# Student Handbook

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THE UNIVERSITY OF TEXAS AT EL PASO
MISSION STATEMENT

The University of Texas at El Paso (UTEP) is dedicated to teaching and to the creation, interpretation, application, and dissemination of knowledge. UTEP prepares its students to meet lifelong intellectual, ethical, and career challenges through quality educational programs, excellence in research and in scholarly and artistic production, and innovative student programs and services, staff and administrators.

As a component of The University of Texas System, UTEP accepts as its mandate the provision of higher education to the residents of El Paso and the surrounding region. Because of the international and multi-cultural characteristics of this region, the University provides its students and faculty with distinctive opportunities for learning, teaching, research, artistic endeavors, cultural experiences, and service.

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OCCUPATIONAL THERAPY PROGRAM
MISSION STATEMENT

* To provide future occupational therapy practitioners with educational opportunities to acquire competencies necessary for entry level success in the profession including research, practice, and involvement in professional activities.

* To prepare students for continuing intellectual, ethical, and career challenges.

* To provide health care personnel to meet the unique health care needs of the United States-Mexico border region.

adopted: 4/3/97
PHILOSOPHY

The Nature of Persons

Persons are characterized by the confluence of thoughts, feelings, and actions through which they engage with the world. Individuals both seek and express personal meaning through the unique ways in which they occupy themselves. Wellness, self-actualization, and a sense of belonging often associate with the occupations through which individuals achieve mastery and establish community within ever-changing environments. By nature, persons are disposed to both partake of and remake the world through an interplay that is in large measure occupational. Persons who thrive in the world display a resilience that allows adaptation, a capacity for reflection that fosters understanding, an empathic disposition that helps connection with others, and a personal integrity that earns respect.

Occupational Therapy

An individual's capacity to engage with the world can be challenged or compromised. Incapacity may stem from problems in the realms of thinking, feeling, or acting that are characterized as disabilities or performance dysfunctions or may derive from environmental, socio-cultural, or developmental constraints.

For help in establishing or restoring a repertoire of meaningful occupations, an individual or a family can turn to occupational therapy. Centered on and directed by the individual's articulation of that which is meaningful, the clinical reasoning process of occupational therapy targets the achievement of a satisfying degree of mastery and interdependence; the therapeutic relationship evokes and adaptive resilience.

An occupational therapist brings professional knowledge and skill to an interactive partnership; an individual in need brings personal strengths along with the request for help. A therapist first engages in an analysis of both the incapacity that is problematic and the occupations that are deemed valuable. The therapist then synthesizes purposeful activity, supportive environment, and caring presence in a dynamic interplay that both simulates and fosters meaningful occupation.

Occupational Therapy Education

Professional education is a meaningful occupation wherein the potential for mastery and community is accessible to both educators and learners. An educational process that aims to develop a professional who is capable of clinical reasoning as well as collaborative relationships must cultivate a confluence of the requisite cognitive, affective, and psychomotor behaviors.

The outcome of the educational process in occupational therapy is a novice practitioner who applies professional knowledge and human understanding in ever-changing practice environments. Educators who foster the development of such a professional must inspire students to acquire a broad base of human understanding about
wellness, the occupational nature of persons, the meaning of compromised capacity in a life, and the dynamic quality of systems. Educators must further lead students to acquire the profession’s knowledge and ethos: a discovery of those principles, theories, skills, and attitudes from the sciences and the liberal arts that make practice effective and ethical.

Given the various arenas that support occupational therapy practice, the fundamentals with which learners must emerge are the capacity to learn independently, to think critically, to manage effectively, to relate interpersonally, and to respond to the challenges of practice with the resilience, reflection, empathy, and integrity that characterize the profession’s science and artistry.
THE UNIVERSITY OF TEXAS AT EL PASO
OCCUPATIONAL THERAPY PROGRAM
CURRICULUM DESIGN

PHILOSOPHY OF THE PROGRAM

The Nature of Persons

Persons are characterized by the integration of thoughts (cognitive), feelings (affective), and actions (psychomotor) through which they engage with the world. Individuals seek and express personal meaning through the unique ways in which they occupy themselves. Wellness, self-actualization, and a sense of belonging often associate with the occupations through which individuals achieve mastery and establish community within ever-changing environments. By nature, persons are disposed to both participation and adaptation through an interplay that, in large measure, is occupational. Persons who thrive in the world display: (1) resilience that allows adaptation, (2) capacity for reflection that fosters understanding, (3) empathic disposition that helps connection with others, and (4) personal integrity that earns respect.

Occupational Therapy

An individual's capacity to engage with the world may be challenged or compromised. Incapacity can stem from problems in the realms of thinking, feeling, or acting that are characterized as disabilities or performance dysfunctions or may derive from environmental, socio-cultural, or developmental constraints. For help in establishing or restoring a repertoire of meaningful occupations, an individual or a family can turn to occupational therapy. Centered on and directed by the individual's articulation of that which is meaningful, the clinical reasoning process of occupational therapy targets the achievement of a satisfying degree of mastery, interdependence, and adaptive resilience. An occupational therapist brings professional, comprehensive knowledge and skill to an interactive partnership; whereby, an individual in need brings personal strengths along with the request for help. A therapist first engages in an analysis of both the incapacity that is problematic and the occupations that are valuable to the client. The therapist then synthesizes an intervention plan utilizing, purposeful activity, supportive environments, and a caring presence in a dynamic interplay that both simulates and fosters meaningful occupation.

MISSION STATEMENT
• To provide future occupational therapy practitioners with educational opportunities to acquire competencies necessary for entry-level success in the profession including research, practice, and involvement in professional activities

• To prepare students for continuing intellectual, ethical, and career challenges.

• To provide health care personnel to meet the unique health care needs of the United States-Mexico Border Region.

PROGRAM FOUNDATION AND SCOPE

The foundation of the program is the belief that humans are complex beings engaged in a dynamic process of interaction with their physical, social, psychosocial, cultural, temporal, and spiritual environment. Through active engagement within these environments, humans evolve, adapt, and change.

The scope of the curriculum is to achieve competence through academic knowledge, interactive learning, direct application, hands-on experience, didactic communication, clinical reasoning, and creative problem solving.

CURRICULUM DESIGN

The design of the occupational therapy program at the University of Texas at El Paso reflects the mission of the University and the philosophical foundations of the profession. The bachelor’s program consists of 89 credit hours divided into seven semesters of professional educational courses and Fieldwork experiences.

The curriculum relies on the integration of a strong foundation of physical sciences, natural sciences, behavioral sciences, liberal arts, and humanities. As students progress through the curriculum, they are expected to increase their capacity to gain knowledge of the human body and function; comprehend and understand relevant occupational theories; demonstrate principles of theory application; develop, analyze and synthesize fundamental skills for clinical and community practice; and discriminate/support advanced concepts of occupational therapy through the integration of cognitive, affective, and psychomotor experiences.

The curriculum scope, design, and sequence is analogous to a tree, which demonstrates growth, maturity, and self-sufficiency over time. Its foundation (soil) is the belief that humans are complex beings engaged in a dynamic process of interaction with their physical, social, psychological, cultural, temporal, and spiritual environments, and capable of growth, change, and adaptation. Embedded in the soil, is a root system grounded in the natural sciences, physical sciences, behavioral sciences, liberal arts, and humanities (see prerequisites, page 5). As students progress through the program, they are nourished through cognitive, affective, and psychomotor experiences that
emphasize clinical reasoning, creative problem-solving, reflection, and evidence-based research. Additionally, they are fed through a constant stream of service-learning opportunities infused throughout the program in varying degrees of requirements and complexities. For example, in courses within the first two semesters, students have opportunities to observe and identify occupational therapy principles within area clinics and community programs. As the students gain abilities in analysis (year two), they use service-learning experiences as vehicles to compare and contrast methodology and intervention from more guided experiences within the community. Upon completion of the academic portion of the program, students are scheduled for Level II Fieldwork. They have opportunities to explore physical health, mental health, developmental health, and/or community health. After 24 weeks of successful Fieldwork, students graduate from the occupational therapy program. The outcome of the program is the development of students (fruit) who are safe, effective, ethical, and competent entry-level practitioners prepared for clinical/community practice, leadership, life-long learning, and active participation in their professional organizations and communities.

**Sequence and Content of Coursework**

Professional courses during the **first year** prepare students to understand the human body and function (OT 3410: Functional and Applied Anatomy and Physiology; OT 3311: Human Adaptation to Pathophysiology; OT 3313: Studies in Human Neurosciences; OT 3312/OT 3122: Biomechanic Principles of Function; OT 3301: Therapeutic Media I; and OT 3114: Medical Terminology). As students examine the principles underlying how humans (occupational beings) function, coursework is presented involving theoretical principles in occupational therapy (OT 3313: Basic Concepts in Occupational Therapy; OT 3103: Practice Skills; OT 3202: Therapeutic Media II; OT 3223/OT 3123: Evaluations in Occupational Therapy; and OT 1335: Preceptorship A). Building on the foundation of theory, the application of practice is introduced in the following semesters as students enroll in theoretical application courses (OT 3312: Clinical Psychiatry; OT 3223/OT 3123: Evaluations in Occupational Therapy (this course addresses both theory and application and therefore is listed under both areas in the schematic drawing); OT 4205: Therapeutic Media III; and OT 4315: Legal/Ethical Issues in Occupational Therapy; and OT 4136: Preceptorship B).

The sequence and content of the **second year** coursework builds upon basic OT theories and application by establishing a foundation regarding how occupation relates to disability, health, wellness, and occupation-centered practice. Courses like OT 4227/OT 4127: Work and Human Occupation; OT 4228: Rehabilitation Approaches in Occupational Therapy; and OT 4225/OT 4125: Developmental Approaches in Occupational Therapy establishes the foundation of ADL’s, work, play, and leisure. Students here focus on higher-level communication, problem solving, clinical reasoning, evaluation, intervention, critical thinking, and documentation. Additionally, students are required to take Management and Research classes (OT 4316: Management Issues in Occupational Therapy Practice; HSCI 3315: Research for Health Professionals) for preparation of leadership and evidence-based practice within their communities.
In the final semester, students study more complex theories, models, and advanced practice (OT 4224/OT 4124: Psychosocial Occupational Therapy; OT 4229/OT 4129: Neurodevelopmental Approaches in Occupational Therapy; OT 4205: Upper Extremity Orthotics and Prosthetics; OT 4326: Advanced Concepts in Occupational Therapy) Additionally, students participate in their final Level I Fieldwork experience (OT 4137: Preceptorship C), which incorporates client-centered evaluation, treatment planning, treatment implementation, and client reassessment through partnership with a collaborative OTA program. Students experience not only realistic encounters with actual patients, but establish appreciation and meaningful relationships with occupational therapy assistant students. Synthesis of this experience is achieved with a series of senior seminars designed to assist the students’ preparation for Level II Fieldwork.

The third year expects students to be active, independent learners as they participate in their Level II Fieldwork experiences. Students perform 24 weeks of practicum to further advance their mastery of theory, evaluation, intervention, critical inquiry, documentation, clinical reasoning, didactic communication, and creative problem solving. Students select Level II Fieldwork experiences from 77 contracted Fieldwork Sites across the states of Texas, New Mexico, Nevada, and Arizona. Fieldwork areas offered include Physical Health, Mental Health, Developmental Health, and Community Health. Students also have options to participate in international Fieldwork opportunities as outlined in ACOTE’s Fieldwork Guidelines.

In summary, the design and content of the curriculum emphasizes a dynamic approach to occupational therapy theory and practice, firmly grounded in occupation and meaningful activity. Cognitive, affective, and psychomotor experiences are infused into the coursework to promote optimal professional growth at each stage of development. The sequence of the courses are organized to provide knowledge from simple to more complex with increasing complexity as the student understands, applies, synthesizes, compares, and evaluates OT theory and practice. The ultimate goal of the program is to prepare students for entry-level practice in a variety of traditional and non-traditional settings both safely and effectively.

