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HANDBOOK ACKNOWLEDGMENT AGREEMENT

All occupational therapy students entering the professional & advanced practitioner phase of the program are expected to READ and UNDERSTAND the information and policies contained in this manual and to ABIDE by the policies defined therein.

Students are expected to sign this Acknowledgment Page indicating their understanding and acceptance of these policies. This signed copy is to be returned to Adriana Pearson, 210 Rangos.

The provisions of the Department of Occupational Therapy Professional Phase Student Handbook are congruent with the provisions of the RSHS Student Handbook which state “As the educational process from admission through graduation requires continuing review and appropriate approval by University officials, the provisions of this handbook are to be considered directive in character”. Information contained in this handbook is accurate and effective as of Spring 2020. The University and School, therefore, reserve the right to change requirements and regulations contained herein, as well as fees, tuition, room and board, and to determine whether an individual has satisfactorily met the requirements for admission or graduation. Once enrolled, students should consult on a regular basis with their Academic Advisor and Faculty Mentor for specific information regarding academic policies pertaining to their respective program.

I, ___________________________ , have read and understand the Policies/Processes as outlined in this manual. I agree to follow and take responsibility for my actions as outlined in this manual. If I choose to take other courses of action than those outlined, I will accept full responsibility for any consequences as a result of those actions in accordance with Department, school and University Policy. I acknowledge that I have downloaded a copy of this manual for my reference throughout the curriculum. This confirms that I have read and fully understand the Duquesne University Department of Occupational Therapy Professional Phase Handbook.

If you have any questions concerning the concepts of this manual please speak with your faculty mentor prior to signing this form.

IMPORTANT NOTE: The material contained herein is subject to change from time to time and this publication cannot be considered an agreement or contract between individual students and the School. The Department of Occupational Therapy reserves the right to alter or amend the terms, conditions, and requirements herein, and to eliminate courses as necessary.

_______________________________________________   ______________
Occupational Therapy Student Signature     Date
PURPOSE OF THE HANDBOOK

The purpose of this handbook is to assist you in becoming acquainted with expectations, standards, organization and regulations of the Department of Occupational Therapy in the John G. Rangos, Sr. School of Health Sciences at Duquesne University. You are expected to read it and be familiar with its contents, and should keep it ready for reference at all times. It should be used in conjunction with the Rangos School of Health Sciences Academic Student Handbook, the Duquesne University Student Handbook and the Fieldwork & Doctoral Experiential Component Manual. These three handbooks should be helpful in answering many of your questions and assisting you to responsibly manage your professional education experience.

GENERAL INFORMATION

History of the Department of Occupational Therapy

The occupational therapy founding program director, Dr. Patricia Crist, began working on the curriculum in January 1992. Four faculty members joined the program during the fall semester of that same year. The first freshmen were admitted to the occupational therapy program September of 1991. Thirty-one students began their first year of professional education in August of 1992. That same group successfully completed the program and became the first graduates of Duquesne occupational therapy program in December 1994. Duquesne University was one of the first freshman-entry Master’s program in the country.

In 1999 - 2000, the Department of Occupational Therapy faculty recognized that an innovative opportunity existed to partner with occupational therapy practitioners to enhance our teaching, research and service activities through addressing real life needs and problems within underserved and/or marginalized populations. Faculty, students and the community could benefit from collaborations that met existing needs of all participants. With the turn of the new millennium, the faculty in the Department of Occupational Therapy at Duquesne University engaged in the singular goal to create an innovative, dynamic educational program in occupational therapy that provided our students and the profession a unique perspective on the professional development of future occupational therapy practitioners. Building upon our faculty expertise, our unique university, community and service delivery contexts, the emerging opportunities within the profession and, most importantly, the philosophy, values and knowledge foundational to occupational therapy, the faculty determined that we could mobilize our environmental opportunities with faculty strengths and desire to make a significant contribution to the profession. The faculty made a conscious commitment to the scholarship of practice and scholarship of learning to support the evolution of a new cadre of occupational therapy practitioners called practice-scholars. Thus, the Practice-Scholar Initiative was created where faculty partnered with practitioners who were interested in engaging proactively in the scholarship of their everyday practice. The goal of this Practice-Scholar Initiative is to develop a cadre of practitioners actively engaged in creating evidence and outcome studies that respond to questions arising from their practice. Throughout the tenure of the Department of Occupational Therapy, maximum accreditation has been granted by ACOTE.

On August 7, 2016 the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA) accredited our OT programs for the maximum initial accreditation period.

The philosophical core of our program is influenced by our institutional context; specifically by our identity as a Catholic University in the Spiritan tradition. As a Catholic Spiritan University the Spiritan Charism and principals of Catholic Social Teaching affect our teaching, research and service. The core of Catholic social teaching and the Spiritan mission is a focus on the integral liberation of people, action for justice and peace, and participation in development (Spiritan Rule of Life of 1840). The Spiritan perspective meshes well with occupational therapy's
professional values for person-centered practice, enablement, empowerment and participation. The philosophical foundation of our curriculum addresses the call for occupational therapy to fully embrace our moral responsibility to address significant social injustices that exist in our communities and to collaborate with communities to address their needs (Kronenberg, Algado, & Pollard, 2005).

Our practice-scholar initiative and outcomes are demonstrating an energizing, leading force that bridges practice, education and research agendas. The analogy we use to describe our Department goals and curriculum is a bridge. Given that Duquesne University is in a region with over 2,000 bridges more than 8 feet long, it is a symbol that fits our environmental context. The symbolic representation of a bridge is an effect way to signify how the components of our curriculum work together to create a dynamic entry-level professional in occupational therapy. Further, the symbolism of the bridge also represents an important goal of our curriculum: “to bridge the gap between education, practice and research.”

Mission

University Mission Statement

Duquesne University of the Holy Spirit is a Catholic University, founded by members of the Congregation of the Holy Spirit, the Spiritans, and sustained through a partnership of laity and religious. Duquesne serves God by serving students. See full mission statement at https://www.duq.edu/about/mission-and-identity/mission-statement.

Rangos School of Health Sciences Mission

The Rangos School of Health Sciences faculty will educate ethical healthcare professionals to engage and serve diverse local and global communities to advance person-centered healthcare. In the spirit of Duquesne University, moral, ethical and spiritual values support the scientific and philosophic underpinnings of all Rangos School of Health Sciences curricula. Students will be provided with opportunities and experiences to foster the development of comprehensive knowledge for practice in health care, education, and other professional settings. This knowledge will support advanced graduate education and scholarship. Graduates from the Rangos School of Health Sciences will be culturally-competent health science professionals who demonstrate competence, leadership, expertise, and a profound moral/ethical respect for their patients/clients, professional colleagues, and the general public.

Occupational Therapy Department Mission

Educate students to be excellent, holistic, practice-scholars who serve, do, question and lead. Our department of mission is consistent with the mission of the University and the RSHS. As practice scholars, we expect our graduates to demonstrate the requisite knowledge, skills, attitudes and habits to use and create evidence to support their practice, to facilitate socially just change as engaged leaders and scholars, and to think critically and creatively as practice innovators. Graduates of our occupational therapy programs will be able to act responsibly, reasonably, morally, and ethically in their decisions related to personal lifestyle, occupational therapy, leadership, and citizenship within their local, national and world communities. The practice-scholar mission is an intentional approach to realizing Vision 2025 of the American Occupational Therapy Association (AOTA, 2017).

Our entry-level MS curriculum provides the foundational skills for students to engage in practice scholarship as well as professional development to achieve the full complement of these roles and functions after graduation. Our entry-level OTD curriculum builds on these foundational skills for students to engage in practice scholarship, professional development to achieve the full complement of these roles and functions and prepared graduates with...
advanced practice competencies. The following description of the knowledge, skills, attitudes and habits requisite to the practice-scholar in occupational therapy, guide our program’s vision, mission and curriculum outcomes. Our practice-scholar graduates will:

- demonstrate the requisite habits to use and create evidence to support their practice specialty by embedding scholarship activities into their every day practices
- engage as leaders, facilitating change and/or knowledge-sharing to enhance occupationally justice practice
- lead practice through the roles they assume in their workplace, community and within the profession
- reflect on and engage in the scholarly application of occupational therapy and health related evidence
- use and create scholarship to support their occupation and evidence-based practices
- disseminate their acquired knowledge regarding ‘best practices’ to benefit the individuals served by occupational therapy
- model their behaviors for others to emulate through fieldwork education, mentoring and other leadership activities within the profession, the community and systems housing our practice.
- create and engage in partnerships with key entities to provide contemporary, quality, evidence-based practice reflecting the value of occupation as process and ends.

Vision

Create a curriculum and departmental culture that prepares students who will make significant contributions to the achievement of Vision 2025 of the American Occupational Therapy Association which defines the future of occupational therapy an “inclusive profession, occupational therapy maximizes health, well-being, and quality of life for all people, populations, and communities through effective solutions that facilitate participation in everyday living.” (AOTA, 2017).

Key Elements of Curriculum Design

Pedagogical practices employed in the Duquesne University Department of Occupational Therapy consistently place occupation in the foreground and adhere to a strong commitment that our graduates be trained to intervene in ways that demonstrate their deep understanding of the interplay between the person, their occupations, and their environments. Our focus on our students’ professional development as practitioners and leaders has led us to initiate and consistently refine a curriculum and departmental culture that encourages our graduates to adopt a professional identity as a practice scholar; a leader who uses the best available evidence to provide occupation-focused, evidence-based interventions and demonstrates the requisite habits to measure outcomes and create answers to the questions that arise in their everyday practice.

Philosophical Perspectives: The design of the Duquesne University Department of Occupational Therapy curriculum is strongly influenced by our institutional context; specifically by our identity as a Catholic University in the Spiritan tradition. The Spiritan Charism and principals of Catholic Social Teaching affect our teaching, research and service. The Spiritan Charism is focused on the integral liberation of people, action for justice and peace, and participation in development (The Spiritan Rule of Life). This Spiritan perspective meshes well with occupational therapy’s professional values for person-centered practice, occupational justice, enablement, empowerment and full social participation. The philosophical foundation of our curriculum addresses the call for occupational therapy to fully embrace our moral responsibility to address significant social injustices that exist in our communities and to collaborate with communities to address their needs (Kronenberg, Algado, & Pollard, 2005; Kronenberg, Pollard & Sakellariou, 2010). The Department of Occupational Therapy holds sacred its fundamental obligations to serve God by serving students and to animate the Spiritan Charism of Duquesne University, which call us to educate students who have a profound concern for moral and spiritual values, a hospitality to diversity and multiculturalism, and a commitment to service to the community, the nation and the world. The Spiritan Charism is consistent with and
compliments the philosophies, ethics, and standards of the American Occupational Therapy Association (AOTA, 2015).

**Occupation Focused:** As a profession, occupational therapists have come to understand that occupation is a critical dimension of human existence. Occupations are “daily activities that reflect the cultural values, provide structure to living, and meaning to individuals; these activities meet human needs for self-care, enjoyment and participation in society” (Crepeau et al., 2013, p. 1031). Occupations are multidimensional and participation in occupation is the essence of productive living (Christiansen & Baum, 2015). Engaging in occupation is “the active process of being, becoming and belonging as well as performing or doing occupations” (Townsend & Polatajko, 2007, pp. 370). Participation in occupation is a dynamic process that supports a person’s continuous adaptation. Throughout their life span, humans engage in occupations in a variety of contexts. This person-occupation-environment interaction is essential to an individual’s ability to effectively engage in meaningful, purposeful occupations throughout their life. A deeper understanding of the interplay between the person, occupations, and their environments is gained by considering important related concepts such as quality of life, meaningful productivity, independent living, full participation, social and occupational justice, multiculturalism, and healthy lifestyles. Thus, a guiding component of the Department of Occupational Therapy’s curriculum philosophy is that occupational performance is developed and enhanced by treating the “whole person” and attending to physical, psychological, social and cultural issues as influenced by the environment. Our students are trained to recognize occupation as the critical link between the person and their environment and to appreciate the impact of personal (e.g., spiritual, cultural, physical) and environmental (e.g., social, physical, political) influences on occupational function and performance. This focus on occupation and occupational performance as an integrated and consistent theme in the curriculum ensures graduates develop the capacity to critically examine the occupations people perform and enables them to use occupation as the medium to assist people to live their lives to the fullest.

**Practice Scholar Initiative:** The goal of the Practice-Scholar Initiative at Duquesne University is to constantly develop and nurture partnerships between occupational therapy, interdisciplinary and community partners and our department faculty and students to support mutual interests in teaching, research and service as a means of enhancing the scholarship of occupational therapy in a variety of settings. The role, ‘practice-scholar,’ was coined by our faculty in 1999 to mirror the role, ‘teacher-scholar,’ used on our campus to reflect performance expectations including the expected balance of teaching and research. A practice-scholar embeds research in their everyday practice to answer central questions and/or provide evidence unique to their practice setting. Our department envisions the potential of practice-scholar activities within any setting where occupational therapy practice is occurring or may occur. Thus, developing practice scholars is another guiding component of the occupational therapy curriculum design. Practice scholars have established the requisite habits to use and create evidence that supports occupation and evidence-based practice (Crist, Muñoz, Witchger-Hansen, Benson & Provident, 2005). The scholarship of practice is a constant consideration in curricular design, educational pedagogy, community-university partnerships, community engaged learning, and program outcome evaluations. Students in our program are consistently challenged to recognize that scholarship is an essential element in their success as leaders and practice scholars (Townsend, Polatajko, Craik & von Zweck (2011). To that end, the Duquesne University program generates opportunities for students to critically reflect and to embed scholarship activities in their everyday practice. Students learn and practice knowledge, skills, attitudes and habits that allow them to assume leadership roles as practitioners, research collaborators, and advocates. Our emphasis on practice scholarship challenges students to intentionally link occupational therapy theory and practice and to ensure that the best available evidence guides their practice.

