orthopedic surgery or autopsies.

In HIV and HBV research laboratories and production facilities, laboratory coats, gowns, smocks, uniforms, or other appropriate protective clothing must be used in work areas and animal rooms. Also, protective clothing must not be worn outside of the work area and must be decontaminated before being laundered.

## Clinical and Classroom Accidents/Injury/Incident Reporting- Needle Stick and Exposures

For all student injuries on campus, Public Safety should be called to assess and report the situation.

For students at clinical at any Carle property, when the student has had an exposure or sharp injury, the procedure is:

If between 8 a.m. and 5 p.m., Monday-Friday, call the Carle Health Occupational Medicine Department (217) 383-3077, 810 W. Anthony Dr., Urbana. The students should identify themselves as a Parkland health career student and explain there has been an occupational exposure to blood/body fluids during clinical and they wish to be evaluated. Department personnel will direct the students to proceed.

At other times, the student should fill out an Employee Injury Form and then go to the Carle Emergency Department (E.D.), 611 W. Park Street, Urbana. Upon check-in, the students will need identify themselves as a Parkland health career student and explain there's been an occupational exposure to blood/body fluids during clinical and they wish to be evaluated. The student should be prepared to show them an insurance card if the student is insured.

The Emergency Room nurse will review immunization status and the exposure and determine if the source needs to be drawn. The ER nurse will also follow with exposure education for the student. The student needs to follow up with the Infection Control Nurse. If possible, the source patient should have an order to have a lab draw.

#### For Students at Non-Carle Health Clinical Sites:

The hospital affiliate's policy for student or employee injury should be immediately followed. Relevant clinical affiliate reports and the Parkland College Incident Report must be completed by the faculty and students.

#### *Responsibility of Charges Incurred*

If the cost of immediate post-exposure care for the student and source is not covered by the facility where the incident occurred or by the students' insurance, Parkland College will cover these costs. A bill should be sent to:

Parkland College  
Wellness Coordinator, Parkland College Student  
Life 2400 W. Bradley Ave. U116  
Champaign, IL 61821.

Any medical follow-up beyond that given at the time of the exposure is the responsibility of the student. The students should consult with their primary care physician or Parkland's Wellness Coordinator as soon as possible after the exposure incident to discuss recommended follow-up care.

While we prepare the student for an entry-level position as an OTA the risk of contracting a disease or illness is understood to be a hazard of the profession, but the safety of the student in the learning environment is a priority for the faculty and instructors. If the student is alerted prior to the start of a patient intervention that the patient does have any airborne or blood borne pathogen, or considered a high-risk patient, the student may be excused and not be allowed to participate with patient care.

## Clinical Progression and Failure

Students are expected to retain knowledge from previous semesters, skills, practical exams. The clinical evaluation is based on the application of previously learned knowledge and skills as well as the comprehension and application of new skills and information each semester. The proficiency of the clinical skills should increase each week and each semester to progress to the next clinical course or graduate.

## Fieldwork Performance Problems

A student may fail the Level II fieldwork due to inability to pass all the *Basic Clinical Skills* by midterm and/or by the end for the fieldwork assignment.

If a student is unable to complete OTA 213 and is eligible for an Incomplete, then the student is required to complete OTA 213 by the end of the spring semester. If a student is unable to complete OTA 217 and is eligible for an Incomplete, then the student is required to complete OTA 217 by the end of the summer semester. If a student fails OTA 213 or OTA 217 then the student will be required to re-take the course when it is offered after completing the requirements of the Fieldwork II Action Plan.

A student who is in jeopardy of failing the FWII assignment will be notified promptly by the Fieldwork Educator who has written documentation of performance/skill deficiencies. The fieldwork educator will promptly inform the Academic Fieldwork Instructor and the Academic Fieldwork Coordinator by email. The student, fieldwork educator, academic fieldwork instructor, and/or the academic fieldwork coordinator will be required to meet to discuss possible remediation plans.

