The policies, procedures, and program requirements outlined in this handbook are in effect as of Fall 2012. Entering students are responsible for program requirements in effect at the time of initial enrollment. Policies and procedures are subject to change and are communicated to all Program in Occupational Therapy students upon approval by the OT faculty.

The University of Minnesota shall provide equal access to and opportunity in its programs, facilities, and employment without regard to race, color, creed, religion, national origin, gender, age, marital status, disability, public assistance status, veteran status, sexual orientation, gender identity, or gender expression.

Inquiries regarding compliance may be directed to the Director, Office of Equal Opportunity and Affirmative Action, University of Minnesota, 274 McNamara Alumni Center, 200 Oak Street S.E., Minneapolis, MN 55455, (612) 624-9547, eoaa@umn.edu, or www.eoaa.umn.edu.

This publication is available in alternative formats upon request. Please contact:

Center for Allied Health Programs
University of Minnesota
MMC 714, 516 Delaware St SE
Room 15-194, PWB
Tel: (877) 334-2659 | E-mail: cohpinfo@umn.edu
Web: www.cahp.umn.edu

© Regents of the University of Minnesota. All rights reserved.
# Table of Contents

**Program Overview**

- Program Mission, Philosophy, and Overview of the Profession ........................................... V
  - Our Mission .................................................................................................................. 5
  - Our Philosophy ........................................................................................................... 2
  - Overview of the Profession ......................................................................................... 6
  - Certification and Licensure ......................................................................................... 6

**Curriculum**

- Course Plan .................................................................................................................. 7
- Course Descriptions ..................................................................................................... 10
- Accreditation .................................................................................................................. 12
- Graduation Information ............................................................................................... 16
- Faculty ............................................................................................................................ 17

**Policies & Procedures** .................................................................................................... 21

- Absence for Participation in Religious Observances ....................................................... 21
- Academic Integrity ......................................................................................................... 21
- Academic Advising Roles & Responsibilities ................................................................ 22
- Address Changes ........................................................................................................... 24
- Association Membership & Subsidy .............................................................................. 24
- Cancellation or Withdrawals and Tuition Refunds .......................................................... 25
- Conference Attendance ............................................................................................... 25
- Course Notes & Class Materials .................................................................................... 28
- Criminal Background Studies ....................................................................................... 29
- Disability Services ......................................................................................................... 29
- Communication ............................................................................................................. 29
- Exam Proctoring ............................................................................................................ 30
- Insurance ....................................................................................................................... 31
  - University Mandate .................................................................................................... 31
  - Waiving the University Plan ....................................................................................... 31
  - AHC Student Health Benefit Plan ............................................................................ 32
  - AHC Disability Insurance Plan .................................................................................. 32
  - Voluntary Student Dental Plan .................................................................................. 32

**Overview of Privacy and Data Security**

- Health Insurance Portability and Accountability Act of 1996 (HIPAA) ......................... 32
- The Privacy Standards ............................................................................................... 33
- The Security Standards ............................................................................................... 33
- The Standards for Transactions and Code Sets ............................................................ 33
- The National Provider Identifier Standards ................................................................ 33
- Privacy and Data Security Training ............................................................................... 34

**Immunization Policy and Requirements** ........................................................................ 35

**Inclement Weather Policy** ............................................................................................ 35

**Makeup Work for Legitimate Absences** ........................................................................ 35

**Performance Site Transfer Guidelines** .......................................................................... 36

**Personal Electronic Devices in the Classroom** ................................................................ 36

**Reference Requests** .................................................................................................... 36

**Sexual Harassment and Discrimination** ........................................................................ 37

**Student Record Access** .............................................................................................. 37

**Directory Information** ................................................................................................. 37

**Student Record Access Examples** ................................................................................ 38

**Students Managing Their Educational Records** .......................................................... 39

**Technical Standards** .................................................................................................... 40
Program Mission, Philosophy, and Overview of the Profession

Our Mission

PREAMBLE: The Program in Occupational embraces the American Occupational Therapy Association’s definition and purpose of occupational therapy as

“the therapeutic use of everyday life activities (occupations) with individuals or groups for the purpose of participation in roles and situations in home, school, workplace, community, and other settings. Occupational therapy services are provided for the purpose of promoting health and wellness and to those who have or are at risk for developing an illness, injury, disease, disorder, condition, impairment, disability, activity limitation, or participation restriction. Occupational therapy addresses the physical, cognitive, psychosocial, sensory, and other aspects of performance in a variety of contexts to support engagement in everyday life activities that affect health, well-being, and quality of life.” (AOTA Model Practice Act, Adopted by the AOTA Representative Assembly 5/04; Agenda A11, Charge 60)

PROGRAM MISSION: The Program in Occupational Therapy’s mission is to enhance the health and quality of life of the people of Minnesota, the nation, and the world through engagement in meaningful occupation. Consistent with the mission of the University of Minnesota, the Program in Occupational Therapy fosters engaged professional and inter-professional discovery, learning, and public service to advance knowledge and to inspire the next generation of leaders in practice, education, and research.

The Program in Occupational Therapy is committed to meeting occupational needs of individuals, families, communities, and societies through:

- Creation, dissemination, and application of occupation-based evidence that promotes health and meaningful participation; and
- Preparation of an engaged, proficient, innovative, professional, culturally effective, person-centered workforce via broadly accessible professional and advanced education; and
- Collaboration across the university and with public/private partners in health, community, and government systems.

STUDENT LEARNING GOALS: Entry-level occupational therapy graduates will

1. Collaborate with individuals, families, groups, organizations, and governmental agencies to promote health and quality of life through participation of individuals in their cultural, physical, social, personal, spiritual, temporal, and/or virtual contexts.
2. Use national and international disciplinary and inter-disciplinary research evidence to make informed decisions.
3. Use client-centered and culturally effective services, respecting differences, values, preferences, and expressed needs of service recipients.
4. Effectively screen and evaluate the performance of individuals in activities of daily living, instrumental activities of daily living, education, work, play, leisure, and/or social participation that have importance and meaning to them.
5. Assess community resources available to support performance of individuals in their natural environments.
6. Develop, implement, and critically evaluate interventions that enhance health and quality of life of individuals and populations through participation in meaningful occupations.
7. Collect data and measure outcomes to assess intervention results and modify or discontinue services with follow-up, advocacy, or referral as needed.
8. Manage occupational therapy program resources to provide cost effective and efficient service delivery.
9. Use technology to communicate, manage information, and support decision making.
10. Contribute to the growth of occupational therapy knowledge through scholarly activity.
11. Confidently take initiative in a variety of occupational therapy roles.
13. Advocate for the profession and its recipients including shaping public policy to enhance individual performance in meaningful occupations in natural environments.
15. Effectively communicate orally and in writing using formats and terminology appropriate for the purpose and intended audience.
16. Follow safe procedures for self and others when providing service.

Our Philosophy
The Program in Occupational Therapy (the Program) faculty developed its statement of philosophy by studying, contemplating, and discussing the truths that are held in common about humanity, health, occupation, and occupational therapy. These beliefs drive our view of the profession and our teaching. The statement reflects consensus of the faculty, is consistent with the University, and serves as the basis for the Program’s curricular design and implementation.

The Program in Occupational Therapy is grounded in the conviction that all human beings:

- Have inherent worth and must be treated with dignity and respect.
- Strive for and are enriched by meaning in life.

We further believe that one important way that humans create meaning is by engaging in occupation. Occupation is defined as the ‘activities...of everyday life, named, organized, and given value and meaning by individuals and a culture...including looking after themselves...enjoying life...and contributing to the social and economic fabric of their communities...” (Law, Polatajko, Baptiste & Townsend, 1997, p.34). Thus it may be said that
human are driven to do. Since all humans have the right to create meaning in their life, engaging in occupation is a right not a privilege.

- Are affected by context.
  Contexts are defined as the dynamic real and virtual environments with “interrelated conditions within and surrounding... [humans]... that influence performance” (Occupational Therapy Practice Framework Domain and Process, p. 55).\(^1\) Contexts may be personal, societal (i.e., family, community or system) or governmental/political. Contexts include the cultural, physical, social, personal, spiritual, and temporal environments (AOTA, 2002) and the political and economic environments that influence the persons, families, organizations, and societies that they touch. Contexts may enhance, impair, or bar participation and full engagement in occupation.

- Have an innate drive and capacity to change.
  Change may be self-created, i.e., generate spontaneously from within, or may occur in response to occupational needs or contextual challenges. When change is responsive to an internal or external demand or pressure, the term adaptation is commonly applied. Change may be adaptive i.e., moving toward health, or maladaptive i.e., moving away from health. Occupational therapy facilitates adaptation, and relies on the dynamism of humans as capable changeable beings.

Health:
The Program considers health to be a construct that reflects both personal and social interpretations. Thus health does not require absence of disease or disability, nor does it require congruence between person and societal views. A person may consider him or herself healthy in spite of chronic health problems while an organization or society may consider the same person as ill.

In parallel, Healthy People 2010 suggested that it is a combination of personal perspective and contextual competence that defines health-related quality of life, which reflects “…a personal sense of physical and mental health and the ability to react to factors in the physical and social environments.”\(^1\) Health disparities can be attributed to many differences including those associated with gender, race, ethnicity, income, education, disability, geographic location, and sexual orientation.\(^2\) These disparities impair global health and stymie well-being and quality of life across the state, nation, and world. Thus health is a right – a necessity - not a privilege. Although the examples offered above speak of personal health, well-being and quality of life, these concepts may also be confidently extended to human groups, e.g., families, organizations, and societies. Indeed, healthy communities nurture healthy persons.

---


**Occupation**

Occupation is the act of “doing culturally meaningful work, play or daily living tasks in the stream of time and in the contexts of one’s physical and social world” (Kielhofner). They define who one is, what one values, and how one connects to others and the greater society (Christiansen & Baum). Occupation goes beyond task performance, involving mental and physical investment, having purpose and meaning, and including both solitary and social elements.

At its best, engagement in occupation can facilitate health and well-being, promote growth and adaptation, and support ongoing participation. At its most ineffective or mal-adaptive it can create and perpetuate illness, dysfunction, isolation, and stagnation. These breaches may be conceptualized as **occupational delay** when meaningful doing “occurs on a schedule that is not typical” (Bass-Haugen, Henderson, Larson, and Matuska, p. 168); **occupational deprivation** when “an external agency or circumstance keeps a person from ‘acquiring, using, or enjoying something’” (Wilcock, p145), **occupational disparity** when meaningful doing is unequal or lack(s) parity across people or groups due to choices, values, or unequal opportunity (Bass-Haugen et al) and **occupational interruption** when engagement in occupation is temporarily or persistently affected by “change in person or environment” (Bass-Haugen et al. p 168).

**Occupational Therapy**

Occupational therapy is an evidence-based profession dedicated to enabling health, well-being, and quality of life. While many health professions share these goals, occupational therapy is unique in its focus on occupation as both the means and the outcome of intervention.

Occupational therapy encourages fullest occupational competency, i.e., ability to engage in and perform occupation, by changing person, context, and occupational form. In our present use, *person* includes any human grouping, e.g., individuals, families, communities, and societies and includes all of the elements that these entities bring to their participation.

Occupational therapy is a living profession, and is therefore continually changing. In the past, these changes reflected growth in technology and knowledge. In the future, the Program holds that the most important opportunity and impetus for change will be a shift of focus from health, occupation, and participation of individuals to health, occupation, and participation of larger human groupings.

Thus, the Program projects that a major emerging area of occupational therapy practice will focus on organizations, society, and public policy. The Program recognizes the need to prepare individuals

---


to serve both current and emerging practice, and to change as new factors create unanticipated changes. Toward that end, the Program prepares and inspires innovative, self-directed, lifelong learners, dedicated to their own continuous professional growth and to growth of the profession.

Learning:
We believe that humans seek opportunities to learn by engaging in meaningful activities that they see as affording growth (Knowles, Holton, & Swanson, 1998)⁷. Although learning often is sought for the sheer joy that it provides, much learning is associated with end goals (i.e., outcomes). When learning is outcome-directed, it is usually planned, typically guided by structured experiences developed by experts (Fink, 2003)⁸. At their core, these experiences are an interaction between a learner and a source. When learning is planned the desired outcomes guide selection and development of the interactions. Learning can use interactions that are virtual or real, those that take place synchronously or asynchronously, those that are simulated or real, those that involve a single independent learner or a group of learners, and those that occur in a variety of contexts including classroom, community, or home. Learning events are designed to support or challenge ideas and assumptions the learner brings to the experience.