The occupational therapy doctorate (OTD) degree prepares advanced practice scholars with the knowledge, skills and attitudes to use and create evidence that validates occupational therapy interventions, to plan, create, and market occupational therapy services in traditional and emerging markets, to develop pedagogically sound learning materials and experiences for practice, professional, and public audiences, and to assume positions as
transformative leaders, who understand complex social and health problems, facilitate knowledge-sharing, influence systemic change, and advocate for socially just practices. As practice scholars, our graduates will demonstrate the requisite skills and habits to use and create evidence to support their practice, to facilitate change as engaged leaders and scholars, to think critically and creatively as practice innovators. Our practice-scholar initiative is a unique approach to realizing Vision 2025 of the American Occupational Therapy Association (AOTA, 2017). Graduates of the occupational therapy program will be able to act responsibly, reasonably, morally, and ethically in their decisions related to personal lifestyle, occupational therapy, leadership, and citizenship within their local, national and world communities.

Core Pedagogical Approaches

The Duquesne University Occupational Therapy curriculum is designed to enable our students to achieve the knowledge, skills, attitudes and habits of a practice scholar through an engaging, broad, well balanced, and fully integrated curriculum. Learning events within our curriculum are designed to promote students’ engagement in the learning process in ways that can support transformative learning and professional identity development.

Engaged Learning: Engaged learning or ‘civic learning in the natural context’ actively integrates three types of thinking: critical thinking – to compare, analyze and evaluate; creative thinking – to design new forms, styles or programs, interpret old work into new ways of doing; and practical/applied thinking – to learn how to answer questions, make decisions and solve problems (Fink, 2003, pp. 40-42). The faculty implement engaged learning activities to nurture students’ problem-solving capacities during real life situations to fully develop these three ways of thinking. The primary outcome from engaged learning is to create individuals capable of making significant ethical and value-laden contributions to the community, practice and professional knowledge (Jones, Valdez, Nowakowski & Rasmussen, 1994).

Transformative Learning: Transformational learning is a process of being changed by what one learns in some meaningful way. Assumptions, beliefs, values and differing views are questioned while always seeking to verify reasoning. Critical reflection on one’s experiences leads to a transformed perspective, which is more inclusive, discriminating and integrative than prior thinking (Mezirow, 2000). Reflecting the Spiritan traditions regarding Catholic social thought and our curriculum philosophy, learning activities are specifically crafted and integrated into the curriculum to assist students to transform (change, add to or integrate) prior ideas or learning with their current educational experience in the classroom and community into new, broader perspectives. These perspectives reflect attention to ethical leadership, social and occupational justice, and engaged citizenship. Through reflective instructional activities, guided experiential debriefing to promote discernment and instituting mini-learning communities through class activities, the students are provided transformational learning across the curriculum. The primary outcome for transformative learning is to provide an experiential foundation for students to make more sophisticated choices based on a deeper understanding or perspective as the basis for their future actions.

Professional Identity Formation: Closely related to transformational learning is apprenticeships of professional identity formation ‘also called ‘apprenticeships of professionalism.’ Professional identity formation is situated. Professional development occurs through the transactional nature of both the individual and the community being shaped and transformed through experience with each other. These transactional encounters can transform the individual, the community context and interpersonal engagements resulting in professional identity formation. Translated for occupational therapy, the Carnegie Foundation names three different foci that apprenticeships serve in professional identity formation; 1) intellectual, cognitive and analytic (helping to think like an occupational therapist); 2) skill acquisition, practice, clinical (fundamental skill acquisition for practice); and 3) roles, professional identity (the meaning of being an occupational therapist) (Hamilton, 2008). The values, ethics and professional behaviors associated with being an occupational therapy practice scholar facilitate student identity formation throughout our curriculum. Specific to our mission and vision our graduates are expected to develop and demonstrate actions that exemplify responsibility, civility, integrity, accountability, empathy and compassion. The Duquesne University Occupational Therapy Handbook – Spring 2020
primary outcome of professional identity formation is to create practice scholars who think, perform and conduct themselves like responsible professionals (that is, to act morally and ethically) (Hamilton, 2008).

These core pedagogical approaches of the Department of Occupational Therapy guide key instructional practices within our curriculum. These include:

1. an intentional use of engaged, active learning educational pedagogies that embeds learning in context and seeks to establish opportunities for transformative learning experiences that promote critical thinking and reflection.
2. concentration on professional identity formation as a practice scholar with the values, ethics, and professional behaviors associated with being an occupational therapist.
3. a graded developmental approach to acquiring the knowledge, skills and attitudes to be a practice scholar who reflects on and engages in the scholarly application of occupational therapy and has a skill set to deliver person-centered, evidence-based occupational therapy.
4. a central focus on occupation, on humans as occupational beings, and on the complex processes by which people find meaning and health through the interactive person-environment process of ‘doing’ or engagement in occupations.
5. a comprehensive understanding of both personal factors and context or environmental influences on occupational performance and function in the areas of occupation.

Curriculum Design and Structure
The curriculum design and structure of the Duquesne University entry-level degree programs reflect the person-occupation-environment interaction and the domains processes of occupational therapy and life span occupational performance as central organizing concepts. Early in the curriculum students acquire knowledge regarding how the body operates (OTPF: client factors - neuromotor & sensory, biomechanical, cognitive and psychosocial function). Course work includes but is not limited to anatomy, physiology, kinesiology and medical conditions. They also are introduced to the profession, occupational science and foundational aspects of the occupational therapy process. As students progress through the curriculum this information is transformed into understanding subsystem functions and interventions that contribute to the participation and performance of occupations (OTPF: areas of occupation, performance skills and performance patterns). During the professional phase, information from the natural sciences and liberal arts is transformed into an applied, holistic understanding of the art and science of occupational therapy. Students are progressively challenged to synthesize knowledge to understand the person as an occupational being whose underlying abilities, in combination with environmental constraints and supports determine occupational performance (OTPF: context and environment plus activity demands). Professional ethics, values, and responsibilities of an occupational therapy professional are introduced early in the curriculum and integrated throughout the curriculum (AOTA, 2014). In a similar vein, opportunities to develop increasing sophisticated knowledge and skills related to leadership and management are a consistent focus of the curriculum culminating in high level application of these skills in the doctoral experiential and practice scholar capstone project. Early in the curriculum, faculty support students’ the development of a professional identity that promotes scholarship within the profession. Using a graded approach, students initially learn to acknowledge the importance of a high level of scholarship to the viability of the profession and how to search for and critique evidence. As they progress through the curriculum, they are expected to apply evidence to clinical decision-making and integrate their synthesis of evidence in treatment plans and scholarly proposals and projects culminating in their capstone doctoral project. Our sequence of evidenced-base practice and specific research courses further develops our students’ capacities to understand and critique the evidence and to design and implement studies of practice, service outcomes and/or professional concerns and issues.

The DU occupational therapy curriculum is divided into three phases: pre-professional, professional and advanced professional. The pre-professional phase consists of the first 5 semesters. The professional phase includes the next 7 semesters. This advanced professional phase is delivered in a 3-semester sequence in the 6th year of their program.
While the first 5 years of our curriculum is offered in a face-to-face format, the sixth year of OTD coursework is predominately delivered in an on-line environment.

**Curriculum Threads**

The curriculum is designed to ensure that students develop their professional philosophy and requisite practice knowledge, skills and attitudes. This curriculum is sequenced to challenge our students to integrate knowledge and skills from the pre-professional phase into the professional then advanced profession phases. The sequence prepares students to become advanced practitioners, practice-scholars, emerging educators and leaders. The sequence for the curriculum is organized into six major curricular threads that reflect the essence of our curriculum design.

1. **Practice Foundations**
2. **Person-Occupation-Environment Interaction and Performance Across the Life-Span**
3. **Health Care Delivery Systems and Population-Focused Services**
4. **Practice-Scholarship**
5. **Community Engaged Learning, Fieldwork Education and Doctoral Capstone Experience**
6. **Servant Leadership, Specialty Roles and Functions**

**Practice Foundations:** The curriculum is designed to provide students with a strong foundation across three key areas 1) human science, 2) profession knowledge, and 3) professional skills. For example, students complete rigorous coursework in anatomy, neuroanatomy, kinesiology and clinical conditions to support their understanding of human engagement and the impact of function and dysfunction on human occupation. In order to introduce students to the profession’s knowledge, they explore the history and current structure, organization and vision of the profession. Students are also introduced to occupational science concepts and learn to view the human developmental continuum through an occupational lens. Finally, students are introduced to key professional skills including group and interpersonal dynamics, activity analysis, professional information literacy and occupational performance evaluation.

**Person-Occupation-Environment Interaction and Performance Across the Life-Span:** Occupational science, occupation-based practice models for related occupational performance and the remediation, compensation and adaptation of occupational performance are applied. Foundational client factor-oriented coursework is transformed into exploring the client’s performance skills and activity demands found in addressing areas of occupation. The information is organized into biomechanical, psychological, neuromotor, sensory, cognitive and perceptual processes which are addressed in a life-span perspective. Students learn specific approaches to addressing problems in performing occupations within various contexts. Community engaged learning, fieldwork education and the doctoral experiential component each provide opportunities for students to apply this academic knowledge, skills and attitudes in various contexts and to build the clinical competencies required of an entry-level practitioner. Community engaged learning is a core component of engaged and transformative learning and is integrated in the pre-professional and professional phases of the curriculum. Three Level I fieldwork experiences are integrated within our two clinical reasoning courses and our psychosocial intervention course to reinforce and synthesize prior learning and home clinical reasoning. The doctoral experiential component provides opportunities for students to apply this academic knowledge, skills and attitudes at an advanced practitioner level.

**Health Care Delivery Systems and Population-Focused Services:** The person-occupation-environment is isolated if curriculum content is too heavily weighted toward client-factors and performance skills. Equally important, occupational therapy practitioners must be skilled to recognize and address professional, social, cultural, political, legislative, and economic factors influencing and even directing, certain occupational performance options
and occupational therapy service delivery. Reflecting on the environment and context, both local and global, as significant influences on individual occupations including choices and options begins early in the curriculum and is reinforced repeatedly. The impact of contextual and environmental factors of practice and service delivery systems becomes a more defined focus as students move through the curriculum and increasingly participate in community engaged learning. Level I and Level II Fieldwork offers students the opportunities to refocus on factors impacting health care delivery systems from increasingly informed perspectives. Learning events later in our curriculum such as group and individual grant writing projects, community and program needs assessments, the capstone project and the doctoral experiential are designed to support students’ abilities to integrate contemporary social, economic, political, geographic, and demographic factors that impact health care policies and advocate for occupational therapy services that address identified individual and population-based needs.

**Practice Scholarship:** Our practice scholarship initiative began over 15 years ago and reflects an intentional approach to socialize Duquesne University graduates with a personal and professional identity that prioritizes and advocates for a scholarly approach to practice and which equips them with the knowledge and skill sets to produce scholarly products that enhance the practice of occupational therapy. Our scholarship sequence begins early in the curriculum when students learn to access, interpret and critique occupational therapy and related literature. An expectation to apply research literature in clinical decision-making is a consistent component of every intervention-focused course. Students continue to build on practice scholarship knowledge and skills as they study research processes, including project design and data analysis procedures in courses that emphasize quantitative and qualitative approaches to measurement. Many students embark on supervised research projects with a faculty mentor before they earn their baccalaureate degree and all students design and implement small scale studies in their research courses and more focused projects in their capstone project and/or doctoral experiential.

**Community Engaged Learning, Fieldwork Education and Doctoral Experiential Component:** Learning by doing is a central value of occupational therapy. In our curriculum, courses students in our pre-professional phase learn by doing in a range of learning events where they complete projects at a level commensurate with their training. For example, in the pre-professional phase freshmen students may hone their ability to describe occupational therapy by creating occupational therapy video commercials and sophomores apply activity analysis principles by creating adaptive equipment for individuals who require adaptations to complete a meaningful occupation. In the professional phase students learn to administer evaluations by administering them with clinical and non-clinical populations and learn the varied group leadership roles by designing and implementing groups with appropriate populations within the local community. A two-semester sequence of community engaged learning provides opportunities to learn more advanced needs assessment and program development for a ten-week extended period. Fieldwork and the doctoral experiential component extend this learning by doing to an even fuller and more skilled extent. Level I Fieldwork is integral to our program’s curriculum design and integrated into our two clinical reasoning courses and a psychosocial intervention course. Level II Fieldwork provides students with advanced opportunities to integrate theory and skills learned in the classroom within the clinical and community settings. Site-specific assignments and reflective online assignments ensure congruence of the fieldwork experience with their academic preparation. The advanced practitioner phase of the curriculum includes a 14-week Doctoral Capstone Experience where students develop in-depth knowledge in a focus area as outlined by ACOTE: clinical practice skills, research skills, administration, leadership, program and policy development, advocacy, education or theory development. The experiential component and capstone project directly connect occupational therapy practice with scholarship via the creation, implementation & evaluation of culminating projects. These continuous, sustained and in-depth hands on learning experiences are continuous, graded, and varied in depth and breadth and reflect our commitment to provide multiple avenues for students to practice the professional values, clinical reasoning, professional performance skills and application of professional knowledge consistent with the curriculum framework of our program.
Servant Leadership, Specialty Roles and Functions: A focus on service leadership is a constant focus within our university and our curriculum places a heavy emphasis on leadership, specialty roles, and innovation and entrepreneurship focused on creating occupational therapy roles where none may currently exist or are in an embryonic stage of development. One faculty mentor supports the Student Occupational Therapy Association and another serves as an advisor to our Pi Theta Epsilon honor society, which won the 2014 Pi Theta Epsilon Presidents Award in recognition for the establishment of a highly successful student-led journal club. Students in our program return to campus after completion of their two Level II Fieldwork experiences and participate in intensive seminars focused on synthesizing their experiences from fieldwork in relation to curriculum objectives, sharing their experience from fieldwork with peers and practitioners and considering specialty and other roles beyond a generalist. The month culminates with a widely attended local symposium for the campus and professional communities where the students deliver workshops on state-of-art practice learned from fieldwork. This tradition is highly valued by local professionals representing alumni, fieldwork educators and practitioners who are seeking accessible, quality professional development. Attendance grows annually for this event.