Prerequisite Course Work:

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<thead>
<tr>
<th>Natural/Physical Sciences</th>
<th>Behavioral Sciences</th>
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<tbody>
<tr>
<td>Biology 1305-1107</td>
<td>Sociology 1301</td>
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<tr>
<td>Biology 1306-1108</td>
<td>Psychology 1301</td>
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<td>Biology 2311-2111</td>
<td>Psychology 1303</td>
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<td>Psychology 2310</td>
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<td>Psychology (3 hours)</td>
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<tr>
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<th>General Biology with Lab</th>
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<tr>
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<td>Organismal Biology</td>
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<td></td>
<td>Human Anatomy and Physiology with Lab</td>
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<td>Introduction to Sociology</td>
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<td>Introduction to Psychology</td>
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<td>Statistical Methods</td>
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<td>Life Cycle Development/Human Growth and Development</td>
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<td>Psychology Elective</td>
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<td><strong>Liberal Arts</strong></td>
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<tr>
<td>English 1311</td>
<td>Expository English Composition</td>
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<td>English 1312</td>
<td>Research and Critical Writing</td>
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<tr>
<td>Communication 3101</td>
<td>Business and Professional Communication</td>
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<tr>
<td>History 1301</td>
<td>History of the United States to 1865</td>
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<td>History 1302</td>
<td>History of the United States since 1865</td>
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<tr>
<td>Political Science 2310</td>
<td>Introduction to Politics</td>
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<tr>
<td>Political Science 2311</td>
<td>American Government and Politics</td>
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<tr>
<td>Math 1320</td>
<td>Math for the Social Sciences</td>
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<tr>
<th><strong>Humanities</strong></th>
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<tbody>
<tr>
<td>Visual Arts</td>
<td>CORE menu (three hours)</td>
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<tr>
<td>Performing Arts</td>
<td>CORE menu (three hours)</td>
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<tr>
<td>University Option</td>
<td>CORE menu (three hours)</td>
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Upper Division Occupational Therapy Courses:

<table>
<thead>
<tr>
<th><strong>Year One- Fall</strong></th>
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<tbody>
<tr>
<td>OT 3410</td>
<td>Functional and Applied Anatomy and Physiology</td>
</tr>
<tr>
<td>OT 3311</td>
<td>Human Adaptation to Pathophysiology</td>
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<tr>
<td>OT 3313</td>
<td>Basic Concepts in Occupational Therapy</td>
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<tr>
<td>OT 3301</td>
<td>Therapeutic Media I</td>
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<tr>
<td>OT 3103</td>
<td>Occupational Therapy Practice Skills</td>
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<tr>
<td>OT 3114</td>
<td>Medical Terminology</td>
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<tr>
<td>OT 3103</td>
<td>Practice Skills</td>
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<th><strong>Year One- Spring</strong></th>
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<tbody>
<tr>
<td>OT 3313</td>
<td>Studies in Human Neuroscience</td>
</tr>
<tr>
<td>OT 3202</td>
<td>Therapeutic Media II</td>
</tr>
<tr>
<td>OT 3223</td>
<td>Evaluations in Occupational Therapy - Theory</td>
</tr>
<tr>
<td>OT 3123</td>
<td>Evaluations in Occupational Therapy – Practice</td>
</tr>
<tr>
<td>OT 3222</td>
<td>Biomechanics- Lecture</td>
</tr>
<tr>
<td>OT 3122</td>
<td>Biomechanics- Lab</td>
</tr>
<tr>
<td>OT 3312</td>
<td>Clinical Psychology</td>
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<tr>
<td>OT 1335</td>
<td>Preceptorship A- Community Practicum</td>
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<th><strong>Year One- Summer</strong></th>
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<tbody>
<tr>
<td>OT 4315</td>
<td>Legal/Ethical Issues in Health Care</td>
</tr>
<tr>
<td>OT 4205</td>
<td>Therapeutic Media III</td>
</tr>
<tr>
<td>OT 4136</td>
<td>Preceptorship B- Occupational therapy theory and practice</td>
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Elective (3 hours) Variety of topics have been offered such as Evaluation and Intervention of Visual/Perceptual/Cognitive Dysfunction; Family-Centered Practice; Disabilities within Literature, etc.
<table>
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<tr>
<th>Year Two- Fall</th>
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<tbody>
<tr>
<td>OT 4227 Work and Human Occupation- Lecture</td>
<td>OT 4127 Work and Human Occupation- Lab</td>
</tr>
<tr>
<td>OT 4228 Rehabilitative Approaches in Occupational Therapy</td>
<td>OT 4225 Developmental Approaches in occupational Therapy- Lecture</td>
</tr>
<tr>
<td>OT 4125 Developmental Approaches in occupational Therapy- Lab</td>
<td>OT 4316 Management in Occupational Therapy</td>
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<tr>
<td>HSCI 3315 Research for Health Professions</td>
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<tr>
<td>Year Two- Spring</td>
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<tr>
<td>OT 4224 Psychosocial Approaches in Occupational Therapy- Lecture</td>
<td>OT 4124 Psychosocial Approaches in Occupational Therapy- Lab</td>
</tr>
<tr>
<td>OT 4229 Neurodevelopmental Approaches in OT- Lecture</td>
<td>OT 4129 Neurodevelopmental Approaches in OT- Lab</td>
</tr>
<tr>
<td>OT 4205 Upper extremity orthotics and prosthetics</td>
<td>OT 4137 Preceptorship C- Senior Seminars</td>
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<tr>
<td>OT 4326 Advanced Concepts in Occupational Therapy</td>
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<tr>
<td>Year Three</td>
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<td>Level II Fieldwork 12 hours</td>
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<td>Level II Fieldwork 12 hours</td>
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Standards for an Accredited Educational Program for the Occupational Therapist

Adopted December 1998 by the Accreditation Council for Occupational Therapy Education of The American Occupational Therapy Association, Inc.

The Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA) accredits educational programs for the occupational therapist. The Standards comply with the United States Department of Education (USDE) criteria for recognition of accrediting agencies.

These Standards are the requirements used in accrediting educational programs that prepare individuals to enter the occupational therapy profession. The extent to which a program complies with these Standards determines its accreditation status.

Sections A and C contain general standards, while Section B delineates standards specific to curriculum. The specific standards in Section B are stated as outcome-based criteria.

Preamble

The rapidly changing and dynamic nature of contemporary health and human service delivery systems requires the entry-level occupational therapist to possess basic skills as a direct care provider, consultant, educator, manager of personnel and resources, researcher, and advocate for the profession and the consumer.

A contemporary entry-level occupational therapist must:

- have acquired, as a foundation for professional study, a breadth and depth of knowledge in the liberal arts and sciences and an understanding of issues related to globalism and diversity;
- be educated as a generalist, with a broad exposure to the delivery models and systems utilized in settings where occupational therapy is currently practiced and where it is emerging as a service;
- have achieved entry-level competence through a combination of academic and fieldwork education;
• be prepared to articulate and apply professional principles, intervention approaches and rationales, and expected outcomes as related to occupation;
• be prepared to supervise and work in cooperation with the occupational therapy assistant;
• be prepared to be a lifelong learner and keep current with best professional practice;
• uphold the ethical standards, values, and attitudes of the occupational therapy profession;
• be prepared to be an effective consumer of the latest research and knowledge bases that undergird practice and contribute to the growth and dissemination of research and knowledge.

Section A:
General Requirements for Accreditation

1.0 Sponsorship

1.1 The sponsoring institution(s) and affiliates, if any, must be accredited by recognized national, regional, or state agencies with accrediting authority. For programs in countries other than the United States, ACOTE will determine an alternative and equivalent external review process.

1.2 Sponsoring institutions must be authorized under applicable law or other acceptable authority to provide a program of postsecondary education and must have degree granting authority.

1.3 For programs in which the academic and fieldwork components of the curriculum are provided by two or more institutions, responsibilities of each sponsoring institution and fieldwork site must be clearly documented in a memorandum of understanding.

1.4 Documentation must be provided that each memorandum of understanding between institutions and fieldwork sites is reviewed at least every five years by both parties.

1.5 Accredited occupational therapy educational programs may only be established in senior colleges, universities, or medical schools.

1.6 The sponsoring institution shall assume primary responsibility for appointment of faculty, admission of students, curriculum planning, including selection of course content, and granting the certificate or degree documenting satisfactory completion of the educational program. The sponsoring institution shall also be responsible for the coordination of classroom teaching and supervised fieldwork practice and for providing assurance that the practice activities assigned to students in a fieldwork setting are appropriate to the program.
2.0 Academic Resources

2.1 The program must have a director who is assigned to the occupational therapy program on a full-time basis.

2.2 The program director shall be an occupational therapist, initially certified nationally, and credentialed according to state requirements. The director shall have a minimum of five years of professional experience in areas related to clinical practice, administration, and teaching. At least two of these years must be a full-time academic appointment with teaching responsibilities.

2.3 The program director shall have academic qualifications comparable to other administrators who manage similar programs within the institution; senior faculty status; and relevant experience in higher education requisite for providing effective leadership for the program, its faculty, and its students.

2.4 The program director shall be responsible for the management and administration of the program, including planning, evaluation, budgeting, selection of faculty and staff, maintenance of accreditation, and commitment to strategies for professional development.

2.5 The program director and faculty must possess the necessary academic and experiential qualifications and backgrounds, identified in documented descriptions of roles and responsibilities, appropriate to meet program objectives.

2.6 The occupational therapy faculty will assume responsibility for development, implementation, and evaluation of fieldwork education. There will be an individual specifically identified with fieldwork coordination responsibilities.

2.7 The faculty shall include occupational therapy practitioners who have been initially certified nationally and who have documented expertise in their area(s) of teaching responsibility.

2.8 The occupational therapy faculty must be sufficient in number and must possess the expertise necessary to ensure appropriate curriculum design, content delivery, and program evaluation.

2.9 Faculty responsibilities shall be consistent with the mission of the institution.

2.10 Each full-time faculty member shall have a written continuing professional growth and development plan to ensure effectiveness and currency as an academic educator consistent with the structure of the program's strategic plan.


the institution for similar programs, promote quality education in laboratory and fieldwork experiences, and ensure student and/or consumer safety.

2.13 Clerical and support staff shall be provided to the program, consistent with institutional practice, to meet programmatic and administrative requirements.
3.2 Policies pertaining to standards for admission, advanced placement, transfer of credit, credit for experiential learning (if applicable), and prerequisite educational or work experience requirements shall be readily accessible to prospective students and the public.

3.3 Criteria for successful completion of each segment of the educational program...
4.6 Policies and processes for student withdrawal and for refunds of tuition and fees shall be published and made known to all applicants.

4.7 Policies and procedures for student probation, suspension, and dismissal shall be published and made known.

4.8 Policies and procedures shall be published and made known for human subject research protocol; appropriate use of equipment and supplies; and for all other relevant rules and regulations.
required for graduation; the plan shall also delineate the instructional methods (e.g., presentations, demonstrations, discussions) and materials that shall be used to develop these competencies.

5.5 Instruction must follow a plan that documents clearly written course syllabi that are consistent with the curriculum design and describe learning objectives and competencies to be achieved for both didactic and fieldwork education components.
Section B: Specific Requirements for Accreditation

1.0 Foundational Content Requirements

Program content shall be based on a broad foundation in the liberal arts and sciences. A strong foundation in the biological, physical, social and behavioral sciences is required.
2.4 Be able to articulate to the consumer, potential employers, and the general public both the unique nature of occupation as viewed by the profession of occupational therapy and the value of occupation for the client.

2.5 Acknowledge and understand the importance of the balance of performance areas to the achievement of health and wellness.

2.6 Understand and appreciate the role of occupation in the promotion of health and the prevention of disease and disability for the individual, family, and society.
4.0 Screening and Evaluation

The process of screening and evaluation shall be based on theoretical perspectives, models of practice, and frames of reference that facilitate development of the performance criteria listed below. The student will:

4.1 Use standardized and non-standardized screening tools to determine the need for occupational therapy intervention. These include, but are not limited to, specified screening assessments, skilled observation, checklists, histories, interviews with the client/family/significant others, and consultations with other professionals.
5.1 Interpret evaluation findings based on appropriate theoretical approaches, models of practice, and frames of reference.

5.2 Develop occupationally based intervention plans and strategies, including goals and methods to achieve them, based on the stated needs of the client as well as data gathered during the evaluation process.

5.3 Provide evidence-based effective therapeutic intervention related to performance areas, performance components, and performance contexts directly and in collaboration with the client and others.

5.4 Employ relevant occupations and purposeful activities that support the intervention goals and are meaningful to the client.

5.5 Use individual and group interaction and therapeutic use of self as a means of...
5.15 Demonstrate the ability to refer to specialists both internal and external to
the profession for consultation and intervention.

5.16 Monitor and reassess, in collaboration with the client, the effect of occupa-
tional therapy intervention and the need for continued and/or modified inter-
vention.

5.17 Plan for discharge, in collaboration with the client, by reviewing the needs of
client/family/significant others, resources, and discharge environment. This
includes, but is not limited to, the identification of community, human, and fis-
cal resources, recommendations for environmental adaptations, and home
programming.
7.0 Management of Occupational Therapy Services

Application of principles of management and systems in the provision of occupational therapy services to individuals and organizations shall facilitate development of the performance criteria listed below. The student will:

7.1 Understand a variety of systems and service models, including, but not limited to, health care, education, community, and social models, and how these models may effect service provision.

7.2 Demonstrate knowledge of the social, economic, political, and demographic factors that influence the delivery of health care in the United States.

7.3 Understand the implications and effects of federal and state regulatory and legislative policies and their impact on the delivery of occupational therapy services.
7.14 Understand the supervisory process of occupational therapy and non-occupational therapy personnel.

7.15 Develop strategies for effective use of professional and non-professional staff.

7.16 Understand the ongoing professional responsibility for providing fieldwork education and supervision.

7.17 Develop skills to formulate and manage teams for effective service provision.

7.18 Understand the use of outcome studies analysis to direct administrative changes.

7.19 Develop fundamental marketing skills to advance the profession.
9.0 Professional Ethics, Values, and Responsibilities

An understanding and appreciation of ethics and values of the profession of occupational therapy shall facilitate development of the performance criteria listed below. The student will:

9.1 Demonstrate a knowledge and understanding of the AOTA Code of Ethics, Core Values and Attitudes of Occupational Therapy, and AOTA Standards of Practice as a guide for professional interactions and in client treatment and employment settings.

9.2 Understand the functions and influence of national, state, and local occupational therapy associations and other related professional associations.

9.3 Promote occupational therapy by educating other professionals, consumers, third-party payers, and the public.
10.0 Fieldwork Education

Fieldwork education is a crucial part of professional preparation and is best integrated as a component of the curriculum design. Fieldwork experiences should be implemented and evaluated for their effectiveness by the educational institution. The experience should provide the student with the opportunity to carry out professional responsibilities under supervision and for professional role modeling. The program will:

10.1 Document a plan to assure collaboration between academic and fieldwork representatives. The plan shall include agreed upon fieldwork objectives that are documented and made known to the student.

10.2 Ensure that the ratio of fieldwork educators to student(s) enables proper supervision and frequent assessment of the progress in achieving stated fieldwork objectives.

