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PROFESSIONAL AND GOVERNING BODIES

THE AMERICAN OCCUPATIONAL THERAPY ASSOCIATION (AOTA)

The American Occupational Therapy Association (AOTA) is the national professional association established in 1917 to represent the interests and concerns of occupational therapy practitioners and students of occupational therapy and to improve the quality of occupational therapy services. AOTA’s major programs and activities are directed toward assuring the quality of occupational therapy services, improving consumer access to health care services, and promoting the professional development of members. AOTA educates the public and advances the profession by providing resources, setting standards, and serving as an advocate to improve health care. AOTA is based in Bethesda, MD.

AOTA Vision Statement
AOTA advances occupational therapy as the preeminent profession in promoting the health, productivity, and quality of life of individuals and society through the therapeutic application of occupation.

AOTA Mission Statement
The American Occupational Therapy Association advances the quality, availability, use, and support of occupational therapy through standard-setting, advocacy, education, and research on behalf of its members and the public.

Centennial Vision
We envision that occupational is a powerful, widely recognized, science-driven, and evidence-based profession with a globally connected and diverse workforce meeting society’s occupational needs.

Contact information:
4720 Montgomery Lane Ste 200
Bethesda, MD 20814-3449

Phone: 800-729-2682
TTD: 800-377-8555

Fax: 301-652-7711

http://www.aota.org

ACCREDITATION

The Occupational Therapy Assistant program at Central Community College is accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA), located at 4720 Montgomery Lane Ste 200, Bethesda, MD 20814-3449. ACOTE’s telephone number c/o AOTA is (800) 729-2682. Graduates of the program are eligible to sit for the national certification examination for the occupational therapy assistant administered by the National Board for Certification in Occupational Therapy (NBCOT).

ACCREDITATION COUNCIL FOR OCCUPATIONAL THERAPY EDUCATION (ACOTE)

The Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA) accredits educational programs for the occupational therapy assistant. The Standards comply with the United States Department of Education (USDE) criteria for recognition of accrediting agencies and are the requirements used in accrediting educational programs that prepare individuals to become occupational therapy assistants. The extent to which a program complies with these Standards determines its accreditation status. The Occupational Therapy Assistant is accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA), located at 4720 Montgomery Lane Ste 200, Bethesda, MD 20814-3449. ACOTE’s telephone number c/o AOTA is (800) 729-2682. Graduates of the program are eligible to sit for the national certification examination for the occupational therapy assistant administered by the National Board for Certification in Occupational Therapy (NBCOT).

ACOTE Vision Statement

The Accreditation Council for Occupational Therapy Education (ACOTE) is committed to the establishment, promotion, and evaluation of standards of quality in occupational therapy education. To this end, ACOTE will lead in the development of effective collaborative partnerships with the communities of interest, both internal and external to the profession of occupational therapy, which are affected by its activities. December 2008, revised December 2013

ACOTE Mission Statement

The mission of the Accreditation Council for Occupational Therapy Education (ACOTE) is to foster the development and accreditation of quality occupational therapy education programs. As an autonomous entity, ACOTE establishes rigorous standards for occupational therapy education at multiple degree levels, thereby supporting the preparation of competent occupational therapists and occupational therapy assistants. ACOTE will continually evaluate its functions to serve as a model for ethical, accountable, and efficient practice, and acknowledges occupational therapy’s contribution to promoting the health and participation of people, organizations, and populations through engagement in occupation. - December 2008

CERTIFICATION

THE NATIONAL BOARD FOR CERTIFICATION IN OCCUPATIONAL THERAPY, INC. (NBCOT)

The National Board for Certification in Occupational Therapy, Inc. (NBCOT) is a not-for-profit credentialing agency that provides certification for the occupational therapy profession. NBCOT serves the public interest by developing, administering, and continually reviewing a certification process that reflects current standards of competent practice in occupational therapy. NBCOT also works with state regulatory authorities providing information on credentials, professional conduct, and regulatory and certification renewal issues.

NBCOT Mission Statement

Serving the public interest by advancing client care and professional practice through evidence-based certification standards and the validation of knowledge essential for effective practice in occupational therapy.

NBCOT Vision Statement

Certified occupational therapy professionals providing effective evidence-based services across all areas of practice

Contact Information

12 South Summit Avenue
Suite 100
Gaithersburg, MD 20877

Phone: (301) 990-7979
Fax: (301) 869-8492
Email: info@nbcot.org

**National Board of Examination and Certification Eligibility**

**Character Review**

NBCOT’s character review program serves the public interest by screening illegal, unethical, and incompetent behaviors of individuals who are yet to be certified by NBCOT. To ensure that occupational therapy practitioners meet standards of professional conduct prior to entering the profession, all applicants for certification are required to provide information and documentation related to affirmative responses to character questions on the examination application.

Prior to being deemed eligible to take the NBCOT certification examination, COTA applicants must:

1. Graduate from an accredited occupational therapy program recognized by NBCOT. NBCOT recognizes U.S. occupational therapy degrees accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association, Inc. (AOTA). Applicants who have not yet received their occupational therapy degree but are “cleared for graduation” are considered by NBCOT to have met the academic criteria. “Cleared for graduation” means that all grades have been recorded, the thesis is complete (if required), and there are no outstanding financial obligations to the institution.
2. Complete all fieldwork requirements.
3. Submit the examination application and receive authorization by NBCOT to take the examination. *Please Note: The application should not be submitted until the applicant has graduated or is cleared for graduation.*
4. Request that the school registrar confirm the applicant’s eligibility to examine by submitting the official final transcript or an NBCOT Academic Credential Verification Form (ACVF).
5. Agree to abide by the NBCOT Candidate/Certificant Code of Conduct.

To maintain the COTA certification status, certificants must satisfy a 36-unit requirement of professional development activities every three years.

**Licensure**

Occupational therapy is regulated in all 50 states, the District of Columbia, Puerto Rico and Guam. Different states have various types of regulation that range from licensure, the strongest form of regulation, to title protection or trademark law, the weakest from of regulation. The major purpose of regulation is to protect consumers in a state or jurisdiction from unqualified or unscrupulous practitioners.

State laws and regulations significantly affect the practice of occupational therapy. Laws or statutes are enacted by legislators, who are elected public officials. Regulations specifically describe how the intent of the laws will be carried out. These regulations are developed by regulators, who are appointed public officials of various departments in state government. Both kinds of officials make decisions that directly and indirectly affect occupational therapy practitioners.


**State of Nebraska**

Upon successful completion of the OTA program at Central Community College and passing state boards, you must request your Nebraska state license. Information regarding Nebraska state license criteria, procedures, and fees can be found at http://dhhs.ne.gov/publichealth/Pages/crl_rcs_ot_requirementstemp.aspx .

Requirements to Apply for an Occupational Therapist or Occupational Therapist Assistant License. (n.d.). Retrieved March 6, 2015, from http://dhhs.ne.gov/publichealth/Pages/crl_rcs_ot_requirementsot.aspx
OCCUPATIONAL THERAPY ASSISTANT PROGRAM OVERVIEW

The Occupational Therapy Assistant program at Central Community College is offered on the Grand Island Campus. The program prepares students for entry-level practice as Certified Occupational Therapy Assistants (COTAs). COTAs work in collaboration with and under the direct supervision of a Registered Occupational Therapist (OTR) to provide health, wellness, and rehabilitative services in a multitude of arenas. Certified Occupational Therapy Assistants are employed in rehabilitation facilities, skilled nursing facilities, hospitals, schools, day treatment centers, outpatient clinics, and other community agencies. Occupational therapist practitioners are concerned with the quality of life of individuals, who because of a physical, psychological, or social condition or an environmental or attitudinal barrier, are unable to fully participate in meaningful tasks and activities of daily life or in the everyday life of their community.

Certified Occupational Therapy Assistants assist OTRs in assessing individual and community needs, planning and implementing treatment activities, communicating with individuals, families, and health care providers, and documenting progress toward the achievement of individual and community identified goals. Occupational therapy practitioners are adept at applying the skillful use of occupation to facilitate health and wellbeing. In addition to occupation, occupational therapy practitioners make use of purposeful activities, creative arts, environmental modification, adaptive devices, and the therapeutic use of self to facilitate engagement in occupation and meaningful activity. In addition, they work collaboratively with citizens who are disenfranchised, health care professionals, community members, and their national (AOTA) and state organizations to facilitate change processes in discriminatory and debilitating health and social practices.

Students graduating from CCC with an AAS degree will be prepared to provide occupational therapy services that meet the demands of current and future practice while demonstrating quality, ethical, and professional occupational therapy behavior in all practice environments. Students with a strong interest in health and wellness, psychology, sociology, education, and behavioral studies are encouraged to apply to the program.

The OTA program at CCC consists of five consecutive full-time semesters of program study. In addition to 52 credit hours of OT specific coursework, students complete 19 hours of CCC core curriculum and coursework that supports the major. Students completing the AAS degree are eligible to sit for the National Board of Certification in Occupational Therapy (NBCOT) examination. After successful completion of this exam, the individual will be a Certified Occupational Therapy Assistant (COTA). It is the standard in most states to require licensure in order to practice. Please note, students with a felony conviction will not be allowed to enter the OTA program, as it affects a graduate's ability to sit for the NBCOT certification examination, state licensure and potentially the ability to become employed.
PROGRAM STATEMENT OF PHILOSOPHY

The programs philosophical principles reflect currently published beliefs held by the profession. Faculty believe that humans grow and flourish when they are immersed in enriched social contexts and that occupation, including the occupation of teaching and learning, is both process oriented and action driven. Graduates with an Occupational Therapy Assistant AAS degree will be prepared to provide occupational therapy services that meet the demands of current and future practice while demonstrating quality, ethical, and professional occupational therapy behavior in all practice environments.

OTA PROGRAM MISSION

The mission of Central Community College’s Occupational Therapy Assistant program is to educate competent, ethical, occupational therapy assistants, who are committed to lifelong learning, advocacy and who are drivers of change for the benefit of the occupational therapy profession. Graduates of the program will use their occupational therapy expertise to facilitate health and healing in diverse and global settings and work collaboratively to address the healthcare challenges of the 21st century.

PROGRAM OUTCOMES

Program outcomes that measure the effectiveness and quality of the program are focused on the benefits to the student, employer, and community. The following outcomes have been identified.

1) Performance on Licensure exam:
   The annual mean for the National Board for Certification of Occupational Therapy (NBCOT) pass rate for CCC OTA graduates will be at or above the national mean for the same year.

2) Program Completion:
   80% of CCC students will complete the OTA program within 3 years of first starting the first occupational therapy course.

3) Graduate Program Satisfaction:
   80% of the CCC OTA graduates will report satisfaction with the preparation for occupational therapy practice provided by the program.

4) Employer Program Satisfaction:
   80% of employers of CCC OTA graduates will report satisfaction with the competency of graduates as defined by the student learning outcomes and graduate competencies.

5) Job Placement Rates
   90% or more of CCC OTA graduates seeking employment will be employed in the area of occupational therapy within 6 months of program completion.

STUDENT LEARNING OUTCOMES

STUDENTS ARE PREPARED TO

1) Provide quality occupational therapy services in a variety of practice environments.
2) Meet the demands of current and future practice.
3) Demonstrate ethical reasoning, practice professional Code of Ethics, and professional integrity.
Curriculum Design

Threaded throughout the curriculum are concepts of quality, advocacy, and ethics. The OTA program utilizes a developmental approach in addressing the curriculum threads. Below is a list of classes in which these concepts are addressed. In the first year of the program, these concepts are introduced and as the student progresses through the coursework, the concepts and complexity increase. These themes help focus the curriculum coursework and highlight the knowledge and skills necessary for practice. These threads have been identified by the community, occupational therapy practitioners, the college and the profession, in order for graduates to address the needs of current and emerging practice areas. The curriculum promotes personal and professional growth. Below is an example of how the curriculum themes are introduced and reinforced throughout. Students are provided with diverse learning opportunities, meeting these concepts via lectures, activities, experiential learning components, assignments and/or evaluations.

**Quality:**
- OTHA 1020; 1210; 1220; 1240; 2000; 2400; 2410; 2460; 2500; 2470; 2050; 2440; 2900; 2950

**Advocacy:**
- OTHA 1220; 1240; 2000; 2400; 2500; 2470; 2700; 2900; 2950

**Ethics:**
- PHIL 2650, OTHA 1000, 1020; 2050; 2440; 2470; 2500; 2900; 2950

**Emerging Practice in OTA Curriculum:** The OTA program instills skills for the OTA to be able to market occupational therapy in emerging practice areas. As health care and demographics change, OTAs will be prepared to meet societal’s needs. Emerging practice are areas of practice where the occupational therapy process can be applied, but is not considered an area that occupational therapy is typical. Usual sources of funding, such as Medicare and private insurance, may not cover services rendered in emerging areas. OTAs must have skills in advocacy, marketing, ability to perform a needs analysis and have basic business skills. All emerging practice areas must comply with state statutes and regulations governing occupational therapy practice. Classes that include this instruction are: OTHA 1220 and OTHA 2500. Students also have an option of completing a fieldwork in emerging practice areas.
**COURSE REGISTRATION AND ADVISING**

Once a student has declared the major of OTA, students are automatically assigned an advisor in the program. Advisors work with students regarding educational planning and directing students towards resources available in the program, the college and the profession. All OTA students are subject to the procedures of registration as published in the college catalog. A list of OTA classes will be provided to the registrar and students prior to enrollment. Students will work with their assigned advisor to register for classes.