Curriculum Threads and Relationship to Curriculum Design

<table>
<thead>
<tr>
<th>CURRICULUM THREAD/COURSE TITLE</th>
<th>COURSE #/CREDITS</th>
<th>PHASE</th>
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<td>Anatomy &amp; Physiology II &amp; Lab</td>
<td>BIOL 209/210 (3/1)</td>
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</tr>
<tr>
<td>Anatomy &amp; Lab</td>
<td>HLTS 315/L (5)</td>
<td>Pre-professional</td>
</tr>
<tr>
<td>Foundations and Concepts of Occupational Therapy</td>
<td>OCCT 305 (3)</td>
<td>Pre-professional</td>
</tr>
<tr>
<td>Occupational Performance Throughout the Lifespan</td>
<td>OCCT 310 (3)</td>
<td>Pre-professional</td>
</tr>
<tr>
<td>Fundamentals of Practice</td>
<td>OCCT 416 (3)</td>
<td>Pre-professional</td>
</tr>
<tr>
<td>Neuroscience</td>
<td>HLTS 503 (4)</td>
<td>Professional</td>
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<tr>
<td>Occupational Performance Evaluation</td>
<td>OCCT 535 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>Human Motion and Movement</td>
<td>OCCT 537 (4)</td>
<td>Professional</td>
</tr>
<tr>
<td>Medical Conditions in OT</td>
<td>OCCT 548 (4)</td>
<td>Professional</td>
</tr>
<tr>
<td>Humans, Groups &amp; Occupations</td>
<td>OCCT 518 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>Person-Occupation-Environment Interaction &amp; Performance Across The Life-Span</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foundations and Concepts of Occupational Therapy</td>
<td>OCCT 305 (3)</td>
<td>Pre-professional</td>
</tr>
<tr>
<td>Fundamentals of Practice</td>
<td>OCCT 416 (3)</td>
<td>Pre-professional</td>
</tr>
<tr>
<td>Neurological &amp; Sensorimotor Function I</td>
<td>OCCT 519 (4)</td>
<td>Professional</td>
</tr>
<tr>
<td>Neurological &amp; Sensorimotor Function II</td>
<td>OCCT 520 (4)</td>
<td>Professional</td>
</tr>
<tr>
<td>Intervention Seminar</td>
<td>OCCT 522 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>Psychosocial Function &amp; Fieldwork II</td>
<td>OCCT 525 (4)</td>
<td>Professional</td>
</tr>
<tr>
<td>Biomechanical Function</td>
<td>OCCT 530 (4)</td>
<td>Professional</td>
</tr>
<tr>
<td>Occupational Performance Perspectives</td>
<td>OCCT 545 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>Community &amp; Population Health</td>
<td>OCCT 560 (2)</td>
<td>Professional</td>
</tr>
<tr>
<td>Instructional Learning Theory and Technology</td>
<td>OCCT 650 (3)</td>
<td>Advanced Professional</td>
</tr>
<tr>
<td>Healthcare Delivery &amp; Population Focused Services</td>
<td></td>
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<tr>
<td>Clinical Reasoning I &amp; FW I/II</td>
<td>OCCT 511 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>Clinical Reasoning II &amp; FW III</td>
<td>OCCT 512 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>Occupational Performance Perspectives</td>
<td>OCCT 545 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>Environmental Adaptations &amp; Rehabilitation Technology</td>
<td>OCCT 550 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>OT Leadership &amp; Administration</td>
<td>OCCT 561 (3)</td>
<td>Professional</td>
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<tr>
<td>Community &amp; Population Programming</td>
<td>OCCT 565 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>Designing Effective Programs</td>
<td>OCCT 625 (3)</td>
<td>Advanced Professional</td>
</tr>
<tr>
<td>Critical Analysis of Practice</td>
<td>OCCT 670 (3)</td>
<td>Advanced Professional</td>
</tr>
</tbody>
</table>
### Curriculum Goals
Graduates of the Duquesne University occupational therapy program are evaluated based on their proficiency at meeting all ACOTE standards for OTD educational programs. The overarching goal of the OTD curriculum is to prepare advanced occupational therapy practitioners who possess the knowledge, skills and attitudes requisite to the practice-scholar roles, habits and functions in their chosen practice contexts. The following student learning outcomes are used to measure the student's transformation into a scholar of practice and education, a leader-advocate within the profession, and a servant-leader for our communities:

**Applied Evidence Based Practice**
Graduates will search, review, analyze, synthesize and apply knowledge to inform best practice in occupational therapy and education.

**Outcomes Measurement**
Graduates will design and implement an evaluation plan using valid and reliable outcome measures to evaluate the effectiveness of a program, intervention or educational process.

**Critical Analysis of Practice**
Graduates will critically evaluate and apply theory to articulate and improve occupational therapy interventions.

**Policy Analysis and Advocacy**
Graduates will articulate issues of justice, and design and implement action plans that include an advocacy role to address health policies, health disparities, or health and quality of life of individuals or populations.

**Teaching, Learning and Educational Technology**
Graduates will apply learning theory to create, deliver and evaluate instructional units for professional education, clients and/or their families, selected populations, or the public and demonstrate the capacity to teach with technology in face-to-face and online environments.

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<table>
<thead>
<tr>
<th>Practice Scholarship</th>
<th>Semester(s)</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scholarship of Practice II</td>
<td>OCCT 532 (2)</td>
<td>Professional</td>
</tr>
<tr>
<td>Scholarship of Practice I</td>
<td>OCCT 533 (3)</td>
<td>Professional</td>
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<tr>
<td>Evidence Based Practice</td>
<td>OCCT 541W (3)</td>
<td>Professional</td>
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<tr>
<td>Fieldwork Proposal</td>
<td>OCCT 574W (1)</td>
<td>Professional</td>
</tr>
<tr>
<td>Research Project I, II &amp; III</td>
<td>OCCT 610, 611, 612 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>Applying Evidence to Practice</td>
<td>OCT 620 (3)</td>
<td>Advanced Professional</td>
</tr>
<tr>
<td>Practice Scholar Capstone I, II, III</td>
<td>OCT 635, 645, 655 (3)</td>
<td>Advanced Professional</td>
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</table>

<table>
<thead>
<tr>
<th>Community Engaged Learning, FW Education and DEC</th>
<th>Semester(s)</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Reasoning I &amp; FW I/II</td>
<td>OCCT 511 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>Clinical Reasoning II &amp; FW III</td>
<td>OCCT 512 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>Psychosocial Function &amp; Fieldwork II</td>
<td>OCCT 525 (4)</td>
<td>Professional</td>
</tr>
<tr>
<td>Level IV, V</td>
<td>OCCT 555, 556 (16)</td>
<td>Professional</td>
</tr>
<tr>
<td>Doctoral Capstone Experience</td>
<td>OCCT 640 (12)</td>
<td>Advanced Professional</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Servant Leadership, Specialty Roles and Functions</th>
<th>Semester(s)</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational Therapy Administration</td>
<td>OCCT 561 (3)</td>
<td>Professional</td>
</tr>
<tr>
<td>Clinical Seminar &amp; Lab</td>
<td>OCCT 552/L (2/0)</td>
<td>Professional</td>
</tr>
<tr>
<td>Leadership &amp; Lab</td>
<td>OCCT 562/L (2/0)</td>
<td>Professional</td>
</tr>
<tr>
<td>Visionary Leadership</td>
<td>OCCT 630 (2)</td>
<td>Advanced Professional</td>
</tr>
<tr>
<td>Transformative Leadership in Practice &amp; Education</td>
<td>OCCT 660 (2)</td>
<td>Advanced Professional</td>
</tr>
<tr>
<td>Critical Analysis of Practice</td>
<td>OCCT 670 (3)</td>
<td>Advanced Professional</td>
</tr>
</tbody>
</table>
**Program Development, Evaluation and Grant Writing**
Graduates will design, implement and evaluate occupation-based programs that address important and contemporary consumer needs and design professional, compelling grant proposals.

**Leadership**
Graduates will be prepared to assume leadership roles in their community and profession at local, national and international levels.

**Professional Writing**
Graduates will actively contribute discourses in occupational therapy and broader health venues by preparing and disseminating their scholarship in community, professional and/or interdisciplinary settings.

**Accreditation**
Duquesne University’s occupational therapy programs have consistently received accreditation for the maximum time periods. Information regarding the accreditation of this program can be obtained through the Accreditation Council for Occupational Therapy Education, 6116 Executive Boulevard, Suite 200, North Bethesda, MD 20852-4929 www.acoteonline.org

**Program Outcomes**

**Graduates’ performance on the NBCOT certification exam**
In academic year 2018-2019, 20/22 MSOT graduates (90.91%) successfully passed the exam on 1st attempt, 100% of DU test takers passed exam on subsequent attempts; 6/6 OTD students (100% passed the exam on 1st attempt,) Overall 5-year average of MSOT & OTD NBCOT pass rate for 1st time test takers is 93.03%. The national average pass rate for the last 3 years (2016-2018) is 72.33%. Upon successful completion of our program, students are eligible to take the national occupational therapy certification examination. Successful completion of this certification examination allows a person to be registered in the U.S. as an occupational therapist and to carry the credentials, O.T.R. This exam is offered independently through the National Board for Certification in Occupational Therapy (NBCOT) Performance on the national OT certification examination is one means of demonstrating a program's quality. For the five most recent academic years (2015-2019), the performance of the graduates of Duquesne University’s occupational therapy program on NBCOT certification examination are as follows:

**MSOT Outcomes:**

<table>
<thead>
<tr>
<th>Year</th>
<th># of MSOT Graduates</th>
<th># of 1st time test takers</th>
<th># of 1st time test takers passing on 1st attempt</th>
<th>% of 1st time test takers passing on 1st attempt</th>
<th>% of all DU test takers who passed the exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>33</td>
<td>33</td>
<td>33</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>2016</td>
<td>23</td>
<td>23</td>
<td>21</td>
<td>91.3%</td>
<td>100%</td>
</tr>
<tr>
<td>2017*</td>
<td>29</td>
<td>28</td>
<td>25</td>
<td>89.29%</td>
<td>100%</td>
</tr>
<tr>
<td>2018</td>
<td>29</td>
<td>29</td>
<td>26</td>
<td>89.66%</td>
<td>100%</td>
</tr>
<tr>
<td>2019</td>
<td>22</td>
<td>22</td>
<td>20</td>
<td>90.91%</td>
<td>100%</td>
</tr>
</tbody>
</table>
### Yearly Certification Exam Outcomes

<table>
<thead>
<tr>
<th>Year</th>
<th># of MSOT Graduates</th>
<th># of 1st time test takers</th>
<th># of 1st time test takers passing on 1st attempt</th>
<th>% of 1st time test takers passing on 1st attempt</th>
<th>% of all DU test takers who passed the exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL 5-Year</td>
<td>136</td>
<td>135</td>
<td>125</td>
<td>92.59%</td>
<td>100%</td>
</tr>
</tbody>
</table>

*2017 includes one student who did not take the exam. Updated: June 2019

### OTD Outcomes

<table>
<thead>
<tr>
<th>Year</th>
<th># of OTD Graduates (December)*</th>
<th># of 1st time test takers</th>
<th># of 1st time test takers passing on 1st attempt</th>
<th>% of 1st time test takers passing on 1st attempt</th>
<th>% of all DU test takers who passed the exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016**</td>
<td>5</td>
<td>5</td>
<td>5</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>2017</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>2018</td>
<td>6</td>
<td>6</td>
<td>6</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>TOTAL 3-Year</td>
<td>13</td>
<td>13</td>
<td>13</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

**OTD program first graduating class was 2016. Updated: February 2019

Prior to graduation, the occupational therapy department provides resources to support students' preparation for the certification examination. When a graduate of our program does not successfully pass the exam the first time, the faculty initiate dialogue with the student and offers to review score reports and define re-testing strategies. Every graduate who has not passed on the first attempt has passed the certification exam on a subsequent attempt.

Program results from the National Board for Certification in Occupational Therapy (NBCOT) can be found online at [https://www.nbcot.org/en/educators/home#schoolperformance](https://www.nbcot.org/en/educators/home#schoolperformance).

The NBCOT Board of Directors has approved the implementation of background checks as part of the exam process. This enhancement offers the unique opportunity to apply a national standard to all entry-level practitioners in support of NBCOT’s mission of public protection.

Background checks will be completed as part of the exam application process for all first-time applicants beginning January 1, 2018. Students and prospective students are advised that a felony conviction may affect one’s ability to sit for the certification examination or attain state licensure.

**Fieldwork education and doctoral capstone experience performance**

In academic year 2018 - 2019, all students who enrolled in a level I or II fieldwork experience, and doctoral capstone experience (OTD students only) received passing scores and received a C or better on all FW/ experiential components of the program.