10.3 Ensure that fieldwork agreements shall be sufficient in scope and number to allow completion of graduation requirements in a timely manner in accord-
and meaningful occupation and/or research, administration and management of occupational therapy services. It is recommended that the student be exposed to a variety of clients across the life span and to a variety of settings. The fieldwork experience shall be designed to promote clinical reasoning and reflective practice; to transmit the values and beliefs that enable ethical practice; and to develop professionalism and competence as career responsibilities. The program will:

10.9 Recognize that Level II fieldwork can take place in a variety of traditional settings and emerging areas of practice. The student can complete Level II fieldwork in a minimum of one setting and maximum of four different settings.

10.10 Require a minimum of the equivalent of 24 weeks full-time Level II fieldwork. This may be completed on a full-time or part-time basis, but may not be less than half-time as defined by the fieldwork site.

10.11 Ensure that the student shall be supervised by an occupational therapist who meets state regulations and has a minimum of one year of practice experience, subsequent to the requisite initial certification. The supervising therapist may be engaged by the fieldwork site or by the educational program.

10.12 Ensure that supervision provides protection of consumers and opportunities
representative of the sponsoring institution and the occupational therapy program director or dean overseeing the proposed program.

1.2 This process is initiated by submitting a letter of intent to seek accreditation to the:

   Accreditation Department  
   American Occupational Therapy Association, Inc.  
   4720 Montgomery Lane  
   P.O. Box 31220  
   Bethesda, MD 20824-1220

1.3 At any time before the final accreditation action is made by ACOTE, a program or sponsoring institution may withdraw its request for initial or continuing accreditation.

1.4 To maintain accreditation, the following actions are required: The program must submit a Report of Self-Study and other required reports within a period of time determined by ACOTE. The program must agree to a site visit date before the end of the period for which accreditation was previously awarded. In accordance with stated policy, the program must inform ACOTE within 90 days of a change in program director. The sponsoring institution must
Core Values and Attitudes of Occupational Therapy Practice

Introduction

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

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

The development of this document is predicated on the assumption that the values of occupational therapy are evident in the official documents of the American Occupational Therapy Association. The official documents that were examined are: (a) Dictionary Definition of Occupational Therapy (AOTA, 1986), (b) The Philosophical Base of Occupational Therapy (AOTA, 1979), (c) Essentials and Guidelines for an Accredited Educational Program for the Occupational Therapist (AOTA, 1991a), (d) Essentials and Guidelines for an Accredited Educational Program for the Occupational Therapy Assistant (AOTA, 1991b), and (e) Occupational Therapy Code of Ethics (AOTA, 1988). It is further assumed that these documents are representative of the values and beliefs reflected in other occupational therapy literature.

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

Actions and attitudes reflect the values of the individual. An attitude is the dispositions...
we emphasize the importance of dignity by helping the individual build on his or her unique attributes and resources.

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

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

**Summary**

Beliefs and values are those intrinsic concepts that underlie the core of the profession and the professional interactions of each practitioner. These values describe the profession’s philosophy and provide the basis for defining purpose. The emphasis or priority that is given to each value may change as one’s professional career evolves and as the unique characteristics of a situation unfold. This evolution of values is developmental in nature. Although we have basic values that cannot be violated, the degree to which certain values will take priority at a given time is influenced by the specifics of a situation and the environment in which it occurs. In one instance dignity may be a higher priority than truth; in another prudence may be chosen over freedom. As we process information and make decisions, the weight of the values that we hold may change. The practitioner faces dilemmas because of conflicting values and is required to engage in thoughtful deliberation to determine where the priority lies in a given situation.

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


American Occupational Therapy Association. (1986, April). Dictionary definition of occupational therapy. Adopted and approved by the Representative Assembly to fulfill Resolution #596-83. (Available from AOTA, 4720 Montgomery Lane, PO Box 31220, Bethesda MD 20824.)


Prepared by

Elizabeth Kanny, MA, OTR

for

Standards and Ethics Commission
Ruth A. Hansen, PhD, OTR, FAOTA, Chairperson

Approved by the Representative Assembly June 1993

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Occupational Therapy

Preamble

The American Occupational Therapy Association's Code of Ethics is a public statement of the common set of values and principles used to promote and maintain high standards of behavior in occupational therapy. The American Occupational Therapy Association and its members are committed to furthering the ability of individuals, groups, and systems to function within their total environment. To this end, occupational therapy personnel (including all staff and personnel who work and assist in providing occupational therapy services, e.g., aides, orderlies, secretaries, technicians) have a responsibility to provide services to recipients in any stage of health and illness who are individuals, research participants, institutions and businesses, other professionals and colleagues, students, and to the general public.

The Occupational Therapy Code of Ethics is a set of principles that applies to occupational therapy personnel at all levels. These principles to which occupational therapists and occupational therapy assistants aspire are part of a lifelong effort to act in an ethical manner. The various roles of practitioner (occupational therapist and occupational therapy assistant), educator, fieldwork educator, clinical supervisor, manager, administrator, consultant, fieldwork coordinator, faculty program director, researcher/scholar, private practice owner, entrepreneur, and student are assumed.

Any action in violation of the spirit and purpose of this Code shall be considered unethical. To ensure compliance with the Code, the Commission on Standards and Ethics (SEC) establishes and maintains the enforcement procedures. Acceptance of membership in the American Occupational Therapy Association commits members to adherence to the Code of Ethics and its enforcement procedures. The Code of Ethics, Core Values and Attitudes of Occupational Therapy Practice (AOTA, 1993), and the Guidelines to the Occupational Therapy Code of Ethics (AOTA, 1998) are aspirational documents designed to be used together to guide occupational therapy personnel.

Principle 1. Occupational therapy personnel shall demonstrate a concern for the well-being of the recipients of their services. (beneficence)

A. Occupational therapy personnel shall provide services in a fair and equitable manner. They shall recognize and appreciate the cultural components of eco-
nomics, geography, race, ethnicity, religious and political factors, marital status, sexual orientation, and disability of all recipients of their services.

B. Occupational therapy practitioners shall strive to ensure that fees are fair and reasonable and commensurate with services performed. When occupational therapy practitioners set fees, they shall set fees considering institutional, local, state, and federal requirements, and with due regard for the service recipient’s ability to pay.

C. Occupational therapy personnel shall make every effort to advocate for recipients to obtain needed services through available means.

Principle 2. Occupational therapy personnel shall take reasonable precautions to avoid imposing or inflicting harm upon the recipient of services or to his or her property. (nonmaleficence)

A. Occupational therapy personnel shall maintain relationships that do not exploit the recipient of services sexually, physically, emotionally, financially, socially, or in any other manner.

B. Occupational therapy practitioners shall avoid relationships or activities that interfere with professional judgment and objectivity.

Principle 3. Occupational therapy personnel shall respect the recipient and/or their surrogate(s) as well as the recipient’s rights. (autonomy, privacy, confidentiality)

A. Occupational therapy practitioners shall collaborate with service recipients or their surrogate(s) in setting goals and priorities throughout the intervention process.

B. Occupational therapy practitioners shall fully inform the service recipients of the nature, risks, and potential outcomes of any interventions.

C. Occupational therapy practitioners shall obtain informed consent from participants involved in research activities and indicate that they have fully informed and advised the participants of potential risks and outcomes. Occupational therapy practitioners shall endeavor to ensure that the participant(s) comprehend

V. Ethics

Principle 4. Occupational therapy personnel shall achieve and maintain all required levels of competence.
D. Occupational therapy practitioners shall take reasonable steps to ensure employers are aware of occupational therapy's ethical obligations, as set forth in this Code of Ethics, and of the implications of those obligations for occupational therapy practice, education, and research.

E. Occupational therapy practitioners shall record and report in an accurate and objective manner all information that they gather, observe, or assess in connection with the occupational therapy practice.
ing familiarity with national, state, local, district, and territorial procedures for handling ethics complaints. These include policies and procedures created by the American Occupational Therapy Association, licensing and regulatory bodies, employers, agencies, certification boards, and other organizations who have jurisdiction over occupational therapy practice.
The University of Texas at El Paso
College of Health Sciences
Occupational Therapy Program

The Americans with Disability Act (ADA) of 1990
Public Law 101-336

This memorandum outlines the Occupational Therapy Program's position related to implementing the opportunity afforded to students with disabilities by The Americans with Disabilities Act of 1990. Further, it serves both potential students and enrolled students as a guideline for action that may facilitate successful achievement in the occupational therapy program. The Occupational Therapy Program actively supports the opportunities derived from the ADA legislation and encourages potential students to explore their interests and the match between their abilities and the job requirements for a career in occupational therapy.

After acceptance into the program, students with disabilities requiring accommodations for successful achievement in the program are encouraged to identify their needs as soon as possible to enable the department and course instructors to provide reasonable accommodations. The student should first contact Susan J. Lopez, Director of Disabled Student Services, Rm. 106 East Union Bldg., 747-5148, to establish that she/he has a disability that requires accommodation under the ADA. Supporting documentation, such as a letter from a physician indicating functional limitations that affect mobility and/or academic performance, must be supplied. The Director of Disabled Student Services will assist the student in identifying modifications that will be required. This process may take several weeks, so students are encouraged to begin well before the first day of class. To arrange for modifications specific to a particular course, the student should then contact the primary instructor. Students are encouraged to meet also with the Fieldwork instructor prior to the first semester of enrollment to identify needs for the clinical segment of the program. Planning in this manner enables timely and appropriate clinical placements.

An individual is not obligated to disclose a disability unless he or she desires accommodation. If a student chooses not to disclose this information, neither the academic nor fieldwork sites is obligated to make accommodations. If a student chooses to delay disclosure, the accommodations cannot be made retroactively, i.e. grades received before that time will not be changed.

Acceptance into the program and successful completion of the program do not guarantee any student employment following graduation. The same reality is true for an individual with a disability. The job search for any student involves seeking a position wherein there is a good match between the individual's interest, expertise, and ability and the requirements of the position.
Each student is assigned to an advisor from the occupational therapy faculty upon entering the program. The faculty advisor continues to advise the student throughout his or her academic work.

The objectives of the faculty advisor are as follows:

- Provide consistent, readily available faculty contact with whom the student can communicate,
- Provide an opportunity for immediate OT faculty contact upon the student’s arrival on campus,
- Provide reinforcement to student on continuity of curriculum,
- Serve as a resource person and answer questions about the program regarding: academic work, learning experiences, professional concerns,
- Facilitate the student’s individual development in academic course work and fieldwork,
- Facilitate the student’s understanding of his/her assets and limitations, and assist in putting these into perspective relative to the profession,
- Serve as a resource person for obtaining assistance in dealing with problems unrelated to school, but which may be affecting school performance,
- Facilitate preliminary planning for electives and fieldwork based on understanding of the individual student,
- Provide information about academic reinforcement programs and make referral when appropriate,
• Provide information on available counseling services when necessary.
Faculty will counsel students who, based upon faculty evaluations (for example, examinations, quizzes, oral presentations, papers, reports, professional development evaluations, and the like), do not meet the program graduation requirements (UTEP Undergraduate Catalogue 2002 - 2004) or engage in acts that obstruct or disrupt any teaching or other authorized Occupational Therapy Program activity (UTEP Undergraduate Catalogue 2002- 2004, page 64).

Student Academic Counseling Procedures:

1. Any student who receives a grade of less than 72% on any major assignment or exam (with a weight of more than 10% of the total grade for the course) is expected to meet with his or her faculty advisor within one week of being informed of the grade.

2. Instructors will inform the student’s faculty advisor in a written note of the grade, the course in which the grade was received, and other any relevant data such as current course standing within one working day after completing the grading of the assignment/exam.

3. The program coordinator will also be informed in writing whenever any student has a course average of less than 72% after 40-50% of the course grade is completed.

4. The student, upon being informed of an assignment/exam grade of D or less (<72%), will meet with the faculty advisor during the advisor’s office hours, or by special appointment if necessary. The purpose of academic counseling is to assist the student in identifying specific study patterns, test-taking skills, content areas or other problems, which contribute to the student’s poor performance on the assignment, and to implement steps to improve the performance. Any course in which a student makes less than a C must be repeated; therefore, timely intervention is necessary to improve low grades.
5. The faculty advisor will document the counseling meetings on a student academic counseling log kept in the advisor’s student files and signed by both student and advisor (Instructor/Advisor Meeting Log).

6. The advisor may recommend that the student also meet with the instructor in whose course the low grade was received, in order to review the work and identify methods for improvement. Students who receive poor grades on an exam should promptly review the exam with the course instructor. Program faculty members communicate closely with each other regarding the progress of students at risk.

7. Faculty advisors may also recommend additional steps to the student, such as reviewing study skills tapes available at the Tutoring and Learning Center, more frequent meetings with the advisor, or personal counseling at the University Counseling Center, if an interpersonal or intrapersonal problem is interfering with academic performance.

Student Behavior Counseling Procedures:

8. Behaviors, which generally interfere with class process, or which in the faculty’s opinion may put the student at risk for interpersonal difficulties or impaired performance in fieldwork or clinical practice are addressed through the Professional Development Evaluation process. All faculty members document professional behavior and deficits using the PDE Form, which is a counseling tool.

9. More serious behaviors, which obstruct or disrupt any teaching, fieldwork, or other authorized Occupational Therapy Program activity, or infringe on other’s rights, are addressed through immediate intervention and counseling. Faculty, upon observing a student engaging in such acts, may deny the student access to participate in class activity for up to two individual classes (or course related activity periods).

10. In addition, faculty will refer the student to his or her faculty advisor for counseling to assist the student in identifying the problems, which contribute to the student’s obstructive or disruptive behavior, and to implement steps to improve the behavior. (UTEP Undergraduate Catalogue 2002 - 2004).

When Grades Are Not Improving:

11. If after two class sessions, the student’s obstructive or disruptive behavior are not improving, the Program Director will refer student to the Office of the Dean of Students for additional disciplinary intervention including withdrawal from the course or courses.