The student will be notified if they are in danger of failing the FWII assignment by midterm. A student who is failing may be required to:

- (a) continue to work at the facility under the terms of the Fieldwork II Action Plan
- (b) leave the facility to work on recommended skills and behaviors and withdraw from the course
- (c) re-assigned to another facility (pending availability) following participation in remedial activities, and/or
- (d) withdraw from the OTA Program.

A student's unsafe, negligent, unethical, unsatisfactory, and/or impaired clinical performance should be identified and documented in writing by the Fieldwork Educator. The fieldwork instructor is required to report his or her concerns to the Academic Fieldwork Instructor. The fieldwork educator and academic fieldwork instructor are responsible for developing appropriate remediation for problematic student performance and/or behavior. The student may be required to leave the fieldwork site and receive an "F" for the course if the student's behavior was unethical or negligent or remains unsafe after repeated instruction and feedback.

A student who has failed OTA 213 may be allowed to continue to participate in the other required OTA courses while working on the requirements for re-entry into Level II Fieldwork education. The student will not be allowed to progress to the fourth semester if she or he has failed to complete the requirements noted in the Fieldwork II Action Plan. Upon successful completion of the fieldwork assignment (pending the terms of re-assignment), the student will be able to progress through the OTA curriculum as published.

If a student fails a Level II Fieldwork course two times or fails both Level II Fieldwork courses (OTA 213 & OTA 217), then the student will be required to withdraw from the OTA Program. The student will be assigned a status of Re-Application Level 3 and will be considered for readmission only with evidence of significant improvements or changes to support re-admission.

### Clinical Dismissal

Depending on the severity, any one break in non-compliance can result in dismissal from the program. Dismissal by the clinical facility includes but is not limited to severe breeches of patient safety, patient rights, staff rights or safety, breeches of confidentiality, or other breeches of rules, ethics, or standards.

By contract, the clinical facilities have the right and the authority to determine who is present on their campus. If the clinical facility removes the student from the clinical facility, Parkland College must comply and there is no appeal process.

If the student is barred from a clinical facility, the Health Professions Dean will weigh the patient's rights, the facility rights, the student's rights, and the infraction to determine if the student can be transferred to another clinical site or if the infraction supports immediate suspension or dismissal from clinical. Standards and ethics that include safe and ethical care are incorporated throughout every program in Health Professions. Positive placement or transfer to another facility will not be considered if patient safety, ethical care or confidentiality has been breached.

A student who commits an infraction serious enough to warrant clinical dismissal, and due to the nature of the offense, cannot be transferred to another clinical facility, will be notified of intent to dismiss from the program.

Safe and ethical care and behavior is required in the classroom, lab and clinical as well as outside the classroom. The student always protects the patient/family, not just when "on duty."

Please refer to the Health Professions Essential Qualifications, Code of Conduct, and Intent to Suspend or Dismiss Policy that is posted on every Health Professions Cobra course.

### Fieldwork II Alternates

- a. All students who were re-admitted into the OTA program after a period of absence have a Fieldwork II (FWII) Alternate status.
- b. All FWII policies and procedures are applicable to the FWII Alternate student except

those that define the sequence of when fieldwork assignments will be available, and the required minimum number of hours per week that FWII students attend assignments.

- c. The priority for Fieldwork II assignments is always for students with a non-alternate status during the scheduled second year course sequence.
- d. The FWII Alternate may be required to attend a clinical assignment on a full-time basis over a shorter time span (less than 16 weeks) during the summer session after the second year course sequence.
- e. Students identified as Fieldwork II Alternates may not be eligible to graduate with their classmates in May due to the outstanding incomplete in fieldwork education, however the FWII student will be able to participate in commencement exercise with his or her peers.
- f. The FWII Alternate status is non-negotiable and non-transferable to other students.

### Student Employment

The OTA program, as with any Health Profession program, has high activity and educational demands. The amount of work outside of the classroom can be quite a bit more than in prerequisite courses. To maintain a balance both in the classroom and in life and to achieve academic success, OTA students are advised to work **no more than 20 hours per week during the 1<sup>st</sup> year and no more than 10 hours per week during the 2<sup>nd</sup> year.**

### Patient Assignments at Clinical

Healthcare providers serve the public and the patient has the right to expect quality care regardless of based on the students' beliefs related to race, color, gender, sexual orientation, religion, creed, national origin, age, marital status, disability, veteran status, disease process, socio-economic status, or any other applicable basis in law. Clinical experiences are planned by the Health Professions faculty/administrators to best meet student learning needs. Students may not refuse patient care assignments.