**Employment Statistics of Alumni**

Data from exit surveys reflect that in the past 3 graduating classes 17% completed job interviews during their clinical fieldwork. Roughly 1/2 of these graduates (56.2%) had either accepted a job or were considering a job offer before graduation. Most students, however, reported that their focus was on preparing for taking the national certification
exam. The vast majority (99%) of alumni responding to employment surveys reported that they took their first job within 1-6 months of graduation.

**FACILITIES**

**Access to RSHS and Libermann:** The RSHS building is open throughout the day, evenings, and posted hours on weekends. All occupational therapy faculty offices and most teaching and research laboratories are in this building. A new occupational therapy lab was designed and is located in Libermann Hall located at 600 Fifth Ave Pittsburgh, PA 15231. Teaching and lab spaces are locked after each class session. At the discretion of the faculty, teaching and research laboratories can be made available to students outside of class time.

**Behavior and Maintenance of RSHS Facilities:** As a school of health sciences, the RSHS will not condone the use of any tobacco products, or the abuse of alcohol or controlled substances. Therefore, smoking and chewing tobacco, alcohol consumption, and illegal drug use are not permitted in any area within the Health Sciences Building or the Health Sciences area within Fisher Hall and Libermann Hall.

All faculty, staff, and students who utilize the RSHS facilities and equipment are expected to treat those facilities and equipment with respect. Students must refrain from utilizing any equipment or facility without the appropriate supervision or permission of a RSHS faculty or staff member. All equipment should be cleaned and returned to the location from which it was taken in the same condition as it was at the time of use. Departmental permission is needed to access RSHS facilities outside of regular course meeting times. Behaviors or actions that detract from the appearance of the building, appearance or function of equipment, or the integrity of its academic programs will not be tolerated and may be cause for dismissal from the RSHS.

**Mailboxes:** Student mailboxes are located on the 2nd floor of RSHS. Students can use these to communicate with each other, as well as to receive general departmental communications. Faculty and staff mailboxes are located in the Occupational Therapy Department Faculty Suite, Room 227. Students may not remove items from any faculty or staff mailbox or from any other student's mailbox.

**Occupational Therapy Bulletin Boards:** Informational bulletin boards are located in the hall outside the occupational therapy faculty suite on the second floor of RSHS. Specific bulletin boards are maintained to announce general information, fieldwork and class information. These bulletin boards are used to post a variety of items of special interest to OT students including faculty publications, fieldwork updates, job openings, social and scholarly events, scholarship and grant competition announcements, etc. Students should review these boards periodically.

**Occupational Therapy Faculty Suite:** The occupational therapy department suite has many functions, but it is primarily a working space for faculty. Students are asked to monitor their use of this space to ensure faculty and staff can effectively use the office space as a working environment and where students can get answers to questions or their needs met.

**Xerox Machines:** Xerox machines can be found on the fourth and fifth floors of the University Library. Photocopying machines are also available to RSHS students on the first and second floors of the Health Sciences Building and the fourth floor of Fisher Hall.

**Student Lockers:** The RSHS has men's and women's locker facilities located on the second floor of the Health Sciences Building. Students enrolled in the professional/accredited phase will be assigned by the Dean's office one locker for their personal use. Students registered for Anatomy will be assigned lockers located on the second and third floor back hallways. Students must supply their own locks. Students must vacate their lockers at the conclusion
of their Anatomy course; graduating students must vacate their lockers prior to final graduation.

Use of Assessment Resources and Lab Equipment: The department maintains a resource library of
commonly used occupational therapy assessments. Careful use and responsibility for clinical materials (including
but not limited to: assessment tools, adaptive equipment, therapeutic devices, etc.) are a professional responsibility
of a student. If the student is assigned an evaluation assessment tool or adaptive equipment/devices, all
materials/forms should be ‘checked out’ via sign-out list, per course instructor. All materials/forms must be returned
to the instructor for check in prior to the final exam. Each student will be responsible for the care of the assessment
and will be financially liable for lost or significantly damaged materials. The RSHS "I" grade policy in the student
handbook will be implemented and the student's final grade will not be changed from an “I” until replacement costs
are submitted to the department.

Use of Occupational Therapy Classroom Space: Occupational therapy class and lab sessions are routinely
held in RSHS 240, RSHS 233 and Libermann G-103. Classrooms are locked when not in use. A student or group of
students may request access to classroom space from their instructor when classes are not in session. The student
and instructor granting access are both responsible for ensuring the space is secured appropriately after use and are
responsible for any losses incurred due to failure to secure the space after use. Other university departments and
students often make reservations to use this room through the department office staff in rooms 210 and 234 Rangos.

Use of Occupational Therapy Kitchen Spaces: The kitchen spaces in Rangos 240 and in Libermann G-103
are governed by the following regulations:

No food is to be prepared in the lab, except during classes when a class activity is pre-approved by a faculty member
who requires use of these materials as part of instruction or during a pre-approved student activity. No kitchen
utensils, devices, or appliances are to be used without an instructor's approval.

All used items are to be cleaned and stored before leaving the kitchen. Both the student group who used the utensils
and the faculty member are responsible for ensuring all kitchen items are cleaned and stored before leaving the lab.
Arrangements for any food items left in the refrigerator can be made with the designated faculty member and will
automatically be disposed of if not clearly marked or if left for more than one week.
Students may bring in beverages or items, which are self-contained and do not require the use of the kitchen and
its resources to prepare, warm, refrigerate, serve, consume or store. Students must dispose of all trash properly. All
table and counter surfaces must be wiped down before leaving.

For all non-class special events where food is to be served, arrangements must be made with your faculty advisor,
class instructor, or the department chair to store, prepare and serve food from the kitchen. You will need a plan for
returning the kitchen area to its original condition and for disposing of all unwanted food.

GENERAL DEPARTMENT PROCEDURES

Appointments: All faculty post regular office hours. If you need to contact a faculty member, students may
contact the instructor using e-mail. Appointments to meet with the department chair are made through the
department administrative assistant.

Canceling Classes: If weather conditions are such that travel is not advisable, you should use your discretion in
making the decision regarding coming to class. If a class is held, the student is responsible for missed materials. The
campus seldom shuts down and if it does, this is announced on local radio and television stations. Only your
instructor can cancel a class otherwise.
Campus Emergency Procedures: To ensure a safe environment for all students, employees and visitors while on the premises of Duquesne University, the University has adopted Emergency Evacuation Guidelines, which outline the procedures to be implemented in the event an evacuation of any building on campus is necessary.

If you see any criminal activity, medical or other emergency on campus notify the Department of Public Safety by calling the 24-hour special emergency number:

**Emergency Number: 412.396.COPS (2677)**

For more information, visit the University’s Campus safety website: [http://www.duq.edu/life-at-duquesne/campus-safety](http://www.duq.edu/life-at-duquesne/campus-safety)

Dress Code: All students are expected to dress appropriately for classes, labs and off campus assignments including community engaged learning, fieldwork observations and the doctoral experiential component. Students’ attire should demonstrate respect for themselves, others, Duquesne University, your profession and the specific learning context. You are expected to dress and be groomed professionally in a manner suitable to your learning environment and the nature of the work involved. Nametags should be worn during all fieldwork education, community engaged learning, and site visits, etc. unless otherwise directed. Each faculty, fieldwork educator, or supervisor will designate standards of dress required by the specific settings. Students will follow all applicable dress codes with the code of their site superseding all other directives. Professional presentation includes appropriate attire, demeanor, cleanliness, and interactions/communication with patients, faculty, guests, and supervisors. Specific dress code expectations are delineated in the Professional Dress Code Policy found in Appendix A.

Graduate Student Photo I.D. Cards: When students become graduate students, they become eligible to receive new graduate student I.D. cards at no additional cost. These new cards enable students to use local college and university libraries for the purpose of research. If students elect to receive new I.D. cards, they must contact DU Card Services (412-396-6191) or ducard@duq.edu.

Student Workers: A limited number of student worker positions are periodically available for full time occupational therapy students. Student positions typically offer an hourly rate. A typical workload is 5-10 hours per week. Announcements of student positions are shared via email when available.

Orientation: The Department of Occupational Therapy sponsors a mandatory professional phase student orientation at the start of the spring semester to introduce students to the requirements and expectations of the professional phase. The Orientation provides an overview of the professional phase of the program and reviews the program requirements in regard to academic progress, dress, and the preparation for and assignment of clinical education.

Personal Guidance: Academic, personal, and vocational counseling are available to all students at Duquesne University. Several offices such as the Center for Student Wellbeing, Freshman Development, Disability Services, DU CARES (Creating Awareness and a Renewed Environment for Students; alcohol and substance abuse) and Office of International Programs (international studies), provide issue specific support and education to students. Students who need assistance with these problems are referred to these services according to institutional policy. Confidentiality of the processes is ensured.
Religious Holidays: Information concerning specific religious holidays observed by the university is found in the Academic Calendar published each semester. The faculty makes every effort to avoid scheduling examinations or requiring that student projects be turned in or completed on religious holidays. Students who wish to observe their religious holidays which are not official university holidays should notify the faculty member by the 10th day of each new semester. Faculty shall make every reasonable effort to honor the request.

Scholarships and Loans: All students are strongly encouraged to explore their eligibility and options for financial aid, as well as seek outside sources of aid. Libraries, guidance offices, and community, state and federal agencies are all good sources of further information on financial assistance. Students are also encouraged to consult POTA, AOTA and AOTF. Information on the various financial aid opportunities available to RSHS students is available through the Financial Aid Office located on the ground floor of the Administration Building. The Office can be reached at 412.396.6607.

Student Input, Suggestions and Complaints: The department values student input, suggestions and complaints to consider enhancements and modifications in department operations that will result in improving or modifying the students’ academic experience. The goal of this process is to address student complaints effectively and efficiently as possible while ensuring that student, faculty, staff and department rights, responsibilities, and integrity and civility are upheld. The process for dealing with a complaint includes the sequential steps that vary according to the type of complaint. See Appendix J for a complete description of the policy for student input, suggestions and complaints. See Appendix B for more information.

Telephone Calls: No personal calls are to be received while in class, during clinical training, or during community learning events. Cell phones should be turned off or to vibrate during class and should only be checked during breaks or after class. Text messaging during class or learning events in the clinic or community will not be tolerated. Students may not use the office telephones without the express permission of a faculty member.

PROFESSIONAL PHASE ACADEMIC POLICIES

The requirements and expectations of the professional phase are contained in the John G. Rangos, Sr. School of Health Sciences Academic Student Handbook. Students in the professional phase and advanced practitioner phase must abide by academic and professional behavior policies defined in the RSHS student handbook as well as RSHS Performance Indicators, RSHS Pre-Clinical Health Requirements, and the Department of Occupational Therapy Policy on Professional Behavior. Professional phase students in the Department of Occupational Therapy are required to abide by all University and RSHS policies regarding due process for student misconduct, whether academic or otherwise. Students have all the rights and privileges as outlined in this Handbook, University catalog, and the Student Handbook and Code of Student Rights, Responsibilities and Conduct.

Academic Integrity

It is the student’s responsibility to maintain academic integrity regarding class assignments, examinations and all other course requirements. Charges of academic dishonesty will be investigated thoroughly. Cheating, plagiarism, and knowingly assisting other student(s) who violate academic integrity will not be tolerated. What constitutes violation of academic integrity, the University's response to those violations, and student rights of appeal in regard to charges of such violations, are further explained in the University Student Handbook and the Student Expectations, Rights and Responsibilities published by the University and the Academic Integrity Policy. See Appendix C for more information on communicating, educating and learning about Academic Integrity.
RSHS Academic Integrity Policy

As an essential element of the Duquesne University mission to educate the mind, heart, and spirit, members of the University dedicate themselves to upholding the highest moral and ethical principles. Since the quest for truth and understanding must be conducted in an honest manner, upholding Academic Integrity is a responsibility and obligation of all members of the University community, including faculty, administration, staff, and students. Students are responsible for maintaining Academic Integrity throughout class assignments, examinations, and all other requirements related to their courses of study.

Individuals who seek or receive credit for intellectual work that is not their own violate Academic Integrity, as do individuals who falsify or ignore data to reach a predetermined conclusion or who destroy or contaminate another person’s data or intellectual property. All violations of Academic Integrity are reported to the RSHS Dean and the University (Associate Vice-President for Academic Affairs) and become part of a student’s University record. Violations of Academic Integrity may include, but are not limited to, the following:

Cheating:

- Cheating on quizzes, tests, examinations, or projects may include giving, receiving, or using unauthorized assistance or material. Unauthorized material may include, but is not limited to, notes or other written documents as well as wireless communication or computing devices, calculators, formulas, computers, computer programs, software, data, or text.
- In other contexts (e.g., group projects, labs), cheating may include forms of deception intended to affect grades or other outcomes.
- Cheating may include, but is not limited to, student use of sources beyond those authorized by the instructor in fulfilling assignments such as writing papers, preparing reports, developing course projects, or solving problems.
- Cheating may also include student possession, without permission, of tests or other academic material belonging to a member of the University faculty or staff.

Plagiarism:

- Plagiarism in papers or other written, electronic, or oral work (including essays, research papers, theses, dissertations, presentations, class projects, or work for publication) may include, but is not limited to, the use—whether by summary, paraphrase, copying, direct quotation, or a combination of such methods—of the published or unpublished work or the specific ideas of another person or source without full, clear, and specific acknowledgment (including the use of quotation marks or other conventions to indicate the source’s language).
- Plagiarism may include the submission of material from sources accessed through the Internet or by other means, or from other individuals, without proper attribution.
- Plagiarism may include the submission of a paper prepared in whole or in part by another person or persons or an agency or entity engaged in providing or selling term papers or other academic materials. Plagiarism may also include the submission, without the instructor’s approval, of work submitted for credit in another course.

Deceit in Academic Matters:

- Deceit may include, but is not limited to, deliberately furnishing false information to or withholding relevant information from any University instructor, official, or office.