**CURRICULUM SEQUENCE**

Students enrolled in the Occupational Therapy Assistant program at Central Community College engage in five semesters of academic coursework, including 16 weeks of level II fieldwork practicums. In addition to 52 credit hours of OTA specific coursework, students will complete 19 hours of CCC core curriculum and coursework that supports the major. Semesters consist of in-classroom study, Level I fieldwork, and two 8-week Level II fieldwork practicum experiences. Students are expected to successfully complete all coursework prior to attending Level II fieldwork. Students are required to complete both Level II fieldworks within 12 months of completing all didactic coursework.

<table>
<thead>
<tr>
<th>Fall 1st Year</th>
<th>Spring 1st Year</th>
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<tbody>
<tr>
<td>ENGL 1010 English Composition</td>
<td>BIOS 1260 Structure &amp; Function of the Human Body II (or BIOS 2260 Gen. A &amp; P II – 4 credits)</td>
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<tr>
<td>OTHA 1000 Introduction to Occupational Therapy</td>
<td>OTHA 1210 Occupational Activity Analysis</td>
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<tr>
<td>BIOS 1250 Structure &amp; Function of the Human Body I (or BIOS 2250 Gen. A &amp; P I – 4 credits)</td>
<td>OTHA 2400 Mental Health &amp; Psychosocial Practice</td>
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<td>PSYC 2890 Developmental Psychology</td>
<td>OTHA 1240 Pediatric / Adolescent Practice</td>
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<tr>
<td>PHIL 2650 Introduction to Ethics</td>
<td>HLTH 1060 Comprehensive Medical Terminology</td>
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<tr>
<td>OTHA 1020 Theory and Evidence Based Practice</td>
<td>ENGL 1020 Writing and Research</td>
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<td><strong>Semester Credit Total</strong></td>
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**Summer**

| OTHA 2700 Functional Kinesiology | 3 |
| OTHA 1220 Community-Centered Practice | 4 |
| OTHA 2050 Fieldwork Practicum Level I A | 2 |
| **Semester Credit Total** | **Semester Credit Total** |
| 9 |  |

**Fall 2nd Year**

| OTHA 2410 Functional Neuroanatomy | 2 |
| OTHA 2500 Ethics, Management, and Leadership | 3 |
| OTHA 2440 Fieldwork Practicum Level I B | 2 |
| OTHA 2460 Modality and Splinting Lab | 1 |
| OTHA 2470 Documentation and Professional Skills | 2 |
| OTHA 2000 Gerontology & Physical Disabilities Practice | 4 |
| **Semester Credit Total** | **Semester Credit Total** |
| 14 | 14 |

| OTHA 2900 Fieldwork Practicum Level II A | 7 |
| OTHA 2950 Fieldwork Practicum Level II B | 7 |
| **Degree Credit Total** | **Degree Credit Total** |
| 71 | 71 |
OTA COURSE DESCRIPTIONS

OTA 1000 INTRODUCTION TO OCCUPATIONAL THERAPY  
3 CREDITS
This course provides students with an introduction to occupational therapy and the role of the occupational therapy assistant. Topics include history, development, philosophy, role delineation, supervision, scope of practice, ethics, values, and practice framework of the profession. The role of occupational therapy in health care, community based and educational systems are also explored.

OTA 1020 THEORY AND EVIDENCE BASED PRACTICE  
3 CREDITS
This course examines theories, models of practice, frame of references and the practice framework for instruction on the occupational therapy process. This course also provides students with the purpose of delivering evidence-based practice, the role of the research assistant, the importance of scholarly activities and how literature contributes to development of profession.

OTA 1210 OCCUPATIONAL ACTIVITY ANALYSIS  
2 CREDITS
Observation, analysis and performance of occupation, while utilizing the practice framework will be emphasized in this course. Students will select, analyze, adapt, grade and use client-centered therapeutic activities to promote engagement in occupations.

OTA 1220 COMMUNITY-CENTERED PRACTICE  
4 CREDITS
This course provides knowledge of global social issues, health and wellness needs of populations, and practical considerations of those at risk for social injustice, occupational deprivation, and disparity in the receipt of services. This course addresses the role and responsibility of advocacy for services, to effect changes in community and recognize opportunities for emerging practice areas.

OTA 1240 PEDIATRIC/adolescent PRACTICE  
4 CREDITS
This course introduces the student to the etiology, symptoms, prognosis, and treatment of pediatric and adolescent disorders, as well as, normal and abnormal human growth and development and its impact on occupational performance. Topics include development of observation skills, play, handling techniques, and knowledge of pediatric evaluations and assessments.

OTA 2000 GERONTOLOGY AND PHYSICAL DISABILITIES PRACTICE  
4 CREDITS
This course introduces the student to the etiology, symptoms, prognosis, and treatment of conditions commonly treated in geriatric and physical rehabilitation and the impact on occupational performance. The course provides the student with the role and clinical knowledge of occupational therapy assistant in gerontology and physical disability practice and the clinical knowledge of skills required to provide intervention to a variety of physical dysfunctions.

OTA 2400 MENTAL HEALTH AND PSYCHOSOCIAL PRACTICE  
3 CREDITS
This course provides students with the role of the occupational therapy assistant in the psychosocial area of occupational therapy practice. Students learn skills necessary to assess, implement and document intervention in a variety of mental health settings. Topics such as group dynamics, therapeutic use of self and the importance of balancing areas of occupation with the achievement of health and wellness for clients are explored.
OTHA 2050 Fieldwork Practicum Level I A 2 Credits
This course provides students with approximately forty-five hours of observation and opportunities for students to apply occupational therapy principles and techniques with a psychological and social factor emphasis.

OTHA 2440 Fieldwork Practicum Level I B 2 Credits
This course provides students with approximately forty-five hours of observation and opportunities for students to apply occupational therapy principles and techniques. Placements are to provide hands-on learning and participation under the direction of the fieldwork educators.

OTHA 2410 Functional Neuroanatomy 2 Credits
This course provides students with knowledge of the anatomical and physiological organization of the central nervous system. Students will gain an understanding of how the brain is involved in movement, learning, memory and daily functioning and apply it to the occupational therapy process and practice.

OTHA 2500 Ethics, Management and Leadership 3 Credits
This course provides students with the knowledge of the occupational therapy assistant in management and leadership skills. Students will gain a further understanding of ethical provision of services, department management, advocacy, resume and interviewing skills, national and state regulations, program development in new or expanding programs, supervision, reimbursement and professional development skill sets.

OTHA 2460 Modality and Splinting Lab 1 Credit
The use of splinting orthotics, modalities, and assistive technology are examined and practiced in this course. This course provides students with hands-on experience in providing fabrication, application, fitting, training of devices, as well as, effective administration of modalities.

OTHA 2470 Documentation and Professional Skills 2 Credits
This course enables students to gain further insights into professional responsibilities in the occupational therapy process and profession. This course also provides students with the opportunity to further enhance documentation skills and rationale for services across diverse practice settings.

OTHA 2700 Functional Kinesiology 3 Credits
This course enables students to link and apply their knowledge of anatomy and physiology to study muscles and their functions. A focus will be placed on skills related to the measurement, prevention and management of muscle, joint and soft tissues as it relates to occupational performance.

OTHA 2900 Fieldwork Practicum Level II A 7 Credits
The fieldwork course provides students with full-time experience in a variety of settings, such as mental health, physical disabilities, geriatric, pediatric, and/or community-based practice working under the supervision of an occupational therapists or occupational therapy assistant.

OTHA 2950 Fieldwork Practicum Level II B 7 Credits
The second fieldwork course provides students with full-time experience in a variety of settings, such as mental health, physical disabilities, geriatric, pediatric, and/or community-based practice working under the supervision of an occupational therapists or occupational therapy assistant. This fieldwork experience prepares the student to develop competent, entry-level skillsets as an occupational therapy assistant.
CCC Core Curriculum

ENGL 1010 English Composition 3 CREDITS
Prerequisite: Appropriate writing placement score English Composition is designed to develop writing skills. Students write papers and essays which emphasize the importance of choice, logic, and sentence construction. The process of planning, writing, revising, and editing essays for a particular audience and basic research-related skills are also emphasized.

ENGL 1020 Writing and Research 3 CREDITS
Prerequisite: Successful completion of ENGL 1010 or acceptable writing placement score Focuses on extended research-based writing and/or projects, including a required research paper. Emphasis is on research and organizational strategy and the proper use and integration of multiple sources.

PHIL 2650 Introduction to Ethics 3 CREDITS
The course examines contemporary ethical conflicts and provides an introduction to the language, concepts, and traditions of ethics.

PSYC 2890 Developmental Psychology 3 CREDITS
Traditional and current research in lifespan development from conception to death.

BIOS 1250 - Structure & Function of Human Body I 2 CREDITS
Note: Previous biology and/or chemistry helpful, but not required. First course studying the basic structure and function of the human body from the cell through the systems to the human organism.

BIOS 1260 - Structure & Function of Human Body II 2 CREDITS
Prerequisite (taken before): BIOS 1250 - Structure & Function of Human Body I Continuation of BIOS 1250. Study of the basic structure and function of the human body from the cell through the systems to the human organism.

HLTH 1060 – Comprehensive Medical Terminology 3 CREDITS
Learn the meaning, spelling and pronunciation of medical terminology in order to develop the medical vocabulary needed to work in a medical setting. Medical abbreviations and symbols will also be covered.
TRANSFER OF CREDIT
Students must have achieved a grade of 2.0 in all transferring coursework that will be used for the AAS degree. Students may be asked to submit a syllabus of the transfer course(s) for comparison. Transfer coursework in the sciences (Anatomy and Physiology or Structure and Function of the Human Body) must have been completed in the past seven years. Exceptions to the “7 year rule” for transfer of credit may be granted upon written request of the student. These exceptions are granted under unique circumstances, including advanced study of subject matter or current substantial, related work experience. Students requesting an exception will be asked to demonstrate current proficiency in subject matter.

BACKGROUND CHECKS AND DRUG TESTING
The OTA program requires background checks for admitted OTA program students, in order to verify an individual’s suitability to participate in Level I and Level II fieldwork practicum experiences. Background checks help to ensure the safety of individuals and organizations with which the student comes in contact, as well as, protects fellow students from potential harms. Students who engage in any unlawful act jeopardizing their education or future ability to perform the essential work of an occupational therapy practitioner must immediately self-disclose this information to the OTA Program Director.

The OTA program also requires drug testing for OTA students. Students will be required to complete a drug test prior to the start of fieldwork. A positive drug test for any substance which impairs the student’s ability to safely perform their work will result in disciplinary action, including the possibility of permanent dismissal from the OTA program.

CHARACTER CHECK AND FELONY CONVICTIONS
The National Board of Certification in Occupational Therapy (NBCOT) performs a brief character review of all certification applicants. This review “serves the public interest by screening illegal, unethical, and incompetent behaviors of individuals who are yet to be certified by NBCOT. To ensure that occupational therapy practitioners meet standards of professional conduct prior to entering the profession, all applicants for certification are required to provide information and documentation related to affirmative responses to character questions on the examination application” (NBCOT 2009). A felony conviction may affect a graduate’s ability to sit for the NBCOT examination or attain state licensure. The program is not responsible for any student who does not meet eligibility criteria to sit for NBCOT examination. For additional information, visit the NBCOT website. See NBCOT character reviews.

AFFIRMATIVE ACTION/EQUAL OPPORTUNITY
Central Community College (CCC) does not discriminate on the basis of race, color, ethnicity, religion, sex, age, marital status, national origin, veteran status, sexual orientation, disability, or other factors prohibited by law, in matters of employment, admissions, financial aid, or other activities and opportunities as set forth in compliance with federal and state statutes and regulations.

Any person having inquiries concerning Central Community College compliance with Title II, Title IV, Title VI, Title IX, the Age Discrimination Act, and/or Section 504 should contact: Vice President of Human Resources, 3134 W Highway 34, PO Box 4903, Grand Island NE 68802-4903, 308-398-7325, titleixcoordinator@cccneb.edu.

Persons seeking further information concerning career and technical education offerings at Central Community College and any specific pre-requisite criteria for the various programs of study should contact: Marketing and Public Relations Director, 3134 W Highway 34, PO Box 4903, Grand Island NE 68802-4903, 308-398-4222, prdirector@cccneb.edu.
Approximate Educational Costs – OTA Program

In addition to college fees, tuition, and costs associated with book and course supplies and materials, students who are accepted into the program must:

- Pass a background check at the applicant’s expense.
- Complete a healthcare provider CPR course and maintain certification throughout the program.
- Submit documentation of required immunizations and tests (Hepatitis B, MMR, TB, flu, DPT, Polio, Varicella, TB test) or sign a waiver prior to fieldwork placement.
- Purchase professional liability insurance through the college.
- Incur the cost of Level I and Level II fieldwork associated expenses.
- Become student members of the American Occupational Therapy Association and maintain membership throughout their course of study.
- Incur the cost of sitting for the NBCOT examination.