12. If, after the following examination or assignment, grades are not improving, the student and advisor will document the problem, discussion during meetings, and specific remedial steps the student will be expected to take on the Student Consultation Form, which will be signed by both the advisor and student and
placed in the student's permanent record in the Program Office. The student may request and receive a copy of this form. All completed student consultations forms will be filed promptly in the office and will remain a part of the student's permanent record. Advisors will also document and file in the permanent record any failure on the student's part to follow up on the remediation plan.

13. If a student fails to pass any major course with a C or better, the program coordinator will write a letter detailing the student's requirements to continue with the program on a modified schedule in order to repeat the required course(s), along with any additional requirements the student is expected to take. Such requirements may include, but are not limited to, meeting weekly or after each exam taken with the faculty advisor and/or course instructors, meeting after receiving any grade below a 75%, and mandatory attendance in all classes. This letter is mailed to the student immediately after final semester grades are recorded. Faculty and pre-registration advisors receive a copy of the letter in order to assist the student in planning the modified curriculum schedule as well as addressing the academic performance problem.

14. Students failing to maintain a GPA of 2.0 in the major curriculum are placed on academic probation in accordance with the policy in the UTEP Undergraduate Catalogue 2002 - 2004. If a student earns less than a “C” in any occupational therapy course, the next higher course may not be taken until the prerequisite course is repeated and passed with a “C” or better. An occupational therapy course may be repeated only once. A student who receives a total of 3 course grades of less than a “C” while enrolled in the major is no longer able to continue in the Occupational Therapy Program (See 2002 – 2004 Catalog).
# FACULTY ADVISORS - Fall 2004

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Karen Funk</td>
<td>James Scherer</td>
<td>Hector Carrillo, Jr.</td>
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<tr>
<td>Room #511</td>
<td>Frank Montelongo</td>
<td>San Del Val</td>
</tr>
<tr>
<td>747-8226</td>
<td>Heather Bruns</td>
<td>Amy Lee</td>
</tr>
<tr>
<td><a href="mailto:kfunk@utep.edu">kfunk@utep.edu</a></td>
<td>Paul Rodriguez</td>
<td>Yolanda Ramirez</td>
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<tr>
<td></td>
<td>Connie Cook</td>
<td>Corey Starks</td>
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<td></td>
<td>Juan Lecea</td>
<td>Maria Vasquez</td>
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<td>Mark Barraza</td>
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<tr>
<td>Emily Haltiwanger</td>
<td>Stephanie Jackson</td>
<td>Sarah Aguilar</td>
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<tr>
<td>Room #508</td>
<td>Chantelle Larson</td>
<td>Antonio Barrozo</td>
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<tr>
<td>747-7271</td>
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<td>Claudia Chacon</td>
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<td><a href="mailto:emilyh@utep.edu">emilyh@utep.edu</a></td>
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<td>Valerie Garcia</td>
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<td></td>
<td>Georgina Cervantes</td>
<td>Rey Mendez</td>
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<td>Thelma Rangel</td>
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<td>Stephanie Capshaw</td>
<td>Rebecca Chavez</td>
<td>Shanae Bauerkemper</td>
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<tr>
<td>Room #404</td>
<td>Matthew Dowding</td>
<td>Grisel Contreras</td>
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<tr>
<td>747-7269</td>
<td>Victor Gaytan</td>
<td>Tony Hall</td>
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<tr>
<td><a href="mailto:scapshaw@utep.edu">scapshaw@utep.edu</a></td>
<td>Rose Norero</td>
<td>Estee Montoya</td>
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<td></td>
<td>Rogelio Saenz</td>
<td>Crystal Ruiz</td>
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<td>Annette Nevarez</td>
<td>Rocio Alarcon</td>
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<td>Susan Leech</td>
<td>Nora Cantu</td>
<td>Ruben Carrillo</td>
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<td>Rm 507</td>
<td>Yvette Luevano</td>
<td>Elizabeth Daul</td>
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<tr>
<td>747-8218</td>
<td>Blanca Medrano</td>
<td>Jocelyn Kervitsky</td>
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<td><a href="mailto:sleech@utep.edu">sleech@utep.edu</a></td>
<td>Erika Padilla</td>
<td>Brian Portugal</td>
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<tr>
<td></td>
<td>Terry Pedroza</td>
<td>Erin Serna</td>
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<tr>
<td></td>
<td>Lisa Acosta</td>
<td>Jeremiah Tovar</td>
</tr>
<tr>
<td></td>
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<td>Estibaliz Alvarado</td>
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1. All occupational therapy students, without exception, are required to get a UTEP email account.
2. Students are responsible for checking their UTEP email account on a regular basis.
3. All email communication between faculty and students will be through UTEP email accounts regardless of any personal email accounts that might exist.

Procedure for getting an email account:
1. The University provides all currently registered students at the University of Texas at El Paso a free email account.
2. You may access a networked computer from the ILC on the first floor of the College of Health Sciences, in the UTEP library, in the Student Union building, and various other locations on the Main Campus.
3. You may access your UTEP email from home by going to the UTEP website (http://www.utep.edu) and clicking on the link to Miner WebMail.
4. To set up your free account, log on to http://getmail.utep.edu from any University computer.
5. Click on the link to set up a new account.
6. Provide the information requested and submit your request for an account to be established.
7. For assistance with your UTEP email account or the Miner Pipeline, contact the UTEP Help Desk at 4357 from any University phone or 747-5257 from off campus.
1. A petition for readmission to the program will not be considered until a six-month waiting period has been completed. The waiting period starts at the completion of the semester in which the student was given notification of his or her inability to continue in the program.
2. A student may petition for readmission to the program only once, and all decisions regarding readmission are final.
3. Any petition received prior to the end of the six-month waiting period will not be accepted and will be returned to the student.
4. A student's petition for readmission will be evaluated against the same standards as other student applications to the program.
5. In addition to the following, a student’s petition for readmission will be evaluated against the same standards as other applicants:
   a. The student must explain, in writing, the conditions, reasons, or situations that accounted for dismissal from the program. The student must not only address the conditions, reasons, or situations outside of his or her control, but also his or her personal reasons or situations for failing.
   b. The student must explain, in writing, how these conditions, reasons, or situations have changed in a way that will allow the student to successfully complete the program.
   c. dismissed from the program to maximize his or her successful completion of the program.
6. A petition for readmission to the program does not assure the student will receive an invitation to interview or be admitted to the program.
7. In the event a student is readmitted to the program, the student must receive a grade of “C” or better in all upper division courses.
8. The student who receives a grade less than a “C” in any upper division course will be dropped from the program.
9. The student who is dropped from the program cannot petition for readmission to the program.
10. The decision of the faculty is final.

Examples of the timing for considering re-application to the program:
<table>
<thead>
<tr>
<th>Dismissed</th>
<th>When considered</th>
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<tbody>
<tr>
<td>Fall (December)</td>
<td>No earlier than the first of July possibly for the fall semester</td>
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<tr>
<td>Dismissed</td>
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<td>Spring (May)</td>
<td>No earlier than the first of December possibly for the spring semester</td>
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<tr>
<td>Summer (August)</td>
<td>No earlier than the first of March possibly for the summer semester</td>
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GENERAL CURRICULUM OBJECTIVES

Upon completion of the curriculum in Occupational Therapy, the student will be able to:

1. Understand those aspects of the basic biological and behavioral sciences that are relevant to occupational therapy practice.

2. Understand normal human development processes and tasks throughout the life span.

3. Understand the impact of environmental, cultural, and socioeconomic influences on human development throughout the life span.

4. Understand states of health and pathology and their impact on human development, including occupational performance.

5. Understand the role of occupation in the individual’s life experience and the rationale for its use in occupational therapy practice.

6. Understand the historical, philosophical and theoretical principles basic to occupational therapy and their application to consumer needs.

7. Integrate knowledge of the basic biological and behavioral sciences, human development, health status, and occupational therapy theory and practice to define consumer problems and develop and implement management plans.

8. Appreciate how the therapeutic use of self influences human relationships and the environment.

9. Demonstrate skill in occupational therapy techniques required for entry-level practice.

10. Assume the responsibilities inherent in ethical and legal practice as a health professional.

11. Understand the influence of healthy delivery policies and systems on the delivery of care.

12. Appreciate the role of research in the enhancement of the profession.
SCHOLASTIC INTEGRITY

As stated in the UTEP Undergraduate Catalogue 2002 - 2004, it is expected of all students that they uphold the highest standards of academic integrity not only in the classroom but in all other academic activities. Students who engage in scholastic dishonesty are subject to disciplinary penalties, including probation, the possibility of failure in the course and suspension or dismissal from the university, among others. “Scholastic dishonesty includes, but is not limited to cheating, plagiarism, collusion, the submission for credit of any work or materials that are attributable in whole or in part to another person, taking an examination for another person, any act designed to give unfair advantage to a student or the attempt to commit such acts.” Since scholastic dishonesty harms the individual, all students and the integrity of the university, these standards are strictly adhered to.

THE FOLLOWING GRADING SCALE IS USED IN THE OCCUPATIONAL THERAPY PROGRAM:

Letter Grade Equivalents:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Equivalent</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>92-100</td>
</tr>
<tr>
<td>B</td>
<td>82-91</td>
</tr>
<tr>
<td>C</td>
<td>72-81</td>
</tr>
<tr>
<td>D</td>
<td>62-71</td>
</tr>
<tr>
<td>F</td>
<td>0-61</td>
</tr>
</tbody>
</table>
When exams are administered, students are to place bookbags, papers, purses, and other personal items at the front of the room. Students will spread out around the exam room when seating themselves. No hats, caps or bulky clothing may be worn. Students will turn exam papers in to the exam monitor before leaving the room for any reason; once a student has left the exam room, he/she may not continue with the examination.

Instructors will identify additional conditions in course syllabi to include specific restrictions about make-up exams, or other exam restrictions, i.e. if a student misses an exam, a make-up exam may be taken only if the student has informed the instructor of the absence prior to the beginning of the examination, and only if the absence is due to a significant emergency approved by the instructor, or make-up exams may be taken if a student is absent from the scheduled exam time, but an automatic deduction of 10 points will result.
**TITLE** Policy #

<table>
<thead>
<tr>
<th>Safe and Effective Practice Policy</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Approved: 4/15/1996</td>
<td>Effective:</td>
</tr>
<tr>
<td>Revised:</td>
<td>Reviewed:</td>
</tr>
</tbody>
</table>

This policy must be adhered to in order for a student to succeed in clinical health care courses.

This policy identifies the essentials of health care practice, and is complementary and supplementary to the objectives of all clinical health care courses.

More specific criteria for performance may be required by individual programs within the department, and will be provided to those program’s students.

All overt and covert acts which comprise the health care process must be directed toward quality care and promotion of health for the patient/client/family.

The Student Demonstrates Safe and Effective Health Care Practice When He/She:

* Demonstrates knowledge about patient’s/client’s health status within the knowledge and practice base of the student’s discipline of study;

* accurately interprets, reports and records all patient information, changes in patient’s condition, and/or accurately performs, interprets, reports and records results of clinical laboratory tests and/or patient evaluations, within the parameters of the student’s discipline of study;

* demonstrates through overt and covert acts assurance of the delivery of quality health care;

* sets priorities and carries through with appropriate health care interventions related to the student’s discipline of study;

* demonstrates the ability to evaluate and make substantive judgments relative to the quality of health care specific to his/her discipline of study;

* plans and administers care procedures safely, and documents such procedures correctly;
* demonstrates knowledge of all Quality Control/Quality Assurance for Continuous Quality Improvement in the practice setting (hospital, clinic, laboratory, etc.);

* demonstrates responsibility for safeguarding the patient’s/client’s right to privacy by judiciously protecting information of a confidential nature.

As health care professionals with a commitment to the welfare of patients/clients, the faculty of the College of Health Sciences reserves the right to refuse the opportunity to a student to care for patients or perform evaluation/testing procedures if the student’s health interferes with performance or if the student gives evidence of unsafe and/or ineffective health care practice. A student may not render care, tests or evaluations when under the influence of prescribed or over-the-counter medication which may affect judgment or if the student imbibes and/or is under the influence of alcohol or illicit drugs. A student who is deemed to or demonstrates unsafe practice will fail the course and be dropped from all clinical courses in which she/he is enrolled at that time.

Since the faculty-student ratio in the clinical area varies, it is impossible for a faculty member to be present continually with each student to observe every situation. It is therefore imperative that each student assume personal responsibility to be prepared for each clinical practice experience. Each student is expected to check immediately with the instructor, clinical supervisor or other appropriate agency staff if in doubt about patient care or condition, and to report to the instructor and/or staff when leaving the clinical area, in order to assure continuity of care for patients.
The University of Texas at El Paso  
College of Health Sciences  
Occupational Therapy Program

PROFESSIONAL DEVELOPMENT EVALUATION FORM

STUDENT ___________________________ SEMESTER ______________________ DATE __________________

COURSE(S) ___________________________ INSTRUCTOR ___________________________

Directions: The purpose of this evaluation is to provide feedback to the student regarding his/her professional development towards becoming an occupational therapist. The following rating scale is to be used by the faculty. Ratings are based on observations of the student in classroom, laboratory, clinical and professional situations. Ratings of 1 or 2 require comments.

1. UNSATISFACTORY  
The student does not demonstrate the required level of professional skill.

2. NEED IMPROVEMENT  
The student, while beginning to demonstrate the required level of professional skill, needs improvement in either quality or quantity.

3. MEETS REQUIREMENTS  
The student demonstrates the required level of professional skill.

4. EXCEEDS REQUIREMENTS  
The student demonstrates refinement of additional qualities beyond that required by his/her progression through this curriculum.