Presentations, community-based experiences, experiential lab sessions, online or in-person case discussions, readings, video demonstrations & cases, clinical experiences, online interactive learning activities & discussions, can all be sources of learning. Because persons bring broad backgrounds of life experience to their learning events, and these influence how a learning experience is interpreted (Knowles, Holton, & Swanson), humans have diverse preferences in learning (e.g., visual, auditory, tactile, or kinesthetic) (Kolb, 1984)⁹. The more varied the provided sources of learning and forms of interaction, the more likely it is that an individual learner’s preferences will be offered, and the more likely that a diverse group of learners will achieve the desired outcomes with greatest comfort.

Learning occurs in both a linear fashion and a spiral fashion. The former is present when information is presented sequentially – building directly off of content, skills, or attitudes developed earlier. The spiral element of learning occurs when concrete experiences, reflective observation, abstract conceptualization, planning for implementation, active experimentation occur in a repeating, and evolving manner, allowing the learner to elaborate upon prior work through guidance and feedback (Kolb, 1984).

Occupational Therapy Students:
Students come to the Program in Occupational Therapy with varying levels of self-direction, independence, life experiences, and commitment to the occupational therapy profession. Students

---


learn best when they take time to reflect on their experiences, when they are encouraged to participate in their own learning and self-assessment, and when they are given choice and can see relevance and value in their learning experiences. It is the Program’s belief that students benefit from collaborative learning experiences with other learners (teachers, mentors, peers) where there is mutual challenge and support.

Like occupation, learning is influenced by contexts (e.g., physical, social, temporal) (Dewey), and is most effective when these are continuously evaluated and adapted to ensure that they facilitate development of the knowledge, skills and attitudes required for the safe and effective practice of the discipline as well as support and empower independence as learners.

**Educator’s Role**

The Occupational Therapy Program believes that the educator’s role in preparation of occupational therapists parallels the role of the occupational therapist in practice. That is, we hold that occupational therapy educators facilitate learning by organizing contexts and educational occupations to facilitate the critical concrete experiences, reflections, abstract conceptualizations, and experimentation with alternatives that lead to learning the information, skills, habits, routines, and attitudes needed to become competent evidence-based critical thinking practitioners, scholars, and leaders in both contemporary and emerging practice.

**Overview of the Profession**

The Program in Occupational Therapy prepares students to work with children and adults who have physical, cognitive, or emotional disabilities that interfere with their ability to engage in life’s tasks. Occupational therapists serve as vital members of a treatment team, consulting with physicians, physical and speech therapists, nurses, social workers, psychologists, vocational counselors, teachers, other specialists, and family members. They blend a scientific knowledge of the human body and mind with an understanding of the challenges of disability, environment and culture. The occupational therapy process includes evaluation of physical capacities, cognitive skills, emotional responses, social adjustment, and the physical and social environment. With this information the occupational therapist plan, intervention using a combination of therapeutic activities, adaptive equipment, and training in specialized techniques to develop or restore function and to help individuals achieve the greatest possible independence. Occupational therapists also become managers of treatment programs and clinical researchers who study the efficacy of therapeutic interventions.

**Certification and Licensure**

Graduates of the Master of Occupational Therapy curriculum will be eligible to sit for the national certification examination for the occupational therapist administered by the National Board for Certification in Occupational Therapy (NBCOT). Upon successful completion of this exam, an individual will be an Occupational Therapist, Registered (OTR). In addition, most states require licensure in order to practice; however, state licenses are usually based on the results of the NBCOT Certification Examination.

*Note: A felony conviction may affect a graduate’s ability to sit for the NBCOT certification examination or attain state licensure.*
Information about the Minnesota license to practice occupational therapy may be found at [www.health.state.mn.us/divs/hpsc/hop/index.html](http://www.health.state.mn.us/divs/hpsc/hop/index.html) or 651.201.3725.

**Curriculum**

*Method of Delivery:* The University of Minnesota’s Program in Occupational Therapy provides its entry-level Master’s curriculum through a hybrid model of delivery. This model combines distance and traditional educational methodologies to afford learning-in-place/learning-on-demand, to encourage an increase in occupational therapy workforce within currently underserved areas. Toward these goals, the didactic curriculum combines use of distance learning strategies, with on-campus experiences used when there is a need for real-time, face to face interaction or an emphasis on hands-on professional skill development or a need to experience unique devices/materials.

**Organization of Curriculum**

The Master of Occupational Therapy curriculum prepares men and women with the knowledge, skills, and attitudes needed to be an efficient and effective direct and consulting practitioners, managers, educator/communicators, researcher/scholars, and advocates for the profession and consumers.

The curriculum’s content is grounded in the history, theories, and science of occupation and it is this crucial foundation content that is addressed in the first phase of the curriculum. Its early placement establishes students’ perspectives as occupational therapists and “occupation” as the encompassing context in which all other content is perceived and integrated. Occupation is reiterated, applied, and expanded within each later course, with increasing complexity and elaboration.

The curriculum follows a macro- to micro progression to reinforce the broadest orientation to the profession and encourage students to view societal and community emerging areas of practice as fully integrated expressions of the profession. These core content areas of the curriculum are illustrated within the curriculum design model as sections of content within the overarching concept of occupation.

Content within each client area (i.e., society, community, family and individual) is organized using the occupational therapy process as a framework. Within this framework, the curriculum covers the screening, assessment, intervention, discharge, documentation, and evidence associated with

---

10 Accreditation Council for Occupational Therapy Education (ACOTE) (Final Draft, 1/2006) *Standards for an accredited master’s-level educational program for the occupational therapist.*

society and community (occupational disadvantage and disparity) and family and individuals (occupational delay and interruption). Human science courses (e.g., anatomy, neuroscience) begin immediately after a foundation of occupation is established. Content related to applied science/conditions (e.g., mental and physical conditions) is integrated throughout the curriculum to provoke learning of client-specific occupational therapy issues. This organization requires that students relate information across areas of practice and diagnostic groups, and integrate learning from earlier courses into successively more complex treatment planning situations, ultimately preparing them to address the complex situations facing occupational therapists in practice and research.

**Curricular Threads**

Four core threads run throughout the curriculum and are incorporated across courses. They are:

**Scholarly Inquiry:** Graduate education has always been associated with scholarship, and thus the interaction between evidence-based-practice and practice-based-evidence is a core element in the Program of Occupational Therapy’s curriculum. The curriculum builds upon students’ prerequisite research knowledge, ensuring that students have the skills to be informed consumers of scholarly information and that they see themselves as potential contributors to the profession’s body of evidence. The research line in the curriculum incorporates integrated use of evidence across classes and progresses to a mentored scholarly project. Students are expected to disseminate their project results, as appropriate, at state and national conferences and in refereed journals, further encouraging their research commitments to the field.

**Public Engagement:** The University of Minnesota has a strong commitment to public engagement as an intrinsic element of graduate education’s scholarship, learning, and service. The Program in Occupational Therapy’s curriculum incorporates public and professional engagement throughout its entry-level Master’s curriculum via course learning activities and community experiences. The ultimate goal is the development of citizen-scholar-professionals, committed to the advancement of the health and well-being of both their profession and the broader community.

**Client-centered and Cultural Effectiveness:** The Program is committed to serving the diverse health care needs of the State of Minnesota, the nation, and the world. The faculty believe that all practice must be driven by client needs and be responsive to client diversity. It therefore believes that client-centered and culturally effective practice are inexorably linked. The curriculum is grounded in client-centered models of practice, with coursework progressively building and expanding students’ exploration of diverse clients and contexts.

**Active Engagement with Clients:** The curriculum embraces Kolb/Bennett’s broad definition of experiential learning, and therefore incorporates it within all coursework. In addition to prominent use of laboratory and case experiences, the didactic curriculum integrates numerous opportunities for public and professional engagement via assignments and Level I fieldwork. The final phase of the academic program is the supervised application of theory and skills through Level II fieldwork/internship. Whereas earlier real-life occupational
therapy experiences permit students to practice under close supervision and mentoring. Level II fieldwork facilitates students’ meaningful and independent performance in a minimum of two different settings.

**Ongoing Learning After Graduation**

The Program in Occupational Therapy explicitly promotes continuing competency and life-long learning by its entry-level Master’s graduates. Faculty model professional commitment through their own participation in professional organizations and continuing education, ongoing specialty client practice and practice-based research, publication and presentation of their research and scholarly products, and service to the professional and client communities. As graduates develop their own practice specialties, many serve as adjunct faculty in the program offering additional role models of the need, purpose, and benefits of continuing professional growth.

**Schematic**

The accompanying figure shows the curriculum design in schematic form. At the center of the figure are three columns representing the core threads (i.e., scholarly inquiry, client-centered and culturally effective practice, and public engagement) that run through the curriculum, and are incorporated across courses.

The vertical axis indicates the temporal and experiential nature of the development of the professional occupational therapist from the entering student.

The reflective spiral of experiential learning, labeled with its elements at its beginning on the horizontal axis, ties together the chronological overlapping progression of content from a basis of occupational theory and models (displayed as an encompassing cone), progressing through the practice applications to society, community, family, and person. These content areas support the Level II Fieldwork where students become competent practitioners, with the overarching goal of life-long learning.

**Integration of Curricular Design into Evaluation**

The curriculum design was embedded into layers of curriculum evaluation processes. Course evaluations identify course content believed by students to be integral to the study of occupational therapy. Each course uses outcomes-based assessment methods to assess level of student learning.
In addition, each course was systematically mapped to curricular threads assessed, in part, via student and graduate survey. Level I fieldwork evaluations collect information relating to student achievement of goals associated with curricular threads and course learning goals. Lastly, the Program evaluates student success in meeting core learning outcomes through a systematic evaluation process. Each method of evaluation is directly linked to the curricular design process.

Course Plan

YEAR ONE
The first year of study focuses on building a firm foundation in the study of activity and occupation; society, community, family and environmental influences on human occupation; and foundations of occupational therapy practice when human occupation is reduced. All students participate in their communities as engaged citizens and with their interprofessional colleagues as they practice professional level skills. Two Level I fieldwork experiences provide guided practice in the role of occupational therapy.

Fall Semester
Course (4 sessions face to face; multiple days each session)
CAHP 5110 Foundations of Interprofessional Communication and Collaboration (1 credit)
OT 6100 Public & Professional Engagement I (0.5 credit)
OT 6101 Foundations of Occupational Science and Occupational Therapy (4 credits)
OT 6102 Professional Identity: Behaviors and Attitudes (2 credits)
OT 6103 Occupational Therapy Process for Society (3 credits)
OT 6111 Foundations: Occupations as Therapy (3 credits)
OT 6113 Occupational Therapy Process for Community (3 credits)
Total Credits 16.5

Spring Semester
Course (6-8 sessions face to face; multiple days each session; note that all students attend anatomy lab at the Twin Cities Campus)
OT 6200 Public & Professional Engagement II (0.5 credit)
OT 6201 Functional Anatomy and Kinesiology (3 credits)
OT 6202 Occupational Therapy Process for Individuals: Occupation through Compensation and Level I Fieldwork (5 credits)
OT 6203 Occupational Therapy Process for Family (2 credits)
OT 6213 Occupational Therapy Process for Individuals: Medical Contexts (2 credits)
OT 7201 Scholarly Inquiry in Health Sciences (4 credits)
Total Credits 16.5

Summer Semester
Course (8-15 sessions face to face; multiple days each session) Credits
OT 6200 Public & Professional Engagement II (0.5 credit)
OT 6301/7301 Neuroscience (5 credits)
OT 6302 Occupational Therapy Process for Individuals: Occupation through Remediation and Level I Fieldwork (4 credits)
OT 6312 Occupational Therapy Process for Individuals: Psychosocial Approaches and Level I Fieldwork (3 credits)
OT 6322 Occupational Therapy Process for Individuals: Work Context (2 credits)
OT 7394 Scholarly Project in Occupational Therapy I (2 credits)
Total Credits 16.5

YEAR TWO
Year two shifts focus from conceptual coursework to increased emphasis on practice. Students apply concepts of occupational therapy to increasingly complex areas of practice in a broad range of contexts including work, school, and group settings. Students spend more time practicing during Level I fieldwork and more time engaged within their communities. Six months of year two is devoted to Level II fieldwork where students practice the role of occupational therapist under the direct supervision of an occupational therapist. All students attend Level II fieldwork in a traditional medical setting and a broad range of community settings in both urban and non-urban settings. Students should expect to travel to at least one of their Level II fieldworks.