Misuse of Documents:

- Misuse may include, but is not limited to, forgery, alteration, or improper use of any University document, record, or instrument of identification (written or computerized).
- Misappropriation, mutilation, or destruction of tangible assets such as books, journals, electronic data, and related resources available in libraries and offices.
Assistant in the Violation of Academic Integrity:

• Assistance may include, but is not limited to, any knowing facilitation of intellectual dishonesty by another person or persons.

Note: Violations of academic integrity—whether or not they are the result of a deliberate intent to deceive—are subject to academic sanctions, including (but not limited to) lowered grade or failure on an assignment; lowered course grade; course failure; suspension or dismissal from a course; suspension or dismissal from the College or School or from the University; and/or revocation of a degree.

Student Conduct and Disciplinary Action: Duquesne University and the RSHS require student conduct to reflect the values and mission of the University. Rules and regulations of misconduct, disciplinary sanctions, judicial policies and student rights of appeal regarding charges of conduct violations, are explained in the Student Handbook, Code of Student Rights, Responsibilities and Conduct, the University Academic Integrity Policy and the Rangos Student Code of Conduct. When a student has violated a policy or procedure, a confidential hearing will be held by the Director of University Judicial Affairs. A sanction will be determined by the Director after hearing from all parties involved. Disciplinary matters are generally not handled by the individual schools. Legal technicalities are minimized and emphasis is placed on the rights and responsibilities that exist between the student and the University.

Should a student be arrested and/or convicted of a crime before or during the time he/she is preparing to enter a profession, a criminal record may have further implications on the student's ability to practice, sit for professional examinations, or be placed in a clinical/fieldwork experience of choice. Many of the disciplines in the School are required by their clinical/fieldwork partners to have students provide proof or validation from the state and federal governments of a student's lack of a criminal record to be eligible for certification, licensure or registration examinations, as well as working with children and confidential records. Students are encouraged to check with their respective disciplines’ state and national credentialing bodies, as well as the department’s Chair and/or Clinical Coordinator for more information.

Academic Standards/Requirements

Student performances are governed by the definitions in the RSHS Academic Student Handbook.

Successful completion of all required RSHS pre-professional course work with a ‘C’ or better, a minimum 3.0 cumulative GPA in the following pre-requisite science courses: Biology I with lab, Physics for Life Sciences I with lab, Introduction to Biostatistics, Biostatistics II, Introduction to Psychology, Anatomy and Physiology I & II with labs, Anatomy and Anatomy Lab, and a minimum 3.0 cumulative GPA for all required pre-professional course work. Advanced Placement is not accepted for any pre-requisite course except Introduction to Psychology. All pre-requisite science courses completed at another college or university must be completed at 4-year academic institution. Transferred courses will be included in the credit total and RSHS GPA calculation.

Joint Authorship

Adapted from policy developed by the UIC Department of Occupational Therapy, Chicago, Illinois - Not all authorship is equal. Generally the first author is recognized as the senior author, i.e., the person who had major responsibility for the published contents. Authorship can be diluted if the list of contributors is excessive; therefore, authorship should be limited to those with significant roles. Some activities that generally do not warrant authorship are: commentary on a draft of a paper; one or two consultations to a project; editorial assistance which focuses on grammar, punctuation, and composition; compensated data collection or limited voluntary data collection; and
compensated statistical analysis. Such contributions are generally noted in an acknowledgment. Authorship should never be used as a reward for limited assistance to a project; it should always be based on a negotiated significant role in the process. The following are some guidelines which should be helpful in determining authorship:

- The first author is someone who does all or many of the following: initiation of the idea; determination of the method to be used; making major decisions concerning variables and control of intervening variables; determining methods of data reduction; making interpretation of results; assumes a major role in writing the paper and assumes responsibility for communicating between authors, with the journal editor, and for any revisions following review and for submission of a flawless final manuscript and galley editing if it is used by the journal. (Note: In the event that two people equally shared this first level of responsibility, alphabetical order is the protocol for entry of names.)
- The second author is someone who may do some of the things noted above and who typically assists in the development of ideas, method and instrumentation and who assists in data reduction and in writing.
- The third author may be someone who assists or carries out data collection of a significant portion of the data or who makes a substantial contribution to one or more phases of the project such as statistical analysis and interpretation. (Note: In the event that authors other than the first author have made equal contributions, alphabetical order is the protocol for order of entry of names.)
- In the event that the original negotiated first author chooses not to assume his/her responsibility to pursue publication in good faith within one (1) year of completion of the project, other persons who originally negotiated to be the second or third authors may assume this responsibility. In any case, the first author’s names should be included in the publication, although first authorship may be renegotiated.
- Everyone whose name appears on a published article should have the opportunity to view and approve the final draft unless he/she explicitly designates the responsibility to a co-author(s).

Class Attendance and Scheduling

The Department of Occupational Therapy follows the RSHS policy on class attendance which states: “Attendance in didactic, laboratory and clinical education courses is an essential part of the professional/accredited phase/major and will be a strong factor in the assignment of grades. Students are expected to be punctual and prepared for all courses. As students in a professional program, attendance at other relevant learning activities is required. Due to special events, clinical education and other learning opportunities, students’ schedules may vary week to week. A typical schedule will be given to students during registration periods. Students are expected not to schedule other activities, work or appointments between 8:00 a.m. and 5:00 p.m., Monday through Friday, including summers. Some courses or clinical hours may be required on weekends.”

In addition to the RSHS policies, the Department of Occupational Therapy adds this policy: Attendance is an essential and required part of the professional phase. Work and outside obligations are to be managed by the student in a way that does not hinder or limit educational expectations. Work, medical, dental or other appointments are not to be scheduled during class time. Students who are unable to attend class because of serious illness, hospitalization, a serious accident, bereavement, or other extenuating circumstance are responsible for notifying the instructor of the course. Students are expected to supply any required written verifications within 48 hours and before returning to class. Repeated absences (3 or more during Fall & Spring semesters and 2 or more during summer semester) and/or frequent tardiness to class or community-based sessions (3 or more during Fall & Spring semesters and 2 or more during summer semester) will result in a deduction of up to 10% of a student’s total course grade and each subsequent absence will result in an additional 2% deduction. Exceptions to this rule will be determined by the instructor based on the nature of the extenuating circumstance and documentation provided.

In the pre-professional and professional phases of the program, students participate in community engaged learning experiences that occur off campus and which may extend into the early evening hours. In the professional phase of
the program, students will participate in clinical education experiences that may include evening and weekend schedules. In the advanced practitioner phase, students will be required to complete a fourteen-week Doctoral Experiential Component. Special learning events may be added throughout the curriculum. Students are provided prior announcement and are required to attend. Flexibility in changing work schedules and appointments is expected. Attendance policy and procedures are consistently delineated in all occupational therapy syllabi.

The Department strategically plans each cohort’s course schedule, which does allow for some flexibility and unopposed time outside of the classroom – but this is also intentional to support opportunities for student-to-student collaboration for group work and other curricular expectations such as required community engaged learning labs, attending meetings, faculty office hours & faculty mentor meetings etc... Please keep this in mind as you balance future non-academic commitments throughout all semesters.

Unopposed time may be scheduled by faculty as needed throughout the semester. Please refer to course syllabi for specific dates.

Change in Health Status

In the event of a change in health that causes a student to be either temporarily or permanently limited in his/her abilities to perform as defined in the Technical Standards and Performance Indicators (Appendix D) in the classroom, laboratory, and/or clinical setting, the student is required to follow the Change in Health Status Procedure (Appendix E). If the change in health status does not result in a change in the student’s ability to perform the Technical Standards, then no action is required. This Change in Health Status Procedure must also be followed when a student wishes to return to full participation after having been placed in a restricted or accommodated situation. Failure to follow these procedures will delay the changes needed to re-integrate a student into his/her appropriate and safe level of participation and may impact the students’ program completion date.

Confidentiality of Student Records

A student’s personal information and academic record is maintained and monitored confidentially by the University. A student’s personal information or academic record may be revealed only in accordance with the Family Educational Rights and Privacy Act (FERPA) of 1974 (Public Law 93-380, Section 438, as amended). Students wishing to waive their FERPA rights relating to the release of academic information (e.g., granting parents access to academic information) or to request nondisclosure of directory information must do so through the DORI Self-Service Banner: Personal Information > Answer a Survey > FERPA Waivers and Nondisclosure. Information provided by the student will remain in effect until it is changed by the student. Once a student separates from the University, only requests for nondisclosure of Directory Information remain in effect. Learn more about FERPA.

Course Difficulty

Students experiencing difficulty in any of their courses, especially if faced with the possibility of earning an unacceptable grade in a required course, are expected to take the initiative and seek assistance at the first sign of difficulty. Students should speak with their instructors, make use of tutorial assistance, and consult with their academic advisor and faculty mentors as soon as possible. It is the student's responsibility to identify possible problems in course completion and to seek whatever assistance he/she needs to successfully complete the course. Any student concerned about a particular course, course grade or teaching/testing methods should first discuss his/her concerns with the individual instructor(s). Should the student feel his/her concerns are not resolved after that point, he/she should discuss them with the department chair. If the student feels that his/her concerns were not resolved after meeting with the department chair, he/she should schedule an appointment with the Dean.
Grading Policy

The Department of Occupational Therapy uses the plus/minus system. The department grading policy follows the RSHS policy for grading course work and rating academic performance.

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Final course grades are not rounded up.

Group Project Grading Policy

Unless otherwise specified in the assignment guidelines, group assignments receive one total group grade with each member of the team receiving an identical grade. Team members may propose an alternative distribution of the group assignment grade. Proposals for an alternative grade distribution must be made in writing. The proposal should specifically define an alternative distribution of the group assignment grade and provide a rationale for the proposed change. After the group presents their proposal to the instructor, the instructor will determine the final distribution of the group assignment grades. The instructor will render a final decision and notify group members.

Students Participating in Inter-Collegiate Activities

Students entering the professional phase should check with the department chair to ensure that all professional requirements can be met. Directors of intercollegiate activities, such as athletics, are expected to make every effort to schedule events in such a way as to minimize their effect on the academic programs of the participating students. Travel and league scheduling, however, may necessitate that students miss class from time to time. When engaged in a University intercollegiate activity, the student represents Duquesne University. Such absences shall be excused, but students are required to follow the procedures below in order to receive credit for any missed work:

1. Students must notify the faculty member of all regularly scheduled events at least one week prior to their anticipated absence. The appropriate forms must be completed and submitted at that time.

2. Students are responsible for all work covered during their absence.
3. In the event that participation in a University approved intercollegiate activity will result in a missed examination or assignment deadline, students are expected to follow the procedure outlined above. Although the absence is excused, students will be expected to make up the exam or submit the assignment at a time and place so designated by the instructor.

4. In the event of participation in intercollegiate athletics activities that conflict with required clinical education experiences, all attempts for accommodations will be taken. However, in some cases students may be required to seek a different clinical assignment or delay participation in clinical education until such time that the commitment to athletics has ended. This delay may necessitate the student dropping back one year in the professional/accredited phase of his or her program.

Students with Disabilities

The department of occupational therapy encourages applications from qualified students with disabilities and endeavors to ensure that all students are treated fairly and that reasonable accommodations can be made for students with disabilities. Students considering a request for accommodations are encouraged to consult with the Disability Services office. The student who is seeking accommodations is responsible for securing written documentation of their disability and to register with the Disability Services, Room 309 Union. Disability Services will review the student's request for accommodation and will contact the department of occupational therapy with a statement of accommodation needs. The student is to request accommodations by their instructor within the first week of each semester. Accommodations cannot be implemented without official written acknowledgment from the Disability Services Office.

Pre-Clinical Health Requirements

Prior to entry into the professional phase, all RSHS students must comply with the pre-professional health requirements established by the Centers for Disease Control (CDC) and the University Health Service. However, RSHS students may be asked to provide documentation indicating ongoing health status (e.g., current PPD) AND complete additional health requirements, including the ability to meet the performance indicators/technical standards, in order to meet the standards of a specific clinical site. Prior to entering in the professional phase students will be required to create a profile with CastleBranch to demonstrate compliance with pre-clinical health and security requirements.

HIPAA

The Health Insurance Portability and Accountability Act (HIPAA) is a Federal Law governing the privacy, confidentiality, and security of oral, written, and electronic patient health information. This law requires that Duquesne University employ a Compliance Officer and train all personnel, including students who will have contact with patient health information. The University Compliance Chair is Joan M. Kiel, PhD, CHPS, Professor in the Department of Health Management Systems of the Rangos School of Health Sciences. All students will receive training on HIPAA Privacy and Security in addition to the HIPAA Omnibus Rule and HITECH. Students will be given a certificate of completion and an adherence form, which is to be submitted to their clinical practice sites. Students who have not passed the training cannot participate in clinical education. HIPAA is a Federal Law; therefore, any breach of confidentiality, whether intentional or unintentional, can result in both civil and criminal penalties in addition to University sanctions. See the University’s HIPAA policy for more details.
Human Participant Protections for Research Purpose Education

All students engaged in research that involves human subjects must obtain verification that they have completed the University required education on protection of human subjects. This verification must be obtained before engaging in any data collection from research subjects. See the Duquesne University Office of Research Human Subject Research Policies and Procedures for more details. In addition, all occupational therapy students complete the NIH On-line IRB training and receive a certificate of completion in the fall semester of the 4th year during the Principles of Research course, concurrently with the first of their two research courses.

Health Insurance

All students must provide evidence of health insurance. All full-time Undergraduate, Graduate, and International students are required to login to our student health insurance portal to either select medical insurance or provide verifiable proof of coverage. All full-time students who do not login to our student health insurance portal to provide the required information will automatically be enrolled in the basic Student Health Insurance plan. See the Mandatory Student Health Insurance Plan for further instructions.