College tuition and fees are established by the Board of Governors and may be subject to change.

<table>
<thead>
<tr>
<th>Estimated Costs of Program</th>
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<tbody>
<tr>
<td>Tuition and fees = 71 hours @ $94 per credit hour (in state)</td>
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<tr>
<td>Books and printed materials</td>
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<tr>
<td>Professional liability insurances ($12 x 2 years, purchased by the college)</td>
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<tr>
<td>Background Check</td>
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<tr>
<td>Drug Testing</td>
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<tr>
<td>Professional AOTA Membership</td>
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<td>NBCOT Examination (taken after graduation)</td>
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<td>Online</td>
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<td>Printed</td>
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<tr>
<td>Immunizations (cost dependent on # of shots required)</td>
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<tr>
<td>CPR (Healthcare Provider Level)</td>
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<td>Room and board (available at Hastings &amp; Columbus campuses)</td>
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<tr>
<td>Room and board for Level II fieldwork (individualized)</td>
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<td>PAMS Certification</td>
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PROGRESSION REQUIREMENTS AND RETENTION POLICY

COURSE PROGRESSION
This is an academically-challenging program, and students should anticipate engaging in critical and creative collaborative-thinking processes and daily out-of-classroom graded homework assignments. A commitment to a full-time course of study with daily attendance is mandatory. Satisfactory completion of coursework is contingent on a student’s demonstrated ability of mastering subject material. Students are expected to successfully complete all coursework prior to attending Level II fieldwork. Both Level II fieldwork experiences must be completed within 12 months from the date of completion of the didactic portion of the OTA program.

The Occupational Therapy Assistant Department oversees student progression requirements. A student must earn a minimal grade of “C” in all required coursework to continue to progress in the Occupational Therapy Assistant program. Failure in any Occupational Therapy Assistant program required course is defined as receiving a grade less than a “C.” Students may also be suspended from the program for violating the Occupational Therapy Code of Conduct, CCC Academic or Non-Academic Misconduct Policies, or community education site-specific codes of conduct. Students who fail a course in any semester will be required to retake any practicum preparation coursework occurring in that same semester to remain eligible for Level II fieldwork placement.

Occupational Therapy Assistant students who fail to complete coursework with a grade of “C” will be subject to the following procedures:

If a student fails an occupational therapy assistant required course, the student will be placed on academic probation. The student will have the opportunity to retake the course(s) one time only, as soon as possible based on available space. Upon successful completion of all failed coursework, the student will then progress to the next sequential semester. Failure to successfully pass any course when taken the second time will result in recommendation for academic suspension from the Occupational Therapy Assistant program. The student will not be eligible to reapply to the Occupational Therapy Assistant program for two years after the suspension date. The student may then reapply through the admissions office, meet eligibility criteria, and be placed in available seating at the beginning of the Occupational Therapy Assistant program to repeat all OTHA coursework. If the student fails two of the 100-level occupational therapy courses the first time taken, or two of the 200-level occupational therapy courses the first time taken, the student will be recommended for academic suspension from the program. The student will remain on academic suspension for a minimum of a full semester (summer session is included). The student may request readmission from academic suspension. If the student fails three or more occupational therapy courses throughout the program, the student will be recommended for academic dismissal from the program. Any necessary dismissals are recommended by the occupational therapy department to the campus president for further action. The student will not be eligible to reapply to the occupational therapy program for 2 years after the academic dismissal date. The student may then reapply through the admissions office, meet eligibility criteria, and be placed in available seating at the beginning of the occupational therapy program to repeat all coursework. A subsequent failure in an occupational therapy course will result in recommendation for permanent dismissal from the occupational therapy program with no possibility of re-entry.

If the student fails or does not complete a general education course that is required to be completed prior to or concurrently with the occupational therapy coursework, the student will be placed on academic probation and not be allowed to continue in the occupational therapy coursework until the course has been completed satisfactory.

A student may appeal an academic probation or suspension. The appeal must be in written form and be forwarded to the office of the campus president (College Catalog, see academic reinstatement policy).
Occupational Therapy Assistant students who violate professional conduct policies will be subject to the following procedures:

Students who exhibit inappropriate behavior or conduct as defined by the AOTA Code of Ethics or violate any Academic and Non-Academic Conduct Policies as defined in the Central Community College Student Handbook, Health Professions Student Handbook, Occupational Therapy Student Handbook, or site-specific behavioral or ethics policies will be subject to probation, suspension, or dismissal. Any student recommended for disciplinary action is entitled to due process of law as provided for in the Central Community College Procedures Manual for College Organizations, Businesses, Instruction, and Students.

Occupational Therapy Assistant students who choose to defer their education are subject to the following procedures:

Students enrolled in the Occupational Therapy Assistant program who choose to defer their education for a later date will be allowed to return to complete their program of study based on seat availability. Students who have been inactive for more than two years will be required to reapply to the program, meet all academic eligibility requirements, and begin in the first semester coursework of the program.

Grading Philosophy

Grades are a global representation of student learning throughout the semester. Formative feedback from instructors will be provided often, in order that grades reflect the student's educational status and achievement as accurately as possible. Students are encouraged to actively seek and use feedback for self-improvement. The focus is on the process of learning, not on competing for a grade. You will not jeopardize your own grades if you help other students or seek help with course work - in fact, encouraging and facilitating others' learning is inherent to constructivist education and an important demonstration of professionalism and citizenship, both valued components of the OTA Program at Central Community College and an important aspect of the OTA Curriculum Design. Because this is a professional program that carries with it many responsibilities to future clients and the profession, a letter grade of D is unacceptable. Students must pass all OTHA coursework with a letter grade of C or higher.

Grading Scale

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>93-100</td>
</tr>
<tr>
<td>B+</td>
<td>89-92</td>
</tr>
<tr>
<td>B</td>
<td>85-88</td>
</tr>
<tr>
<td>C+</td>
<td>81-84</td>
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<tr>
<td>C</td>
<td>77-80</td>
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<tr>
<td>D+</td>
<td>73-76</td>
</tr>
<tr>
<td>D</td>
<td>69-72</td>
</tr>
<tr>
<td>F</td>
<td>Below 68</td>
</tr>
</tbody>
</table>

Guidelines for Success

There are resources on campus, including instructors and your assigned advisor, which are available to assist you in being successful as a student in the program. Please be sure to ask questions, take responsibility for your own learning and seek out necessary resources to ensure your success. It is highly recommended to make an appointment with an instructor and/or advisor if you fail any assignment, quiz or exam. There is an Academic Success Center on campus, room 453. They offer a variety of services designated to help students improve grades. Tutoring is available at no cost. To assist students with concerns that would be best served by a counselor, the Central Community College student services division has a contractual relationship with Family Resource Center to provide some clinical counseling sessions for students at no cost.

For more information, on all of the above, please do visit the college catalog or search Student services:
http://catalog.cccneb.edu/content.php?catoid=26&navoid=2099#ASC
Academic Honesty

Academic honesty is a core principle of learning and scholarship. When you violate this principle, you cheat yourself of the confidence that comes from knowing you have mastered the targeted skills and knowledge. You also hurt all members of the learning community by falsely presenting yourself as having command of competencies with which you are credited, thus degrading the credibility of the college, the program, and your fellow learners who hold the same credential.

All members of the learning community share an interest in protecting the value, integrity, and credibility of the outcomes of this learning experience. We also have the responsibility to censor behaviors that interfere with this effort. The following behaviors will be subject to disciplinary action:

1. Plagiarism - presenting someone else's words, ideas, or data as your own work.
2. Fabrication - using invented information or falsifying research or other findings.
3. Cheating - misleading others to believe you have mastered competencies or other learning outcomes that you have not mastered. Examples include, but are not limited to:
   a. Copying from another learner's work.
   b. Allowing another learner to copy from your work.
   c. Using resource materials or information to complete an assessment without permission from your instructor.
   d. Collaborating on an assessment (graded assignment or test) without permission from the instructor.
   e. Taking a test for someone else or permitting someone else to take a test for you.

Academic Misconduct

Other academically dishonest acts such as tampering with grades, taking part in obtaining or distributing any part of an assessment, or selling or buying products such as papers, research, projects or other artifacts that document achievement of learning outcomes.

Independent Work

Periodically throughout the program you will be asked to participate in independent activities which may take several different forms, such as independent study, interactive instruction, laboratory exercises, research, internet exploration, and community participatory activities associated with Level I fieldwork experiences. These activities are an integral part of the total curriculum, but will have minimal instructor involvement. They provide you with the opportunity to demonstrate your ability to work independently to meet a designated goal as well as to show development in the various core abilities associated with the program.

Late Assignments

Assignments are due at the start of class. Any assignments not turned in at that time will be considered late. Late assignments will result in a 10% grade reduction after work is graded. Assignments not turned in within one week will be considered a 0%. It is your responsibility to communicate with your instructor regarding any late assignments.
Attendance

As an adult learner you most likely have multiple roles and commitments to juggle. In addition to being a student, you may be an employee, a parent, a community leader, or a caregiver to a family member. If you are a full-time student, you are working to learn a wide variety of new skills and to meet the expectations for multiple courses. As your teachers, we, too, have many responsibilities and multiple roles. Therefore, we need to work together to accomplish the intended learning outcomes for this course. Responsible attendance means that you will plan your schedule so that you can be present for scheduled class sessions and manage your time so that you can complete your assignments and assessments on or before the date they are due. It is your responsibility as a student to email the instructor prior to being tardy or absent and make arrangements to make up your assignment(s) or class activities missed.

ADA Statement

If you have a disability that may prevent you from meeting course requirements, contact the instructor immediately to file a student disability statement and to develop an accommodation plan. Course requirements will not be waived, but reasonable accommodations will be developed to assist you in meeting the requirements. You are expected to work with the instructor and with a student service counselor to develop and implement a reasonable accommodation plan.

Please see essential functions necessary for program completion on page 39

Professional Development, Requirements And Memberships

AOTA

Lifelong learning is embedded in the curriculum design for the OTA program. It is mandatory for students, who are accepted and enrolled in the OTA program to have membership to the American Occupational Therapy Association (AOTA). Students will visit http://www.aota.org and become a member. Students will be responsible for providing a copy of their membership to the department annually. Membership to AOTA provides a multitude of resources and will be used throughout the curriculum.

SOTA

The OTA program also has professional development opportunities. Becoming member of the Student Occupational Therapy Association (SOTA) is recommended. Through the SOTA organization, students can have opportunities for leadership development through participation in the offices for the organization. Students who belong to SOTA typically meet once a month, plan social events, service to the profession or college events and pay a minimal fee.

AOTA ASD

Students also have an opportunity to be a delegate to the Assembly of Student Delegates (ASD). The national student committee of AOTA is responsible for student issues of the profession and association. There is an annual ASD meeting held prior to the national AOTA conference. Each accredited program has one elected delegate. SOTA and the SOTA’s faculty advisor are responsible for helping to fill such role. If a student is interested, they must seek out the president of SOTA and the faculty advisor of SOTA.
OTA Professionalism Expectations

It is expected in the Occupational Therapy Assistant (OTA) program that students learn, practice and strive to be professional, ethical and have the ability to provide quality occupational therapy services. The program’s curriculum design has concepts of professionalism, ethics and quality threaded throughout. Below is specifically how the curriculum threads the concept of professionalism.

Students are first introduced to professionalism during the mandatory OTA Orientation, held prior to the fall start date. During this orientation, students are introduced to the concept of professionalism, the classes in which instruct on professionalism and examples given regarding professionalism expectations throughout the program. Again, the program has a developmental approach in progressing the skillsets, as the student moves through the curriculum.

In OTHA 1000 Introduction to Occupational Therapy, students review the definition of professionalism and discuss professionalism expectations in the college arena and the workplace.

In OTHA 2050 Fieldwork Practicum Level I, students complete a self-assessment on professionalism (page 43 in forms appendix). Students work with the instructor to create goals and action plans on how they can improve on professionalism skillsets.

In OTHA 2470 Documentation and Professional Skills, students take an in-depth approach in learning, practicing and improving on professionalism skills. Students review their past self-assessments, reflect and reassess their skillsets. Instructor, while working with the student’s advisor and/or program director, will also assess student and provide feedback (page 45 in forms appendix). The instructor works with student to create new goals and create action plans for improvement prior to going on Level II Fieldwork.

If, at any time throughout the program, an instructor, staff or program director has evidence that a student is exhibiting excellent professionalism or any unprofessional behavior, a professionalism form will be filled out and gone over with the advisor and/or instructor and student. The student and instructor work together to create an improvement plan. If a student continually demonstrates unprofessional behavior; this could impact student’s ability to progress in the curriculum and complete fieldwork.

Both Instructor and self-assessments will be utilized to document behaviors that are commendable or considered unprofessional in nature. The professionalism forms will be utilized as a tool for the student to be aware of the behavior(s), reinforce and/or make a plan of action to practice and exhibit professionalism at all times. These dispositions also parallel the curriculum design concepts of quality, advocacy and ethics.
OTA Professionalism Expectations (continued)

Areas of focus:

**Attendance**
Student attends, arrives on time and is actively participating. Student is appropriate on electronic devices, no texting; phone turned off or on vibrate, no surfing internet etc.). Student communicates with instructor if tardy or absent prior to and makes up work in timely manner.