Fall Semester
Course (15 sessions face to face; multiple days each session) Credits
OT 6200 Public & Professional Engagement II (0.5 credit)
OT 6402/7402 Occupational Therapy Process for Individuals: Occupation through Neurorehabilitative Approaches and Level I Fieldwork (4 credits)
OT 6403 Management of Occupational Therapy Services (1 credit)
OT 6412 Occupational Therapy Process for Individuals: Orthotics and Prosthetics and Level I Fieldwork (3 credits)
OT 6422 Occupational Therapy Process: Group Context (2 credits)
OT 6432 Occupational Therapy Process for Individuals: Educational Context and Level I Fieldwork (2 credits)
OT 7494 Scholarly Project in Occupational Therapy II (4 credits)
Total Credits 16.5

Spring Semester
OT 7596 Level II Fieldwork (typically January through March) (6 credits)
OT 7696 Level II Fieldwork (typically April through June) (6 credits)
Total Credits 12

**The beginning and ending dates of each Level II Fieldwork assignment are suggested by the American Occupational Therapy Association to support uniformity in the arrangements made by many of the schools across the country. Students should refer to the Fieldwork Manual for policy and procedure information related to Level II Fieldwork placement and scheduling.**
Course Descriptions

SEMESTER 1 (16.5 CREDITS)

CAHP 5110 Foundations of Interprofessional Communication and Collaboration (1 credit)
This course facilitates an interprofessional approach to health care. It includes both online modules and face to face interprofessional group activities. Students from various professional programs in the Academic Health Center will be divided into groups of approximately twelve students for activities directed by a course facilitator to meet for five two-hour sessions throughout the semester. The five components of this course include: personal and professional image; basics of teamwork, self and peer assessment; knowledge of health professions; professional identity and integrity; and relationships between the professions and those they serve.

OT 6100 Public and Professional Engagement I (0.5 credit)
Working in collaboration with an academic advisor, students will design a series of experiences in the natural setting (assignments, service learning, and public engagement) that include a broad base of contexts/practice settings and clients (society, community, family) across the lifespan.

OT 6101 Foundations of Occupational Science and Occupational Therapy (4 credits)
The course provides the historical, philosophical, and theoretical foundations of occupational therapy. The student will examine the definition of occupation, assessment of occupational performance, activity analysis, and models of practice. Course content includes the Occupational Therapy Practice Framework.

OT 6102 Professional Identity—Behaviors and Attitudes (2 credits)
This course is an introduction to and examination of the attitudes and behaviors of the occupational therapy professional. This is the first course in the series and serves as a foundation for the professional development thread that weaves through the curriculum. Students explore their own self-awareness, values, interpersonal communication, and therapeutic use of self. Standardized personality inventories are used in understanding self in relation to others in a group.

OT 6103 Occupational Therapy Process for Society (3 credits)
Students examine societal influences on occupations and occupational engagement. Global societal issues are discussed with particular emphasis on how various society’s address health. Laws and policies governing access and health care will be analyzed and measures of occupational performance applied to the societal level. The role of the occupational therapist at the societal level is addressed.

OT 6111 Foundations: Occupations as Therapy (3 credits)
This course addresses everyday occupations and their use as a therapeutic modality. Students apply activity analysis to occupations. Students apply their beginning knowledge to the process of grading and adapting the environment, tools, materials, and the occupation to enhance successful performance by the individual.
OT 6113 Occupational Therapy Process for Community (3 credits)
This course teaches application of the OT Process to wellness and health promotion activities in the community. It focuses on the knowledge, skills and attitudes necessary to understand the influence of community health as a whole on the health of individuals. This course exposes the student to health behavior theories (including adult education). Core to the OT Process in community is program development and evaluation. Students will apply occupational therapy theoretical models to community health in agencies for underserved community populations or in areas of emerging practice at a community level.

SEMESTER 2 (16.5 CREDITS)

OT 6200 Public and Professional Engagement II (0.5 credit)
A continuation of Public and Professional Engagement I; students will engage in professional and community activity that align with occupational therapy practice.

OT 6201 Functional Anatomy and Kinesiology (3 credits)
This course explores gross human anatomy emphasizing skeletal, muscular, circulatory, and peripheral nervous systems of the extremities, neck, and trunk through online Anatomy TV, videotapes, and cadaver lab prosections. Students analyze and evaluate human movement (i.e., occupations, tasks, and activities) from a biomechanical perspective.

OT 6202 Occupational Therapy Process for Individuals:
Occupation through Compensation (5 credits)
This course focuses on use of compensatory approaches to enhance an individual's participation in occupations of daily living. The O.T. Practice Framework is applied to evaluation and intervention including occupational performance skills, patterns, contexts, activity demands, and client factors. Experiential learning includes lab, case studies, and Level I fieldwork.

OT 6203 Occupational Therapy Process for Family (2 credits)
Students will apply the OT Process to the family. The influence of family systems on the health, well-being and occupational participation of the family and individual members will be addressed. Principles of family-centered care will be applied to the interaction within families of very young children and families of elders with dementia. This course extends prior knowledge of service delivery by providing an overview of OT in home care settings.

OT 6213 Occupational Therapy Process for Individuals: Medical Contexts (2 credits)
This course provides an overview of medical model systems and settings (e.g. inpatient acute, long-term care, partial hospitalization) and examines individual client assessment and intervention from a medical model perspective. Students develop written and verbal communication skills and learn about issues of reimbursement in medical settings.

OT 7201 Scholarly Inquiry in Health Sciences (4 credits)
This course explores how evidence-based practice is developed, disseminated, and utilized in health sciences. Students in small groups will write a qualitative and/or quantitative scholarly proposal
including critically appraising relevant literature, choosing assessment tools, and selecting appropriate research design and statistical analysis for the data.

**SEMESTER 3 (16.5 CREDITS)**

**OT 6200 Public and Professional Engagement II (0.5 credit)**
A continuation of Public and Professional Engagement I; students will engage in professional and community activity that align with occupational therapy practice.

**OT 6301 Neuroscience (5 credits)**
This course presents neuroanatomic structures, functional systems and basic neurophysiologic concepts. Emphasis is on application so that students may understand, evaluate and treat client conditions in all areas of physical, psychosocial and cognitive dysfunction.

**OT 6302 Occupational Therapy Process for Individuals: Occupation through Remediation (4 credits)**
This course will focus on the biomechanical approach to evaluation and treatment of clients with clinical conditions appropriate to this approach (e.g., conditions with loss of strength, endurance, range of motions, sensibility, and soft tissue integrity). Cases will be used to help students learn how to apply the OT process to specific clients. Level 1 Fieldwork helps students apply knowledge to real-world settings.

**OT 6312 Occupational Therapy Process for Individuals: Occupation through Psychosocial Approaches (3 credits)**
This course extends prior knowledge of mental health diagnoses by providing information on psychiatric/neuropsychological assessment and treatment. Issues related to medical and community management and the role of OT with clients with mental health needs are studied. Level 1 Fieldwork exposes students to current practice issues.

**OT 6322 Occupational Therapy Process for Individuals: Work Contexts (2 credits)**
This course focuses on the knowledge, skills, and attitudes needed to apply the occupational therapy process with individuals who have been injured in work settings or to promote injury prevention. Students learn about the unique structure and requirements of the Workers Compensation System. They also learn basic ergonomic and prevention principles which can be applied to individuals to decrease potential injuries.

**OT 7394 Scholarly Project in OT (2 credits)**
Group or individual study of a question related to occupational therapy. Students will demonstrate a high level of critical thinking as they plan, conduct, and evaluate their mentored scholarly project.
SEMESTER 4 (16.5 CREDITS)

OT 6200 Public and Professional Engagement II (0.5 credit)
A continuation of Public and Professional Engagement I; students will engage in professional and community activity that align with occupational therapy practice.

OT 6402 Occupational Therapy Process for Individuals: Occupation through Neurorehabilitative Approaches (4 credits)
This course compares and contrast major theories used to explain sensory systems, vision, motor control/learning, perception, and cognition in children and adults. Primary focus is on evaluation and intervention of central nervous system disorders, although theories with evidence for use with non-CNS issues are addressed for expanded populations. Students learn pediatric OT practice in a Level 1 Fieldwork experience.

OT 6403 Management of Occupational Therapy Services (1 credit)
The student will learn management and supervision of occupational therapy services. Students will be prepared to lead and manage in multiple service delivery settings by training in basic human resource and business management skills. Students will learn the impact of health policy, systems analysis, tracking and analysis systems, marketing principles and strategies for resource procurement. Students will develop skills valuable as an entrepreneur in occupational therapy practice.

OT 6412 Occupational Therapy Process for Individuals: Orthotics and Prosthetics (3 credits)
Addresses occupational therapy processes using prosthetics and orthoses to treat selected conditions in children, adults, and elders. Practical skills and critical appraisal are emphasized. Also covers physical agent modalities and wound care. Level 1 Fieldwork facilitates student learning in a practice context.

OT 6422 Occupational Therapy Process for Individuals: Group Contexts (2 credits)
This course teaches small group therapeutic intervention. It focuses on applying small group theory and group dynamics to facilitate change in individuals in a group setting. This course uses a problem based learning approach to generate group dynamics and analyze group process in real time. Skills are developed in this course with application to mental health treatment.

OT 6432 Occupational Therapy Process for Individuals: Educational Context (2 credits)
Occupational therapy assessment and intervention in early intervention and K-12 settings will be explored. Students will learn about various models of services delivery, legislation that governs school-based practice, and occupational performance areas commonly addressed by occupational therapists in these settings. Students experience school-based practice in a Level 1 Fieldwork.

OT 7494 Scholarly Project in OT (4 credits)
Group or individual study of a question related to occupational therapy. Students will demonstrate a high level of critical thinking as they plan, conduct, and evaluate their mentored scholarly project.
Students will submit a written description of their project in APA format and defend their project orally.

**SEMESTER 5 (12 CREDITS)**

**OT 7596/7696 Fieldwork Level II (6 + 6 credits)**

Level II Fieldwork is a two course sequence where students are provided with in-depth experiences in delivering occupational therapy services to clients in clinical settings, focusing on the application of the OT Process. A minimum of 24 weeks full-time is required. This may be completed on a part-time basis if the site allows this but must be at least 50% of full time. Typically, Level II fieldwork is completed in two different settings for a 12 week period of time at each setting. In all settings psychosocial factors influencing engagement in occupation must be integrated into client-centered, occupation-based outcomes. Due to the importance of patient safety, all students are expected to meet the established technical standards and adhere to all stipulations outlined by the established program/clinical site affiliation agreements.

All students should expect to travel throughout the state to attend Level II fieldwork placements which may require alternative housing arrangements. All Level II fieldwork must be completed within two years of completion of the didactic course work.

**The beginning and ending dates of each Level II Fieldwork assignment are suggested by the American Occupational Therapy Association to support uniformity in the arrangements made by many of the schools across the country. Students should refer to the Fieldwork Manual for policy and procedure information related to Level II Fieldwork placement and scheduling.**

**Accreditation**

The Program in Occupational Therapy is accredited by the [Accreditation Council for Occupational Therapy Education (ACOTE)](https://www.acote.org/) of the [American Occupational Therapy Association (AOTA)](https://www.aota.org/).

ACOTE  
c/o Accreditation Department American Occupational Therapy Association (AOTA)  
4720 Montgomery Lane, Suite 200  
Bethesda, MD 20814-3449  
Phone: 301-652-2682 /TDD: 800-377-8555  
Fax: 301-652-7711

The Standards for an Accredited Occupational Therapy Program apply to every occupational therapy program in the United States. These Standards guide the development of the curriculum and include such topics as professional communication, evaluation, intervention, service delivery, research, and professional community.

The programs are visited on a regular basis to determine if they comply with ACOTE standards. If so, they are accredited or re-accredited. The Program in Occupational Therapy at the University of
Minnesota began in 1946, achieved its first accreditation in 1948 and has been continuously accredited since then. The Rochester location achieved its initial accreditation status in 2008.