<table>
<thead>
<tr>
<th>PROFESSIONAL DEVELOPMENT SKILL</th>
<th>RATING</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Demonstrates respect for others</td>
<td>1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>Arrives punctually, attends regularly</td>
<td></td>
<td></td>
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<tr>
<td>Tolerates individual differences</td>
<td></td>
<td></td>
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<tr>
<td>Tactfully expresses disagreement</td>
<td></td>
<td></td>
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<tr>
<td>Listens to the opinions of others</td>
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<td></td>
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<tr>
<td>Displays courteous behaviors</td>
<td></td>
<td></td>
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<tr>
<td>Is attentive in class and does not distract others</td>
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<td></td>
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<tr>
<td>Behaves in a nondisruptive manner</td>
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<td></td>
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<tr>
<td>Behavior &amp; speech are consistent with OT Code of Ethics</td>
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<tr>
<td>2. Assumes responsibility for own actions</td>
<td>1 2 3 4</td>
<td></td>
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<tr>
<td>Notifies faculty if circumstances prevent attendance</td>
<td></td>
<td></td>
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<tr>
<td>Makes up missed assignments</td>
<td></td>
<td></td>
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<tr>
<td>Acknowledges errors when they occur</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cleans up personal work area; shares in lab maintenance/cleanup</td>
<td></td>
<td></td>
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<tr>
<td>Makes and keeps necessary appointments</td>
<td></td>
<td></td>
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<tr>
<td>Takes initiative</td>
<td></td>
<td></td>
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<tr>
<td>Strives to increase personal competence</td>
<td></td>
<td></td>
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<tr>
<td>Meets deadlines</td>
<td></td>
<td></td>
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<tr>
<td>Seeks help as needed in a timely manner</td>
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<tr>
<td>3. Demonstrates the ability to problem-solve</td>
<td>1 2 3 4</td>
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<tr>
<td>Evaluates context of situations</td>
<td></td>
<td></td>
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<tr>
<td>Asks relevant questions</td>
<td></td>
<td></td>
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<tr>
<td>Examines cause-effect relationships</td>
<td></td>
<td></td>
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<tr>
<td>Formulates possible courses of action</td>
<td></td>
<td></td>
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<tr>
<td>Explains rationale for decisions</td>
<td></td>
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<tr>
<td>Exercises good judgement, i.e., in dress, behavior, proxemics, etc.</td>
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<tr>
<td>Demonstrates good time management skills in class, labs</td>
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<tr>
<td>4. Demonstrates the ability to be flexible</td>
<td>1 2 3 4</td>
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<tr>
<td>Recognizes when it is appropriate to negotiate/compromise</td>
<td></td>
<td></td>
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<tr>
<td>Modifies plan to accommodate change</td>
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<td></td>
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<tr>
<td>Handles changes without excessive stress or irritation</td>
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<td></td>
</tr>
<tr>
<td>5. Demonstrates functional level of confidence and</td>
<td>1 2 3 4</td>
<td></td>
</tr>
<tr>
<td><strong>assertiveness</strong></td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Expresses personal needs</td>
<td></td>
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<tr>
<td>Volunteers opinions or services</td>
<td></td>
<td></td>
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<tr>
<td>Works independently</td>
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<td></td>
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<tr>
<td>Assists others</td>
<td></td>
<td></td>
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<tr>
<td>Exhibits confident tone/body language</td>
<td></td>
<td></td>
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<tr>
<td>Willing to voice unpopular opinions</td>
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<td></td>
</tr>
<tr>
<td>Avoids excessive/unreasonable complaints</td>
<td></td>
<td></td>
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<tr>
<td>Pursues own needs without interfering w/ those of others</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>6. Demonstrates the ability to be a cooperative and contributing member of the class and profession</strong></th>
<th>1 2 3 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Voluntarily contributes to discussions</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Participates in experimental tasks</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Participates productively in group process</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Contributes to the success of others</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Assumes various group roles as needed</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Meets responsibilities as a group member</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Demonstrates leadership skills</td>
<td>1 2 3 4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>7. Recognizes and handles personal and professional frustrations in a nondisruptive and constructive manner</strong></th>
<th>1 2 3 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reports problems to suitable person as appropriate; follows &quot;chain of authority&quot;</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Gives others the benefit of the doubt</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Acts proactively</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Accepts appropriate limitations</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Sets reasonable priorities</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Accepts consequences of personal choices</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Does not allow personal responsibilities to interfere with professional/academic performance</td>
<td>1 2 3 4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>8. Demonstrates the ability to modify behavior in response to feedback</strong></th>
<th>1 2 3 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accepts feedback without defensiveness, arguing</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Makes and follows plans for change in a timely manner</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Seeks clarification/feedback as needed</td>
<td>1 2 3 4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>9. Demonstrates the ability to give feedback</strong></th>
<th>1 2 3 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uses tactful approach</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Makes helpful suggestions</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Targets changeable behaviors</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>Gives feedback when appropriate</td>
<td>1 2 3 4</td>
</tr>
</tbody>
</table>

Additional Comments:

Student Comments:

<table>
<thead>
<tr>
<th>Student Signature</th>
<th>Date</th>
<th>Course Instructor Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

Faculty Advisor Signature | Date
ACTION PLAN

Professional development behavior component(s) to improve:

Goals to work on:

Activities to improve performance including time line(s):

_______________________________________  ___________________________

Student Signature   Date

_________________________________________  ______________________________

Faculty Advisor   Date

Resolution Achieved:

___________________________________________ ______________________________

Student Signature   Date

___________________________________________ _______________________________

Faculty Advisor   Date
Notice regarding accessibility to labs

Please take notice that accessibility to labs is restricted to class times. When not in use, labs are locked for security purposes. This applies to all labs.

If students need to go into a lab at other than class times, the instructor of the specific class will be the only one who can authorize their access to the lab.

Students will remain in the lab only for the authorized time and date.
ATTENDANCE POLICY

Attendance at all class sessions is expected. Mastery of course content and professional competencies requires that students attend and actively participate in all class sessions. On rare occasions it may be necessary for a student to be absent from class. Each instructor has discretion to determine the maximum number of absences allowable before the students’ mastery of material is compromised. The maximum allowable number of absences will be stated in the syllabus for each course. This policy is in accordance with the UTEP 2002-2004 Undergraduate Catalog statement on Page 56: “When in the judgment of the instructor, a student has been absent to such a degree as to impair his or her status relative to credit for the course, the instructor may drop the student from the class with a grade of \textit{W} before the course drop deadline and with a grade of \textit{F} after the course drop deadline.”
Accumulated Knowledge Policy

Each course presented in the Occupational Therapy Program serves as the prerequisite for future OT courses in the program. Information presented in all occupational therapy courses is considered to be part of the student’s knowledge base. Students are responsible for retaining knowledge from previous OT courses and applying, reviewing, and synthesizing knowledge throughout the OT program. Students may be tested, on any exam, over material covered in previous related coursework.
Cell Phones and Pagers Policy:

1. All cell phones and pagers will be off during class except in certain situations pre-approved by the instructor.
2. The program secretary will take urgent messages and deliver them to you. You may give family or other appropriate people (schools or day care, etc) the department phone number: 747-7270 for this purpose. If the program secretary will not be in the office for a day or more, the secretary will give an alternate number on her voice mail.
3. If you are expecting an urgent message, either ask for pre-approval from your class instructors or alert the program secretary.
4. Cell phones and pagers are NOT to be on during exams.
LEVEL I
FIELDWORK OBJECTIVES

At the completion of the three Level I preceptorships, the student will have had the
opportunity to:

I. Demonstrate responsible professional behavior.
   A. Respect the rights and freedom of others (i.e. safety, reputation, property,
      privacy, confidentiality.)
   B. Accept responsibility for own actions.
   C. Seek supervision when needed.
   D. Modifies performance based on constructive criticism.
   E. Appreciate the contribution of occupational therapy and other professional
disciplines.
   F. Initiate efforts to upgrade own knowledge and skill through available
resources.

II. Demonstrate beginning skill in professional communication processes.
   A. Establish rapport with patients.
   B. Establish rapport with health professionals.
   C. Demonstrate satisfactory interviewing skills.
   D. Demonstrate satisfactory documentation skills.
   E. Communicate the purposes of occupational therapy to others.
   F. Use appropriate medical terminology.

III. Demonstrate basic knowledge of the focus and scope of occupational
     therapy.
    A. Appreciate the value of occupation as treatment and its relationship to
treatment goals.
    B. Describe a variety of evaluation and treatment procedures used in
occupational therapy.
    C. Describe occupational therapy treatment programs in a minimum of two
different areas.
    D. Identify functions and responsibilities of occupational therapy personnel.
    E. Describe the role of occupational therapy in a variety of health care settings.

IV. Demonstrate basic understanding of the occupational therapy process.
    A. Develop beginning data collection skills.
    B. Utilize existing documentation and other resources to obtain information
needed for evaluation and treatment planning.
    C. Develop basic documentation skills
    D. Utilize observation as an evaluation tool.
    E. Administer appropriate evaluations with supervision.
    F. Record evaluation results in appropriate format.

Level I FW Objectives
G. Interpret evaluation results with supervision.
H. Identify basic patient assets and liabilities which influence occupational therapy treatment planning.
I. Develop a minimum of one (1) treatment plan in the format utilized in the assigned setting.
J. Perform occupational therapy treatment procedures with supervision.

V. Develop an awareness of self and one's impact on others.
   A. Identify personal strengths and weaknesses.
   B. Identify one's personal attitude towards disability and illness.
   C. Appreciate the impact of cultural and socioeconomic differences on the treatment process.
GENERAL AND SPECIFIC
LEVEL II FIELDWORK OBJECTIVES

Level II fieldwork will give the student the opportunity to accomplish the following objectives:

I. **Apply skills in data collection.**
   A. Obtain adequate and appropriate historical information from the consumer.
   B. Consult other sources for information.
   C. Obtain information by means of appropriate and thorough evaluations.

II. **Demonstrate skill in recording, maintaining, and reporting data.**
    A. Record and maintain important and pertinent information.
    B. Record data accurately, completely, clearly, and promptly.
    C. Organize records so that data can be easily located.
    D. Present data for review by clinical supervisor.
    E. Recognize the value of record review to establish appropriateness of treatment.
    F. Protect the consumer’s right to privacy and confidentiality.

III. **Demonstrate competence in defining the consumer’s problems.**
     A. Identify consumer’s problems in performance areas.
     B. Establish problem priorities with consumer.
     C. Recognize consumer’s strengths.

IV. **Demonstrate judgement in formulating a management plan.**
    A. Identify potential resources.
    B. Communicate necessary information as appropriate to consumer, caregiver, and treatment team.
    C. Establish realistic treatment goals in collaboration with consumer or caregiver.
    D. Apply occupational therapy principles in formulating a management plan.
    E. Consider consumer’s needs, interests, and environment.

V. **Apply skill and judgement in implementing management plans.**
   A. Appraise own level of professional competency.
   B. Utilize the occupational therapy process.
   C. Utilize a variety of modalities correctly.
   D. Explain procedures clearly to the consumer or caregiver.
   E. Exercise judgement in monitoring treatment.
   F. Interpret treatment process and outcome to appropriate persons.
Level II FW Objectives

-2-

VI. Demonstrate administrative and educational abilities.
   A. Apply basic principles of supervision.
   B. Apply basic principles of organization and administration.
   C. Communicate effectively with facility personnel.
   D. Apply basic instructional principles to facilitate the mastery of new skills.
   E. Communicate competency levels for various occupational therapy personnel.
   F. Consider public policy issues which influence occupational therapy practice.
   G. Respond proactively to changing demands and situations in the health care environment.

VII. Assume professional role as an occupational therapist.
   A. Practice self-assessment procedures.
   B. Acknowledge the need for maintaining competency.
   C. Participate in additional educational and professional activities as appropriate.
   D. Seek information, suggestions, resources or assistance to improve own level of competence.
   E. Maintain an attitude of inquiry.
   F. Communicate effectively with other professionals.
   G. Interpret occupational therapy to the public.
   H. Investigate availability of community resources and agencies.
   I. Recognize the role of occupational therapy in contributing to community health care planning and activities.
   J. Take necessary steps to maintain own health and comply with universal precautions.
   K. Articulate the importance of contributing to the profession’s knowledge base.
   L. Adhere to rules and regulations governing practice, as an occupational therapist, at national and state levels.
   M. Practice in accordance with AOTA=s Principles of Ethics and Standards of Practice.

Adopted by Occupational Therapy Faculty 10/22/96

University of Texas at El Paso
# REGULATIONS RELATING TO FIELDWORK EXPERIENCES

1. The Board of Regents of The University of Texas System allows students to do fieldwork experiences only at centers that have an Institutional Agreement with the university. The negotiation process for this legal document takes from six months to one year.

2. As the citizens of Texas pay a major part of the educational costs, the Board of Regents prefers that all fieldwork experiences be within Texas so that the taxpayers receive benefit from the student's education. The Board of Regents generally does not approve fieldwork agreements with facilities outside of Texas.

3. Each student is required to have six months of fieldwork experiences. All experiences must be at a center that has an Affiliation Agreement with The University of Texas at El Paso. During these six months, the student must be under the supervision of a registered occupational therapist, who has a minimum of one year's experience. **Students may not do more than one fieldwork experience at any one facility** unless approved by Academic Fieldwork Coordinator in advance and there are valid reasons why this is in the best interest of the student, facility, and university. All fieldwork requirements must be completed within 24 months after completion of the didactic coursework.

4. Fieldwork selections are made in the summer semester of the junior year. The experiences will usually occur in the senior year during the months of July through December. As the fieldwork selections are made one year in advance, the student is expected to arrange his/her finances and personal life in accordance with this known schedule.