**Communication**
Student expresses self professionally in all oral and written communication, including social media. Checks email often, uses appropriate language, facial expressions, eye contact and attentive body language. Actively participates and speaks positively to others.

**Collaboration**
Student has an overall positive disposition. This means the student is a team player, shows initiative, contributes share of group work, is a positive team member, and demonstrates respect for others. The student is not mocking others, rolling eyes or showing disrespect for peers, the program, community partners, fieldwork or faculty members. Seeks out opportunities to volunteer both inside and outside of the classroom. Helps others.

**Ethical**
Concepts of ethical responsibility are a part of the curriculum design. Student maintains confidentiality, HIPAA, Code of Ethics. Student has integrity, dependable and is trustworthy. Student is accountable and able to act independently. Please refer to the Code of Ethics on next pages.

**Appearance**
Student dresses professionally, according to each situation, covers tattoos, facial and body piercings, and demonstrates appropriate hygiene and grooming.

**Content/Knowledge**
Quality, competent and evidence based are all part of the curriculum design. Student is reflective, flexible and open to new ideas. Student relies on information from a variety of sources, and uses evidence based practice, shares information with others, curious for new knowledge and learning. Student asks questions, is passionate, positive and an advocate for the profession. Student is able to articulate the concept of lifelong learning. Student is globally aware and is able to meet current and future practice trends.

Please refer to the Professionalism forms in the Appendix section of this handbook
FIELDWORK REQUIREMENTS AND GUIDELINES

Fieldwork is an essential component in your journey of learning in the occupational therapy assistant curriculum. These experiences allow you to apply what you have learned in the classroom to the real-life application of skills and knowledge. In order to meet programmatic goals, it is the philosophy of the program to ensure you are exposed to a variety of practice settings and experiences across the lifespan. Students have the opportunity to participate in Level I and Level II fieldwork. Level I fieldwork is approximately 45 hours and is embedded in the curriculum, during the third and fourth semesters of the program. Level II fieldwork is 8 weeks, full time and scheduled after successfully completing all academic coursework. Both Level II fieldwork experiences must be completed within 12 months from the date of completion of the didactic portion of the OTA program.

Students must have completed a background check and all immunization and health status requirements (located on page 28 of the handbook) prior to attending Level I and Level II fieldwork. Expenses incurred for Level I and Level II fieldwork experiences, such as transportation, out-of-town lodging/relocation, food, and incidental expenses, are the sole responsibility of the student.

FIELDWORK PLACEMENT

Fieldwork placement assignments will be made by the Academic Fieldwork Coordinator (AFWC). While students can provide input to the decision-making process, final placement decisions will be made by the AFWC, in conjunction with potential fieldwork preceptors. While every effort will be made to match practicum sites to student needs and interest, no guarantee is given or implied that placement will be made in a student’s home community of choice. Level II fieldwork practicums are seen as an extension of didactic learning and not simply a place to practice hands-on skills. Students will be expected to complete learning assignments and engage in ongoing learning with their peers throughout the length of experiential study. Placements will be made to complement student areas of strength and to provide the opportunity for future growth in student identified area(s) of limitation. Students are able to submit new fieldwork sites to the AWFC via email. The AWFC will follow up with the site and evaluate if the site matches with the program’s philosophy and mission statements. All potential sites are discussed with faculty and program director. Students cannot complete their fieldwork affiliations with a current or prearranged future employer. It is the responsibility of students to disclose all potential conflicts of interest in being assigned to a particular site to the fieldwork placement office in advance of any placement. Expenses incurred for Level I and Level II fieldwork experiences, such as transportation, out-of-town lodging, food, and incidental expenses, are the sole responsibility of the student.
OTHA 2050 Fieldwork Practicum Level I
This fieldwork is intended for the students to have a psychological fieldwork experience. Students will be placed for approximately forty five hours in a given week or broke up throughout the semester. Mary Lanning in Hastings, Nebraska is the intended placement, however other mental health placements can be considered.
The objectives of this placement include:

1. Practice observation skills in the mental health setting.
2. Observe documentation and understand documentation specific to the mental health setting.
3. Review medical records, documentation and methods of documentation specific to setting.
4. Discuss and understand all reimbursement issues related specifically to practice setting.
5. Demonstrate effective communication skills (nonverbal, verbal and written) with setting, staff, clients, faculty and fieldwork educators.
6. Demonstrate professionalism skills at all times, including communication, dress code and managing emotions maturely.
7. Understand occupational therapy assistant’s roles and responsibilities specific to practice setting.
8. Display ethical and legal conduct in a manner reflective of AOTA Code of Ethics and Standards of Practice, including policies and procedures specific to the site.
9. Comply with all safety procedures, precautions, polices and regulations of the practice setting.
10. Utilize knowledge of psychosocial factors in determining appropriate treatment interventions for clients across the lifespan.
11. Utilize critical thinking skill sets when determining appropriate treatment interventions for clients across the lifespan, particularly with psychosocial factors.
12. Utilize knowledge of psychosocial factors in determining appropriate treatment interventions for clients across the lifespan.

OTHA 2440 Fieldwork Practicum Level I
This second Level I fieldwork experience is intended for a student to be placed in any of the following practice settings, physical disabilities, geriatric, pediatric, and/or community based practice. Students will complete approximately forty five hours in a given week or broke up throughout the semester. Students who did not complete their psychological setting for OTHA 2050; will do so during this fieldwork practicum experience. The Level I course objectives are the same as above for OTHA 2050.

OTHA 2900 Fieldwork Practicum Level II
The fieldwork experience provides students with full time experience in a variety of settings, such as mental health, physical disabilities, geriatric, pediatric, and/or *community based practice, working under the supervision of an occupational therapists or occupational therapy assistant.

*Note: If a student is interested in a community based setting, students will be encouraged to do this experience in their last Level II fieldwork, OTHA 2950.

OTHA 2950 Fieldwork Practicum Level II
The fieldwork experience provides students with full time experience in a variety of settings, such as mental health, physical disabilities, geriatric, pediatric, and/or community based practice, working under the supervision of an occupational therapists or occupational therapy assistant.
Objectives for Level II Fieldwork

1. Demonstrate entry level occupational therapy assistant knowledge, skills and attitudes in the provision of occupational therapy services

2. Engage in occupational therapy practice that facilitates the psychological and social well-being of clients, regardless of specific diagnosis or practice setting, to enable the creation of meaning in the occupations that clients engage in and to assist clients in participating in new occupations they may not yet be comfortable engaging in.

3. Use creativity to create occupation-based, client-centered interventions for individuals considering diagnoses, psychosocial factors, and environmental contexts after reviewing all available evaluative data and collaboratively agreed upon client/group goals.

4. Demonstrate social responsiveness by identifying and working to address environmental and attitudinal barriers faced by groups or individuals that limit participation in communal and/or individual occupational engagement.

5. Demonstrate the ability to individualize and grade interventions to promote timely and effective progress toward client or group goals across multiple individuals.

6. Demonstrate competency and timeliness in documentation and/or billing per site protocol. If no site protocol exists, student will use client narrative and the International Classification of Functioning, Disability and Health to document client status and progress.

7. Integrate knowledge of Occupation, Disability, Community and Participation in daily interactions with all clients

8. Participate in the occupational therapy process, from evaluation to discharge, in collaboration with lead professional, client, and family and/or primary caregiver as appropriate.

9. Use critically evaluated knowledge, ethical reflection, and divergent and intuitive thinking to guide occupation-centered practice.

10. Identify normal and abnormal psychosocial and/or motoric development in individuals/populations served that hinder participation in everyday life activities.

11. Articulate the role of OT to clients, caregivers, and professionals in appropriate language.

12. Demonstrate professionalism to include consideration for diversity and privacy of clients, colleagues, populations, and communities and as outlined in site policies.

Psychological and Social Factor Fieldwork Policy

If students are unable to be placed in a psychological setting (for example, due to limits in placements and/or number of students) during OTHA 2050 Level I fieldwork practicum experience, students are required to complete OTHA 2440 (the next fieldwork practicum Level I) in a psychological setting, or lastly students can opt to complete it during their Level II practicum experience (OTHA 2900 or OTHA 2950). Every effort will be made to ensure the student will do the required psychological and social factor fieldwork as their fieldwork practicum Level I experience. If students are not placed with a psychological focus, they will be placed in a setting such as physical disabilities, geriatric, pediatric or a community based practice setting. A student must complete one fieldwork experience (either Level I or Level II) that has a focus on psychological and social factors that influence engagement in occupation. All placements will be tracked with the students to ensure they are attending the required fieldwork for accreditation.
Variety of Settings Policy for Level I and Level II Experiences

In order for students to be exposed to a variety of clients across the lifespan and to a variety of settings, students are required to engage in fieldwork Level I and Level II experiences in two different practice settings. A student will not be placed in two mental health settings, two community settings, or two pediatric settings etc for Level I or Level II. Students can do the same setting for a Level I and a Level II, for example: mental health Level I and a mental health Level II fieldwork experience.

Community Based or Emerging Practice Fieldwork Policy

If a student is interested in a community, emerging practice setting, permission must be granted ahead of time. Every effort will be made to place a student in a community based practice setting that employs an occupational therapist or certified occupational therapy assistant for supervision purposes. If no occupational therapy personnel is available, faculty, program director or the Academic Fieldwork Coordinator may supervise. Availability of supervision could impede placement.

Fieldwork Placement Procedures

The list of fieldwork sites will be available to students. Students are able to submit their top three choices and rationale for the site. The AFWC will review these selections, review fieldwork history and placements (keeping in mind all policies) to ensure students are getting diverse practice setting experiences. Students will be assigned fieldwork according to their strengths, history of placements, site preference and match with the facility. Under extreme circumstances, students can request a different placement. Written requests will be reviewed and left to the discretion of the AFWC. Faculty and program director may have input as well in determining the written request for change. Requests four weeks before the placement will not be considered.

Assessment of Fieldwork

Level I fieldwork will be evaluated with the Midwest Regional Fieldwork Consortium Level I fieldwork student evaluation form (please see form at end of handbook). Level II Fieldwork students will be evaluated by using the AOTA Fieldwork Performance Evaluation for the Occupational Therapy Assistant Student.

Conflict of Interest Placement Policy

Students will not be placed at a fieldwork site where the student is currently employed, within the department, if the student has been employed within the last two years of the department or if the student is supervised by a person who is a relative, close friend or relative of a mutual acquaintance. The student also will not be placed if the student has been a patient with the department within the last two years. Students are required to report any conflicts of interest or potential conflicts of interest to the Academic Fieldwork Coordinator (AFWC). The AFWC will make the final determination of placing students at the fieldwork site.
Cancellations of Sites

Please note that facilities may cancel at any given time, due to a multitude of reasons. When cancellations occur, the AWFC will do everything possible to secure an alternative placement as soon as possible. Students need to always be prepared in that their site could cancel, at any time. Students may have to make last minute arrangements for travel, lodging and relocation and scheduling.

Fieldwork Attendance Policy

Students need to make every effort to attend all fieldwork schedule dates. If a student has to miss any time during fieldwork, the student is responsible for making up the missed time. The student must inform the fieldwork educator, as well as the AFWC, regarding the absence(s). If a student knows ahead of time that she/he may miss any fieldwork hours, this must be pre-approved by the AFWC and the fieldwork educator. Students who miss three days during a Level II fieldwork may fail the rotation and/or be required to extend their time. Please note the student is responsible for adhering to site specific policies regarding attendance. If the site has a no miss policy than students have to abide by this policy. Students should make every effort to have back up plans for daycare if have children or are caregivers.

Students are encouraged not to work during fieldwork. Students are not allowed to miss fieldwork due to work conflicts.

Fieldwork Communication

Students will be notified when it is appropriate to contact their site. Please adhere to all professionalism information in written exchange with the site. The AFWC will send the site the student’s Student Professional Information (please see page 56 in form appendix) Students are required to complete this form and electronically submit it to the AWFC. The AFWC will communicate the due dates for the form. This form will need to be updated periodically. It is the student’s responsibility to ensure it is current.

Students are required to have current contact information with the program. Students are required to communicate often with the AFWC and immediately should any concerns, issues or problems arise at any time during fieldwork. During the fieldwork experience, students are required to check their email at least every 48 hours. Students should phone the AFWC and email to lay out best plans for communication, especially when a concern arises. It is the responsibility of the student to include the AFWC. Issues or concerns that arise, even if small, should be communicated to the AFWC as soon as possible. A small concern can turn into something larger, if not addressed.

For additional information regarding being successful on fieldwork, please visit http://www.aota.org/Education-Careers/Fieldwork/Answers.aspx

HIPPA, Ethics, Professionalism

Students are expected to be professional and ethical in all interactions on fieldwork (please refer to the professionalism and Code of Ethics information in the handbook). Students are expected to adhere to all confidentiality polices set forth by the site. Students will complete HIPPA training prior to fieldwork. Some sites may have HIPPA training; students are required to complete the further HIPPA training at the site as well. Any HIPPA violations, professionalism concerns or unethical behavior at a site can be grounds for failure and/or removal from the fieldwork site.