Our current accreditation review occurs in fall, 2020. A year-long self-study is undertaken before the accreditation visit, during which every aspect of the curriculum is scrutinized by the faculty. Input from students, fieldwork supervisors and employers is also sought. In addition, the faculty of the program have a curriculum evaluation plan which outlines a yearly set of activities for curriculum review and development. Course evaluation forms that you complete help the faculty determine quality learning activities and those which need revision. As a result, the curriculum is continually redesigned to foster the highest quality learning in our students.

**Graduation Information**

Three major events mark the requirements you need to graduate:

1) End of your academic classes: You do not technically graduate from the program until your Scholarly Project and all fieldwork is completed, however, the end of classes is the last opportunity for all of you to be together here at the University. It is at this point that the Center for Allied Health Programs will sponsors a cap and gown graduation ceremony. You will receive specific information about this as the event approaches.

In order to graduate with a Master’s in Occupational Therapy students must have completed:

- 78 credits of required OT courses included Level II Fieldwork
- GPA of 2.8 or better
- Group scholarly project poster accepted by a committee and a paper accepted by the research advisor

2) Commencement: the Center for Allied Health will provide an official ceremony celebrating graduation. The graduation ceremony for the Center for Allied Health Programs is held in December, after students have completed coursework, but before completion of Level II Fieldwork.

Participation in this ceremony is voluntary. You may participate in the commencement ceremony without having completed all your degree requirements, but you will not officially graduate from the University until all degree requirements are completed.

3) Graduation: Formal graduation and the award of the Master of Occupational Therapy degree generally occurs in July, following completion of Level II Fieldwork. To officially graduate from the University of Minnesota, your file must be reviewed and approved by the Center for Allied Health Programs. Clearance for official graduation (vs. commencement) from the University of Minnesota is given by the Center for Allied Health Programs only after you have completed all courses listed on your Degree Program form, including all Level II fieldwork and your Scholarly Project. In addition, if you are doing an optional fieldwork, use the end of all fieldwork (including the 3rd) as the date that you wish to graduate (on your graduation paperwork). All Level II Fieldwork must be completed within 24 months of completing your coursework. The Center for Allied Health Programs then
checks your Degree Program form against your transcript to be sure you have completed all courses listed on the Degree Program form. Once that is done, you will be cleared to graduate.

CAHP Student Services automatically enrolls you in a non-credit graduation online course in your fourth semester. This course will direct you to the necessary forms and paperwork required to graduate.

**Faculty**

Peggy Martin, PhD, OTR/L  
Program Director  
15-170B Phillips Wangensteen Building  
(612) 626-4358 | marti370@umn.edu  
Has taught OT 6103 OT Process for Society; OT 6301 Neuroscience; OT 6403 Management; research group advisor  
**Education**  
University of Minnesota, PhD in Adult Education  
University of Illinois, MS in Occupational Therapy  
University of Minnesota, BS in Occupational Therapy  
**Scholarly Interests**  
Adult education, cultural competence and sensitivity, development of expertise, clinical reasoning, substance and health care education, movement analysis, developmental disabilities, and sensory processing

Chris Bourland, MHA, OTR/L  
Director of Experiential Learning  
R278 Children’s Rehabilitation Center  
(612) 626-3995; stra0183@umn.edu  
Has taught OT 6100 & OT 6200 Public and Professional Engagement I & II; OT 6403 Management; and OT 7596/ 7696 Level II Fieldwork I & II  
**Education**  
MHA in Health Care Administration, University of Minnesota; BS in OT, University of Minnesota

Jennifer Hutson, MOT  
Teaching Specialist  
(612) 788-5588 | hutso028@umn.edu  
Has taught OT 6111 Foundations: Occupations as Therapy  
**Education**  
MOT University of Illinois at Chicago  
**Scholarly/Practice Interests**  
Assistive technology, Wheelchair seating
Cindy Jacobs, MS, OTR/L
Teaching Specialist
(877) 334-2659; pell0063@umn.edu
Has taught OT 6402 OT Process for Individuals: Neurorehabilitation and OT 6432 OT Process for Education. Teaches OT 1003 Orientation to OT.
Education
MS in OT University of Minnesota

Terrianne Jones, MA, OTR/L
Fieldwork Co-coordinator; Student Organization advisor; Instructor
15-172 Phillips Wangensteen Building,
(612) 626-3252 | jone1727@umn.edu
Has taught OT 6113 OT Process for Community; OT 6202 OT Process for Individuals: Occupation through Compensation; OT 6312 OT Process for Individuals: and Occupation through Psychosocial Approaches; research group advisor
Education
Ph.D. (Cand) in Occupational Therapy, Nova Southeastern University, Fort Lauderdale, Florida; M.A. in Occupational Therapy, College of Saint Catherine; B.S. in Occupational Therapy, University of Minnesota
Scholarly/Practice Interests
Aging in place, evidence based practice, development of clinical reasoning

Corey McGee, MS, OTR/L
Instructor and Program Coordinator in Rochester (interim)
CAHP offices University Square
(507) 258-8054 | mcge0062@umn.edu
Has taught OT 6202 OT Process for Individuals: Compensatory Approaches; OT 6412 OT Process for Individuals: Orthotics and Prosthetics; OT 7201 Scholarly Inquiry in Health Sciences; research group advisor
Education
PhD (Cand) in Rehabilitation Sciences, University of Minnesota; MS in Occupational Therapy, University of Minnesota
Scholarly Interests
Biomechanics, hand therapy, continuing education

Virgil Mathiowetz, PhD, OTR/L, FAOTA
Associate Professor, Assistant Program Director and OT Coordinator for Rehabilitation Sciences
R505 Children’s Rehabilitation Center
(612) 626-3759 | mathi003@umn.edu
Has taught OT 6201 Functional Anatomy & Kinesiology; OT 6302 OT Process for Individuals: Occupation through Remediation; OT 7201 Scholarly Inquiry in Health Sciences; research group advisor.
Education
University of Minnesota, PhD in Kinesiology
Boston University, MS in Occupational Therapy
University of Minnesota, BS in Occupational Therapy
Scholarly Interests
Task-oriented approach to CNS dysfunction, Stroke, Fatigue management in multiple sclerosis, Assessment of hand strength, dexterity, and hand function.
Patricia L. Schaber, PhD, OTR/L  
Assistant Professor, Co-Chair of Admissions Committee, Chair of Scholarship Committee  
R277 Children’s Rehabilitation Center  
(612) 626-5111 | schab002@umn.edu  
Has taught OT 6101 Foundations of Occupational Science and Occupational Therapy, OT 6203 OT Process for Family, and OT 6422 OT Process: Group Context; OT 6402 OT Process for Individuals; Neurorehabilitation; research group advisor  
Education  
PhD in Family Social Science, University of Minnesota; MA in Pastoral Studies, University of St. Thomas; BS in Occupational Therapy, University of Minnesota  
Scholarly Interests  
Dementia-Alzheimer’s type. Well-elderly interventions. Family-centered care models.  

Laura Sopeth  
Instructor  
Has taught OT 6402 OT Process for Individuals: Neurorehabilitation; supported teaching in OT 6202 OT for individuals: Compensatory Approaches, OT 6213 Medical Contexts, and OT 6301 Neuroscience  
Education  
AAS in Occupational Therapy Assistant at St. Catherine’s University  
BS in Occupational Therapy at University of Minnesota  
MA in Occupational Therapy at St. Catherine’s University  

Erica B. Stern, PhD, OTR/L, FAOTA  
Associate Professor  
R276 Children’s Rehabilitation Center  
(612) 626-2799 | stern001@umn.edu  
Has taught OT 7201 Scholarly Inquiry, OT 6302 OT Process for Individuals: Occupation through Remediation, OT 6402 OT Process for Individuals: Occupation through Neurorehabilitation Approaches; research group advisor  
Education  
PhD in Curriculum and Instruction, University of Kansas; MS in Health Sciences Education & Evaluation, State University of New York at Buffalo; BS in Occupational Therapy, Indiana University  
Scholarly Interests  
Driving, Responsible conduct of research, Functional effects of hand splints in arthritis. Assessment and intervention post Brain Injury/Stroke.
Absence for Participation in Religious Observances

The University of Minnesota permits absences from class for participation in religious observances. Students who plan to miss class must:

1. Inform instructors of anticipated absences no later than 7 days after the start of a course;
2. Meet with instructors to reschedule any missed examinations; and
3. Obtain class notes from other students.

Instructors are expected to assist students in obtaining course materials and assignments distributed during class sessions and to make arrangements for taking missed examinations.

Academic Integrity

Students are responsible for maintaining scholastic honesty in their work at all times. Students engaged in scholastic dishonesty will be penalized and reported to the Office of Student Conduct and Academic Integrity (OSCAI, http://www1.umn.edu/oscai/index.html).

The University’s Student Conduct Code defines scholastic dishonesty as “plagiarizing; cheating on assignments or examinations; engaging in unauthorized collaboration on academic work; taking, acquiring, or using test materials without faculty permission; submitting false or incomplete records of academic achievement; acting alone or in cooperation with another to falsify records or to obtain dishonestly grades, honors, awards, or professional endorsement; or altering, forging, or misusing a University academic record; or fabricating or falsifying of data, research procedures, or data analysis.”

Plagiarism is an important element of this policy. It is defined as the presentation of another’s writing or ideas as your own. Serious, intentional plagiarism will result in a grade of "F" or "N" for the entire course. Students are urged to be careful that they properly attribute and cite others' work in their own writing. For guidelines for correctly citing sources, go to http://tutorial.lib.umn.edu/ and click on “Citing Sources”.

In addition, original work is expected every course. It is unacceptable to hand in assignments for any course when credit has been received previously in another course unless by prior agreement with the instructor. Building on a line of work begun in another course or leading to a thesis, dissertation, or final project is acceptable. If you have any questions, consult the instructor.

Integrity is a critical aspect of all allied health professions, and the integrity of laboratory results can affect patient care and patient survival. If a student provides false personal information as a rationale for requesting special consideration on a test or other assignment, this situation will be referred to the Student Scholastic Standing Committee, and the student may be dismissed from the program, based on the ruling of this committee.
**Academic Advising Roles & Responsibilities**

Students in the Occupational Therapy Program have both an Academic Advisor and a Research Advisor. This section addresses only the roles and responsibilities of the assigned academic advisor.

Purpose: Academic advisors provide consultation and recommendations to occupational therapy students while they are in the MOT curriculum. This advising generally has three goals:

1. To provide early support for students in academic need;
2. To guide student transformation in the adoption of professional behaviors; and
3. To advise and encourage students’ professional development including areas of practice and graduate studies.

Scope of role: Advisement is provided related to problems in students’ academic performance and professional behavior, and planning of professional development. Issues of academic performance and professional behaviors may be assisted by referral to resources on campus. Issues that cannot be resolved within the scope of the course instructor or the adviser/student relationship can be referred to the Program’s academic progress procedures.

Stages of faculty academic advising:

*Stage one (Enrollment through 1st semester).* Faculty advisors are assigned to students immediately upon enrolling into the Program. The portal used by students to enter online courses contains their advisor’s name and contact information, thereby providing consistent and easy access to advisors by students. Before courses begin or early in the first semester, all OT faculty who are serving as advisors introduce themselves to their advisees (email or in person) and invite advisees to contact them for a meeting. Meetings occur in person, telephone, or virtually via web connections such as Skype®. Advisors document meetings in a follow up email to their advisee, so that both parties have a record of the meeting. Advisors retain an e-file of these emails.

By university policy course directors must communicate to students at risk of failing at course at the midpoint of a course. If an academic or behavioral issue does not resolve, students are contacted/or initiate contact with the course instructor who uses the student’s course record and e-portfolio Generic Abilities and Professional Development plan as counseling tools. If revised, the student’s new Generic Abilities and Professional Development plan is filed in the student’s e-portfolio. The instructor follows-up on all meetings with an email to the student summarizing the issue and action, with the instructor retaining an e-copy.

If academic or behavioral difficulties arise that are not resolved by contact with the instructor, the academic advisor is called into the issue. The advisor again uses the student’s course record, Generic Abilities, and Professional Development plan when s/he meets with the advisee. The advisor documents the results of the meeting in an email to the student; retaining record in an e-file. If revised, the student’s Generic Abilities and Professional Development plan is filed in the student’s e-portfolio.

*Stage two (Semesters 2 through 4).* The student’s research advisor transitions to the role of academic advisor at the beginning of the second semester, when the research advisor is assigned in
OT 7201 Scholarly Inquiry. Advisors provide consultation and guidance regarding academic progress, professional behaviors, and professional planning while guiding group research projects.