All patients are to be treated with equal care and compassion. Patient confidentiality is always respected and students will follow HIPAA policies.

### Student Work Policy at Clinical

All student activities associated with the OTA Program while completing clinical rotations will be educational and training focused. Students will not receive monetary remuneration in any form during this educational/training experience. Additionally, the student will not be substituted for hired staff within the partnering hospital setting while enrolled in the OTA program.

### Mandated Reporting of Suspected Abuse and/or Neglect

Occupational therapy personnel, OTA faculty and OTA students are required to report to designated authorities when he/she suspects that a client has been abused or neglected

during the performance of services provided by any member of the professional team, supportive staff and ancillary care providers, and/or family members. The following procedure is required by all OTA students who may witness behavior that may be interpreted as abusive or negligent.

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

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

**Administration for Children and Families**

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

**Illinois Department of Children and Family Services**

[http://www.state.il.us/dcf/faq/faq\\_faq\\_can.shtml](http://www.state.il.us/dcf/faq/faq_faq_can.shtml)

**Administration of Aging:**

[http://www.aoa.gov/aoaroot/aoa\\_programs/elder\\_rights/ea\\_prevention/whatisea.aspx](http://www.aoa.gov/aoaroot/aoa_programs/elder_rights/ea_prevention/whatisea.aspx)

**Illinois Department on Aging:**

<http://www.illinois.gov/aging/Pages/default.aspx>

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

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

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

## **VIII. Student Conduct, Professional Behavior, Appearance, and Standards**

### **Health Professions Code of Conduct**

Conduct standards for Health Professions are higher than those of the ordinary student or citizen because of the inherent responsibilities assumed by the health professional's role and the trust the public places on the Health Professions to do no harm. Therefore, issues such as

professional and Interprofessional ethics, honesty, integrity, safety, and confidentiality are considered essential for practice in health professions and students will be held to professional standards.

A graduate must be competent in the application of the principles of ethical reasoning, ethical decision making and professional responsibility as they pertain to the academic environment, research, and patient care. If a student is found to be behaving in an unprofessional manner, the student will be removed from the classroom, lab, or clinical site. This includes any actions that may be deemed unprofessional by the instructors or surgical staff. Examples of unprofessional conduct include (but are not limited to): verbal or non-verbal language, actions, or voice inflection which compromises rapport with patients, family members, physicians, nurses, surgical technologists, surgical assistants, other staff, or instructors. This includes sexual innuendo or flirtatious behavior. Violations of these standards are serious and will result in the student being removed from the classroom, lab, or clinical site immediately. Students removed from clinical, will not be readmitted to class or to the program.

Please refer to the Health Professions Code of Conduct posted in Cobra for every course.

### Dress Code

1. Students may wear comfortable clothing to class. Students might consider wearing layers to accommodate different temperatures. Clothing and footwear should not interfere with or be unsafe for participation in classroom or laboratory activities.
2. When students are attending service-learning activities, fieldwork assignments and field trips in the community, they are to remember that they are representing the OTA program, the college and the profession of occupational therapy. Dress in community settings should be professional as appropriate for the assignment. Always check with your Fieldwork Educator to confirm what dress is expected.
3. The OTA students must contact the Fieldwork I and Fieldwork II instructors and inquire about the appropriate dress code. Students are required to comply with each fieldwork facility's designated dress code to remain in the fieldwork assignment. The OTA Program does not have a uniform. The following suggestions may be required at your site:
  - a. Neat clothing (clean, non-wrinkled, no jeans or leggings). Students should be able to bend, squat, lift, sit and kneel on the floor without his or her chest, midriff or buttocks showing. Blouses should not be provocative. It is recommended that students wear clothing that can be easily washed and maintained
  - b. Flat soled, closed toe shoes
  - c. Simple jewelry
  - d. Little or no perfume
  - e. Nails are to be kept short (no longer than ¼ inch long) and if painted should not be chipped. Chipped polish and long nails place our clients at risk for possible infections.
  - f. Hair should be styled so it does not interfere with client interaction and/or student safety.
  - g. A student may be requested to remove any unusual facial piercings if they are considered to interfere with the performance of the fieldwork role.