Professional Liability Insurance

Professional liability insurance will be provided by Duquesne University at no additional cost. Individual students do not need to seek liability insurance on their own to fulfill clinical education. This insurance covers students on University business (e.g., clinical education assignments). However, any student who is employed or is working external to the clinical placement site is not covered under the University's Professional Liability Insurance and should purchase personal liability insurance. Students should be aware that when they become professional practitioners, personal professional liability insurance may be necessary.

ACADEMIC ADVISEMENT AND PROFESSIONAL DEVELOPMENT

Academic advisors in the Dean’s Office and occupational therapy faculty mentors welcome contact with students and encourage them to seek assistance whenever necessary. They prefer to see students by appointment to ensure that proper time can be spent in addressing their concerns. However, faculty mentors are willing to meet students without appointments when necessary.

Membership in Professional Associations

Students enrolled in the professional phase of their respective programs are required to join The American Occupational Therapy Association as student members and are strongly encouraged to join the Pennsylvania Occupational Therapy Association.

Occupational Therapy Code of Ethics

Faculty, students and staff are all expected to uphold all of the rights, responsibilities and ethical behaviors of the University and the Code of Ethics for the Occupational Therapy Profession. Representatives of the RSHS student body also generated a code of conduct that list expectations for professional and ethically.
Role of Academic Advisor

The Academic Advisor in the Dean’s Office completes centralized tasks related to maintaining official student records, pre-professional and professional advising for course registration and generic academic progress, referrals to academic support resources, including tutoring and recommendation for general academic and personal support services. The Academic Advisor from the Dean’s Office attends department student orientation sessions and works collaboratively with the Department Chair and faculty regarding assisting individual students with special needs.

Role of Faculty Mentor

All students are assigned an occupational therapy faculty mentor once they enter the occupational therapy program as freshman or transfer student. Every semester, students are expected to initiate a meeting with their faculty mentor, no less than one time a semester. The mentor-mentee relationship is intended to guide students’ academic performance and provide mentoring to promote individual professional development as needed. Faculty mentors serve as a resource to support professional socialization in the occupational therapy profession and work with the students to identify and address course difficulties, explore professional issues and ensure satisfactory progress in both didactic and clinical course work. Students may see their faculty mentor during posted office hours or by appointment. In addition, the Program Director or any faculty member can provide academic guidance upon request or need. The roles and responsibilities of the OT Faculty Mentor are as follows:

- Facilitates a successful educational experience by working with the student and other faculty to address development of professional behaviors, by soliciting feedback from faculty and/or sharing pertinent information with faculty when necessary, and by periodically reviewing professional development with the student.
- Promotes professional development (See Appendix F) by assisting students with self-assessment of professional behavior and setting goals to address areas needing development, and discussing goal attainment.
- Keeps a written record of concerns, goals, actions and outcomes relevant to the student’s academic performance, professional behavior and professional development.
- Monitors the student’s academic performance via grade reports and faculty feedback, and assists the student with problem solving when personal and/or academic problems effect on academic performance.
- Assists students with locating on-campus and off-campus resources to address academic or personal concerns (e.g., tutoring, counseling, legal services).
REFERENCES


APPENDIX A - Professional Dress Code Policy

Professional Dress Code: All students enrolled in the pre-professional phase, professional phase, and sponsored course work are expected to dress appropriately for classes, labs and off campus assignments including community engaged learning, fieldwork, and observations. Students’ attire should demonstrate respect for themselves, others, Duquesne University, your profession and the specific learning context. You are expected to dress and be groomed professionally in a manner suitable to your learning environment and the nature of the work involved. Nametags should be worn during all fieldwork education, community engaged learning, and site visits, etc. unless otherwise directed. Each faculty, fieldwork educator, or supervisor will designate standards of dress required by the specific settings. Students will follow all applicable dress codes with the code of their site superseding all other directives. Professional presentation includes appropriate attire, demeanor, cleanliness, and interactions/communication with clients/patients, faculty, guests, and supervisors. The following are specific dress code expectations:

1. All students will wear the Department clothing when required by faculty. This will include:
   a. The DU OT shirt with official logo
   b. Khaki pants of appropriate length worn on or above the hips. Belt may be requested to secure at the waist.
2. To ensure client/patient and student safety, the following jewelry items are not permitted to be worn during educational experiences: nose rings, eyebrow rings, tongue piercings, lip rings, long necklaces, excessive finger rings, excessive earrings, excessive bracelets, and also excessive ear piercings (more than 2 per ear). No baseball caps or hats are to be worn inside the buildings or classrooms.
3. Personal hygiene requirements include the following: hair must be clean, out of the eyes, and unobtrusive while performing occupational therapy duties. Long hair should be tied back so as to not interfere with performance. Hands and fingernails should be clean at all times, and fingernails must be at an appropriate length as to not harm client/patients or serve as a potential health hazard. Some sites do not permit artificial nails as they are a health hazard.
4. When placed at a site outside of Duquesne University, please check with the fieldwork instructor or site supervisor to determine appropriate attire. If there is no dress code required at that site, you must follow the policy set by Duquesne University’s Department of Occupational Therapy.
5. Appropriate socks and shoes must be worn at all times. In most cases an athletic shoe or work shoe that securely fits is advisable for practice. No sandals or flip flops permitted. High heels are only advisable when business dress is required and no intervention work or services are being engaged.
6. Many sites do not permit perfume or other scented body preparations due to allergies. Students are discouraged from using perfume, etc. during off campus activities.
7. Appropriate attire must be professional at all times and may not reveal undergarments or body areas that would be considered inappropriate in a professional environment. Ripped or patched clothing, skin tight, rolled up pants, or items of clothing where undergarments are exposed will not be permitted.
8. All tattoos must be covered.

9. The following are prohibited in classrooms, labs and community engaged learning sites: dirty, unkempt, worn, patched, skin tight, rolled, unconventional, torn or cutoff clothing; clothing with obscene, profane or suggestive words, pictures or symbols; clothing with advertisements of alcohol, drugs or tobacco products; excessive jewelry; sandals or flip slops; baseball caps or other headgear. For labs: Lab coats are required in the anatomy lab. Students in occupational therapy often participate in laboratory classes, which require clothes that allow for ease of movement and reasonable exposure. Dress should allow freedom of movement and professional demeanor.

Note: Students are reminded that their appearance, attitude, and active engagement (listening, sitting, and doing) on campus in the presence of speakers, guests, etc. are a direct reflection of the motivation and professional qualities of our student body. These observations by important stakeholders (future fieldwork educators, OT and community leaders; other faculty, etc.) will influence your education in the future as well as how your DU degree/education is valued. Students are encouraged to share in creating the best of the DU OT program for the future through daily interest and engagement.

Revised 1/3/19
APPENDIX B - RSHS Policy and Procedure for Student Input, Suggestions & Complaints

The department values student input, suggestions and complaints in order to consider enhancements and modifications that will result in improving students’ academic experience. The goal of this process is to address student complaints effectively and efficiently while ensuring that student, faculty and staff rights, responsibilities, integrity and civility are upheld. The process for dealing with a complaint begins at the departmental level and includes the following sequential steps according to the type of complaint. Students should be advised that in cases where the concern involves illegalities or issues that require more timely interventions, these issues may be acted on more quickly or in a manner beyond those steps outlined here and will follow University protocols. Students must follow the grievance procedure outlined below.

Step 1: Declare the Concern
If the student concern involves a specific class, general academic issue or non-academic program complaints or concerns, the student should first discuss the issue with the course instructor, if applicable. Otherwise, or if satisfactory resolution is not met for the student, the student can choose to discuss the concern with his/her academic advisor and/or faculty mentor or the Department Chairperson. The student can discuss an issue with an instructor or his/her faculty mentor without placing anything in writing; however, issues shared with the Department Chairperson will be documented. No official complaint will be filed until the student files an official complaint as outlined in Step 2.

Step 2: File an Official Complaint
To file an official complaint, the student must bring a written, signed and dated copy of their concern to a pre-arranged appointment with the Department Chairperson. The Department Chairperson will formally address only written complaints submitted by the student. The student can request information in discussions with the Department Chairperson before placing a complaint in writing, but no formal action can be expected until the student’s written complaint is received.

If the Department Chairperson is unable to resolve the student’s concern, then the written student statement along with a written statement from the Department Chairperson is forwarded to the Dean. Next, the student must make an appointment with the Dean to seek resolution. Prior to meeting with the Dean, the student can submit an additional statement updating his or her understanding of the current nature and disposition of the complaint.

Written Statement Guidelines:
• An individual student or a group of students with common concerns can pursue the complaint process.
• All written statements must contain the author’s or authors’ statements regarding the nature and requested disposition of each complaint along with signatures and date.
• All written statements will be placed in a Department file with a note from the Department Chairperson and/or Dean regarding outcome and disposition.
• Once a student submits a written complaint to a faculty member, the Department Chairperson or the Dean, he/she cannot withdraw the written complaint or remove it from the Department records. However, the student can submit a written statement indicating a desire to close the process regarding the original complaint. The statement must include a rationale describing reasons why the student no longer desires to pursue the complaint. No further action will be taken by the RSHS unless the concern violates Department, School or University policy.
APPENDIX C - Statement of Responsibility for Communicating, Educating & Learning about Academic Integrity

To create and maintain a culture of Academic Integrity at Duquesne University, all members of the community must take an active role. Responsible leadership on the part of the University Standing Committee on Academic Integrity, the Office of the Provost, the Center for Teaching Excellence, the administration of each School, and all faculty and students is needed. Many problems can be prevented through careful and systematic education and communication. A climate of positive scholarship with integrity can be fostered through open dialogue and learning.

Although this listing of roles and responsibilities suggests courses of action that, if followed, will greatly reduce the likelihood of cheating and plagiarism, no one segment of the University community alone can ensure attainment of Academic Integrity. Not only must all work together, but all must maintain vigilance over time, provide continual reinforcement of key messages and expectations, and keep channels of communication open and free-flowing. The allocation of specific responsibility to one or more parties does not relieve others of their individual and collective duties; Academic Integrity is a common asset and needs to be nurtured by all.

The procedures that follow are practical suggestions for promoting a positive academic environment founded on scholarship, inquiry, the pursuit of excellence, and mutual trust. As such, they are neither comprehensive nor exhaustive, but are intended to guide prevention, education, communication, policy review, effective administration and individual action.

Students

• learn what Academic Integrity means and why it is vital to the Mission of the Duquesne University community
• ask the course instructor whenever unsure of what may constitute plagiarism or cheating, or if uncertain of what resources or tools may be used in completing an assignment or exam
• identify resources (websites, Librarians, Resident Advisors) that may be consulted when faced with questions about when and how to cite works consulted
• carefully document all research and work done in the completion of each assignment for which other resources are consulted
• alert course faculty or School administrators upon learning that another student may have cheated or plagiarized
APPENDIX D - John G. Rangos Sr. School of Health Sciences Performance Indicators/Technical Standards

All RSHS applicants and students will be expected to have abilities in five categories: observation, communication, motor, intellectual, and social. These abilities enable the student to perform tasks required to meet graduation and professional requirements as measured by state and national certification, licensure, and registration processes. These tasks will vary from program to program, according to the proficiency requirements of each profession. The required physical examination validates those abilities included in the performance indicators/technical standards. On an individual basis, reasonable accommodations will be considered for persons with documented disabilities; however, applicants/students must be able to perform in an independent manner. Should an applicant’s or student’s ability to meet the Performance Indicators change at any point in the academic program, it is his/her responsibility to report this to the Department Chairperson.

Any applicant or student who thinks he/she does not possess one or more of the five abilities should seek assistance from an academic advisor or faculty mentor, and the Learning Skills Center, and must notify and work with the Office of Freshman Development and Special Student Services. Neither the student nor an RSHS faculty member has the right to ignore documented accommodations.

Any applicant or student who, after reasonable accommodations, cannot perform the essential skills may not be admitted or permitted to continue in their respective program. The following indicators are required, with or without accommodation:

Observation: Applicant/student must have sufficient sensory capacity to observe in the lecture setting, the laboratory, and the health care, educational, or community setting. Sensory abilities must be adequate to perform appropriate examinations or assessments including functional vision, hearing, and tactile sensation to observe a patient’s condition and to elicit information appropriate to the particular discipline.

Communication: Applicant/student must be able to communicate effectively and professionally in academic, community, educational, and health care settings; including demonstrating proficiency in both verbal and written English at a level consistent with competent professional practice, and basic word-processing skills. The ability to establish rapport with patients, from different cultural and social backgrounds is also required.

Motor: Applicant/Students must have the ability to participate in basic diagnostic and therapeutic maneuvers and procedures. Motor function must be adequate to fully execute movements required to provide patient care in their respective disciplines which may include dependent transfer of an individual, physical examination techniques and medical procedures such as performing cardiopulmonary resuscitation. Applicant/Students must be able to negotiate patient care environments required in their particular discipline and be able to move between settings such as the classroom, health care facility, educational, or community setting. For example, some physical tasks require that students be able to transfer the equivalent of an adult human's body weight or transport heavy, wheeled equipment including wheelchairs or stretchers. Physical stamina sufficient to complete the rigorous course of didactic and clinical study is required including sufficient strength, gross and fine motor coordination, balance to transfer, move and assist clients in walking and daily occupations without injury to client or self. Long periods of sitting, standing, or moving are required in a variety of learning sites.

Intellectual: Applicant/Students must be able to measure, calculate, reason, analyze, and integrate information as well as be able to comprehend temporal and spatial relationships academically, socially and clinically in a timed or untimed environment. The ability to use sound judgment, apply safety precautions and adhere to ethical standards is also required.