If A Problem Occurs on Fieldwork

The identified problem should be communicated to the AFWC immediately. The AFWC will work with the student and fieldwork educator to remediate the problem(s). Again, it is imperative to inform the AFWC immediately and as early as possible in the fieldwork rotation. This may be done by the fieldwork educator, student, program director, instructor or AFWC. The AFWC is responsible for collecting all information regarding the problem(s), discussing it with all parties.
involved, review the student’s academic history and professionalism behaviors, and will identify strategies to remediate the problem. Specific action plans and/or goals will be established to improve performance(s) and behavior(s) for the student and/or all parties involved. Communication will increase to ensure everyone is supported during this process and to see if progress is made. If progress is not made, the student may be removed from the fieldwork. The AFWC has the right to be onsite to help with the process and/or show up at any given time to review student performance. If a student fails any fieldwork course, all policies regarding retaking courses and curriculum progression will apply, including tuition and fees.

Fieldwork Withdrawal

A student may withdraw from a fieldwork rotation for medical reasons or extenuating life circumstances. Documentation regarding the situation is required. Students are required to inform the AFWC and advisor immediately if withdrawing from fieldwork. Discretion to reassign the student will be determined by the AFWC or program director. Reassignment or withdrawing from fieldwork for other reasons may impede progression and graduation.
IMMUNIZATIONS AND HEALTH STATUS REQUIREMENTS

The student shall complete the following OTA program health requirements prior to the start of fieldwork:

1) Required documentation of immunization history with dates for:
   a. TB skin test or chest X-ray (annually).
   b. MMR requiring 2 doses. Documentation of vaccination or testing reflecting evidence for measles, mumps, and rubella (German measles) immunity.
   c. Hepatitis B vaccine series completed or started or written declination. Series must be completed within 9 months of enrollment in OTA program.
   d. Varicella vaccine or verifiable history of chicken pox or serologic testing for varicella immunity.
   e. Influenza (annually) or written declination.
   f. Tdap vaccine. (must be within last 10 years)

2) The student will complete other health information forms or requirements as indicated by the facility.

3) The student will complete OSHA-regulated Bloodborne Pathogen Exposure and Hazardous Materials Training annually as presented in the curriculum.

4) The student will complete and maintain current certification for CPR at the health professionals’ level (American Heart Association: Basic Life Support (BLS) for Healthcare Providers).

5) The student shall notify the facility and the college of any health status that poses an identifiable risk to clients or of any health status that limits her or his ability to provide care.

6) The student shall conduct herself/himself in a professional manner as outlined by the Code of Ethics of the AOTA.

7) Statements of declination are accepted only for reasons related to medical contraindications and declination based on religious grounds.

Acceptable documents serving as evidence of previous immunization and/or immunity may include:

- an official school immunization record or copy thereof from any primary, secondary, undergraduate, graduate, health professions, or other school;
- a record from any public health department;
- a medical record or form summarizing a medical record and prior immunizations signed by a physician licensed to practice medicine in any jurisdiction of the United States or foreign country or other licensed health professional approved by the Nebraska State Department of Health;
- a report of serology from a licensed laboratory.

A student declining immunization on the basis of religious beliefs must submit a written, signed statement explaining how immunization conflicts with his or her bona fide religious beliefs or practices. A general philosophical or moral objection to immunization shall not suffice as the basis for exemption on religious grounds. The student shall be required to acknowledge in writing that he or she was informed of the value of immunizations and has knowingly declined to have such immunizations for religious reasons. Students who decline immunizations for religious related reasons may be prohibited from completing level I and level II fieldwork in certain settings.

Immunization requirements are based on the Centers for Disease Control 2006 recommendations for healthcare providers
Occupational Therapy Code of Ethics and Ethics Standards (2010)

PREAMBLE

The American Occupational Therapy Association (AOTA) Occupational Therapy Code of Ethics and Ethics Standards (2010) (“Code and Ethics Standards”) is a public statement of principles used to promote and maintain high standards of conduct within the profession. Members of AOTA are committed to promoting inclusion, diversity, independence, and safety for all recipients in various stages of life, health, and illness and to empower all beneficiaries of occupational therapy. This commitment extends beyond service recipients to include professional colleagues, students, educators, businesses, and the community.

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

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

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

While much has changed over the course of the profession’s history, more has remained the same. The profession of occupational therapy remains grounded in seven core concepts, as identified in the Core Values and Attitudes of Occupational Therapy Practice (AOTA, 1993): altruism, equality, freedom, justice, dignity, truth, and prudence. Altruism is the individual’s ability to place the needs of others before their own. Equality refers to the desire to promote fairness in interactions with others. The concept of freedom and personal choice is paramount in a profession in which the desires of the client must guide our interventions. Occupational therapy practitioners, educators, and researchers relate in a fair and impartial manner to individuals with whom they interact and respect and adhere to the applicable laws and standards regarding their area of practice, be it direct care, education, or research (justice). Inherent in the practice of occupational therapy is the promotion and preservation of the individuality and dignity of the client, by assisting him or her to engage in occupations that are meaningful to him or her regardless of level of disability. In all situations, occupational therapists, occupational therapy assistants, and students must provide accurate information, both in oral and written form (truth). Occupational therapy personnel use their clinical and ethical reasoning skills, sound judgment, and reflection to make decisions to direct them in their area(s) of practice (prudence). These seven core values provide a foundation by which occupational therapy personnel guide their interactions with others, be they students, clients, colleagues, research participants, or communities. These values also define the ethical principles to which the profession is committed and which the public can expect.
The *Occupational Therapy Code of Ethics and Ethics Standards (2010)* is a guide to professional conduct when ethical issues arise. Ethical decision making is a process that includes awareness of how the outcome will impact occupational therapy clients in all spheres. Applications of Code and Ethics Standards Principles are considered situation-specific, and where a conflict exists, occupational therapy personnel will pursue responsible efforts for resolution. These Principles apply to occupational therapy personnel engaged in any professional role, including elected and volunteer leadership positions.

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

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

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

**DEFINITIONS**

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

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

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

**Occupational therapy personnel shall**

A. Respond to requests for occupational therapy services (e.g., a referral) in a timely manner as determined by law, regulation, or policy.

B. Provide appropriate evaluation and a plan of intervention for all recipients of occupational therapy services specific to their needs.

C. Reevaluate and reassess recipients of service in a timely manner to determine if goals are being achieved and whether intervention plans should be revised.

D. Avoid the inappropriate use of outdated or obsolete tests/assessments or data obtained from such tests in making intervention decisions or recommendations.

E. Provide occupational therapy services that are within each practitioner’s level of competence and scope of practice (e.g., qualifications, experience, the law).

F. Use, to the extent possible, evaluation, planning, intervention techniques, and therapeutic equipment that are evidence-based and within the recognized scope of occupational therapy practice.

G. Take responsible steps (e.g., continuing education, research, supervision, training) and use careful judgment to ensure their own competence and weigh potential for client harm when generally recognized standards do not exist in emerging technology or areas of practice.

H. Terminate occupational therapy services in collaboration with the service recipient or responsible party when the needs and goals of the recipient have been met or when services no longer produce a measurable change or outcome.

I. Refer to other health care specialists solely on the basis of the needs of the client.

J. Provide occupational therapy education, continuing education, instruction, and training that are within the instructor’s subject area of expertise and level of competence.

K. Provide students and employees with information about the Code and Ethics Standards, opportunities to discuss ethical conflicts, and procedures for reporting unresolved ethical conflicts.

L. Ensure that occupational therapy research is conducted in accordance with currently accepted ethical guidelines and standards for the protection of research participants and the dissemination of results.

M. Report to appropriate authorities any acts in practice, education, and research that appear unethical or illegal.

N. Take responsibility for promoting and practicing occupational therapy on the basis of current knowledge and research and for further developing the profession’s body of knowledge.
NONMALEFICENCE

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

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

Occupational therapy personnel shall

A. Avoid inflicting harm or injury to recipients of occupational therapy services, students, research participants, or employees.

B. Make every effort to ensure continuity of services or options for transition to appropriate services to avoid abandoning the service recipient if the current provider is unavailable due to medical or other absence or loss of employment.

C. Avoid relationships that exploit the recipient of services, students, research participants, or employees physically, emotionally, psychologically, financially, socially, or in any other manner that conflicts or interferes with professional judgment and objectivity.

D. Avoid engaging in any sexual relationship or activity, whether consensual or nonconsensual, with any recipient of service, including family or significant other, student, research participant, or employee, while a relationship exists as an occupational therapy practitioner, educator, researcher, supervisor, or employer.

E. Recognize and take appropriate action to remedy personal problems and limitations that might cause harm to recipients of service, colleagues, students, research participants, or others.

F. Avoid any undue influences, such as alcohol or drugs that may compromise the provision of occupational therapy services, education, or research.

G. Avoid situations in which a practitioner, educator, researcher, or employer is unable to maintain clear professional boundaries or objectivity to ensure the safety and well-being of recipients of service, students, research participants, and employees.

H. Maintain awareness of and adherence to the Code and Ethics Standards when participating in volunteer roles.

I. Avoid compromising client rights or well-being based on arbitrary administrative directives by exercising professional judgment and critical analysis.

J. Avoid exploiting any relationship established as an occupational therapist or occupational therapy assistant to further one’s own physical, emotional, financial, political, or business interests at the expense of the best interests of recipients of services, students, research participants, employees, or colleagues.

K. Avoid participating in bartering for services because of the potential for exploitation and conflict of interest unless there are clearly no contraindications or bartering is a culturally appropriate custom.

L. Determine the proportion of risk to benefit for participants in research prior to implementing a study.
AUTONOMY AND CONFIDENTIALITY

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

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

Occupational therapy personnel shall

A. Establish a collaborative relationship with recipients of service including families, significant others, and caregivers in setting goals and priorities throughout the intervention process. This includes full disclosure of the benefits, risks, and potential outcomes of any intervention; the personnel who will be providing the intervention(s); and/or any reasonable alternatives to the proposed intervention.

B. Obtain consent before administering any occupational therapy service, including evaluation, and ensure that recipients of service (or their legal representatives) are kept informed of the progress in meeting goals specified in the plan of intervention/care. If the service recipient cannot give consent, the practitioner must be sure that consent has been obtained from the person who is legally responsible for that recipient.

C. Respect the recipient of service’s right to refuse occupational therapy services temporarily or permanently without negative consequences.

D. Provide students with access to accurate information regarding educational requirements and academic policies and procedures relative to the occupational therapy program/educational institution.

E. Obtain informed consent from participants involved in research activities, and ensure that they understand the benefits, risks, and potential outcomes as a result of their participation as research subjects.

F. Respect research participant’s right to withdraw from a research study without consequences.

G. Ensure that confidentiality and the right to privacy are respected and maintained regarding all information obtained about recipients of service, students, research participants, colleagues, or employees. The only exceptions are when a practitioner or staff member believes that an individual is in serious foreseeable or imminent harm. Laws and regulations may require disclosure to appropriate authorities without consent.

H. Maintain the confidentiality of all verbal, written, electronic, augmentative, and non-verbal communications, including compliance with HIPAA regulations.

I. Take appropriate steps to facilitate meaningful communication and comprehension in cases in which the recipient of service, student, or research participant has limited ability to communicate (e.g., aphasia or differences in language, literacy, culture).

J. Make every effort to facilitate open and collaborative dialogue with clients and/or responsible parties to facilitate comprehension of services and their potential risks/benefits.
SOCIAL JUSTICE

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

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

Occupational therapy personnel shall

A. Uphold the profession’s altruistic responsibilities to help ensure the common good.

B. Take responsibility for educating the public and society about the value of occupational therapy services in promoting health and wellness and reducing the impact of disease and disability.

C. Make every effort to promote activities that benefit the health status of the community.

D. Advocate for just and fair treatment for all patients, clients, employees, and colleagues, and encourage employers and colleagues to abide by the highest standards of social justice and the ethical standards set forth by the occupational therapy profession.

E. Make efforts to advocate for recipients of occupational therapy services to obtain needed services through available means.

F. Provide services that reflect an understanding of how occupational therapy service delivery can be affected by factors such as economic status, age, ethnicity, race, geography, disability, marital status, sexual orientation, gender, gender identity, religion, culture, and political affiliation.

G. Consider offering pro bono (“for the good”) or reduced-fee occupational therapy services for selected individuals when consistent with guidelines of the employer, third-party payer, and/or government agency.

PROCEDURAL JUSTICE

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

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

A. Be familiar with and apply the Code and Ethics Standards to the work setting, and share them with employers, other employees, colleagues, students, and researchers.

B. Be familiar with and seek to understand and abide by institutional rules, and when those rules conflict with ethical practice, take steps to resolve the conflict.

C. Be familiar with revisions in those laws and AOTA policies that apply to the profession of occupational therapy and inform employers, employees, colleagues, students, and researchers of those changes.

D. Be familiar with established policies and procedures for handling concerns about the Code and Ethics Standards, including familiarity with national, state, local, district, and territorial procedures for handling ethics complaints as well as policies and procedures created by AOTA and certification, licensing, and regulatory agencies.