As in *Stage one*, during semesters 2 through 4, instructors are the ones to address course issues directly with students. In such contacts, they use the same process described in *Stage one*, above. Advisors may meet at the request of students, or when issues of student academic progress or professional behaviors arise that cannot be adequately addressed by the course instructor. Advisors continue to use the Generic Abilities and Professional Development plan as a counseling tool, and to file changes with the student and to retain copies in their own e-files.

Students may also seek contact with their advisor to request help proactively for academic or behavioral issues, and for input on professional decisions about practice area, advanced degrees, or other topics.

Continuing or exceptional behavioral or academic problems may require that the OT Program Director constitute an Occupational Therapy Program’s Academic Progress Committee, or refer to CAHP committee as part of a formal appeal process.

*Stage three (Level II Fieldwork through Graduation).* At the end of the fourth semester, the role of academic advisor transitions to the Academic Fieldwork Coordinator so that h/she is the student’s advisor throughout the Level II Fieldwork experience and until graduation. This transition is in keeping with prior student input, and occurs because of the intensity of the relationship between the student and fieldwork coordinator. As in earlier stages, the Academic Fieldwork Coordinator documents each student contact during fieldwork, copying the student. As with all courses, a student who is at risk for failing a fieldwork must be notified near midterm. The student’s Generic Abilities and Professional Development plan continue to be used as a counseling tool. Since the course instructor and advisor are one in the same during this period, continuing or exceptional behavioral or academic problems may require that the OT Program Director constitute an Occupational Therapy Program’s Academic Progress Committee, or refer to CAHP committee.

Please note that students may contact their student services advisor for additional help at any time (see page 57).

If a student is dissatisfied with their academic advising
At any stage, should the student not be satisfied with their academic advising, the student handbook directs the student to contact the Program Director with their concerns. When this occurs, the Program Director documents the concern in an email to the student and the advisor, working toward mediation when conflict exists. An advisor may be changed at the Program Director’s determination, as long as the student has followed the processes outlined in the handbook, and the newly designated advisor and student both agree to the assignment.

Advisor key responsibilities:
- Contact student advisees during the first semester of the program to introduce themselves, discuss the adviser/advisee relationship, share resources, and encourage communication.
- Inform advisees of adviser’s schedule and method to be used for making appointments.
• Provide consultative services for academic or professional concerns in a confidential environment.
• Provide information and access to information and resources external to the program.
• Monitor academic standing and professional behavior of advisees during the didactic portion of the occupational therapy curriculum.
• Meet with advisee when issues related to academic performance or professional behaviors are not resolved at the instructor level.
• Document student advisement meetings including a plan for resolution of issues and corresponding timeline for review. Submit documentation to the student, instructor (if involved), and place in the official student file.
• Present to OT faculty those academic and behavioral issues that are not resolved at the adviser level.
• Immediately inform the Program Director of concerns regarding student danger to self and/or others. In absence of the Program Director, this information may be reported to other appropriate persons/agencies for example, Student Counseling Services or campus security.

Student advisee key responsibilities:
• Seek timely advisement for academic and professional behavior concerns whenever there is a perceived need.
• Follow chain of command – first seeking resolution of course-related issues with the involved instructor(s), then with their academic advisor, and finally with uninvolved faculty member if their academic advisor is an involved instructor or Program Director (depending upon issue).
• Communicate with academic adviser if having difficulty completing the remediation plan or if there are barriers to resolving an academic or professional behavior issue.
• Use resources available at the University that are appropriate such as student counseling services, disability services, or student conflict resolution services

Address Changes
Address changes should be made online via One Stop http://onestop.umn.edu. Students may have more than one address on file.

Association Membership & Subsidy
Students are strongly encouraged to join both the American Occupational Therapy Association (AOTA) and the Minnesota Occupational Therapy Association (MOTA). These are excellent sources of professional information. AOTA membership includes subscription to practice journals quality continuing education, professional resources, website, advocacy, discounts, career resources, and a special interests section. AOTA membership options include two student rates, both under $100.00 a year. Go to http://www.aota.org/Benefits.aspx for more details. MOTA maintains a job file and video lending library. Both organizations have annual conferences (see Conference Attendance) with well-known keynote speakers and concurrent sessions on a variety of topics.
Thanks to gifts from alumni, the Program in Occupational Therapy subsidizes student memberships to the AOTA, paying 50% of the standard student membership fee for any student wishing to join AOTA. This offer is valid for membership in either year one and/or year two of the program. The Program in Occupational Therapy will reimburse 100% of the student dues for students who wish to join MOTA in year two of the program. Visit the CAHP website at http://cahp.umn.edu and go to Current Students.

**Cancellation or Withdrawals and Tuition Refunds**

Course cancellations are effective the day they are processed and strictly follow the dates listed on the refund schedule (exceptions are not made for classes that have not yet met for the week). A tuition refund will be based on the date the course is officially canceled (by canceling online or by taking a complete Registration and Cancel/Add form to a One Stop location), not on the date you stopped attending class.

Exceptions to the Cancellation/Tuition Refund Schedule on the University Academic Calendar are handled by an appeal process through the University of Minnesota Academic Support Resources Office and One Stop. When a student has a documented extenuating circumstance to report the appeal should be filed using the Tuition Refund Appeal Form available on One Stop Forms Online.

**Conference Attendance**

The Program in Occupational Therapy awards grants to support student participation at professional meetings related to promotion of the program.

**Procedure:**

1. The Program faculty will consider requests from students to fund conference costs (e.g., registration) for conferences pertinent to the student’s professional development. Priority is given to conferences where the student is representing the Program or presenting their research (i.e. poster, panel, presentation, or co-presentation).
2. Requests will be granted by a majority vote of the faculty.
3. Requests must be approved by faculty prior to registering for the professional meeting.
4. The financial support offered in this process is a grant and does not require repayment.

In cases when the Program approves support of a student’s professional meeting registration, the student will:

1) Submit a tentative schedule of activities that the student will be attending at the conference, to be approved by a designated faculty member prior to conference.
2) Hold a brown bag presentation summarizing the conference and sharing new learning with students and faculty within a month of their return.
3) Sign Contract for Accepting Grant for Professional Meetings Form agreeing to the above terms prior to receiving the conference registration grant.

**Attendance at AOTA sponsored events:**
When finances permit, the Program in Occupational Therapy will support student attendance at AOTA
sponsored events. Priority shall be given to sending ONE student who shall represent the single curriculum (both campuses) to the Assembly of Student Delegates Meeting prior to the annual national conference in the spring of each year. If funds allow, the program will also send a student from each campus to the AOTA National Student Conclave held annually in the fall of the year. A Record of which students attended in what capacity will be maintained in the OT student Organization Folder on the OT share drive by the faculty liaisons.

For each event, the Program will cover:

Registration:
- For the Conclave: the cost of the registration at the early bird rate for each student.
- For the Assembly of Student Delegates Meeting: There is no registration fee for the ADM meeting, however because the meeting occurs immediately prior to the national conference, the ASD representative will be invited to attend the conference as well. The Program will pay either half of the conference registration at the student rate, or one full day of registration at the student rate.

Hotel:
- For the Conclave: The Program will pay for two nights of hotel (double occupancy when students of the same gender attend, single occupancy when students of opposite genders attend).
- For the Assembly of Student Delegates Meeting: The Program will pay for two nights of hotel for the days of the ASD meeting, plus one additional night of hotel at the national conference. Students who wish to stay longer must pay for the remaining hotel days.

Airfare:
- For each event, the Program will pay for round trip tickets booked at the advance purchase rate (i.e., 3-6 weeks prior to the flight). Students who book late and incur added expense to the ticket will be expected to pay for the difference in fares.

Ground Transportation:
- For each event, the Program will pay for ground transportation to and from the airport to the event. Students are expected to choose the most cost efficient method available and to share trips when advantageous to do so.

Students are expected to pay for their own meals while attending the events. Students must save all other receipts for submission for reimbursement after the event.

Procedure

Assembly of Student Delegates Meeting:

Selection of Student: The Student OT organization president of either campus (year 2) will have the first option to attend, alternating between the two campus presidents year to year. In 2011 a Twin Cities Campus president went; for 2012 it will be the Rochester president.

If the designated president is unwilling or unable to attend, the option will be given to the class secretary from the same campus. If that person declines, the option will be open to any
student from the same campus. The selection of the attendee will be made by faculty if there is more than one student interested in going.

Responsibilities of the Student Attendee: The student attending the ASD meeting represents the entire University of Minnesota Program in Occupational Therapy. It is expected that the student will attend all the scheduled meetings and participate fully. Professional behavior and dress during the trip are expected. Upon return to campus, the student will be required to write a short 1-2 page reflective summary of the events and information learned, to be shared with faculty and fellow OT students via email.

Registration and booking of hotels, etc.: Students are expected to make all of the arrangements for registration and travel on their own and pay for the costs up front. After the event, the student must submit their reflection summary and their receipts to their faculty liaison, who will complete the appropriate reimbursement form and submit the request for payment on behalf of the student. No reimbursements shall be distributed without submission of the required reflection summary.

AOTA Student Conclave

Selection of Student: The Student OT organization president (year 2) of the campus not sending its president to the ASD meeting and the secretary of the other campus (year 2) will have the first option to attend. For example, in 2011 the Twin Cities Campus president will go, along with the secretary from the Rochester campus.

If the designated attendees are unwilling or unable to attend, the option will be open to any student from the same campus. The selection of the attendee will be made by faculty if there is more than one student interested in going.

Responsibilities of the Student Attendee: The students attending the AOTA Conclave represent the entire University of Minnesota Program in Occupational Therapy. It is expected that the students will attend all the scheduled meetings and participate fully. Professional behavior and dress during the trip are expected. Upon return to campus, the student will be required to create a short (15-20 min) presentation to share with the rest of the OT program the events and information learned at the meeting. This presentation will be scheduled with the instructor of OT 6200.

Registration and booking of hotels, etc.: Students are expected to make all of the arrangements for registration and travel on their own and pay for the costs up front. After the event, the student must submit their presentation materials as well as their receipts to their faculty liaison, who will complete the appropriate reimbursement form and submit the request for payment on behalf of the student. No reimbursements shall be distributed without submission of the required presentation summary.
Course Notes & Class Materials

Students are expected to use equipment and supplies at all times. This means that equipment and supplies will be used for their intended purpose as described by the faculty member directing their use. Students will check out equipment used during non-class times with the corresponding instructor of the course for which its use is required. At no time will a student use equipment or materials without first obtaining approval from the instructor.

Each laboratory classroom is equipped with a first aid kit and a corresponding safety manual. It is each student’s responsibility to review the safety manual and to know the evacuation procedures associated with your class location.

The faculty of the University encourages students to take and share notes in their classes, laboratories, and the many other instructional settings in which they participate as they pursue their education at the University. Taking notes is a means of recording information but more importantly of personally absorbing and integrating the educational experience. The faculty recognizes that collaborative note-sharing and discussion helps students learn.

However, the organization, preparation, and presentation of materials in a class or other instructional setting represent the intellectual effort of the instructor. Instructors have an interest in protecting this intellectual effort and in assuring the accuracy of any public representations of their course lectures and presentations. The classroom should also be a place where instructors feel free to share with students the full range of information available in their subject areas, including results of new research as it is produced, without concern that such new knowledge will be shared prematurely outside the University learning community. Broadly disseminating class notes beyond the classroom community or accepting compensation for taking and distributing classroom notes undermines instructor interests in their intellectual work product while not substantially furthering instructor and student interests in effective learning. Such actions violate shared norms and standards of the academic community.

1. Students may not distribute, via the Internet or other means, instructor-provided lecture notes or other instructor-provided materials, except to other members of the same class or with the express consent of the instructor.
2. Instructors have the right to impose additional restrictions on course materials in accordance with copyright and intellectual property law and policy. (See Board of Regents Policy: Copyright, Board of Regents Policy: Commercialization of Intellectual Property Rights and Administrative Policy: Copyright Ownership.)
3. While students hold the copyright to their own notes from a course, students may not engage in the widespread distribution or sale of transcript-like notes or notes that are close to verbatim records of a lecture or class presentation. Students may share such notes with other students in the same class.
4. The provisions of this policy are enforceable as University rules under Board of Regents Policy: Student Conduct Code.