5. **Students are not to arrange fieldwork placements directly with a center.**

6. Once fieldwork selections and assignments have been made, all unused reservations are released so that centers can make those training spaces available to other curricula.
7. Only in unusual circumstances may a student request a fieldwork reassignment. This request must be in writing to the Fieldwork Coordinator and must give specific reasons as to why the request is being made. A faculty committee will review the request and the student will be notified of the decision. If the request is granted, the curriculum does not guarantee that a new fieldwork assignment can be located in the same time period. The student can anticipate that the granted request will delay the student's graduation date.

8. Occasionally the Occupational Therapy Program finds it necessary to cancel a student's scheduled fieldwork. If this happens, it is for one of the following reasons:

   a. The center has notified the school that due to staff or program changes they are not able to provide the training,
   b. The center no longer has a person available who is qualified to supervise an occupational therapy student,
   c. The center or the university has canceled the Fieldwork Institutional Agreement.

   If the Occupational Therapy Program has to cancel a student's fieldwork, a fieldwork assignment will be found in the same time period.

9. Students are expected to observe the same working hours and holiday schedule as the staff of the fieldwork center.

10. The starting and stopping dates of fieldwork have been predetermined and any request to change these dates must go to the Fieldwork Coordinator for approval. A student is not to contact a center about any changes to their fieldwork schedule. The school must ensure that the student has completed the minimal number of working days required by the Essentials of an Accredited Educational Program for the Occupational Therapist which qualifies a student to sit for the Certification Examination for Occupational Therapists, Registered.

11. The student should not request days off to visit with family, interview for a job, etc. Overtime should be taken according to the institution's policies. The student should not accrue earned overtime to shorten the fieldwork experience.

12. Fieldwork experiences must be satisfactorily completed prior to the awarding of the degree.

13. Some centers offer housing, stipend, or meals to students. The student should be aware that these arrangements are subject to change and may no longer be available by the time the student is ready to do fieldwork.

14. Students are not permitted to take the NBCOT examination until all Level II Fieldwork has been successfully completed. Please note that a felony conviction may affect a graduate’s ability to sit for the NBCOT certification examination and attain licensure in the State of Texas.
COUNSELING OF STUDENTS EXPERIENCING DIFFICULTY ON FIELDWORK

1. The Fieldwork supervisor should notify the Fieldwork coordinator that the student is having difficulty and is in danger of failing the experience. This normally should occur no later than the midterm evaluation time.

2. Through conversations with the supervisor and the student, the Fieldwork Coordinator may assist in the identification and clarification of problems. Discussions are held on means by which the student can improve his/her performance. The supervisory relationship and the structure of the fieldwork experience are examined for problems that are causing difficulty.

3. Upon request of either the center or the student, the Fieldwork Coordinator makes a site visit to consult with the supervisor and the student.

4. The student is counseled about requirements for passing fieldwork courses or fieldwork units of courses with “credit” or a “C” or better when a letter grade is given. Those experiences that are not passed must be repeated. (See UTEP Undergraduate Catalog).

5. To pass Level II fieldwork experiences, a student must have passing scores in each of the grading categories of Performance, Judgement, and Attitude as measured by the Fieldwork Evaluation for the Occupational Therapist.

ACADEMIC REGULATIONS FOR WITHDRAWING FROM A COURSE

1. Before the end of the week following the midterm of the experience the Fieldwork Coordinator contacts the student’s supervisor to determine the student’s current performance. If the supervisor feels the student is not going to pass, the student is advised of this by the Fieldwork Coordinator and the student is counseled to withdraw from the fieldwork course. The student must decide within seven days following the midterm point whether to withdraw from the fieldwork course or to continue in the experience. Withdrawing from the course at this point results in the designation of WP or WF on the student’s transcript.

2. If the student must repeat a fieldwork experience, the Fieldwork Coordinator and the student discuss the problem the student was experiencing, and:

   a) If the problem seems to be one that is a function of the situation or the student’s ability to perform in that situation at that point in his/her educational experience, the student is scheduled for another fieldwork experience.
FW Counseling
-2.

b) If indicated, the student is referred for counseling. If it is felt by the Coordinator of the Occupational Therapy Program and the Fieldwork Coordinator that the student’s behavior in the clinical setting is inappropriate or potentially dangerous to the patient/client, the student may be requested to seek counseling and/or improve his/her basic academic knowledge before continuing with additional fieldwork.

3. If the student decides to continue in the fieldwork experience, the final evaluation is scored upon receipt and the earned grade is recorded on the transcript.

4. If the student decides to contest the fieldwork grade, he/she is to follow the established procedures for contesting a grade. Pending the outcome of the appeal procedure an additional experience may be scheduled for a student.

5. A student who experiences repeated problems on fieldwork is counseled to withdraw from the curriculum. The Program Coordinator may request through the Dean of the College of Health Sciences an evaluation of the student’s performance by the UTEP Counseling Center. Recommendations resulting from the evaluation are reviewed by the Dean, Program Coordinator and the student’s advisor. When a consensual decision is reached, the student is requested to meet with the advisor, at which time plans for the future are made.

6. All fieldwork requirements must be completed within 24 months after the completion of the didactic coursework.

Adopted by the occupational therapy faculty 2/4/98
A Patient’s Bill of Rights

A Patient's Bill of Rights was first adopted by the American Hospital Association in 1973.

This revision was approved by the AHA Board of Trustees on October 21, 1992.

Introduction

Effective health care requires collaboration between patients and physicians and other health care professionals. Open and honest communication, respect for personal and professional values, and sensitivity to differences are integral to optimal patient care. As the setting for the provision of health services, hospitals must provide a foundation for understanding and respecting the rights and responsibilities of patients, their families, physicians, and other caregivers. Hospitals must ensure a health care ethic that respects the role of patients in decision making about treatment choices and other aspects of their care. Hospitals must be sensitive to cultural, racial, linguistic, religious, age, gender, and other differences as well as the needs of persons with disabilities.

The American Hospital Association presents A Patient's Bill of Rights with the expectation that it will contribute to more effective patient care and be supported by the hospital on behalf of the institution, its medical staff, employees, and patients. The American Hospital Association encourages health care institutions to tailor this bill of rights to their patient community by translating and/or simplifying the language of this bill of rights as may be necessary to ensure that patients and their families understand their rights and responsibilities.

Bill of Rights

These rights can be exercised on the patient’s behalf by a designated surrogate or proxy decision maker if the patient lacks decision-making capacity, is legally incompetent, or is a minor.

1. The patient has the right to considerate and respectful care.

2. The patient has the right to and is encouraged to obtain from physicians and other direct caregivers relevant, current, and understandable information concerning diagnosis, treatment, and prognosis.

Except in emergencies when the patient lacks decision-making capacity and the need for treatment is urgent, the patient is entitled to the opportunity to discuss and request information related to the specific procedures and/or treatments, the risks involved, the possible length of recuperation, and the medically reasonable alternatives and their accompanying risks and benefits.

Patients have the right to know the identity of physicians, nurses, and others involved in their care, as well as when those involved are students, residents, or other trainees. The patient also has the right to know the immediate and long-term financial implications of treatment choices, insofar as they are known.
3. The patient has the right to make decisions about the plan of care prior to and during the course of treatment and to refuse a recommended treatment or plan of care to the extent permitted by law and hospital policy and to be informed of the medical consequences of this action. In case of such refusal, the patient is entitled to other appropriate care and services that the hospital provides or transfer to another hospital. The hospital should notify patients of any policy that might affect patient choice within the institution.

4. The patient has the right to have an advance directive (such as a living will, health care proxy, or durable power of attorney for health care) concerning treatment or designating a surrogate decision maker with the expectation that the hospital will honor the intent of that directive to the extent permitted by law and hospital policy. Health care institutions must advise patients of their rights under state law and hospital policy to make informed medical choices, ask if the patient has an advance directive, and include that information in patient records. The patient has the right to timely information about hospital policy that may limit its ability to implement fully a legally valid advance directive.

5. The patient has the right to every consideration of privacy. Case discussion, consultation, examination, and treatment should be conducted so as to protect each patient's privacy.

6. The patient has the right to expect that all communications and records pertaining to his/her care will be treated as confidential by the hospital, except in cases such as suspected abuse and public health hazards when reporting is permitted or required by law. The patient has the right to expect that the hospital will emphasize the confidentiality of this information when it releases it to any other parties entitled to review information in these records.

7. The patient has the right to review the records pertaining to his/her medical care and to have the information explained or interpreted as necessary, except when restricted by law.

8. The patient has the right to expect that, within its capacity and policies, a hospital will make reasonable response to the request of a patient for appropriate and medically indicated care and services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically appropriate and legally permissible, or when a patient has so requested, a patient may be transferred to another facility. The institution to which the patient is to be transferred must first have accepted the patient for transfer. The patient must also have the benefit of complete information and explanation concerning the need for, risks, benefits, and alternatives to such a transfer.

9. The patient has the right to ask and be informed of the existence of business relationships among the hospital, educational institutions, other health care providers, or payers that may influence the patient's treatment and care.

10. The patient has the right to consent to or decline to participate in proposed research studies or human experimentation affecting care and treatment or requiring direct
patient involvement, and to have those studies fully explained prior to consent. A patient who declines to participate in research or experimentation is entitled to the most effective care that the hospital can otherwise provide.

11. The patient has the right to expect reasonable continuity of care when appropriate and to be informed by physicians and other caregivers of available and realistic patient care options when hospital care is no longer appropriate.

12. The patient has the right to be informed of hospital policies and practices that relate to patient care, treatment, and responsibilities. The patient has the right to be informed of available resources for resolving disputes, grievances, and conflicts, such as ethics committees, patient representatives, or other mechanisms available in the institution. The patient has the right to be informed of the hospital's charges for services and available payment methods.

The collaborative nature of health care requires that patients, or their families/surrogates, participate in their care. The effectiveness of care and patient satisfaction with the course of treatment depend, in part, on the patient fulfilling certain responsibilities. Patients are responsible for providing information about past illnesses, hospitalizations, medications, and other matters related to health status. To participate effectively in decision making, patients must be encouraged to take responsibility for requesting additional information or clarification about their health status or treatment when they do not fully understand information and instructions. Patients are also responsible for ensuring that the health care institution has a copy of their written advance directive if they have one. Patients are responsible for informing their physicians and other caregivers if they anticipate problems in following prescribed treatment.

Patients should also be aware of the hospital's obligation to be reasonably efficient and equitable in providing care to other patients and the community. The hospital's rules and regulations are designed to help the hospital meet this obligation. Patients and their families are responsible for making reasonable accommodations to the needs of the hospital, other patients, medical staff, and hospital employees. Patients are responsible for providing necessary information for insurance claims and for working with the hospital to make payment arrangements, when necessary.

A person's health depends on much more than health care services. Patients are responsible for recognizing the impact of their life-style on their personal health.

**Conclusion**

Hospitals have many functions to perform, including the enhancement of health status, health promotion, and the prevention and treatment of injury and disease; the immediate and ongoing care and rehabilitation of patients; the education of health professionals, patients, and the community; and research. All these activities must be conducted with an overriding concern for the values and dignity of patients.
POSITION STATEMENT AND DISCLAIMER ON STUDENT USE OF NON-TRADITIONAL PROCEDURES AND MODALITIES DURING THE LEVEL II FIELDWORK

“Occupational Therapy students from The University of Texas at El Paso who engage in procedures or use modalities not included in the pre-fieldwork curriculum do so at their own risk. The Occupational Therapy Program, The University of Texas at El Paso, cannot advocate, condone, or otherwise assume educational responsibility for any action which results from the use of such modalities or procedures. Further, current professional liability insurance covering our students during fieldwork experience does not include practices not covered during the pre-fieldwork curriculum.”

An explanation of the rationale underlying this disclaimer follows:

The Occupational Therapy Program at The University of Texas at El Paso embraces the belief that curricula should prepare students for roles as entry level practitioners in a variety of health care settings. Consequently, current practice patterns form the basis for curriculum content, which is continuously evaluated and refined to reflect changes in practice.

Because of the dynamic nature of occupational therapy practice, it is not possible to prepare students for every role in which they might find themselves. Thus, curricula attempt to educate students in the occupational therapy process, and familiarize students with the concepts and techniques germane to practice in physical, mental and developmental health arenas. Students are expected to apply their knowledge and skills in a variety of settings and contexts.

The matter of dealing with role ambiguity unfortunately poses a difficult problem. Of great concern to occupational therapy educators is the ongoing confusion which seems to exist about procedures and modalities appropriately within the purview of occupational therapy practice. This ambiguity is illustrated through use of heat and electrical modalities (e.g. Fluidotherapy, TENS, etc.) as well as procedures such as burn debridement and joint mobilization by occupational therapists in several settings. These arenas of practice have traditionally been within the purview of disciplines other than occupational therapy and are therefore not addressed in our professional curriculum. While there have been areas of ambiguity for some time, it seems apparent that lines of demarcation are becoming increasingly less distinct. We concur with the American Occupational Therapy Association’s position paper titled “Physical Agent Modalities: A Position Paper” published in the American Journal of Occupational Therapy (1992), Vol. 46 pp. 1090-1091.

This raises the question of what constitutes legitimate or authentic occupational therapy? As educators, we must continue to make critical decisions about the most appropriate content to include within our already overstretched curriculum. It is clear that we cannot accommodate each new precedent, and we must be responsive to the legal and philosophical issues that are raised as each new precedent emerges. Since courts have ruled that professional programs can be held responsible and liable for inadequate educational preparation as a factor in malpractice judgments, we are compelled to protect our own liability.

While we support the right of every therapist to hold and foster personal views concerning the philosophical basis for occupational therapy practice, we do not advocate or support the right of therapists or health care institutions to unilaterally define parameters of practice. Continuation of this haphazard process, will, in our view, have potentially destructive consequences for the profession.