Social: Applicant/Students must exercise good judgment and be able to function, appropriately and effectively, in the face of uncertainties inherent in clinical practice and must maintain mature, sensitive and effective professional relationships with faculty, students, patients and other members of health care and/or educational teams. Applicant/Students must demonstrate the ability to perform in stressful environments, irregular hours or during impending deadlines, and be able to self-regulate behaviors in class, lab, and fieldwork experiences.

My signature below indicates that I have read, understand and am currently (check one)

____ able to meet the requirements for the RSHS Performance Indicators without accommodation

____ able to meet the requirements of the RSHS Performance Indicators with accommodation*  (* Documentation must be gained from the Office of the Freshman Development and Special Student Services)

____ Unable to meet the requirements for the RSHS Performance Indicators with or without accommodation

If my status changes at any time, I acknowledge that it is my responsibility to contact the Office of the Freshman Development and Special Student Services

____________________________________________   ______________________________
Student Signature                Date
APPENDIX E - Occupational Therapy Change in Occupational Therapy Student Health Status Procedure

1. The occupational therapy student should notify the Department Chair, in writing, of the change in health status. (if incident occurs and may impact clinical fieldwork activities, the occupational therapy student should notify the Academic Fieldwork Coordinator)

   a. If change in health status results in a change in the student’s abilities to perform the RSHS performance indicators, then the student must have a physician (MD or DO), Nurse Practitioner, or Physician Assistant, authorize this change of status. The MD, DO, DNP, PA must have access to, and acknowledge, the RSHS performance indicators when authorizing change in health status.

   b. If a change in health status does not result in a change in the student’s abilities to perform the RSHS Performance indicators, the no further follow-up is required.

2. The occupational therapy student should complete a new Performance Indicator Form and return it to the Department Chair and/or Academic Fieldwork Coordinator.

3. The occupational therapy student should present the Change of Health Status Form and Performance Indicator Document to his/her physician, DNP, PA for completion.

4. The occupational therapy student should present the affidavit to his/her physician to complete.

5. The occupational therapy student should return the affidavit to the Department of Occupational Therapy Chair or have the physician’s office send the affidavit back to the Department of Occupational Therapy.

6. No occupational therapy student will be permitted to alter activities until the Change in Health Status Affidavit and Performance Indicator forms are received by the Department.

7. Depending on the nature of the classroom, laboratory or clinical activities, the Department of Occupational Therapy reserves the right to request that the occupational therapy student obtains more specific documentation from the certified medical practitioner to ensure safety.

8. DU faculty and students are required to document any medical event or injury using the University’s risk management process, within 24 hours of event: Link to electronic form here: http://www.duq.edu/about/departments-and-offices/risk-management/forms
Duquesne University
Department of Occupational Therapy
Change in Occupational Therapy Student Health Status Affidavit

I, _______________________________________, patient under my care, was seen by me on

   Patient / Occupational Therapy Student Name

_______________________, for the following condition(s)______________________________________________

   Date of Visit   Briefly describe medical condition

______________________________________________________________________________________________________________

Under review of the Duquesne University, Rangos School of Health Science Indicators (see other side), I do hereby certify

that this student’s health has changed, and his or her occupational therapy classroom, laboratory and/or clinical

activities should be altered as follows:

Check one:

☐ Student may return to all classroom, laboratory and clinical activities with no accommodations or restrictions

and can do so without threat posing a threat to the health or safety of self or others. Return to school date:

______________________________________________________________________________

☐ Student may return to classroom, laboratory and/or clinical activities with the following

accommodations/restrictions:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Date student may return with accommodations/restrictions as listed above: __________________

☐ Student may not return to classroom, laboratory and/or clinical activities at this time.

Date of first treatment: ____________________     Date of most recent treatment: ___________

Date of next treatment: __________________

Name of Certifying Medical Practitioner: _____________________________________________________

   Please Print

Address: _______________________________________________________________________________

_____________________________   __________________________

Medical Practitioner Signature             Date

Please return this affidavit to:
Duquesne University Health Science Building
Department of Occupational Therapy 600 Forbes Avenue Pittsburgh, PA 15282
Fax 412-396-4343
APPENDIX F - Faculty/Student Professional Development Mentoring

Introduction:
This document describes the Department of Occupational Therapy’s philosophy on professional development and shares the processes (and tools) faculty mentors use with their student mentees to encourage and support professional development. This document provides a description of the semesterly faculty-student mentoring process, (including the professional development plan (PDP), use of a professional development rating scale, and creation of professional portfolios).

Purpose:
In addition to technical knowledge and skills, professional education socializes the OT student to the personal, interpersonal, and interprofessional behaviors that he/she is expected to have as an occupational therapy student, and subsequently an occupational therapy practitioner.

Correlation to the Department’s Curriculum Philosophy: Professional development is conceptualized as encompassing a wide variety of activities that a person undertakes to keep stimulated and to continue to grow personally and professionally. Ideally, professional development is characterized by a combination of self-reflection, self-direction and a personal commitment to seek and maximize opportunities to grow and develop in the multiple roles one accepts as a healthcare professional. The use of effective clinical reasoning based on critical evaluation of information, ethics, standards of practice, and the ability to facilitate responsible cooperation among individuals are woven throughout the fabric of the curriculum.

The curriculum model focuses on personal and professional development as it is embodied in specific roles and nurtured in a sequenced series of academic and service learning experiences. The curriculum model employs a planned sequence of learning opportunities that support and challenge students as they develop skills and habits, which support professional role development. In meetings with their faculty mentor, students are expected to process, explore and reflect on their coursework, fieldwork (FW), community engaged learning (CEL) experiences, doctoral capstone experience (DCE) and related extracurricular activities. Further, students are expected to reflect on and choose opportunities for personal and professional development in professional roles such as citizen, learner, practitioner, practice-scholar, leader, and advocate.

Students are expected to document their learning processes using a professional development plan (PDP), which they are expected to maintain throughout the course of the program. A process that is heavily dependent on faculty oversight defeats the purpose and spirit of personal and professional discovery. In the model employed by the DU Department of Occupational Therapy, your faculty mentor provides support and structure for you to succeed, but places the responsibility for the creation and maintenance of the PDP on the student.

How/When do I Create My Own Professional Development Plans (PDP)?
Each faculty member has a different mentoring style but all apply similar procedures. Each semester, student mentees can expect an email requesting them to initiate the scheduling of a faculty-mentee meeting, and a reminder to post an updated PDP. Each semester the student is expected to:

1. If this is your first Professional Development Plan (first year and transfer students) you should access the Professional Development Plan form on your faculty mentors Blackboard site. If you are a current student in the program, review your Professional Development Plan from the previous semester and document your progress.
2. Complete the Professional Development Planning Tool and plan to participate in discussion with mentor.
3. Set new goals and submit these to your personal page on your Faculty Mentor’s Blackboard site.
4. Set up a meeting with your faculty mentor to discuss these goals and other professional development successes and/or issues.
5. After your meeting and completing of the self-rating, revise your goals if needed and repost in Blackboard.
6. You are encouraged to share your goals with at least one peer and another faculty member who may be able to support you in achieving your goals.
7. Monitor your goal attainment, as you will be asked to document your progress at the end of the semester.
8. Repeat this process every Fall and Spring semester.

See Appendix G for more information.

* The OT student is expected to meet with their faculty mentor at least one time per semester and are encouraged to take the initiative and seek out faculty mentoring as needed to maximize personal and professional development.

** The OT student is expected to demonstrate professional attitudes and behaviors in his/her interactions. All interactions with faculty, staff, practitioners, fellow students, community partners and clients during classroom, community, fieldwork, CEL and DEC educational experiences are expected to be professional and consistent with codes of ethical and professional behavior. When a student demonstrates attitudes or behaviors that violate these codes of behavior, faculty and/or the faculty mentor provide feedback to the student and support to remediate these behaviors. Faculty and/or the faculty mentor may expect students to re-take the Professional Development Planning Tool to foster critical self-reflection and meaningful goal-setting based upon the individual student needs.

What Kind of Goals do I Write in my PDP?
The best answer is, “it depends”. Everyone is at a different point in the path, so your goals must be the “just right” challenge for you. The Professional Development Plan forms list several developmental roles that a person wants to develop as they become a health care professional (e.g., professional service, practitioner, leader, practice-scholar, etc).

You are expected to demonstrate self-reflection and initiative to set goals that help you grow as a professional and support you success in this program. Early on these may include completing requirements such as shadowing hours or pre-clinical health and security clearances. As you progress they can focus around knowledge, skill and behaviors that you decide can help you develop into a fully rounded professional that any peer would want as part of their team. Focusing your goals around specific professional roles may help structure this goal setting process. It is important to be realistic and to stay focused; develop ONLY 2-3 GOALS each semester. Your mentor will provide feedback on your goals. Some ideas to help frame goals around specific professional roles are described below:

**Professional Service** – volunteering and/or engagement in professional service (via organizations, associations on or off campus) can be meaningful occupations to support professional development, networking and develop unique skills such as working with others, critical thinking, communication, creativity, problem solving and leadership) Examples: regular, ongoing attendance/participation in: SOTA, Best Buddies, POTA Student Rep, AOTA Student Delegate, Service Sorority or Fraternity, Habitat for Humanity, health related advocacy efforts and/or mission trips.

**Practitioner** – taking ownership and initiative to intentionally plan your own learning by exploring new, diverse practice settings or populations, arranging shadowing experiences, community engaged learning, or seeking out resources to advance your knowledge via independent readings or attending continuing education sessions at conferences such as POTA, AOTA or AOTA/NBCOT Student Conclave.

**Professional Development** – use the Professional Development Planning Tool to reflect on areas of growth, examples may include: raising your hand to actively participate more in class, attending faculty office hours 2x month, challenging yourself to raise the quality of your own critical thinking, participating in health related advocacy, enter all deadlines/due dates into planner, increasing timeliness or reducing tardiness etc.

**Leader** – pursuing leadership roles in academic, service, social or community settings. Examples: holding an officer or board position in an organization, leading an adhoc task group or initiative, taking a leadership role in a student group project, empowering your peers and colleagues to take on leadership roles.

**Health Care Advocate** – advocating for occupational therapy, occupational justice and health equity is a critical component of your training as a Duquesne Practice Scholar. Learning skills for gathering and understanding data on health behaviors, health statistics and health disparities, and interpersonal skills for engaging key decision makers in respectful yet assertive
ways can be appropriate goals.

**Practice-Scholar** – Creating practice-scholars is the mission of the Department of Occupational Therapy. Practice Scholars serve, do, question and lead. As practice scholars, we expect our graduates to demonstrate the requisite knowledge, skills, attitudes and habits to use and create evidence to support their practice, to facilitate socially just change as engaged leaders and scholars, and to think critically and creatively as practice innovators. Some steps that students can take to achieve the practice-scholar vision are to maintain their membership to AOTA, attend and regularly participate in Journal Club, seek to meet expectations to join the PKE etc.

**Prep for FW/DCE** – ensuring that your “hard” (technical) and soft skills (professional behaviors/attitudes) are appropriate, taking initiative to seek out and complete pre-requisites requirements for CEL, Fieldwork and DCE, and contacting planned FW/DCE sites proactively.

**Prep for NBCOT Exam** – completing self-assessments to evaluate strengths and growth areas, planning ahead to attend self-study workshop, utilizing NBCOT AspireTM study tools and forming study groups.

**Do I Continue Professional Development Plans During Fieldwork & DCE?**
Yes, though direct face-to-face meetings are not possible or expected. However, after you have successfully completed both your level II Fieldwork placements, your faculty mentors will ask to meet with you one last time during your January term to bring the mentoring process to closure. You may be asked to give a short presentation of your showcase pieces or to respond to guided reflections on patterns in your own professional development that you notice as you look back over the years of professional development goals you set for yourself. You will definitely be asked, “What’s next? What is in your portfolio to support this professional development goal?”

**Should I Continue Writing Professional Development Plans Post-Graduation?**
Yes! Throughout your career, to a greater or lesser degree, your supervisor will expect self-directed professional development and you will have grown to expect it of yourself. Faculty at Duquesne continue to write professional development goals for themselves each year. The American Occupational Therapy Association (AOTA) also places strong value on professional development as a lifelong pursuit and many state licensure laws require documentation of continuing education. AOTA has created the Professional Development Tool (PDT), which is available free as a member benefit (AOTA, 2003). The PDT is designed to help you assess your individual learning needs and interests, create a professional development plan, and document your professional development activities. If the process you learned at DU has been successful and useful you will have already established a strong habit pattern for this.

**What is a Professional Development Portfolio?**
In addition to creating and maintaining a PDP, the faculty-student mentoring process also involves a professional development portfolio. A portfolio is a collection of evidence or “artifacts”, which demonstrate the continuing acquisition of skills, knowledge, attitudes, understanding and achievements (Buckley et al., 2009; Craik & Rappolt, 2006; Crist, Wilcox & M’Carron, 1998; Hayward et al., 2008). Because occupational therapy personnel can move across a variety of roles and settings, the transitional portfolio, as a historical and working record can be used to facilitate reflection on one’s various roles and functions, while a current portfolio represents a record of current roles and functions. Occupational therapy literature regarding the use of portfolios advocates for the use of these to record and verify skill acquisition and learning experiences in career development, and to document learning outcomes. A student’s portfolio is expected to be more than a collection of accomplishments as they show in detail how the student grew through a reflective process, documenting what and how something was learned. Thus, the portfolios serve not only as a basis for a retrospective review of accomplishments, but also become a prospective guide for future professional development planning. In addition, graduates of the Duquesne program have cited the benefit of selecting evidence from their portfolio to successfully document specific skills desired by a future employer or credentialing body.