## Personal Grooming

Personal hygiene must be impeccable. Body odor cannot be tolerated by patients and coworkers in the clinical setting. Patients can have heightened sensitivity to smells.

## Personal Information Protection for HIPAA

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

Protected Health Information (PHI) is any information that identifies an individual AND relates to:

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

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

1. All patient records (the chart, the surgical schedule and any other information, verbal or written, and any notes taken from the facility record) are confidential.
2. Students must be protective of patient information once it is removed from the clinical setting. (i.e., notes not left on desks, in classrooms, in cafeterias, or out for any public viewing). No patient names will at any time be removed from the clinical facility.
3. Students must not identify patients, surgical team members or other people by name in written work, notes or other exercises for learning purposes. In such instances, the use of initials is appropriate.
4. Students will not discuss patients, staff, or care issues in public (i.e., with friends or family, or in public places such as the shuttle bus, cafeterias, lounges, bars, restaurants, hairdressers, etc.).

## Implications for Students

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

## Consequences

Students providing information to the media will be dismissed immediately.

The student will receive a written warning when the HIPAA violation appears accidental (such as leaving a chart open).

The student will be expelled if a willful HIPAA violation occurs, such as looking up information

on a patient without good reason, taking pictures of images with a cell phone, etc.

Any violation of confidentiality may result in removal from a clinical site and dismissal from the program.

Please see the entire HIPAA compliance policy posted on every Cobra course.

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

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

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

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

### OTA Program Professionalism

1. All OTA students are encouraged to collaborate with other OTA students and instructors to develop an **effective learning community** for the next two years.
2. OTA students are expected to demonstrate **effective work ethic behaviors** in the classroom, in fieldwork education, and in execution of course requirements based on the *Parkland College Work Ethics Student Handbook*. These behaviors include Attendance, Character, Teamwork, Appearance, Attitude, Productivity, Organizational Skills, Communication, Cooperation, and Respect.
3. OTA students are expected to attend class on time and be prepared to engage in the

learning objectives and activities outlined in the course topic outlines. See **Attendance & Punctuality Policy**.

4. OTA students are encouraged to be **active participants** in classroom discussions, to share ideas, ask questions, to express differences in perspectives, to explore creative problem- solving, and to engage in critical analysis of course content.
5. OTA students are expected to interact with all students and faculty in a **respectful manner**. A student will be reminded one time, in a respectful manner, to refrain from using disruptive or disrespectful behavior. A student may be requested to leave the classroom for a designated period (e.g., until composed or until the next class period) if the student is unable to stop the disruptive behavior. A student who has demonstrated frequent disruptive behavior will be requested to meet with the instructor, the program director and/or the Vice President for Student Services for remediation and/or disciplinary action. Refer to the *Parkland College Student Policies and Procedures Manual, Student Conduct Code* for additional information.
6. **Scheduling, time and task management skills** and **prioritizing daily activities** are critical work ethic behaviors essential to be an effective student in the OTA Program, and to be an effective clinician. You are responsible for modifying your skills to effectively schedule your assignments with your other responsibilities. Contact the course instructor or Counseling and Advising Center for assistance.
7. **Conflict Resolution:** OTA students are encouraged to engage in proactive, solution-focused, problem-solving approaches when conflicts arise. Students are encouraged to discuss concerns and issues with the instructor, program director and/or Counseling and Advising. The OTA faculty will empower each student to use effective conflict resolution strategies in their academic interactions.
8. Students will be evaluated on their **professional behavior and work ethic behaviors** during classroom, clinical and laboratory assignments, and the completion of assessments and homework. The primary objective for evaluation is to provide feedback for the learner to improve professional and work behavior. Secondly, the evaluation will aid instructors and students in defining specific objectives in need of remediation.
9. A student who demonstrates significant work ethics problems (Attendance, Character, Teamwork, Appearance, Attitude, Productivity, Organizational Skills, Communication, Cooperation, and Respect) will be considered ineligible to participate in Level I and/or Level II fieldwork in the community.
  - a. The faculty meets each semester at or before midterm to discuss student professional behavior in lecture and labs and to complete the Professional Behavior Checklist. The checklist and feedback are shared with the student.