E. Hold appropriate national, state, or other requisite credentials for the occupational therapy services they provide.

F. Take responsibility for maintaining high standards and continuing competence in practice, education, and research by participating in professional development and educational activities to improve and update knowledge and skills.

G. Ensure that all duties assumed by or assigned to other occupational therapy personnel match credentials, qualifications, experience, and scope of practice.

H. Provide appropriate supervision to individuals for whom they have supervisory responsibility in accordance with AOTA official documents and local, state, and federal or national laws, rules, regulations, policies, procedures, standards, and guidelines.

I. Obtain all necessary approvals prior to initiating research activities.

J. Report all gifts and remuneration from individuals, agencies, or companies in accordance with employer policies as well as state and federal guidelines.

K. Use funds for intended purposes, and avoid misappropriation of funds.

L. Take reasonable steps to ensure that employers are aware of occupational therapy’s ethical obligations as set forth in this Code and Ethics Standards and of the implications of those obligations for occupational therapy practice, education, and research.

M. Actively work with employers to prevent discrimination and unfair labor practices, and advocate for employees with disabilities to ensure the provision of reasonable accommodations.

N. Actively participate with employers in the formulation of policies and procedures to ensure legal, regulatory, and ethical compliance.

O. Collect fees legally. Fees shall be fair, reasonable, and commensurate with services delivered. Fee schedules must be available and equitable regardless of actual payer reimbursements/contracts.

P. Maintain the ethical principles and standards of the profession when participating in a business arrangement as owner, stockholder, partner, or employee, and refrain from working for or doing business with organizations that engage in illegal or unethical business practices (e.g., fraudulent billing, providing occupational therapy services beyond the scope of occupational therapy practice).
VERACITY

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

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

Occupational therapy personnel shall

A. Represent the credentials, qualifications, education, experience, training, roles, duties, competence, views, contributions, and findings accurately in all forms of communication about recipients of service, students, employees, research participants, and colleagues.

B. Refrain from using or participating in the use of any form of communication that contains false, fraudulent, deceptive, misleading, or unfair statements or claims.

C. Record and report in an accurate and timely manner, and in accordance with applicable regulations, all information related to professional activities.

D. Ensure that documentation for reimbursement purposes is done in accordance with applicable laws, guidelines, and regulations.

E. Accept responsibility for any action that reduces the public’s trust in occupational therapy.

F. Ensure that all marketing and advertising are truthful, accurate, and carefully presented to avoid misleading recipients of service, students, research participants, or the public.

G. Describe the type and duration of occupational therapy services accurately in professional contracts, including the duties and responsibilities of all involved parties.

H. Be honest, fair, accurate, respectful, and timely in gathering and reporting fact-based information regarding employee job performance and student performance.

I. Give credit and recognition when using the work of others in written, oral, or electronic media.

J. Not plagiarize the work of others.
FIDELITY

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

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

Occupational therapy personnel shall

A. Respect the traditions, practices, competencies, and responsibilities of their own and other professions, as well as those of the institutions and agencies that constitute the working environment.

B. Preserve, respect, and safeguard private information about employees, colleagues, and students unless otherwise mandated by national, state, or local laws or permission to disclose is given by the individual.

C. Take adequate measures to discourage, prevent, expose, and correct any breaches of the Code and Ethics Standards and report any breaches of the former to the appropriate authorities.

D. Attempt to resolve perceived institutional violations of the Code and Ethics Standards by utilizing internal resources first.

E. Avoid conflicts of interest or conflicts of commitment in employment, volunteer roles, or research.

F. Avoid using one’s position (employee or volunteer) or knowledge gained from that position in such a manner that gives rise to real or perceived conflict of interest among the person, the employer, other Association members, and/or other organizations.

G. Use conflict resolution and/or alternative dispute resolution resources to resolve organizational and interpersonal conflicts.

H. Be diligent stewards of human, financial, and material resources of their employers, and refrain from exploiting these resources for personal gain.
References


Authors

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Central Community College endorses the Americans’ with Disabilities Act. In accordance with Central Community College Policy, when requested, reasonable accommodations may be provided for individuals with disabilities. The essential functions below are necessary for Occupational Therapy Assistant program admission, progression, and graduation and for the provision of safe and effective occupational therapy assistant treatment and intervention. The essential functions include but are not limited to the ability to:

<table>
<thead>
<tr>
<th>Professional Behavior</th>
<th>Cognitive/Critical Thinking</th>
<th>Communication/Interpersonal Relationships</th>
<th>Safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Convey caring, respect, sensitivity, tact, compassion, empathy, tolerance, and a healthy attitude toward others</td>
<td>a) Consistently and dependably engage in the process of critical thinking in order to formulate and implement safe and ethical decisions in a variety of health care settings</td>
<td>a) Engage in two-way communication and interact effectively with others from a variety of social, emotional, cultural, and intellectual backgrounds</td>
<td>a) Detect hazards in the environment</td>
</tr>
<tr>
<td>b) Demonstrate a mentally healthy attitude that is age-appropriate in relationship to the client</td>
<td>b) Demonstrate satisfactory performance on written and practical examinations and/or course assignments</td>
<td>b) Work effectively in groups</td>
<td>b) Respond rapidly to emergency situations putting client safety first</td>
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<tr>
<td>c) Handle multiple tasks concurrently</td>
<td>c) Satisfactorily achieve the program objectives</td>
<td>c) Work effectively independently</td>
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<tr>
<td>d) Safely perform effective occupational therapy assistant treatment and intervention for clients in a caring context</td>
<td>d) Satisfactorily achieve the program objectives</td>
<td>d) Discern and interpret nonverbal communication</td>
<td></td>
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<tr>
<td>e) Understand that posing a direct threat to others is unacceptable and subjects one to discipline</td>
<td>e) Express one’s ideas and feelings clearly</td>
<td>e) Express one’s ideas and feelings clearly</td>
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<tr>
<td>f) Not to pose a threat to self or others</td>
<td>f) Communicate with others accurately in a timely manner</td>
<td>f) Communicate with others accurately in a timely manner</td>
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<tr>
<td>g) Function effectively in situations of uncertainty and stress inherent in providing occupational therapy assistant treatment and intervention</td>
<td>g) Obtain and share information and communications via technology</td>
<td>g) Obtain and share information and communications via technology</td>
<td></td>
</tr>
<tr>
<td>h) Adapt to changing environments and situations</td>
<td>h) Effectively read, write, and comprehend the English language</td>
<td>h) Effectively read, write, and comprehend the English language</td>
<td></td>
</tr>
<tr>
<td>i) Remain free of prescription, non-prescription or alcohol abuse</td>
<td>i) Ask for and receive advice during times of uncertainty</td>
<td>i) Ask for and receive advice during times of uncertainty</td>
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<tr>
<td>j) Provide occupational therapy assistant care in an appropriate time frame</td>
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<td>k) Accept responsibility, accountability, and ownership of one’s actions</td>
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<td>l) Seek supervision/consultation in a timely manner</td>
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<tr>
<td>m) Examine and modify one’s own behavior when it interferes with occupational therapy assistant treatment and intervention or learning</td>
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OCCUPATIONAL THERAPY ASSISTANT ADMISSIONS PROCEDURES

Begin the admissions process early. You will not be granted consideration to the OTA program until items 1 – 6 are completed. It is the student’s responsibility to notify the OTA Administrative Assistant when items are completed.

Admission Criteria and Procedure
1. Complete Central Community College application. This includes submission of college and high school transcripts.
2. Complete the OTA Supplemental Application Form. This form is found in the OTA Admission Packet.
3. Schedule an informational meeting with an OTA Director, Professor, or Assistant.
4. Meet program specific academic eligibility. This is accomplished by attaining minimum scores on the ACT, Compass, Accuplacer, or Asset test. Test scores must be within 3 years of your OTA application. If the scores from your ACT or Asset test are older than 3 years, Compass tests are offered at all Central Community College campuses. Call the campus nearest you to schedule a day/time for your test.

Program specific minimum scores are listed below:

<table>
<thead>
<tr>
<th>ACT TEST</th>
<th>COMPASS Placement Test</th>
<th>Accuplacer Placement Test</th>
<th>ASSET Test</th>
</tr>
</thead>
<tbody>
<tr>
<td>Composite ≥ 19</td>
<td>Reading ≥ 80</td>
<td>Reading ≥ 74</td>
<td>Reading ≥ 40</td>
</tr>
<tr>
<td>Math ≥ 19</td>
<td>Writing ≥ 74</td>
<td>Sent-Skills ≥ 84</td>
<td>Writing ≥ 42</td>
</tr>
<tr>
<td>All other areas ≥ 18</td>
<td>Algebra ≥ 40</td>
<td>Elem Algebra ≥ 57</td>
<td>Math ≥ 43</td>
</tr>
</tbody>
</table>

5. Complete 8 hours of community volunteer service
   • All hours can be completed with the same organization or hours may be split between two sites (minimum of 4 hours per site). Volunteer Service Verification Form (included in this packet) must be mailed by the organization where the volunteering was done.

6. Complete 8 hours of observation with a COTA or OTR
   • Hours can be completed through observing any area of OT practice. OT Observation Form must be mailed by the organization where the observation took place.

7. Attend OTA Informational Seminar
   • All students offered a position in the OTA program must attend this program specific seminar. The seminar will be scheduled approximately 1-2 months prior to the program start date. You will receive a formal invitation to the seminar via the mail.

8. Submit Deposit
   • Students who are officially admitted to the OTA program must submit a deposit of $200.00 to hold their seat. The deposit will be collected when you attend the informational seminar and will be applied to the applicants’ tuition. Please note that this deposit is non-refundable. If a student accepts the college’s offer of admission into the OTA program and then later opts not to enroll in OTA coursework, they will forfeit their deposit.

All required forms can be downloaded and printed from the CCC OTA program webpage. Please note that verification forms must be completed and returned in a sealed envelope by the person at the organization completing the form.

Selection Process
Enrollment to the program is limited to 23 students yearly. All students meeting academic eligibility and completing steps 1 through 6 above will be accepted into the program based on the date their file was completed. In the event that more than 23 students meet academic eligibility, a waiting list will be created. In the event a student from the waiting list cannot be placed into a class, they will automatically secure a spot in the following year class. Application materials of students not meeting academic eligibility, but continuing to work toward meeting admission requirements will be kept on file for a period of two admission cycles, after which time a student will need to reapply to the program meeting the stated requirements for all first-time applicants.
SAFETY POLICY AND PROCEDURES

GENERAL LABORATORY & SAFETY POLICIES & PROCEDURES

The personal safety and health of everyone in the Occupational Therapy Assistant (OTA) Program is of primary importance. This policy will be reviewed and re-evaluated annually to ensure that safety guidelines are being met.

Anyone seeing unsafe conditions must report it immediately to a staff member. In the event of a safety incident, a thorough investigation will be made to determine the cause and if corrective action needs to be taken, even if no injury or illness resulted from the incident.

In the laboratory, students will use a variety of different materials and will be responsible for familiarizing themselves with the MSDS and other safety information about supplies and equipment used. Students will be responsible for maintaining safe work areas and following all safety procedures. Learning activities for these policies will be gone over in each course. Students are required to read this manual and go over college safety materials at the new student orientation. After the training, students will sign the policy page and return it to the OTA Department where it will be kept in each student’s individual file.

Self-Disclosure of Student Conditions
Students are encouraged to disclose any allergies or medical conditions that may be aggravated by using chemicals and doing lab work.

Restricted Access to Laboratories
Only those students who are registered in an OTA laboratory course are allowed in the lab. Visitors and children are required to have special permission to be in the lab because of the risk of injury. OTA students may do presentations in the lab, during which time visitors will be allowed with faculty approval and/or supervision.

Dress Code
Students should dress comfortable to participate in their lab and occupation-based activities. They should not wear jewelry, etc., as this could cause potential problems for their safety and others safety. Open-toed shoes and sandals will be prohibited in the lab. If hair is longer than shoulder length, it needs to be tied back at all times.

Personal Protective Equipment
Students will be required to follow the manufacturer’s recommendations for personal protective equipment found in the Material Safety Data Sheet (MSDS) for the product in use. At a minimum, students will be required to wear gloves when handling any hazardous materials. Protective eyewear: impact safety glasses will need to be worn when operating power tools such as the saw and drill. Chemical splash goggles will be worn when there is any danger which could result in liquid splashes to the eye that might not be prevented by safety glasses (even with side shields).

First-Aid Kits
A first-aid kit is located above the sink in Room 905, the Lab Area. The kit will be used to treat minor injuries. Medical treatment or consultation may be obtained by anyone receiving injuries.

The Course Instructor should be notified of any injuries, including minor ones, so an accident/injury report can be filled out. The report will be kept on file in the OTA Department office, the college business office, and a copy will be kept in the student’s file. Minor injuries may indicate a situation that needs corrected, so all accidents/injuries will be investigated.

The location and phone number of emergency services and the Poison Control Center (1-800-522-4611) are clearly posted on the cabinet door.
The OTA Administrative Assistant is responsible for maintaining the first-aid kit(s). A log is attached to the kit indicating the last inspection date. It should include items such as Band-aids®, sterile gauze pads, bandages, scissors, antiseptic wipes or ointments, and a first aid card. All kits should also contain examination gloves for response to emergencies where blood is present.