Faculty believes that professional development is a life-long endeavor and every DU faculty member has his/her own portfolio. Effective practice scholars demonstrate the habits of self-reflection, goal setting and continuing
education. This portfolio is intended to help you hone these very skills and habits. Over the course of the curriculum and especially in the professional phase you will create a portfolio. Students are required to present an electronic initial link to the website, which should include the following information:

- Personal statement (why OT for your career, professional and personal goals)
- Resume
- Credentials (AOTA membership, in the future-NBCOT certificate, state license)
- Certifications (CPR, clearances, etc.)
- Academic preparation (OT curriculum)
- Examples of academic accomplishment (presentations, exemplary group or individual project, FW evaluations, etc.). **this should include at least 1 sample of “best work”
- Research
- Publications
- Awards/Recognitions/Scholarships
- Service (volunteer, offices, committees)
- Continuing Education
- Professional Development Plan (PDP) (created each semester with your academic mentor)

How do I Create my Own Portfolio?

While it is never too early to begin to gather materials for your portfolio, you officially start the process of building a portfolio in the Fall of your Fourth Year in Clinical Reasoning I and Fieldwork IA (OCCT511). From this point on, students are required to continuously assemble materials into an electronic Professional Development Portfolio consisting of a personal, professional website that documents and showcases academic, professional and leadership accomplishments. Students are expected to continuously update their portfolio as they progress though the curriculum. Formal assessment of the portfolios may occur as graded or ungraded learning activities in courses from the 4th year on.

More information and tools to assist with this creating a website and writing the leadership plan can be found on:


Professional Development Planning Tool

The Professional Development Planning Tool (Appendix H) identifies 11 professional behaviors expected of all DU occupational therapy students. Examples of mastery performances in each category of professional behavior are included on the evaluation form. This is not an all-inclusive list, but can serve to help the student and their faculty mentor assess behavior and professional growth. All OT students are expected to familiarize themselves with the Professional Development Planning Tool. The descriptions of mastery performance define levels of professionalism each student should aspire to. For example, students are expected to refrain from “distracting behaviors” when class is in session to maintain a supportive shared learning environment. Examples of distracting behaviors include but are not limited to:

- Using a cell phone (including text messaging)
- Using a laptop for tasks unrelated to class notation
- Conversing during lectures by faculty, guests or peers
- Not being ready to begin class on time
- Arriving late and/or leaving early
- Sleeping / putting head down on table
- Eating, drinking or chewing gum in an audible manner
- Using social media unprofessionally or unethically (see Department social media policy)
- Lack of collaboration and/or collegiality during didactic, CEL, FW and/or DCE activities.

There are three primary purposes of the Professional Development Planning Tool 1) to foster self-assessment and self-
reflection skills, 2) to verify mastery in professional behavior and 3) to serve as a method to change behavior. This tool identifies professional behaviors, attitudes and actions expected of all DU practice scholars and provides examples of mastery performances in each category of professional behavior. Each professional behavior has 4 rating options: Level One (poor, unacceptable), Level Two (below expectations), Level Three (meets expectations), and Level Four (exemplary).

When using this tool, an evaluator focuses on patterns of behavior, not isolated instances that fall outside the student’s normal performance. For example, an OT student who is consistently on time and prepared for class is demonstrating competence in time management and an isolated emergency that makes him or her late for one class would not warrant a poor rating on time management. Conversely, if the OT student is consistently late for class, he/she would be counseled and if the behavior continues, rated as Level One or Level Two for the characteristic of attendance and punctuality. Any characteristic rated as a Level One or Level Two requires an explanation including specific behaviors and identification of goals on the student’s professional development plan to remediation behavior and performance. When a formal behavioral contract or remediation plan is deemed necessary this will be documented in the student’s permanent record in the RSHS Dean’s office.
**APPENDIX G - Professional Development Plan Worksheets**

**1st YEAR PROFESSIONAL DEVELOPMENT PLAN**

*A journey of a thousand miles begins with a single step.* - Chinese Proverb

Name: ______________________________________  Date:___________________

At the beginning of the semester:
1) Write at least 2 or 3 goals for yourself that can be completed this semester and post on Blackboard.
2) Identify specific strategies you will use to measure whether you have accomplished each goal.
3) Schedule a brief meeting with your faculty mentor to discuss your goals.
4) Post your revised goals on your BB personal page and self-monitor your goal attainment.

At the end of the semester:
5) Document evidence that have met each goal.
6) Generate a brief reflection on this semester’s professional development goals and begin thinking about creating a new plan for next semester.

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2nd YEAR PROFESSIONAL DEVELOPMENT PLAN

Valued goals drive us towards purposeful activity, the use of our resources of energy, time, interests and attention to complete life tasks. - Pat Nuse Clark, 1979

Name: ______________________________________  Date:___________________

At the beginning of the semester:
1. Write at least 2 or 3 goals for yourself that can be completed this semester and post on Blackboard.
2. Identify specific strategies you will use to measure whether you have accomplished each goal.
3. Schedule a brief meeting with your faculty mentor to discuss your goals.
4. Post your revised goals on your BB personal page and self-monitor your goal attainment.

At the end of the semester:
5. Document evidence that have met each goal.
6. Generate a brief reflection on this semester’s professional development goals and begin thinking about creating a new plan for next semester.

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Goals create tension inside us. These task tensions keep us moving toward our goals until they are reached (or abandoned) and the tension is released. - Kurt Lewin, 1935

Name: ______________________________________  Date:___________________

At the beginning of the semester:
1. Write at least 2 or 3 goals for yourself that can be completed this semester and post on Blackboard.
2. Identify specific strategies you will use to measure whether you have accomplished each goal.
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3. Schedule a brief meeting with your faculty mentor to discuss your goals.
4. Post your revised goals on your BB personal page and self-monitor your goal attainment.

At the end of the semester:
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5th YEAR PROFESSIONAL DEVELOPMENT PLAN

Who aims at excellence will be above mediocrity; who aims at mediocrity will be far short of it. - Burmese Saying

Name: ______________________________________  Date:___________________

At the beginning of the semester:
1. Write at least 2 or 3 goals for yourself that can be completed this semester and post on Blackboard.
2. Identify specific strategies you will use to measure whether you have accomplished each goal.
3. Schedule a brief meeting with your faculty mentor to discuss your goals.
4. Post your revised goals on your BB personal page and self-monitor your goal attainment.

At the end of the semester:
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Our goals can only be reached through a vehicle of a plan, in which we fervently believe, and upon which we must vigorously act. There is no other route to success. - Pablo Picasso

### 6th YEAR PROFESSIONAL DEVELOPMENT PLAN

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## APPENDIX H - Professional Development Planning Tool

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<th>ATTENDANCE AND PUNCTUALITY</th>
<th>LEVEL ONE: (poor, unacceptable)</th>
<th>LEVEL TWO: (below expectations)</th>
<th>LEVEL THREE: (meets expectations)</th>
<th>LEVEL FOUR: (exemplary)</th>
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<td>Unacceptable absenteeism or tardiness; not ready to engage in class (see course policies on syllabi)</td>
<td>Frequently absent, tardy, or leaves early; not ready to engage in class</td>
<td>Rarely absent or tardy; ready to engage in class, proactively communicates absence with instructor</td>
<td>Perfect attendance; ready to engage in class activities</td>
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| COLLEGIALITY | Often does not demonstrate collaborative skills (e.g., active listening; able to switch from leading to being a member; encouraging ideas; facilitating group in reaching goals) | Sometimes demonstrates collaborative skills | Responsibly engages in group/team efforts | Strong contributor to group/team efforts |

| QUALITY OF INTERACTIONS AND PARTICIPATION | Consistently apathetic or indifferent; disruptive or off-task; does not contribute to classroom activities or is not appropriately engaged with students and colleagues; unprepared | Sometimes uninvolved or disruptive or off-task; minimally contributes to classroom activities or is sometimes not engaged with students and colleagues; not well-prepared | Contributes to classroom activity and is appropriately engaged with students and colleagues; comes prepared | Contributes to classroom and field activities, often as a leader; highly engaged with students and colleagues; comes well-prepared |

| INTERPERSONAL SKILLS | Overly negative or critical; insensitive to the feelings and needs of others; discourteous; does not show that he or she values ideas of others; may ignore rules or common etiquette; acts out of self-interest in most situations; may lack self-control in interactions | On a few occasions, is overly negative or critical, insensitive, or discourteous; sometimes does not value others’ ideas or ignores rules/common etiquette or acts out of self-interest; may lack self-control in interactions | Applies critical perspective appropriately; is sensitive to the feelings and needs of others; courteous; demonstrates that he or she values the ideas of others; abides by rules and common etiquette; acts in the interests of others; demonstrates self-control in interactions | Uses positive approaches when questioning or criticizing; acts on concerns for the feelings and needs of others; abides by rules and common etiquette; is very courteous; acts in the best interests of others in many situations, communicates appropriately with various stakeholders (peers, faculty, clients) |

| ORAL COMMUNICATION SKILLS | Makes frequent speaking errors, inarticulate, hesitates to express self, or does not use voice effectively | Expresses self but not regularly, makes some errors, or does not consistently use voice effectively | Expresses self regularly, uses Standard English grammar, uses voice effectively | Expresses self very well, communicates ideas very well, is adept in using voice effectively |

| CRITICAL THINKING SKILLS | Makes no attempt to question, analyze, interpret, explain, or evaluate; unable to justify the results of his/her thinking; or maintains or defends views based on self-interest or preconceptions; close minded | Struggles with questioning, analyzing, interpreting, explaining, or evaluating, and with providing rationale for reasons, points of view; or does this in superficial manner | Thoughtfully questions, analyzes, interprets, explains, or evaluates and is able to justify the results of his or her thinking; open-minded | Accurately interprets; identifies salient information or reasons; draws warranted judicious conclusions; justifies and explains assumptions and reasons; fair-mindedly follows where evidence and reason lead |

| QUALITY OF WORK/ COMMITMENT TO EXCELLENCE | Often submits work that is of poor quality or incomplete; does not make use of available resources, help, or suggestions to develop or improve work | Work or performance meets minimal requirements or expectations; does not consistently use resources, help, or suggestions to develop or improve work | Work and performance indicates significant effort and care; consistently uses resources, help, or suggestions to develop or improve work | Work and performance consistently demonstrates commitment to candidate’s own high standards for professional work |

| RESPONSE TO CONSTRUCTIVE FEEDBACK | Defensive/non-responsive and does not make changes to subsequent performances or behaviors | Defensive/non-responsive; subsequent performances or behaviors show some changes | Receptive; subsequent performances show some productive changes | Seeks out feedback; subsequent performances consistently show productive changes |

| COMMITMENT TO DIVERSITY AND EQUITY | Ethnocentric; considers only personal perspective | Demonstrates awareness of diversity issues and of multiple perspectives | Demonstrates emerging commitment to learning more about diversity and how to incorporate multiple perspectives in practice | Consistently demonstrates a commitment to understanding diversity; incorporates multiple perspectives in practice; empathetic |

| PATIENT/CLIENT ADVOCACY AND CONFIDENTIALITY | Does not communicate client needs to appropriate referral sources; irresponsible with client information with limited awareness of the gravity of violations. | Articulates client needs to appropriate referrals sources; does not consistently implement the necessary behaviors to protect client information. | Clearly articulates client needs with professionalism and follow through, may not achieve desired outcome; consistently implements necessary behaviors to protect client information. | Clearly and directly communicates client needs to others in a way that facilitates the necessary response with appropriate follow through; consistently implements exceptional behaviors needed to protect client information. |
APPENDIX I - Policy & Procedures Regarding Safety, Infection Control, & Emergencies Including Evacuation

The following actions and processes are followed to ensure safety for all participants in Department-related activities:

1. Students are advised not to engage in any academic activity or equipment use unless they have received training by an instructor or other knowledgeable person regarding the safe use of equipment and supplies, including storage and disposal.

2. Each course instructor is responsible for providing students with safe use information, training and appropriate supervision on all equipment and supplies related to classroom activities. All students are required to maintain their health and CPR certification requirements current during the professional program. If requested, a student must provide documentation regarding health requirements, which are distributed every year during fall orientation and noted in the RSHS Student Handbook.

3. Students can be removed immediately from any academic or fieldwork experience if proof of their current health status or CPR cannot be provided.
   a) All student health records are maintained through the University Health Services and through the Department via CastleBranch. Students are encouraged to retain a copy of their health records for their own reference and use.
   b) A student will not be admitted to the professional phase of the curriculum if they have not completed all pre-professional program health requirements.
   c) Any student that is non-compliant with the health and CPR requirements can be asked to leave class, fieldwork or any other academic-related activity immediately when they cannot provide verification of required health requirements. Make-up work may not be possible.
   d) The Academic Fieldwork Coordinator ensures that students comply with health requirements during fieldwork education. The student is expected to follow all fieldwork education health and safety expectations. Doctoral students are responsible for maintaining their health requirements for their capstone experience and collaborate with their capstone site to complete any pre-capstone health or training requirements.

4. The Department follows the University Emergency Evacuation Guidelines for fire, building evacuation and emergency notification procedures. The Department participates fully in all evacuation drills.

5. All faculty, staff and students are encouraged to participate in the voluntary University’s Emergency Alert program.

6. All evacuations routes are clearly marked on campus. Students, faculty and staff are encouraged to know the closest evacuation route at all times.

7. Students receive Universal Precautions and General Safety training during the Fundamentals in Occupational Therapy course or the OT Overview online modules. Once trained they are expected to review periodically and act according to these precautions in all that they do in the academic program. Failure to comply results in consequences.

REV: 1/9/2019