If the faculty of a department or collegiate unit, as a group, or individual faculty in a particular course, have assented to or authorized the distribution of lecture notes or instructor-provided materials, such action does not violate this policy.
Criminal Background Studies
Based on amendments to the Vulnerable Adult Act in 1995 and 1996, Minnesota Law requires that any person who provides services involving direct contact with patients and residents at hospitals, nursing homes and other health care facilities licensed by the Minnesota Department of Health have a background study conducted by this state agency.

Education programs are authorized to initiate the background studies on their students as an alternative to each licensed facility requesting the studies. When requested by an educational program, the study is valid for one year and may be sent to every clinical or fieldwork site where students are placed during the coming year.

If a student is disqualified from having direct patient contact as a result of the background study and this disqualification is not set aside by the Commissioner of Health through a reconsideration process, the student may not be accepted for clinical placement at licensed facilities, and therefore, may not be eligible for a degree in this program.

All CAHP students are required to complete an annual criminal background study during the completion of their program. Information about completing the study is emailed from CAHP Student Services, and the timing of the study varies by program. Completing the study is a requirement and those who fail to cooperate with the request are not able to complete the clinical and/or fieldwork components of the degree program.

Disability Services
The University of Minnesota is committed to providing all students equal access to learning opportunities. Disability Services is the campus office that works with students who have disabilities to provide and/or arrange reasonable accommodations. Students registered with Disability Services, who have a letter requesting accommodations, are encouraged to contact the instructor early in the semester. Students who have, or think they may have, a disability (e.g. psychiatric, attentional, learning, vision, hearing, physical, or systemic), are invited to contact Disability Services for a confidential discussion at 612-626-1333 (V/TTY) or ds@umn.edu. Additional information is available at the DS website http://ds.umn.edu.

Communication
Email: The University-assigned student email account is the official means of communication between CAHP and all students. Students are responsible for all information sent via the University assigned email account. Students should check email daily. If a student chooses to forward the University email account, he/she is still responsible for all the information, including attachments. Forwarding is not recommended.

Online Communication Conduct Policy and Procedures:
Security of identity. Throughout our web courses, the use of technology will sometimes make students' names and U of M Internet IDs visible within the course website, but only to other students in the same class. Since we are using a secure, password-protected course website, this will not increase the
risk of identity theft or spamming for anyone in the class. If you have concerns about the visibility of your Internet ID, please contact the pertinent course director for further information.

*Protection of sensitive information.* In an effort to foster our students’ ability to freely express themselves and remain in compliance with Section III, Subdivision 6 of the University of Minnesota’s Code of Conduct, the program in occupational therapy encourages profound, open, and introspective online communication. The nature of such student communication (e.g., threaded discussions, chats, and other interactive functions) may, however, reveal possibly sensitive information. The Faculty of the program in occupational therapy will not develop questions or topics that ask students to reveal FERPA and HIPAA protected information nor will they share any protected information that is incidentally yielded from such communications. All members of this community are cautioned to avoid sharing potentially sensitive information that is outside of the scope of online communication. Likewise, all are prohibited from sharing any potentially sensitive information to those internal or external to an online course community who do not “need to know”. Examples of those who do not “need to know” include:

1) Family  
2) Friends external to the program  
3) OT students whom are not within your assigned discussion group (unless otherwise stipulated)  
4) Significant others  
5) OT faculty members who need not be privy to such information

Furthermore, it is the responsibility of all members of this community of occupational therapy online coursework (i.e., faculty, faculty extenders, course developers, administrative staff, and students) to conduct themselves in manners consistent with the U’s Code of Conduct through behaviors that:

1) are ethical (Sect. III, Subd. 1)  
2) are fair and respectful (Section III, Subd. 2)  
3) are in the best interest of all students (Sect. III, Subd. 3 and Subd. 7)  
4) safeguard one another’s’ shared and sensitive information (Sect. III, Subd. 9)  
5) promote a safe and healthy environment (Sect. III, Subd. 10)  
6) are consistent with the “Professional Behaviors of Students” section (pg. 47) of the student handbook

**Exam Proctoring**

Exams may be administered by eligible proctors if the course instructor has approved the request by the student at least one week in advance of the exam date. Eligible proctors are those whose license to practice includes knowledge of FERPA regulations and academic dishonesty policy (e.g. librarians, faculty of institutions of higher education). If a student wants an exam to be proctored the student should first contact the course instructor. It is the instructor’s decision to allow proctored exams within their course.


Insurance

University Mandate
The University requires all students to have health care coverage to ensure they have access to medical care and can maintain good health, which is essential for academic success. Students who are:

- admitted to a degree program; and
- registered for six or more credits per semester that count toward the automatic assessment of the Student Services Fee; are required by the University of Minnesota to have health insurance coverage.

"But wait! Is the University requiring me to have health insurance just so it can sell me its own health plan?" Not at all. The University wants students to have the health care plan that's right for them. Even though the University offers the Student Health Benefit Plan, students may waive the University-sponsored option and enroll in an alternative plan.

Waiving the University Plan
Eligible students* are automatically covered under the Student Health Benefit Plan unless they waive the coverage. If you can demonstrate that you have active health insurance coverage from another source as allowed under Minnesota law, you may apply for a waiver of coverage. If your waiver is approved, the Student Health Benefit Plan will be removed from your tuition bill. A waiver is valid for two years and must be re-applied for every two years.

*International Students are only eligible to waive the Student Health Benefit Plan if enrolled in the University-sponsored Graduate Assistant Health Plan or a United States-based employer-sponsored group health plan.

The fall 2012 deadline to waive the Student Health Benefit Plan is September 17, 2012.
If you do not apply to waive coverage by the stated deadline, or cannot demonstrate you have other eligible coverage, the Student Health Benefit Plan will remain on your tuition bill and you will automatically be enrolled in the Plan for the semester. International students have other health insurance and waiver requirements, consistent with federal visa regulations, market availability and other educational factors. International Students are automatically enrolled in the Student Health Benefit Plan and are only eligible to waive out of it if enrolled in either the University-sponsored Graduate Assistant Health Plan or a United States-based employer-sponsored group health plan. Academic Health Center (AHC) students have a separate AHC student health plan and waiver procedure. Please visit www.shb.umn.edu for more information.

It's important to waive the University plan correctly: Providing deceptive information on the health plan registration screen is a violation of the Student Code of Conduct and could result in student judicial action in addition to denial of enrollment in the Student Health Benefit Plan. Students who are automatically enrolled in the Plan will be charged the full, nonrefundable fee for the Student Health Benefit Plan at the start of each semester.
AHC Student Health Benefit Plan
All admitted Academic Health Center students registered for one or more credits in an Academic Health Center program are automatically enrolled in the University-sponsored AHC Student Health Benefit Plan. All eligible Academic Health Center students will be enrolled in the University-sponsored AHC Student Health Benefit Plan prior to the start of each new term unless they are eligible for, and submit a waiver request. For complete details regarding the plan coverage visit http://www.shb.umn.edu/twincities/ahc-students/ahc-student-health-benefit-plan.htm.

AHC Disability Insurance Plan
As of September 1, 2009, the Academic Health Center, the Office of Student Health Benefits, and Guardian Life Insurance Company have partnered to provide Long Term Disability (LTD) insurance coverage for eligible Academic Health Center students on the Twin Cities, Duluth, and Rochester campuses.

This coverage is not optional for students in qualifying programs. Academic Health Center students, enrolled in a qualifying AHC program, will be automatically covered under a group Long Term Disability plan while a student. They will see a charge of $41.50—an average cost of $6.92 per month—for this coverage on their student account once at the beginning of each fall and spring semester. Payment of this fee for two consecutive semesters provides year-around coverage until graduation from their program. For complete details please go http://www.shb.umn.edu/twincities/ahc-students/disability-insurance-plan.htm.

Voluntary Student Dental Plan
The University of Minnesota is proud to offer the Voluntary Student Dental Plan to help you stay smiling. For less than a dollar a day, the Voluntary Student Dental Plan offers year-round dental care that’s sure to keep your smile healthy and your wallet happy. The Office of Student Health Benefits has partnered with MetLife to provide this service, giving you lower costs, approximately 15% to 45% less than the same or similar services at other dentists in your area; freedom to choose from thousands of participating providers without being locked into one; fully covered preventive care; and more!

For more details visit http://www.shb.umn.edu/twincities/ahc-students/voluntary-dental-plan.htm.

Overview of Privacy and Data Security
Health Insurance Portability and Accountability Act of 1996 (HIPAA)

Overview:
The purpose of HIPAA is to improve the portability and continuity of health insurance coverage in the group and individual markets, to combat waste, fraud, and abuse in health insurance and health care delivery, to promote the use of medical savings accounts, to improve access to long-term care services and coverage, to simplify the administration of health insurance, and for other purposes. The University has appointed a HIPAA Privacy and Security Officer, who is responsible for developing University policies and procedures that implement the HIPAA standards.
The Privacy Standards

Overview:
The privacy provisions HIPAA apply to health information created or maintained by health care providers who engage in certain electronic transactions, health plans, and health care clearinghouses. The Department of Health and Human Services (HHS) has issued the regulation, "Standards for Privacy of Individually Identifiable Health Information," applicable to entities covered by HIPAA. The Office for Civil Rights (OCR) is the Departmental component responsible for implementing and enforcing the privacy regulation.

The Security Standards

Overview:
The Administrative Simplification provisions of HIPAA require the Department of Health and Human Services (HHS) to establish national standards for the security of electronic health care information. The final rule adopting HIPAA standards for security was published in the Federal Register on February 20, 2003. This final rule specifies a series of administrative, technical, and physical security procedures for covered entities to use to assure the confidentiality of electronic protected health information. The standards are delineated into either required or addressable implementation specifications.

The Standards for Transactions and Code Sets

Overview:
Transactions are activities involving the transfer of health care information for specific purposes. Under HIPAA Administration Simplification, if a health care provider engages in one of the identified transactions, they must comply with the standard for that transaction. HIPAA requires every provider who does business electronically to use the same health care transactions, code sets, and identifiers. HIPAA has identified ten standard transactions for Electronic Data Interchange (EDI) for the transmission of health care data. Claims and encounter information, payment and remittance advice, and claims status and inquiry are several of the standard transactions. Code sets are the codes used to identify specific diagnosis and clinical procedures on claims and encounter forms. The CPT-4 and ICD-9 codes that you are familiar with are examples of code sets for procedure and diagnosis coding. Other code sets adopted under the Administrative Simplification provisions of HIPAA include codes sets used for claims involving medical supplies, dental services, and drugs.

The National Provider Identifier Standards

HIPAA mandated that the Secretary of Health and Human Services adopt a standard unique health identifier for health care providers. On January 23, 2004, the Secretary published a Final Rule that adopted the National Provider Identifier (NPI) as this identifier.

All HIPAA covered healthcare providers, whether they are individuals or organizations, must obtain an NPI for use to identify themselves in HIPAA standard transactions. Once enumerated, a provider’s NPI will not change. The NPI remains with the provider regardless of job or location changes. HIPAA covered entities such as providers completing electronic transactions, healthcare clearinghouses, and large health plans, must use only the NPI to identify covered healthcare providers in standard transactions by May 23, 2007. Small health plans must use only the NPI by May 23, 2008.
Privacy and Data Security Training
The University of Minnesota’s Privacy and Data Security Training program is the educational component developed at the University to comply with HIPAA (the Health Insurance Portability & Accountability Act of 1996) regulations. Although the University’s data security training courses fulfill the training requirement contained within the HIPAA rule, they also provide the entire University community, including those who do not work with protected health information covered by HIPAA, with information about securing private University data.

The training program consists of individual courses that University employees, students, and volunteers complete online. Individuals who are assigned training receive an e-mail notification containing details about accessing the assigned training. See the About Training page for more information about the courses offered. Additional information about training can be found through the links listed to the right. Individuals can also contact the Privacy and Security Office at privacy@umn.edu or 612-624-7447 for assistance.

How to Access Training
Assigned courses are available for completion at any time through the University’s myU portal. See the Training Instructions page for step-by-step instructions.

Alternative formats for training materials are available. Please contact the Privacy and Security Office at privacy@umn.edu or 612-624-7447 to obtain materials in an alternate format.

Immunization Policy and Requirements
All students in CAHP programs on all campuses are required to have immunizations and/or tests as a condition of enrollment. Expectations for health professions students are consistent with those of the Centers for Disease Control and Prevention (CDC), Occupational Safety and Health Administration (OSHA), and Minnesota state law for health care workers.