**Chemical Inventory**
A chemical inventory list of all products will be kept inside the flammables’ storage cabinet, and a second copy will be kept in the OTA program office.

**Chemical Safety Information**
All chemicals not in use shall be properly stored. All flammable chemicals shall be stored in the flammable cabinet.

**Location of Material Safety Data Sheets (MSDS)**
Safety information sheets related to all hazardous chemicals are located in the MSDS Laboratory Safety Manual. This manual is to at all times be kept on the counter next to the sink in the OTA Lab. Information sheets will be added for all newly purchased supplies stored in the laboratory area. The OTA Administrative Assistant will review the manual quarterly to assure that MSDS safety sheets are current and up-to-date.

**EMERGENCY EVACUATION PROCEDURES**

**Classroom Emergency Procedures**
Faculty members need to remain calm and give clear instructions during an evacuation. Emergency evacuation procedures will be posted in the facility, and all faculty members will be familiar with these plans to ensure an orderly and safe evacuation. The procedures will be gone over during safety training.

Everyone should know how to report an emergency. Persons with special needs should have the information they need to deal with the situation at hand.

**Building Evacuation**
Floor plans are posted in all college buildings on the Grand Island campus showing specific building evacuation routes. If you are notified to evacuate the building or an alarm is sounded, please proceed to the nearest exit.

After leaving the building, everyone should maintain a safe distance from the affected building and keep out of the way of emergency personnel. The designated assemble area for the OTA Department is the entrance to the main campus building across from the south OTA door of the CIT building. After everyone has assembled, a faculty member will take roll call to be sure everyone is accounted for and out of the building. If someone is missing, the faculty member will report this immediately to emergency personnel.

Persons with a disability or medical condition may not be able to evacuate without special assistance. Students should inform their instructors in advance of any special needs that may be necessary during an emergency situation. OTA faculty and staff will ensure that individuals with disabilities are provided with assistance during an emergency situation.
Fire Safety Procedures

1. If you discover a fire or smoke, sound the building fire alarm. Know the location of the alarm signal stations and how they operate. Activate the fire alarm immediately.
2. Notify the Fire Department when an alarm is transmitted by dialing 911.
3. WHEN THE FIRE ALARM SOUNDS, LEAVE AT ONCE. Close the doors behind you and proceed into the fire exit and LEAVE THE BUILDING.
4. Feel the door that leads from the office or classroom to the corridor before opening it. If it is hot or smoke is seeping in, do not open. If you cannot reach the fire exit, keep the door closed and seal off any cracks. Use the telephone to call the Fire Department by dialing 911 and give the address of the building and the office/room number.
5. If the door feels cool, open cautiously. Be prepared to close it quickly if the corridor is filled with smoke or if you feel heat pressure against the door. If the corridor is clear, proceed with the building evacuation instructions.
6. If caught in smoke or heat, stay low where the air is better. Take short breaths through your nose until you reach an area of refuge.

An “all clear” will be given by the local fire department. Students should not re-enter the building until instructed to do so by appropriate college personnel.

Hazardous Materials Procedures

Central Community College has a Chemical Hygiene Plan that students are required to follow and is posted in the lab. The OTA safety guidelines are in addition to all college policies.

The Occupational Therapy Assistant Laboratory does not currently use any radioactive or biological materials.

A spill or release of chemicals inside a building or the environment may be a hazardous materials incident. Users may manage simple spills. Major spills or emergencies require emergency assistance from the fire department or a Hazardous Material (HAZMAT) Team. In the event of a major chemical spill or if a chemical spill is beyond the expertise of the instructor to remediate, notify the local fire department by dialing 911.

<table>
<thead>
<tr>
<th>Simple Spill</th>
<th>Major Spill or Emergency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does not spread rapidly.</td>
<td>Spreads rapidly.</td>
</tr>
<tr>
<td>Does not endanger people.</td>
<td>Endangers people.</td>
</tr>
<tr>
<td>Does not endanger environment.</td>
<td>Endangers environment.</td>
</tr>
<tr>
<td>Trained individual can clean up.</td>
<td>Must call 911.</td>
</tr>
</tbody>
</table>

For major spills, notify emergency personnel about the type(s) of materials involved and any other information that may be prudent. Evacuate the area and assemble at a safe distance – upwind. Make sure everyone is accounted for and wait for emergency personnel.

Explosion Procedures

An explosion is caused by a rapid expansion of gas from chemical reactions or incendiary devices. Signs of an explosion may be a very loud noise or series of noises and vibrations, fire, heat or smoke, falling glass or debris, or building damage.

Get out of the building as quickly and calmly as possible and call 911. If items are falling from the ceiling, you can seek shelter under a sturdy table or desk. Help others leave the building and move to designated evacuation areas if required. Make sure to stay clear of emergency vehicles and crews. Untrained persons should not attempt to rescue people who are inside a collapsed building—wait for emergency personnel to arrive. Persons with mobility problems should go to an area of safety and wait for emergency personnel.
**Violent Incident Procedures**

Violent incidents may include acts of terrorism, assaults, and incidents of workplace violence. Emergency situations should be reported to the police (call 911) and college personnel (dial 0).

If you observe any criminal activity or suspicious behavior on campus, immediately notify the police (911) from a safe location. Report as much information as possible, including:

- What the person(s) is/are doing,
- Where it is happening,
- Whether weapons are involved, and if so, what type,
- A physical description of the person(s) involved and their clothing,
- A vehicle description and license number and the direction of travel when last seen.

Stay on the phone with the police dispatcher and provide additional information as the situation changes until the police arrive at your location. If you believe your life is in danger, attempt to leave the area and find a safe place until help arrives. Do not approach or attempt to apprehend the person(s) involved.

**UNIVERSAL PRECAUTIONS FOR SCHOOL SETTING**

Central Community College has adopted a “Bloodborne Pathogen Exposure Control Plan” in accordance with 29 CFR 1910.1030. Further, college policy on Infectious Disease and Aids may be found at:


"Universal precautions," as defined by CDC, “are a set of precautions designed to prevent transmission of human immunodeficiency virus (HIV), hepatitis B virus (HBV), and other bloodborne pathogens when providing first aid or health care. Under universal precautions, blood and certain body fluids of all patients are considered potentially infectious for HIV, HBV and other bloodborne pathogens.” (CDC, 1996). Universal precautions refer to the usual and ordinary steps all school staff and students need to take in order to reduce their risk of infection with HIV, the virus that causes AIDS, as well as all other blood-borne organisms (such as Hepatitis B virus). These steps are universal because they need to be taken in all cases, not just when a staff member or a student is now to have HIV. They are precautions because they require foresight and planning and should be integrated into existing safety guidelines.

Areas contaminated with blood or body fluids will be cleaned by properly trained personnel in accordance with the guidelines set forth in CCC’s “Bloodborne Pathogen Exposure Control Plan.” Students should make the instructor aware of any blood/body fluid contamination immediately. Hands or other skin surfaces will be washed immediately if contaminated with blood or other body fluids.

Gloves will be worn when touching blood or other body fluids, mucus membranes, nonintact skin, or handling items or surfaces soiled with blood or other body fluids. Gloves will be disposed of after a single use. Hands will be washed immediately upon glove removal.

If it is anticipated droplets of blood or any body fluids may come in contact with the mucus membranes of the employee’s eyes, nose, or mouth, he/she will wear protective equipment (i.e., goggles or face shield).

Contaminated items should be placed in red bags marked with bio-hazard indicator and secured. Biohazardous waste bags must be red in color and labeled with either the words “Biohazardous Waste,” or with a biohazard symbol and the work “Biohazard.” These bags must be disposable and impervious to moisture and have strength sufficient to preclude ripping, tearing, or bursting under normal conditions of usage and handling.
SPECIFIC MODALITIES/SUPPLIES SAFETY PROCEDURES

All supplies and devices are not used every day. Equipment will be inspected and cleaned according to the manufacturer’s guidelines before and after use by faculty, staff, and students. These guidelines are kept in a file cabinet in Room 909 by the OTA Program Administrative Assistant. Equipment of electrical nature will be stored in the lab and inspected for safety and certified by a Certified Electrical Technician annually. There will be dates of inspection stickers on the equipment, and documentation will be kept in Room 909 by the Administrative Assistant. Equipment is stored in a cabinet or closet at the end of the class, and the lab door is locked when no one is in the area. Damaged equipment should be tagged and reported to OTA faculty immediately. Faculty shall clean, disinfect, and store equipment after its use. Appropriate cleaning supplies and personal protective equipment available in the laboratory.

Paraffin Machine
When the paraffin is used, the temperature will be 125-130 degrees and cleaned weekly according to manufacturer’s instructions.

Hydrocollator
The temperature of the hydrocollator will be 160-175 degrees. It should be cleaned monthly.

Cold Packs
Cold packs should be 23 degrees. These and hotpacks should be thrown away if there are tears or leaks.

Suspended Pediatric Equipment
A variety of swings, bolster, platform, etc. are used to demonstrate pediatric and sensory-based treatments. Hazards associated with swings include back, neck, and shoulder injury due to poor body mechanics or awkward movements; potential dizziness, nausea, or vomiting due to movement; injury to client falling off swing or losing balance; injury to people in the path of the swing.

The following safety precautions shall be followed when using swings: ensure protective padding on floor under swings and cushioning surrounding potential nearby hazards; ensure appropriate set-up of swings before proceeding with activity; provide proper support to participant on swing; identify a clear safety area for observing use of swing, while staying out of swing path.

Craft Supplies
Water-based paints include watercolor, acrylic and tempera. Water is used for thinning and cleanup. There are hazards associated with water-based paints. Acrylic paints contain a small amount of ammonia, so some sensitive people may experience eye, nose, and throat irritation from the ammonia. Acrylics contain a very small amount of formaldehyde as a preservative. People already sensitized to formaldehyde may experience allergic reactions from the trace amount of formaldehyde found in acrylics.

The following safety precautions shall be followed when working with water-based paints: open a window while using acrylic paints; never use lips to point the end of the paintbrush; and eating, smoking, and drinking are prohibited in the lab while art materials are being used.
**Dry Drawing Media**

Dry drawing media includes dust-creating materials (charcoal, pastels, chalk, and pencils) and media that do not create dust (like crayons and oil pastels). There are hazards associated with dry drawing media.

Charcoal is considered a hazard because of dust. The dust, if inhaled in large amounts, can lead to chronic lung problems through an irritation and clogging effect. Do not blow excess charcoal dust off a drawing as this is a major source of charcoal inhalation. Colored chalks are considered the same as charcoal, and some are dustier than others. Anyone with asthma may have trouble with dusty chalks.

Pastel sticks and pencils consist of pigments bound into solid form by a resin. Inhalation of pastel dusts is a major hazard, especially if blowing excess pastel dust off the drawing. Pastels may contain toxic pigments such as chrome yellow (lead chromate), which can cause lung cancer, and cadmium pigments which can cause kidney and lung damage and are suspect human carcinogens.

The following safety precautions will be followed when working with dry drawing media: use the least dusty types of pastels, chalks, and pencils; switch to oil pastels or similar non-dusty media when possible; do not blow off excess pastel or charcoal dust with your mouth (tap off the built up dust so it falls to the floor); wet-mop and wet-wipe all surfaces clean of dusts; and a mask can be worn for protection from inhalation of dusts.

**Glue**

Glues used for joining wood include white glue and wood glue. Hazards associated with glue include: water-based glues, white glue (polyvinyl acetate), and other water-based adhesives are slightly toxic through skin contact and only slightly toxic through inhalation or ingestion.

The following safety precautions shall be followed when gluing wood: use water-based glues for craft projects and provide window ventilation when large amounts of glue are used.
POLICY FOR PEDIATRIC LAB

Cleaning Toys
Toys will be cleaned after each individual child has used a toy, particularly toys used by infants and toddlers.

Small plastic toys with no batteries will either be run through the dishwasher or scrubbed with a clean rag in soapy water, rinsed, sanitized by dipping in diluted bleach (1/4 cup bleach to 1 gallon of water), stickers on the toy dried with a clean towel, and the toy allowed to air-dry. Non-toxic sanitizer may also be used.

Toys with batteries will be sprayed with canned air to dislodge debris, cleaned on the outside with soapy water and clean water, wiped with the diluted bleach solution, and allowed to air-dry. Another method that may be used is putting a few drops of antibacterial soap in very warm water and adding one to two tablespoons of white vinegar. Mix up mixture with rag, wring out rag, and wipe the surface of toys, rub over keys and buttons, dry stickers with a clean towel, and allow the toy to air-dry. Non-toxic sanitizer may also be used.

Large plastic, metal, or wooden toys and equipment are to be cleaned on the surface with soap and water, wiped with bleach solution, stickers dried with a clean towel, and allowed to air-dry. Non-toxic sanitizer may also be used.

Fabric toys and equipment should be washed in the laundry in laundry soap and hot water.

Actions in the Pediatric Lab
General safety precautions will be followed when anyone is in the Pediatric Lab. No unnecessary risks or play tactics will be used by anyone in the Pediatric Lab to ensure the safety of everyone.
FORMS APPENDIX
Professionalism Skillset Self-Assessment

The intended purpose for this is to assess your professionalism skillsets. Please read and reflect on your professionalism skillsets demonstrated on a consistent basis. This is a tool for you to reflect and work on good professional behaviors. Please seek out assistance from instructors, peers or CCC research to aid in professionalism.