Adopted by the faculty 6/10/97
PROFESSIONAL/REGULATORY ORGANIZATIONS OF OCCUPATIONAL THERAPY

AOTA
The American Occupational Therapy Association is the national professional organization. This organization has several special interest sections, an education accreditation department, and a political committee, which monitors legislation pertinent to the profession. This organization additionally provides continuing education courses, self-study courses and specialty certification in pediatrics and the neurologically impaired patient. They also sponsor an annual conference, which is traditionally held in April of each year. Some advantages to belonging to AOTA include: Reduced fees to conference, continuing education, AOTA books and other products, networking with other OT’s. Literature and information regarding the profession is available from the national library. There is an annual fee for membership. Student members are eligible for AOTF scholarships. An application for membership may be obtained from AOTA 1-800-729-2682.

NBCOT
The National Board for Certification in Occupational Therapy, Inc., is the board which writes and administers the national registration examination and confers the designation “Registered” to the OT upon passing the examination. This board is a private board at the present time. The Board also requires the practicing therapists to renew their certificate of registration every five years. There is a fee for the certification examination and a fee for the renewal of the certification.

TBOTE
Texas Board of Occupational Therapy Examiners is the licensing board of the state of Texas. It is this organization to which your certification examination grade will be sent and to whom you will pay your fees for State of Texas licensure. Licenses are renewed every two years.

TOTA
The Texas Occupational Therapy Association is the professional organization of the State of Texas. This is the organization that is the state level counterpart of the American Occupational Therapy Association. The group keeps track of state legislation regarding the OT profession and health care, provides support for continuing education and sponsors an annual regional conference called the Mountain Central Conference. There is an annual membership fee. Student members are eligible for scholarships and student loans. An application for membership is attached to this handbook.

RIO GRANDE DISTRICT
This organization is the regional group of the Texas Occupational Therapy Association. Since Texas is so large, it is more manageable to divide the state into six districts to provide more effective information gathering and service delivery within the state as a whole. The district meetings are held quarterly and provide a local network for therapists. Membership is based on payment of TOTA membership dues.

SOTA
The Student Occupational Therapy Association is the student organization affiliated with the American Occupational Therapy Association. This is your organization. There is a membership fee.

PI THETA EPSILON
Membership is based on GPA, scholarly activity, and is by invitation.

The local UTEP chapter is the Alpha Chi Chapter (currently inactive.) There is a membership fee.
ORGANIZATIONAL FLOW CHART

Voluntary Membership

National Level

AOTA

SOTA

State Level

TOTA

SOTA

Rio Grande District of TOTA

Required Membership

NBCOT

TBOTE

The Accreditation Council for Occupational Therapy Education (ACOTE) is the organization, which accredits educational programs for occupational therapy in the United States. Each educational program is required to meet the Essentials as set down by the organization. Students, however, must pass the NBCOT, Inc. registration examination whereby they are entitled to use COTA or OTR designations after their name. In Texas, occupational therapists are additionally licensed by the Texas Board of Occupational Therapy Examiners.
STUDENT OCCUPATIONAL THERAPY ASSOCIATION (SOTA)

The Student Occupational Therapy Association is a campus student organization whose mission is to promote occupational therapy through involvement with the community, at the university, local and state levels. This mission is pursued through the following goals:

1. Campus and community public education activities, such as health fairs;

2. Community service activities, such as therapeutic horsemanship and volunteer programs;

3. Cooperative activities with the Rio Grande District of the Texas Occupational Therapy Association and with Alpha Chi Chapter of Pi Theta Epsilon, the National Honor Society for occupational therapy (when active);

4. Fundraising activities to support the objectives and activities of the club; and

5. Social and educational activities to enhance the learning and professionalization experience of the occupational therapy students of UTEP’s Occupational Therapy Program.

Any student enrolled in the professional Occupational Therapy Program may join the Student Occupational Therapy Association by paying the annual dues, as established by the membership.

For further information, contact:

Dr. Emily Haltiwanger
Faculty Advisor
Ph. 747-7271
PI THETA EPSILON
ALPHA CHI CHAPTER

History

Pi Theta Epsilon (PTE) was developed as a specialized honor society for occupational therapy students and alumni. The society recognizes and encourages superior scholarship among students enrolled in professional entry-level programs at accredited schools across the United States. Pi Theta Epsilon is sponsored by the American Occupational Therapy Foundation (AOTF).

The objective of the society is to contribute to the advancement of occupational therapy through special projects of its members; to provide a basis for relationship among the accredited schools of occupational therapy; and to work in cooperation with the aims and ideals of the occupational therapy club (known as the Student Occupational Therapy Association or SOTA).

The mission of Pi Theta Epsilon is to promote research and scholarship among occupational therapy students.

MEMBERSHIP ELIGIBILITY

1. Selection of new members shall include those who have demonstrated superior scholarship, those who are eligible shall rank not lower than the highest 20% of their class in scholarship and have a GPA of at least 3.5 on a scale of 4.0 since entering the occupational therapy program, and shall have attained second semester junior status in the occupational therapy program.

2. Lapsed members may rejoin the local PTE Chapter (Alpha Chi) by paying only the current year’s membership fee. Membership in a local Chapter automatically bestows membership in the national society.

Faculty Advisor: Dr. Emily Haltiwanger
747-7271
FACULTY AND STAFF DIRECTORY

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THE UNIVERSITY OF TEXAS AT EL PASO

MAIN CAMPUS

Dean of Students – UTEP ...................................................... 747-5648

Helpful numbers

University Bookstore ......................................................... 747-5594
Library ................................................................. 747-5671
Student Development Center ............................................. 747-5670
Student Health Center ..................................................... 747-5624
Student Counseling Services ............................................. 747-5302

Emergency Numbers:

All emergencies on-campus—call University Police .................... 747-5611
(fire, police, ambulance)

Fire, Police (City) ............................................................... 911
Useful Numbers:

Dean – Dr. Leslie Schulz ................................................................. 747-7201
Assistant Dean for Student Affairs – Connie Gamboa.................... 747-7266
Main Switchboard ........................................................................... 747-7280

Occupational Therapy Program:

Dr. Karen Funk – Director ............................................................. 747-8226
OT Office ....................................................................................... 747-8207
The University of Texas at El Paso

Fire Alarm Evacuation Procedure

Do not ignore a fire alarm signal—even if you have reason to believe that it may be false!

The university’s fire alarm systems are tested and maintained to afford building occupants the best possible warning in case of fire. Before an alarm sounds, take note of the following:

1. Always identify at least two evacuation routes and exits in case of an emergency. The route you always take may not be accessible.
2. Identify the locations of the fire alarm pull stations so that you may send an alarm in case of fire.
3. Determine how to operate the pull station.
4. Learn to recognize the sound of the alarm.
5. Do not prop open the stairwell doors. They must close and latch to keep smoke and heat out in order to maintain a safe passageway for building occupants. Report stairwell doors that do not self-close and latch.
6. Your supervisor should identify an area that your department should gather so that everyone is accounted for. If you haven’t been told where—ask.

In the event that the fire alarm sounds in your building, the following steps should be taken:

1. Close any open windows. Close the door to your office or room when leaving. This will help slow a fire by reducing the oxygen that feeds a fire. Also, closing your door will reduce the probability of smoke ruining the contents of your room. Don’t lock the door. Firefighters must gain entry to all rooms when fire occurs to verify that everyone has escaped.
2. Use the stairs to get out. DO NOT USE THE ELEVATORS! The elevator control panel or the building electrical system may be disabled due to the emergency thus trapping the car between floors. The elevator shaft can become like a chimney flue, filling with hot smoke, gases and flames, in a fire’s natural progression. Exit the building and proceed to a designated assembly area that is a safe distance from the building. Do not block driveways or parking lots. Emergency equipment may need access.
3. Report to your supervisor. Do not wander off until you have been accounted for. Precious time may be lost searching for you. Every effort should be made to account for everyone.
4. Do not re-enter the building until it has been declared safe by Campus Police or the city fire department.

If a fire starts in your area, remember to close the door to the fire area, activate the fire alarm, call 9-911 from a safe telephone, evacuate the building, do not use elevators and if caught in smoke, get down low. The clearest air is closer to the floor.
Just because you can’t see or smell smoke doesn’t mean that there isn’t an emergency. There may still be a fire or some other emergency requiring exit from the building. A fire alarm pull station may be activated to evacuate the building for emergencies other than fire, such as a chemical emergency, gas leak, medical emergency, or even to draw attention to a crime in progress.

**Do not ignore a fire alarm signal—even if you have reason to believe it may be false.**

If you become trapped, go to a window and wave something white to catch the attention of those below. If a telephone is available, call 9-911 and be prepared to give a detailed description of your area. Remember, the rescuers are not as familiar with campus buildings as you are.

**PERSONS WITH DISABILITIES**

We all have an obligation to look out for each other. Each department should develop procedures for evacuating those students, staff or faculty who have disabilities. Persons with hearing impairment should be alerted when an alarm sounds and those with visual impairments will need our help in exiting a building. Notify emergency personnel when a person with disabilities remained behind in a stairwell area of refuge.

Persons with disabilities should make a point to become familiar with the building. Stairwells should be checked out, making note of landings and whether they may be used as an area of refuge. Locations of exits, telephones, signs and fire alarm pull stations should be noted. Remind co-workers that you may need their assistance in case of an emergency. When an emergency occurs, request help. Don’t wait for someone to offer it.

**COLLEGE OF HEALTH SCIENCES SPECIFIC INSTRUCTIONS**

All persons evacuating from the College of Health Sciences are to gather in the parking lots across the streets at either Campbell and Arizona or Kansas and Arizona. Remain across the street until you are advised it is safe to return to the building.

There are at least two coordinators per floor who will help evacuate the building and provide assistance if needed.

There are two Emergency Evacuation Chairs for disabled persons in the building, located on the south emergency exit of the 5th floor and the loft on the second floor by the Sim Lab office. An electric Emergency Evacuation Chair is located in room 600. Floor coordinators and staff in the College are trained to operate these chairs.

For questions or assistances please contact: UTEP Police Ext 5611, Environmental Health & Safety Department Ext 7124, or the Dean’s Office Ext 7201.
THE UNIVERSITY OF TEXAS AT EL PASO
COLLEGE OF HEALTH SCIENCES

CLASSROOM USE

Use of classrooms in the College of Health Sciences is restricted to instructional purposes and/or academic related activities, and their capacity cannot be exceeded.

- The following is not permitted in any of the classrooms:
  
  Food  
  Drinks  
  Social activities of any kind  
  Loud noise

- Classes are expected to maintain a normal noise level so as not to disturb classes in session in other classrooms

- DO NOT USE CLASSROOMS WITHOUT PRIOR SCHEDULING

- Classes start promptly and end 10 minutes before the hour or half hour to give time for the new class to come into the room

- Do not use a classroom ahead of a scheduled class

- Use of classrooms for studying or eating is not permitted

- Any materials left behind in classrooms will be disposed of

- Furniture cannot be taken out of the room. If it is re-arranged, it must be put back to the original set up at the end of class/event

- Tables and chairs set up by the Disabled Student Services Office may not be re-arranged or taken out of the classroom

- Report malfunction of air conditioning or furniture in poor condition to the front desk operator, at Ext. 7280 and of audiovisual equipment, projection screens, etc., to the Independent Learning Center, Ext. 7112

- Classrooms are scheduled through Esther Barragan.

STUDENT SERVICES
INDEPENDENT LEARNING CENTER (ILC)

There is a computer laboratory available to occupational therapy students on the first floor of the College of Health Sciences building. This laboratory is for the students to access computers for word processing, E-mail and other computer needs. There is access to the AOTA website, MedLine, the Internet and Eric Library System from this laboratory. A software program for anatomy and physiology called Body Works is available. Operation hours are posted on the door of the ILC.

LIBRARY AND OTHER RESOURCES

The library is located on the main campus on Wiggins Road. (Refer to the Undergraduate Student Catalog for more information). There are journals, books, video tapes, films and audio cassettes which are available to the student with a proper current ID card. The faculty will place selected items on reserve for specific classes or assignments. Faculty will allow students to review articles and books from their own personal libraries upon request, and at the convenience of the individual faculty member. There is a temporary library parking permit available from Alice Garcia, College Receptionist, at the front desk in the College of Health Sciences building. It may be checked out for 24 hours for the purpose of studying/performing research at the UTEP library. It is on a first come/first serve basis. Abuse of this privilege in any way will result in ineligibility to use the parking pass for the remainder of your time as a student at the College.

TUTORING AND COUNSELING SERVICES

These services are located on the main campus. Please refer to your Undergraduate Student Catalog for more information.

STUDENT HEALTH CENTER

Students are referred to the Undergraduate Student Catalog for a description of these services and the location on the main campus.
The Texas state law concerning the carrying of concealed weapons does not apply to the UTEP campus. It is and will continue to be a felony violation of State Law to carry or possess a weapon on the premises of the University regardless of whether the person is licensed to carry a concealed weapon or not. This includes the transporting and/or storage of weapons by residents of University housing.

The University Police Department provides locked, temporary storage cabinets, at police headquarters, for use by individuals in possession of a firearm and who need to conduct business on the University campus.

**Individuals driving or parking their vehicles in parking lots on the campus with weapons must remember they will be in violation of this law.**
The University Counseling Center offers a variety of psychological services to the UTEP community. Our staff of professionals helps students address individual and relationship concerns, manage stress, explore career directions, and enhance their overall personal and academic success. The UCC offers personal, career, and crisis counseling to currently enrolled UTEP students and outreach and consultation to faculty, staff, and students.

University Counseling Center services are free to UTEP students, and all contact is confidential. Visit their offices Monday through Friday, in the West Union Building, Room 104, to make an appointment.