Entering students are expected to have this requirement completed prior to entering CAHP programs. A registration hold is placed on the student record if immunization requirements are not met. Complete information related to requirements and documentation can be accessed at http://www.bhs.umn.edu/immunization-requirements.htm. If information has been provided to Boynton Health Service, a personalized immunization record is available for each student via MyU Portal.

CAHP students are responsible for maintaining copies of immunization records, and for providing documentation to affiliate health care organizations for clinical or fieldwork experiences. In accordance with federal law and University of Minnesota policy, CAHP programs that receive requests for student immunization from affiliate health care agencies/organizations will refer such requests directly to the student. CAHP Staff are not able to view specific information about a student’s immunizations, only that requirements have been met.
Inclement Weather Policy

Although closure of the UMN due to winter weather is a rare event, we want to have a plan in place for rescheduling classes in case it does occur. Therefore, our policy is:

For Fall Semester, if classes are cancelled for first year students, every attempt will be made to reschedule the classes one week later. For Fall Semester classes, if classes are cancelled for the second year students, every attempt will be made to reschedule the classes within one week.

For Spring Semester, if UMR or UMTC closes, OT classes will be cancelled for that day and will be re-scheduled for the same day and time the following week.

In all cases, when classes are rescheduled, every effort will be made to tape the rescheduled class and make it available to students online.

We recognize this may not work for everyone, but it is the best solution for insuring that you get the instruction you need to become excellent occupational therapists. The good news is that this is very unlikely to happen. WCCO radio and TV report on campus closures.

Makeup Work for Legitimate Absences

1. Students will not be penalized for absence during the semester due to unavoidable or legitimate circumstances. Such circumstances include verified illness, participation in intercollegiate athletic events (see Administrative Policy: Intercollegiate Athletic Events during Study Day and Finals Weeks: Twin Cities, which prohibits intercollegiate athletic competition during study and finals week except under certain circumstances), subpoenas, jury duty, military service, bereavement, and religious observances. Such circumstances also include activities sponsored by the University if identified by the senior academic officer for the campus or his or her designee as the basis for excused absences. Such circumstances do not include voting in local, state, or national elections.

2. It is the responsibility of students to plan their schedules to avoid excessive conflict with course requirements.

3. A student must notify instructors of circumstances identified in (1) as soon as possible and provide documentation to the instructor to verify the reason for the absence. In the event that the University declares a pandemic emergency (e.g., flu), the Senior Vice President for Academic Affairs and Provost or designee may waive the requirement that students are required to have documentation from a physician for illness.

4. If a student is absent due to circumstances identified in (1) and has complied with the notification requirement, the instructor may not penalize the student and must provide reasonable and timely accommodation or opportunity to make up exams or other course requirements that have an impact on the course grade.

5. The authority to determine what constitutes an excusable bereavement absence and religious observance rests with the Senior Vice President for Academic Affairs and Provost.

6. Instructors are expected to accommodate students who wish to participate in party caucuses, pursuant to Board of Regents resolution [See http://www1.umn.edu/regents/minutes/2005/deceber/board.pdf, p. 147]
7. This policy applies to all course requirements, including any final examination.
8. Colleges and academic units may establish specific criteria for notice and completion of work to implement this policy.

Performance Site Transfer Guidelines
Students requesting to transfer to another performance site must submit a request in writing to CAHP Student Services to cahpinfo@umn.edu. The transfer requests are decided by the OT Program Director. Transfers are only approved between semesters and must be submitted at least 60 days in advance of the first day of the next semester.

A Performance Site Transfer request is considered on its own merit. Factors considered in granting such a transfer will include the size and capacity of enrollments at the requested performance site, size and capacity of enrollments at the current site, group participation in the scholarly inquiry project, the availability of fieldwork sites, and the student’s academic standing in the program. Level II fieldwork placements will not change because of a change in performance location.

Transfers may result in additional fees based on policies in place at specific campuses. Further, policies governing international students with study visas may limit eligibility for enrollment at certain campuses. Ordinarily, if a student is granted permission to transfer to another performance site, additional transfer requests from the same student will not be considered.

Personal Electronic Devices in the Classroom
Using personal electronic devices in the classroom setting can hinder instruction and learning, not only for the student using the device but also for other students in the class. To this end, the University establishes the right of each faculty member to determine if and how personal electronic devices are allowed to be used in the classroom.

1. CAHP instructors may restrict or prohibit the use of personal electronic devices in his or her classroom, lab, or any other instructional setting. An instructor may allow students to use laptops or other devices for taking notes or class work.
2. Individual students may be directed to turn off personal electronic devices if the devices are not being used for class purposes. If the student does not comply, the student may be asked to leave the classroom.
3. In establishing restrictions, instructors must make reasonable accommodations for students with disabilities in working with the Office for Disabilities Services.
4. The default provision is that students are not permitted to record (whether audio or visual or both) any part of a class/lab/other session unless explicitly granted permission to do so by the instructor.
5. Students who fail to comply with an instructor’s restrictions or prohibition will be subject to the provisions of Board of Regents Policy: Student Conduct Code or be asked for leave the class.

Reference Requests
Students and alumni of the Program in Occupational Therapy or Program must submit a Reference Request and Authorization form prior to release of any information to employers, educational
institutions, or organizations that provide awards or scholarships. Reference Requests should be submitted to CAHP Student Services for processing. Information will not be released without Reference Request on file.

**Sexual Harassment and Discrimination**

The University has strong policies against sexual harassment and discrimination in any form. If you feel you are the victim of either, please contact your adviser, the Program Director or the Office of Equal Opportunity and Affirmative Action (612-624-9547).

Students are responsible for knowing the University of Minnesota, Board of Regents' policy on Student Conduct and Sexual Harassment found at [http://www.umn.edu/regents/polindex.html](http://www.umn.edu/regents/polindex.html).

Students are expected to be attentive during class, ask questions if he or she does not understand something, and participate in class discussions. Students are also expected to listen respectfully to other students and the instructor when speaking. Racism, sexism, homophobia, classism, ageism, and other forms of bigotry are inappropriate to express in the classroom.

**Student Record Access**

Federal law, state law and Regents' policy govern access to student records. Violation of Regents' policy may result in disciplinary action. This card contains a brief summary of information that may, or may not, be released without the student's consent. For further information see the web site at [http://onestop.umn.edu/grades_and_transcripts/student_records_privacy.html](http://onestop.umn.edu/grades_and_transcripts/student_records_privacy.html).

**Directory Information**

The following information is public information, unless the student has requested non-disclosure (suppress). Students may suppress (1) address, e-mail and phone information or (2) all information. On the PeopleSoft system, the “window shade” icon indicates that a student has suppressed his or her information.

A request to have information suppressed or a release of suppression must be submitted to the Office of the Registrar while an individual is an active student.

- Name
- Address
- Electronic (E-mail) address
- Telephone number
- Dates of enrollment
- Enrollment status (full/part time, not enrolled)
- Major
- Adviser
- College
- Class
- Academic awards and honors
- Degree received
Non-Public (Private) Information - Information other than the aforementioned directory information is not public and may not be released except under certain prescribed conditions. Non-public information includes but is not limited to:

- ID and social security numbers
- Birth date
- Gender
- Grades
- Courses taken
- Class Schedule
- Test scores
- Advising records
- Educational services received
- Disciplinary actions
- Photographs

Student Record Access Examples

1. A person identifying herself as the student's mother calls to request information. The parent insists that parents have the right to access their son or daughter's record. What do you do?

   Under some circumstances parents do have the right to access their student's record. Refer the caller to the Office of the Registrar (612/624-1111). We will let them know what documentation is required to access the information.

2. A caller identifying himself as a child care provider calls. He says that it is an emergency and that he must get in contact with the child's parent (who is a student). What do you do?

   Refer the caller to the Office of the Registrar (612/624-1111). We have a procedure in place to get emergency messages to students.

3. An organization calls or writes. This organization wants the names and addresses of all the majors in a particular department. All of this information is public. What do you do?

   We are not required to release "mailing lists," although anyone may access this information indirectly through the Student-Staff Directory. Before releasing any information it is imperative to check for any student records that have been suppressed.

4. A student organization is attempting to recruit the top students in a department. They request the names and addresses of all the students who have a GPA of 3.0 or better. The department thinks this is a good cause and wants to help. What do you do?

   Releasing the names would be against policy because GPA information is a part of the request. The department, however, may do the mailing on behalf of the organization. Or they could work with Institutional Research and Reporting to facilitate the mailing.
Note: Information may be released within the University on a need-to-know basis. Thus advisers may see the transcripts of their advisees. Scholastic committee members may review academic progress of students within their college. However, looking at the record of a student in another unit is generally not permitted.

ID number, social security number, race and date of birth are not public information. This information is used to access other information and is particularly sensitive. Do not release or post these identifiers.

If you have any questions about the release of data, call One Stop Student Services at 612/625-1064 or 612/624-1111.

Students Managing Their Educational Records
Students should also take responsibility for their educational records. For complete details and guidance visit the UWide Policy Library at http://policy.umn.edu/Policies/Education/Student/STUDENTRECORDS_PROC04.html.
Program in Occupational Therapy Minimum Technical Standards

The University of Minnesota is committed to the policy that all persons shall have equal access to its programs, facilities and employment without regard to race, color, creed, religion, national origin, sex, age, marital status, disability, public assistance status, veteran status or sexual orientation.

In adhering to this policy, the University abides by the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, the Minnesota Human Rights Act and other applicable statutes and regulations relating to equality of opportunity. The University's mission is to provide optimal educational opportunities for all students, including those with disabilities. Students are responsible for seeking assistance at the University and making their needs known. The Office of Disability Services (DS) is provided by the University of Minnesota to promote access, by ensuring the rights of students with disabilities and assisting the University in meeting its obligations under federal and state statutes. For further information, visit http://ds.umn.edu/.

The Program in Occupational Therapy requires students to engage in diverse, complex and specific experiences essential to the function of an occupational therapist assuring best practices to protect patient safety. The student must be able to participate in these experiences safely and within an acceptable amount of time. Unique combinations of cognitive, affective, psychomotor, physical, and social abilities are required to satisfactorily perform these functions throughout the curriculum including all clinical rotations.

Candidates for the Program in Occupational Therapy must meet the technical standards necessary to acquire or demonstrate competence in occupational therapy as outlined in this document with or without reasonable accommodation.

Motor Skills General: The candidate should have sufficient motor functions such that they are able to execute movements required to provide general care and treatment to clients in all health care settings.

Specific:

- It is required that a candidate possess the motor skills necessary for assessment and therapeutic procedures in a variety of positions and settings.
- Such actions require coordination of both gross and fine muscular movements, equilibrium and functional uses of senses within the context of provision of treatment (such as fabrication of splints or custom orthotics).
- The candidate must be able to perform basic life support (including CPR), transfer and position clients and position and re-position self around clients.

Sensory/Observation General: The candidate must be able to acquire a defined level of information presented through demonstration and experience in the rehabilitative sciences.
Specific:
- Candidate must be able to observe the client accurately, at a distance and close at hand, and observe and appreciate all levels of information including non-verbal communications such as vision, hearing and somatic sensation, when performing assessment and intervention.
- Candidate must be able to learn to perform visual and tactile examinations and treatments to differentiate subtle variations in color, shape and general appearance.
- Candidate must also possess the visual acuity to read or view various forms of documentation including records, charts, print and handwritten notation.

Communication General: The candidate must have the ability to communicate effectively and sensitively with other students, faculty, staff, clients, family and other professionals.
Specific:
- Candidate must be able to express his or her ideas and feelings clearly and demonstrate a willingness and ability to give and receive feedback.
- The candidate must be able to convey or exchange information at a level allowing development of a health history, identify problems presented, explain alternative solutions, and give directions during treatment and post-treatment.
- The candidate must be able to effectively communicate in English in oral, written and electronic forms and to retrieve information from literature, computerized databases and lectures.
- Candidate must be able to process and communicate information on the client’s status with accuracy in a timely manner to members of the health care team.
- The appropriate communication may also rely on the candidate’s ability to make a correct judgment seeking supervision and consultation in a timely manner.