<table>
<thead>
<tr>
<th>Professional Behavior</th>
<th>Strengths and Improvements</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Attendance</strong></td>
<td></td>
</tr>
<tr>
<td>Student attends, arrives on time and is actively participating. Student is appropriate on electronic devices, no texting; phone turned off or on vibrate, no surfing internet etc.). Student communicates with instructor if tardy or absent prior to and makes up work in timely manner.</td>
<td></td>
</tr>
<tr>
<td><strong>Communication</strong></td>
<td></td>
</tr>
<tr>
<td>Student expresses self professionally in all oral and written communication including social media. Checks email often, uses appropriate language, facial expressions, eye contact and attentive body language. Actively participates and speaks positively to others.</td>
<td></td>
</tr>
<tr>
<td><strong>Collaboration</strong></td>
<td></td>
</tr>
<tr>
<td>Student has an overall positive disposition. This means the student is a team player, shows initiative, contributes share of group work, is a positive team member, and demonstrates respect for others. The student is not mocking others, rolling eyes or showing disrespect for peers, the program, community partners, fieldwork or faculty members. Seeks out opportunities to volunteer both inside and outside of the classroom. Helps others.</td>
<td></td>
</tr>
<tr>
<td><strong>Ethical</strong></td>
<td></td>
</tr>
<tr>
<td>Student maintains confidentiality, HIPAA, Code of Ethics. Student has integrity, dependable and is trustworthy. Student is accountable and able to act independently.</td>
<td></td>
</tr>
<tr>
<td><strong>Appearance</strong></td>
<td></td>
</tr>
<tr>
<td>Student dresses professionally, according to each situation, covers tattoos, facial and body piercings, and demonstrates appropriate hygiene and grooming.</td>
<td></td>
</tr>
<tr>
<td><strong>Content/Knowledge</strong></td>
<td></td>
</tr>
<tr>
<td>Student is reflective, flexible and open to new ideas. Student relies on information from a variety of sources, and uses evidence based practice, shares information with others, curious for new knowledge and learning. Student asks questions, is passionate, positive and an advocate for the profession. Student is able to articulate the concept of lifelong learning. Student is globally aware and is able to meet current and future practice trends.</td>
<td></td>
</tr>
</tbody>
</table>

Please provide an action plan for improvement regarding professionalism.

<table>
<thead>
<tr>
<th>Professional Skillset to Improve</th>
<th>Steps for Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

X

Student Signature
Professionalism Skillset Assessment for Instructor/Advisor

Instructor and/or advisor please reflect on student performance and provide insight into the strengths and weaknesses observed for the student. Collaborate with student to create an action plan for improvement in professionalism.

<table>
<thead>
<tr>
<th>Professional Behavior</th>
<th>Strengths, Improvements and Examples</th>
</tr>
</thead>
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<td></td>
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<table>
<thead>
<tr>
<th>Professional Skillset to Improve</th>
<th>Steps for Improvement</th>
</tr>
</thead>
</table>

Student Signature: ___________________________ Date: ___________________________

Instructor/Advisor Signature: ___________________________ Date: ___________________________
Read the declarations below and sign only one option. If you are unable to fully meet any criterion, you will need to direct your request to the Program Director of the Occupational Therapy Assistant Program.

I have reviewed the Essential Functions for this program, and I certify that to the best of my knowledge I currently have the ability to fully perform these functions. I understand that further evaluation of my ability may be required and conducted by the Occupational Therapy Assistant program faculty if deemed necessary to evaluate my ability prior to admission to the program and for retention and progression through the program.

I have read the Essential Functions for this program, and I currently am unable to fully meet the items indicated without accommodations. I am requesting reasonable accommodations on an attached proposal with an explanation of how each accommodation will help me perform the essential work of an occupational therapy assistant student and practitioner.

_________________________________  ______________________
Student Signature                   Date

_________________________________
Printed Name                       Student ID #
Student Verification of HIPAA Training

I have received HIPAA training from this program, and I certify that I will adhere to the HIPAA training rules. If I am in doubt of something, I will always consult my supervisor or instructor. I understand that further evaluation of my ability may be required and conducted by the Occupational Therapy Assistant program facility if deemed necessary to evaluate my ability prior to admission to the program and for retention and progression through the program.

_______________________________________  ________________________________
Student Signature                              Date

_______________________________________  ________________________________
Printed Name                                  Student ID
**Central Community College Health Sciences**

**Immunization Record**

<table>
<thead>
<tr>
<th>Student name:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Please Print)</td>
<td></td>
</tr>
</tbody>
</table>

Date of Birth: __________________________ Age: __________

### MEASLES/MUMPS/RUBELLA (MMR)

For individuals born after Jan. 1957

<table>
<thead>
<tr>
<th>Two required Immunizations:</th>
<th>Or Positive Titer:</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1 Date:</td>
<td>Measles Positive Titer - Date:</td>
</tr>
<tr>
<td>#2 Date:</td>
<td>Mumps Positive Titer - Date:</td>
</tr>
<tr>
<td></td>
<td>Rubella Positive Titer - Date:</td>
</tr>
</tbody>
</table>

### VARICELLA (Chickenpox)

Two required immunizations:

<table>
<thead>
<tr>
<th>#1 Date:</th>
<th>Or History of chicken pox:</th>
</tr>
</thead>
<tbody>
<tr>
<td>#2 Date:</td>
<td>Or Positive antibody titer:</td>
</tr>
</tbody>
</table>

### TETANUS/DIPHTHERIA/PERTUSSIA (Tdap)

Documentation of Tdap immunization within the past 10 years:

(If Tdap has not been previously administered, an interval of 2 years since the last TD booster is suggested.)

Date:

### HEPATITIS B

<table>
<thead>
<tr>
<th>Hepatitis B # 1 - Date:</th>
<th>Or Positive Antibody Titer - Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B # 2 - Date:</td>
<td>*If titer is negative, repeat the series and titer</td>
</tr>
<tr>
<td>Hepatitis B # 3 - Date:</td>
<td></td>
</tr>
</tbody>
</table>

### TUBERCULOSIS SKIN TEST (PPD)

Tuberculosis: Disease or exposure testing,

TB skin testing within the past 12 months and yearly:

Results & Date read:

Negative: ___________  Positive: ___________

If positive tuberculin skin test, documentation should include chest x-ray results and medical treatment received

Chest X-ray & Medications/Treatment - Date:

### INFLUENZA VACCINE (YEARLY)

Must have documentation from provider

Vaccine Name: ___________

Lot #: ___________

Date: ___________

TB testing is required yearly prior to first clinical rotation. Influenza vaccine is required yearly.

**RETURN FORM TO:** Central Community College

Attach copies of actual records or provide physicians signature verifying immunizations.

Physician's Signature: __________________________ Date: ___________

9/5/2014
Students are responsible for knowing and adhering to the policies and procedures outlined in the Student Handbook. It is the responsibility of the student to contact the OTA Director or an OTA Instructor if they have a question about the content of the handbook.

I have read and understand the information, policy, and procedures outlined in this handbook.

________________________________________________  ______________________
Student Signature                                   Date

________________________________________________  ______________________
Printed Name                                         Student ID #
Student Professional Information Form

Name: ___________________________ Phone: ___________________________

Address: ___________________________

Emergency Contact person and number: ______________________________________

Goal for fieldwork experience:

Please list prior fieldwork rotations:

1) Name of site:
   Location:
   Brief summary of patient population, treatments, and theories utilized at site:

2) Name of site:
   Location:
   Brief summary of patient population, treatments, and theories utilized at site:

3) Name of site:
   Location:
   Brief summary of patient population, treatments, and theories utilized at site:

Please list any honors, work experience relevant to profession, continuing education performed or memberships held within the profession.

Describe your learning style:
Students are responsible for knowing the policies and safety procedures in this manual. Each student must also maintain safe work areas in the lab and follow all posted procedures in this manual and in the lab.

I have read and understand the safety information, procedures, and policies in this manual.

Student Signature _______________________________________________________

Date ____________________________________
Central Community College’s affiliates may ask for the college to share a background check on a particular student. The college will not release this information without the student’s permission.

OTA practicum/clinical sites ____________, an affiliate of Central Community College, 
Affiliate’s Name
has requested a copy of _____________________________, a student at Central Community College, background check. This includes the information supplied by Secured Data Services, the NHHS Child Abuse and Adult Abuse Registers, and the National Register for Sex Offenders.

I authorize Central Community College to release a copy of my background check as identified above

to OTA practicum/clinical sites _____________________________
Affiliates Name

PO Box 1024 Hastings NE 68902-1024
Affiliates Address City State Zip

Print Name: ____________________________ Signature: ____________________________
Student’s name

Date: ____________________________
Midwest Regional Fieldwork Consortium
Level I Fieldwork Student Evaluation

Student Name: _____________________________________________________
Course Number: _________________________
Facility Name: _____________________________________________________
Dates of Fieldwork: ______________________
School Name:________________________________________________________
Type of Setting: ___________________________

Please indicate the student’s performance on each item using the rating scale below. The following definitions are provided for consistency and clarity. Remember to consider students will need clinical supervision and guidance during this experience. The focus of these experiences is not intended to be independent performance, therefore, the student should be rated based on their performance as a Level I fieldwork student.

Needs Improvement (N): Performance is inconsistent or requires constant supervision and cueing/assistance from fieldwork educator to perform tasks safely and effectively. Performance is weak in many of the required tasks or activities and may occasionally be unacceptable. This student might show minimal interest in the activities/tasks. Opportunities for improvement exist, but further training/experience is indicated.

Meets Expectations (M): Carries out required tasks and activities in a safe and effective manner. This student demonstrates good solid performance in required activities and shows initiative/enthusiasm. This rating would ideally be used more than all others.

Exceeds Expectations (E): Frequently demonstrates clinical performance that surpasses requirements. At times, performance is exceptional. This student shows initiative above what is expected.

Not Applicable/No Opportunity (NA): This is to be used when an item to be scored either was not observed by the supervisor or there was no opportunity for the activity to occur in this setting.

RATING ____ 1. TIME MANAGEMENT SKILLS (Is prompt, responsible, and flexible)
Comments: ____________________________________________________________

RATING ____ 2. ORGANIZATION (Sets priorities, is dependable, organized, and follows through with responsibilities. Plans adequately to complete program assignments.)
Comments: ____________________________________________________________

RATING ____ 3. WRITTEN COMMUNICATION (Correct grammar, spelling and legibility are noted. Information contained in the written work matches the consumer activity in which the student participated or observed.)
Comments: ____________________________________________________________

RATING ____ 4. CLINICAL REASONING/PROBLEM SOLVING (Self reflective, willing to ask questions, able to analyze, synthesize and interpret information; understands the OT process)
Comments: ____________________________________________________________

5. USE OF PROFESSIONAL ETHICS
RATING ____ A. Respects confidentiality and consumer’s rights
RATING ____ B. Uses precautions and effective safety techniques at all times
RATING ____ C. Complies with facility’s policies and procedures
RATING ____  6. OBSERVATION SKILLS (Observes relevant behaviors for performance areas and performance components and verbalizes perceptions and observations.)
Comments:____________________________________________________________________________________________________________________________

RATING____  7. PARTICIPATION IN THE SUPERVISORY PROCESS (Gives, receives and responds to feedback; seeks guidance when necessary; follows proper lines of command)
Comments:____________________________________________________________________________________________________________________________

RATING ____  8. VERBAL COMMUNICATION AND INTERPERSONAL SKILLS WITH CONSUMERS/STAFF/CAREGIVERS ( Interacts appropriately with individuals (e.g.- eye contact, empathy, active listening, respectfulness, use of authority, etc; degree/quality of verbal interactions; use of body language and non-verbal communication)
Comments:____________________________________________________________________________________________________________________________

RATING ____  9. PATIENT RELATED ACTIVITIES (Develops therapeutic relationship with consumer taking into consideration contextual dimensions religion, ethnicity, culture, lifestyle); generates appropriate strategies to facilitate achievement of consumer's goals and if feasible plans and assists with carrying out one or more intervention/evaluation sessions)
Comments:____________________________________________________________________________________________________________________________

10. PROFESSIONAL BEHAVIOR

RATING ____  A. Overall appearance and dress appropriate for the facility
RATING ____  B. Asks appropriate questions and shows initiative to seek and acquire information from a variety of resources
RATING ____  C. Shows the ability to take responsibility for own learning and demonstrates motivation
RATING ____  D. Sets appropriate limits in response to undesirable physical or social behaviors if applicable
RATING ____  E. Deals with personal emotions maturely
RATING ____  F. Demonstrates ability to work in collaboration with the consumer and/or family and a variety of service providers
Comments:____________________________________________________________________________________________________________________________

RATING ____  11. OVERALL IMPRESSION OF STUDENT'S PERFORMANCE
(An overall ‘N’ rating indicates the need for the student to repeat the clinical experience.)
Comments:

____________________________________     _________________________
Student Signature                        Date

____________________________________     _________________________
Signature of Rater and Title              Date