College students encounter many new and challenging experiences, and they often face difficult personal problems and life decisions. Students come to us with a variety of concerns, including family conflicts, relationship problems, and academic pressure. You may want to talk with us about such issues as…

- Stress and anxiety
- Depression
- Suicidal thoughts
- Self-esteem
- Assertiveness
- Family pressures
- Loneliness and isolation
- Childhood experiences
- Eating disorders
- Sexual orientation
- Relationship abuse
- Sexual assault
- Anger
- Grief and loss

In addition to helping students with personal and relationship problems, we can provide help with academic problems such as:

- Test anxiety
- Time management
- Perfectionism
- Fear of failure

The UCC provides a safe and confidential place for you to talk about problems that might interfere with your personal growth or academic achievement. Couples’ counseling is available.
to assist students with relationship or marital problems. Our staff can also suggest various referral options in the El Paso area if you need extended or specialized services.

Appointments can be made by visiting the University Counseling Center during their regular business hours, Monday through Friday. You will be asked to take a few minutes to fill out some brief paperwork. Your first appointment with a professional counselor can usually be scheduled within the next few days. At certain times of the semester, this wait may be longer.

No appointment is needed for crisis counseling. Students in crisis are seen immediately by an available counselor during regular business hours.

For more information and services offered, you can stop by or call them at (915) 747-5302.
The University of Texas at El Paso
College of Health Sciences
Occupational Therapy Program

Student Administrative Information—From the Department Secretary

Student Contact Information

It is critical for the program secretary to be able to contact you by phone (home and/or cellular), address, and email for the entire time you are an OT student. This includes during your fieldwork. **Please keep your information up to date!** At the end of this handbook there are three blank “Update Contact Information” forms. Please fill one out as soon as any change takes place—even if temporary—and turn it in to the department office. If you need additional forms, they are available from the program secretary. Please do not assume that the contact information we have is current and correct.

Registration

Overview

Registration can be accomplished through Touch Tone Registration, Web Registration, or in person. Before the first day of registration for each semester, you will be provided with the program’s schedule for that semester with assigned lab groups and call numbers. Please follow this to register for your classes. The program secretary will also remove the program holds and give department approvals and/or overrides, if needed, for your classes and sections through Goldmine. Because holds can reappear after a time, if you must late-register please let the secretary know so s/he can check your status before you attempt registration.

Holds, Dept Approvals, Error Messages

Approximately one month before registration begins for a semester, a Major Advising Hold is automatically placed on every OT student by Goldmine. This is the only hold that is related to the OT program and the one that is removed by the program secretary. There are many other holds that are possible. While the program secretary can identify those holds for you and direct you to the department responsible for them, s/he cannot remove those holds. You should also be able to view your holds on Goldmine on the web after you log in.

If there is any problem with your registration, you will be given an error message. Please pay close attention to what the error message says and write it down. It will give the secretary clues as to what the problem is if it is not immediately apparent and also the remedy to the problem.

If you encounter any problems registering, please contact the department office as soon as you can so that the problem can be solved before your registration time is up. For this reason, please register as early as possible. The department cannot help you with any late registration fees due to registration problems if you wait until the last minute to register. If you run into problems after the office is closed, call and leave a detailed message on the office voice mail.
Please include your name, identification number, the call number(s) of the course that you had problems with, and any error message that you received. This will give the office time to correct it before your next registration period.

In Person Registration

If you choose to register in person at the Academic Services Building, your holds and department approvals in the Goldmine system will be accessed by registration personnel. You do not need any paperwork from the department office to take with you. **Note: If there is any problem with your registration at the Academic Services Building, call the department secretary before you leave the building!** Even if you are told you must return to your department’s office, call first. Almost all problems can be handled by computer or by telephone and you do not have to make a trip to the College of Health Sciences and then back to main campus. If necessary, the program secretary can speak directly with the registration worker to solve most unexpected problems.

Financial Aid

Tuition payments from Financial Aid are made on the date that payments are due for all students at the University for each semester. You can find this date listed on the Academic Calendar on the UTEP website or in the class schedule for that semester. Typically it is about 1 week before the start of the semester.

“Walks” in classes/labs

The tradition of “walks” in classes (being free to leave without penalty if the faculty member does not appear within 15 minutes from the start of class) is not an official university policy. Therefore it is not honored in the OT program. If the faculty for your class or lab does not show up within 10 minutes, please contact the department office for information unless prior arrangements have been made between the class and the faculty. The secretary will contact the program director or the faculty member in charge for instruction before any permission will be given to leave without penalty.

Items to Faculty via the Program Secretary

If a faculty member is not in their office when you need to drop off an item, book, or assignment, you may leave them with the program secretary by following these instructions:

1. Do NOT leave anything or put anything into the faculty member’s box without telling the program secretary or the PT secretary (if the OT secretary is not there) that you are doing so. Otherwise it is easily overlooked and may not be noticed for some time.
2. All assignments or anything that will be graded MUST be dated, timed, and initialed by a staff member (or in emergency, another faculty member). This will be the date and time that you hand the item over to be turned in. If this is not done, there is a risk that it could be counted late since there is no documentation of when it was turned in.
3. Please make efforts to drop off non-graded items when the faculty member is in their office. The program office does not have extra space to store items—extra items are actually hazardous to step around. The office will accept these items if you cannot or do not connect with the faculty in their offices. Please leave a note attached to the item with your and the faculty’s name on it.

Final Exam Schedule

The program makes every attempt to follow the official university final exam schedule that is printed in the class schedule each semester. However, sometimes there are circumstances—like a conflict with time or room—when adjustments must be made. Adjustments often become complex to coordinate and the process becomes lengthy. We try to have the final exam schedule for each semester available one month before “dead” day. However, you are advised to not make any plane reservations until the final exam schedule is posted.

Liability Insurance

All OT students are required to have liability insurance while they are in the program. The only possible exception is if a student is off-cycle and will not be in any preceptorships or fieldwork for the entire academic year. Check with your advisor if in doubt.

The liability insurance costs approximately $11-$17 per academic year (Sept 1 through Aug 31). The cost remains the same whether it is purchased at the beginning of the academic year or at the last minute; it is not pro-rated. For this reason, the department requires that purchase be made at the beginning of each fall semester. Please bring the receipt to the department secretary. If you do not purchase the liability insurance, you will be dropped immediately from any course that requires it.

The liability insurance must be purchased in person from the Bursar’s in the Academic Services building. Please make arrangements with the Bursar’s office for your final fieldwork’s liability coverage (final Fall semester) if you will be out of town and unable to purchase it in person. Liability insurance cannot be purchased until tuition is paid or a payment schedule is set up for that semester. Students on Financial Aid, please refer to the previous section for tuition payment information. You are responsible for obtaining your liability insurance as soon as payment has been made on your tuition and before you have any patient contact. If it appears that your tuition payment will not be made in time before patient contact, please let the department secretary know immediately so a solution can be found so you are covered by insurance. You also need to tell your clinical supervisor.
City-Wide Orientation

City-Wide Orientation is held at the College of Health Sciences every Fall and Spring semester. Attendance is mandatory for all students who will be having any patient contact during the year. OT students are asked to attend the Spring semester sessions as this will provide maximum course coverage for each session attended. Proof of your attendance is good for one calendar year. You will be issued a card at the end of the orientation. Please bring the card to the orientation that the fieldwork coordinator has for the preceptorships at the beginning of the semester. She will pick them up at that time. If you do not attend City Wide Orientation, you will not be allowed to continue in preceptorships or fieldwork.

City-Wide Orientation is scheduled before the first day of class for that semester. The department office will notify the students via announcement, memo, or flyer of the date and time before the end of the preceding semester. It is the student’s responsibility to arrive on campus in time to attend. It is normally held in the morning. You are strongly advised to arrive early to ensure registration and admittance. Once the session starts, the doors are locked and entrance is not permitted. It lasts approximately 4 hours. You are not required to attend any other nonspecific orientations unless you are told otherwise. If in doubt, please ask.

There is usually a make-up City-Wide Orientation held after classes start. Please note the following:

- Going to the make-up orientation is not an excused absence from your OT classes and any graded activities or tests that day will be scored as a zero.
- You cannot begin any preceptorships or activities with patient contact until you have attended. This could result in being dropped from the course or zeros being given for each class you are not allowed to attend.

Graduation Process for Students

Application for graduation

Before you begin your first Fieldwork II level experience, come to the department office and fill out the top portion of the graduation application. The secretary will hold those in a file in the office.

Between the first and second Fieldwork II experience, you, one of your co-students, or a family member will need to pick up your graduation application after the secretary receives the go-ahead from the UTEP fieldwork supervisor and also obtains the initials of the program director and the dean’s signature. If anyone other than the student picks up the application, a record will be made of their identity. Family members may be asked for identification. The application needs to be taken to the cashiers in the Bursar’s office with a payment of $25 for the graduation fee (which includes the cost of your diploma.) This can be paid with cash, check, money order, or by credit card. You can also pay by credit card on the web before the application is taken to the cashiers. The Bursar’s office expects students to take care of this themselves unless they are out of town on fieldwork or are unable to come during the cashiers’ hours. For those circumstances, the application and payment may be mailed to the Bursar’s office after the completed application is picked up from the program secretary. The advantage to handling this
in person (or having someone else do it for you) as opposed to mailing is that you will be given the pink back copy of the application with the date of payment stamped on it. You will also be given a receipt for the payment. This can be useful if questions arise later about when and if it was turned in. You will not have the pink copy if you do this by mail. If you have problems with your application or payment being accepted by the cashiers or the Bursar’s office, please contact the program secretary immediately.

**Transcript requests**

NBCOT will need to receive your transcript with your degree posted before your application to take the NBCOT exam is complete. However, **do not send a transcript until after you have registered for the exam and paid the exam fee.** Otherwise your transcript will be discarded. A Transcript Request Form will be included in your Fieldwork Handbook. You need to request an official transcript to be mailed to the following address: NBCOT, Attn: Transcript Processing, 800 S. Frederick Avenue, Suite 200, Gaithersburg, MD 20877-4150. Please note that your degree will not be posted until after January 1 (if you graduate in the fall.)

**Cap and gown purchase**

Usually after the University Thanksgiving holidays, graduation caps, gowns, and invitations go on sale. Contact the department office in early November for the exact date. These may be purchased by anyone—no proof is needed. The gowns are sized by your height. The bookstore staff will assist in selecting the size based on the height. The caps, or mortarboards, are one-size-fits-all. You will need to purchase your tassel—the color is that for the College of Health Sciences. In the past, the color has been salmon/apricot. If the color changes, the department secretary will make efforts to notify you. **Please leave a way for the secretary to quickly make contact with you while you are on each fieldwork.**

**Honor cords**

If you will be graduating with honors, the university will pay for your honor cord. These are delivered to the department to give to you at your awards luncheon (if your class organizes one) or they will be given to you before the graduation ceremony by a faculty member.

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**NOTE:** The program is not responsible for specific information pertaining to the NBCOT exam nor licensure in the sections following. The information presented here is general in nature and is included for the sole purpose of providing a surface view of what is involved. You must contact the NBCOT and the licensing board for specific and more detailed information.
**NBCOT Exam**

The NBCOT website is [http://www.nbcot.org](http://www.nbcot.org) You need to access that website in order to register for your NBCOT exam, order your handbook, and order the study guide (if desired). All exams are administered by computer and testing is now on-demand. After your registration for the exam is complete you must arrange for testing within 90 days. After 90 days, you will have to pay an extra fee to reactivate your testing eligibility. UTEP transcripts that would include the fall semester's grades and conferral of degree are not ready until the beginning of January. Keep that in mind with regards to obtaining a temporary license [see next section].

NBCOT also recommends the following: “…many states require official notification of eligibility (Confirmation of Eligibility Letter) for limited or temporary licenses and a score report for permanent licenses. Please encourage your students to request these services at the time of application. This will reduce their waiting time for the temporary or permanent license.”

**Texas Licensure**

To find information on Texas licensure, including temporary licenses, go to the TBOTE website at [http://www.ecptote.state.tx.us](http://www.ecptote.state.tx.us) You can find the licensing information for OTs by following these links: Services, Applications, OT Licensure. This is the definitive source of information on Texas licensure and should be consulted for all questions.

The website gives the following advice: “**You must have a regular or temporary license in hand to work as an OT or OTA. Don't promise to start work on a specific date unless you have the license in hand.**” Note that in addition to completing the application packet they send on request, you also need to submit to them the Confirmation of Examination Registration and Eligibility to Examine Notice from NBCOT. In a recent phone call, TBOTE stated that letters from the department would not be honored for the purpose of confirming award of the BSOT. A passing score on an “open text” jurisprudence exam must be presented to the board before your temporary license will be issued. This exam is obtained through the licensing board. There are other additional requirements. Again, check the website and know that the earliest you would likely have your temporary license in hand will not be for a month or two after graduation.

Questions regarding anything in this booklet or the program, and requests for assistance should be directed to the department secretary or your advisor.

Questions regarding the NBCOT exam should be directed to NBCOT at their website or the following number: 1-301-990-7979

Questions regarding Texas licensure should be directed to the Texas Board of Licensure at their website or at the following number: 1-512-305-6900.

University of Texas at El Paso
College of Health Sciences
Occupational Therapy Program

Contact Information Form
Name: ________________________________________________________________

Local address: ___________________________________________________________________

Local phone number: ___________________________________________________________________

Cellular phone number: ___________________________________________________________________

Permanent address: ___________________________________________________________________

Permanent phone number: ___________________________________________________________________

Email address: ___________________________________________________________________

Emergency contact information:

☐ Same as permanent address  ☐ Same as local  ☐ As below

Name: ________________________________________________________________

Address: ___________________________________________________________________

Phone: ___________________________________________________________________