- b. If inappropriate professional behaviors are identified, the faculty will schedule a meeting with the student to develop an Academic Advising Plan to develop remediation plan.
- c. The faculty will notify the Program Director about identified concerns and remediation plan.
- d. The Program Director may schedule a meeting with the student to review and follow-up on the remediation plan.

### OTA Program Interprofessionalism

The OTA program collaborates with other health profession programs to provide various opportunities for student collaboration and interprofessional education. The OTA program believes interprofessional education is the key to building strong relationships and communication skills with other Health Profession students. Interprofessional education has been defined as systematic development of learning experiences in which “students from two or more professions in health and social care learn together during all or part of their professional training with the object of cultivating collaborative practice for providing client-centered health care” (Centre for the Advancement of Interprofessional Education, 1997). Furthermore, a World Health Organization Study Group (2010) developed the Framework for Action on Interprofessional Education and Collaborative Practice that identified the mechanisms that shape successful collaborative teamwork, and outlined a series of action items that policymakers can apply in their health care systems to foster interprofessional collaboration and education. This framework is used throughout the OTA education at Parkland College.

Benefits of interprofessional education include

- Enhanced practice that improves the delivery of services and has a positive impact on care
- Improved understanding of the knowledge and skills needed to work collaboratively
- A better and more enjoyable learning experience for participants
- Flexibility to implement in a variety of settings.

### OTA Program Code of Ethics

1. All OTA students will abide by the Occupational Therapy Code of Ethics (2020) for all client and professional interactions.
2. All clients' records (the chart and any other information, verbal or written, and those notes taken from the record) are confidential. Violations of this confidentiality may be subject to litigation involving the student and the College.
3. Students must be protective of client information once it is removed from the fieldwork setting (i.e., notes not left on desks, in classrooms, in cafeterias, or out for any public viewing). No discussion of clients, staff or care issues occurs in public (i.e. lounges, restaurants, stores).
4. Students must not identify clients, nursing staff, doctors, or other people by name in course work treatment plans, notes, or other exercises for learning purposes.

5. Students will not discuss client or staff problems with other clients.
6. Students are expected to display professional behavior both in the classroom and while participating in the fieldwork assignments.
7. Students demonstrating unethical conduct, (i.e., cheating, deception) during examinations and preparation of class or clinical assignments (verbal, written or agency assigned visits) will be subject to course faculty review to determine disciplinary action.
8. Parkland College will maintain student confidentiality in all interactions with the clinical facilities. The Academic Fieldwork Coordinator is not at liberty to disclose any students' academic or personal history or need for special accommodations for learning without the student's written permission.
9. Students are responsible for requesting accommodation for his or her disability on the first day of the fieldwork assignment. The student will provide written documentation of the accommodation to the Academic Fieldwork Instructor and the Clinical Instructor (i.e., lifting restriction; extended documentation time due to learning disability). The Academic Fieldwork Instructor will assist the Clinical Instructor in making reasonable and appropriate accommodations in accordance with the facility's policies and procedures, and the Americans with Disabilities Act (ADA).
10. Clinical Instructors are required to maintain confidentiality about any OTA student's records, during and after the student's participation in the fieldwork II assignment.

#### Occupational Therapy Code of Ethics

OTA students are expected to follow the Occupational Therapy Code of Ethics (2020) by showing ethical decision making and professional behavior. The OT Code of Ethics is found at the following link: <https://ajot.aota.org/article.aspx?articleid=2442685>

## IX. Parkland College Policies

### Extended Absences

See General College Syllabus

### Absence Due to Religious Obligations

See General College Syllabus

### Children in the Classroom

It is understood that the mission of the College is to provide an atmosphere that is as free as possible from outside distractions and disruptions. To maintain this learning environment, unaccompanied and unauthorized minor children are not allowed on the campus. To protect children from possible injury and to maintain a safe, secure learning environment, children are not permitted in classes and are not to be left unsupervised anywhere on campus, including employee work areas. (College Policy 5.04)

## Accessibility Services

See General College Syllabus

## Academic Honesty

The following statement is the sanctioned affirmation of academic honesty in works submitted by students:

“I honor Parkland’s core values by affirming that I have followed all academic integrity guidelines for this work.”

Parkland College’s values include honesty, integrity, and responsibility. Students, faculty, and staff are all expected to maintain academic integrity in their work and take collective responsibility for preventing violations of intellectual ownership.

Healthcare professionals are held to the highest standard and must be trusted to be honest in any situation. Academic dishonesty is unacceptable, and the institution is committed to helping students learn these values through development and growth. Personal commitment, honest work, and honest achievement are necessary characteristics for an educated person and a health care professional. Parkland faculty and administration can no longer make assumptions about what is considered cheating (academic dishonesty) and what students understand to be cheating (academic dishonesty).

Parkland Policy in Student Policy Manual: Please go online and read through the manual.  
<http://www.parkland.edu/studentLife/policies/default.aspx>

Page 5: Cheating: Using or attempting to use unauthorized materials, information, or study aids in any academic activity. Submitting as one’s own work term papers, homework, and examinations that are not one’s own work or for which a student received unauthorized help.

Page 6: Collaboration: Students at Parkland College are encouraged to work together on group projects, study, and other activities. However, work submitted to fulfill an assignment not specifically identified as a group activity must be substantially the work of the author. Collaboration beyond this constitutes academic misconduct.

### Examples of Cheating

1. Taking pictures of exams
2. Taking pictures of a computer screen with test questions
3. Texting each other while sitting at your own computers sharing answers
4. One student looking up answers while another student answers questions on an assignment/test.
5. Posting, texting, or communicating parts of a test or quiz.
6. Taking quizzes together

UNLESS YOUR INSTRUCTOR HAS SAID, “this is a group project” or use any resource, including your classmate, your work should be just YOUR work, or it is cheating.

Consequences of cheating:

1. Fail the quiz, test, or assignment- and/or
2. Fail the course- and/or
3. Be dismissed from the Program- and/or
4. Be dismissed from the College

## X. Health Professions Policies- *The following policies are posted on Cobra for Health Professions courses.*

Guidelines for Accommodations in Health Professions

Spoken and Written English Policy

Social Networking Policy

HIPAA Policy

Clinical Failure and Grading/Withdrawal

Intent to Dismiss Policies and Procedures

Student Health, Immunization, Drug, and Background Policy and Procedures

HP Model for Building Professional and Interprofessional Teamwork

Name Change on Graduation Policy

Health Professions Code of Conduct

## XI. Some General Good Advice

1. Actively listen, get involved, and actively learn.
2. Respond, don't react.
3. Focus on solutions not problems.
4. Learn how to hold two opposing ideas in your head at once.
5. Plan, be prepared, don't get behind, do one thing at a time.
6. Ask for help anytime.
7. Learn to work together and get help from other students.
8. Don't take everything too seriously, it typically is never about you.
9. Accept and learn from your mistakes as well as your successes.
10. Amend your ways promptly when in error.
11. Respect others and yourself.
12. You can learn from all situations.
13. Live and learn!

## XII. Student Policy Compliance and Attestation

The OTA Student Handbook has been developed to assist you in your progression through the Occupational Therapy Assistant Program. Understanding and compliance with the policies and procedures outlined in this booklet and the Student Policy and Procedures Manual are necessary for successful completion of the program.

I have read, understood, and will comply with the Policies and Procedures outlined in Parkland College, Occupational Therapy Assistant Program Student Handbook and the Student: Policy and Procedures Manual and has accessed and reviewed policies on the Cobra Learning System.

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Printed Name

Signature

Date