Cognitive General: The candidate must be able to measure, calculate, reason, analyze, integrate and synthesize information at a level commensurate with a Masters level education.
Specific:
- Due to the nature of a hybrid curriculum, the candidate must be able to self-organize his/her time, independently manage multifaceted demands and schedules.
- The candidate must be able to effectively maneuver within and problem solve while working in an online context.
- The candidate must be able to quickly read and comprehend extensive written materials.
- Candidate must also be able to evaluate and apply information and engage in critical thinking in the classroom, lab and clinical setting all in a timely manner.
- Candidate must be able to synthesize the information in the development of an effective treatment plan.

Behavioral/Emotional General: The candidate must possess the emotional health required for the utilization of his/her intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the care of clients and families.
Specific:
- The candidate must be able to maintain mature, sensitive, and effective relationships with clients, students, faculty, staff and other professionals under all circumstances, including highly stressful situations.
• Candidate must have the emotional stability to function effectively under stress and to adapt to an environment that may change rapidly without warning and/or in unpredictable ways.
• The candidate must be able to balance their individual learning needs with the professional standard of protecting the safety of patients in all health care delivery environments.
• The candidate must be able to experience empathy for the situations and circumstances of others and effectively communicate that empathy regardless of age, gender, race, socioeconomic status, and disability status, religious or cultural background.
• Candidate must know that his or her values, attitudes, beliefs, emotions, and experiences affect his or her perceptions and relationships with others. The candidate must possess skills and experience necessary for effective and harmonious relationships in diverse academic and work environments.
• The candidate must possess the ability to reason morally and practice in an ethical manner in accordance with professional, legal and cultural standards of practice.
• Candidate must possess attributes that include compassion, empathy, altruism, integrity, honesty, responsibility and tolerance.
• Candidate must have the appropriate social skills for forming and maintaining mature relationships with a variety of people in a variety of settings.

Upon acceptance into the University of Minnesota’s Program in Occupational Therapy the candidate will be responsible for verifying that they understand and meet the technical standards as outlined in this document.

Any occupational therapy student applicant or currently enrolled occupational therapy students with questions about whether they can meet these technical standards due to the functional limitations from a disability should contact a disability specialist from the Disability Services Office for a confidential consultation.

Disability Services can be contacted at:

Twin-Cities:
Disability Services
University of Minnesota Twin Cities
McNamara Alumni Center
200 Oak St SE Suite 180
Minneapolis, MN 55455
Phone: (612) 626-1333 (V/TTY)
Fax: (612) 626-9654
www.ds.umn.edu (http://www.ds.umn.edu/)

Rochester Campus
Kendra A. Weber, M.S.
Assistant Vice Chancellor for Student Affairs
University of Minnesota Rochester
(507) 258-8008
weber362@r.umn.edu
Academic Progress in the OT Program
Approved by OT Faculty on 8/18/09

This document addresses policy and procedure for students’ appeal of course grades, and Program in Occupational Therapy action on poor academic progress, academic misconduct, and unprofessional behaviors.

Goal
Students are expected to meet the academic and professional standards set by the Program in Occupational Therapy, the Center for Allied Health Programs, and the University of Minnesota.

Introduction
The Program in Occupational Therapy’s overall goal is to ensure that its graduates have a strong academic foundation, ethical core, and professional competence. In most cases the student is the first person aware of an academic problem and, therefore, is encouraged to initiate contact with professors and academic advisors. Faculty can provide study tips, extra help, and referral to the other many resources on UM campuses.

Policy on Academic Progress
The Occupational Therapy Program has three minimum standards for academic good standing. The student must:
1. Complete all required Occupational Therapy courses including FW, with a final grade of S for those courses that are S/N, and a grade of C or higher in all those graded using F-A grades; and
2. Maintain a semester GPA of 2.80 or higher for each enrolled semester. This is calculated per Figure 1. S/N grades are not considered toward GPA, but all S/N graded courses must have earned grades of S; and
3. Manifest emotional and behavioral characteristics, which, in the judgment of the department faculty will not jeopardize his/her professional competence.

Students who fail to meet these criteria will be placed on probation or dismissed from the program, depending on the particulars. For a more detailed description of academic scenarios that trigger probation and dismissal see Table 1, pages 52-54.

Figure 1: Grade point calculation

Grade points are calculated as follows:
A   = 4.0
A-  = 3.67

12 A course grade lower than a C/S indicates that a student has not achieved a level of learning or skill consistent with the basic requirements of the course content.
B+ = 3.33
B   = 3.0
B-  = 2.67
C+  = 2.33
C   = 2.0

-----------Grades below this line are calculated within GPA but do not satisfy course credit toward OT graduation
C-  = 1.67
D+  = 1.33
D   = 1.0    * There is no D- in the grading system
F   = 0

N, S, K, and I are not calculated in GPA.
S is required for an S/N course to be considered ‘successfully passed’

Course Grade Appeals
A student may appeal a final recorded course grade for the following reasons:
1. Grade(s) were calculated in a manner inconsistent with the University policy, the syllabus, or changes to the syllabus.
2. Grade(s) were erroneously calculated.
3. Grading/performance standards were arbitrarily or unequally applied.
4. The instructor failed to assign or remove an Incomplete or to initiate a grade change as agreed upon with the student.
5. The student withdrew from class(es), after grades have been assigned, due to genuine hardship. (Students appealing on this basis should proceed by contacting the CAHP Student Services Office and following the procedures for a late withdrawal appeal.)

A grade appeal cannot be made in response to a grade penalty assessed as a result of an official finding of student academic integrity violation(s). Such a finding will have been made through the procedures provided in the academic integrity policy.

Instructor Unavailable to Assign Grade
In circumstances where an instructor is unable to assign a grade in a timely manner, the OT Program director will make reasonable efforts to contact and ask the instructor to supply a grade. If these efforts are unsuccessful, the Program director will appoint another qualified faculty member to assign the grade.

Probation
Probation formally indicates that a student is in jeopardy of not completing the program. At the same time, it offers a student the opportunity to continue in the program and to resolve the circumstances that interfered with satisfactory progress.

- A single semester GPA below 2.80, with no single course grade below C or S, automatically and immediately places the student on probation, and allows the student to continue program progress.
A single course grade below C or S immediately places the student on probation and requires that the student stop progress in the program until the student has re-enrolled and earned a C or S in the specific course when that course is next offered.

Occupational therapy courses are offered only 1x per year and students in this situation should use the time to correct the problems that undermined their prior scholarship. Retaking a course generally will delay graduation by one year.

- Students may be on probation only one time for any reason, during their time in the program.

- Students may re-enroll in any course only once. Withdrawal from a course (including Fieldwork) is considered an enrollment, and therefore constitutes one effort towards achieving the minimum acceptable standard/remediation. Thus, a student cannot fail or withdraw from more than one course and continue in the program. In their one allowed re-enrollment, the student must earn a grade of C or higher.

  The sole exception to this rule is if a student is required by a reviewing body to retake courses as part of their probationary remediation. In that case, the student is permitted to re-enroll as dictated by the terms of their probation. Thus, a reviewing body is permitted to require that a student retake one or more courses to adequately prepare for progress.

Probation Outcomes: Regaining Good Standing or Failing Probation

Once on academic probation, a student must meet the probation terms, including but not exclusive to minimum academic and professional standards. If a student meets these requirements for their probationary semester they will be considered in good standing.

Students will be dismissed from the program if they 1) do not successfully meet probation requirements during their probationary semester, or 2) fail to meet minimum requirements in any semester subsequent to their probation. Thus, students are allowed only one semester of probation.

Incomplete Courses

Incomplete academic performance in a required occupational therapy course will result in a grade of I (incomplete), D, F, or N in accordance with the University’s definition of these grades. Grades of K are intended for courses where the required work stretches beyond the semester (e.g. a Fieldwork is assigned during break), not when a student fails to complete work. Course faculty will inform the student's advisor when an Incomplete is awarded.

Dismissal

A student will be dismissed for academic reasons if he or she:

- Earns less than C or S on two or more courses in the curriculum (including if these grades are earned in a single semester) or
- Fails to meet all probation requirements.
Notification
Students will be notified in writing of their probation or dismissal by the Occupational Therapy Program’s Academic Progress Officer or alternate designee appointed in his/her absence by the Program Director. This notification shall be made by telephone or university email, followed by posted letter - receipt requested.

Academic cases not covered by these rules
In most cases Program action is automatic. In academic situations not covered by these rules and the examples in Table 1, the Occupational Therapy Program Director may request that the Occupational Therapy Program’s Academic Progress Officer constitute an Occupational Therapy Academic Progress Review Committee to examine the student’s case and make a recommendation for action to the Program Director.

Such a committee will include 3 voting members: the OT Program’s Academic Progress Officer, one clinical/community occupational therapist with fieldwork supervision experience (or if unable to access such an individual in a timely manner, a second UM occupational therapy faculty or adjunct faculty member), and one University faculty member external to the Program. The Occupational Therapy Program Director or her designee may attend the committee as a non-voting member to better understand discussion and provide information as requested.

Appeal
Students have the right to appeal probation or dismissal on the basis of a policy, procedure, or practice violation. The CAHP Student Performance Policies and Procedures are available on our website at http://cahp.umn.edu/policy. Students should contact CAHP Student Services for assistance with a formal appeal process.

Re-admission After Dismissal
A student who is dismissed from the Program may apply for re-admission using the same application process as new applicants. Such re-application is strongest when it presents clear evidence that the student has remedied the elements that stood in the way of successful academic work in earlier enrollments.

The Admission Committee may re-admit on probation or without condition. If admitted on probation, the student must meet all rules pertaining to that condition (e.g., 2.80 GPA, no grade below C) and recognize that failing probation will result in dismissal for a second time.

Students who reapply are forewarned that curricular issues and changes may necessitate re-enrollment in some or all of the courses that were successfully completed in their earlier enrollment. In such situations, the Program will set aside its policy limiting students to only one course re-enrollment and allow designated courses to be repeated for a second time, however numerous these courses may be.
Table 1 - Actions when Academic Standards are not met

<table>
<thead>
<tr>
<th>Incident</th>
<th>Required Action</th>
<th>Immediate Effect on Enrolled Student (OT Program has very short breaks between semesters – creating a situation where students may already be enrolled in next planned semester)</th>
<th>Student Optional Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Student who has never been on probation, has semester grade point average (GPA) that falls below 2.80, with all course grades in that semester remaining at or above C or S</td>
<td>Student placed on probation</td>
<td>Student continues in enrolled OT courses</td>
<td>Student has 5 working days to appeal to CAHP</td>
</tr>
</tbody>
</table>
| B. Student who has never been on probation, earns a single course grade below C or S | Student placed on probation            | Student is not permitted to continue in enrolled courses or to continue in OT program until course retaken successfully  
Original course grade remains on record for course; new course appears as retake | Student may automatically re-enroll and retake the course when it is next offered. Student must pay for re-enrollment. Readmission is not required.  
Student has 5 working days to appeal to CAHP |
| C. Student never on probation earns two or more course grades below C or S in a single semester | Student dismissed from Program         | Student is not permitted to continue in enrolled courses or to continue in program  
If permitted to re-enter, Admissions Committee must determine work to be made up and describe criteria for such re-entry (e.g., what OT or outside coursework needs to be taken/re-taken, what grades earned for retaken courses).  
If readmitted, original grade remains on record for course; new courses appear as retake | Student may reapply to OT Program at next admission cycle  
If permitted to re-enter, Admissions Committee must determine work to be made up and describe criteria for such re-entry (e.g., what OT or outside coursework needs to be taken/re-taken, what grades earned for retaken courses).  
If readmitted, original grade remains on record for course; new courses appear as retake |
| D. Student who is on probation or who has been on earlier probation in the Program in Occupational Therapy earns a new semester GPA below 2.80 or earns a new course grade below C or S | Student dismissed from Program         | Student is not permitted to continue in enrolled courses or continue in program  
If permitted to re-enter, Admissions Committee must determine work to be made up and describe criteria for such re-entry (e.g., what OT or outside coursework needs to be taken/re-taken, what grades earned for retaken courses).  
If readmitted, original grade remains on record for course; new courses appear as retake | Student has 5 working days to appeal to CAHP  
If permitted to re-enter, Admissions Committee must determine work to be made up and describe criteria for such re-entry (e.g., what OT or outside coursework needs to be taken/re-taken, what grades earned for retaken courses).  
If readmitted, original grade remains on record for course; new courses appear as retake |
<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>E.</strong></td>
<td>Student who has no prior probation, fails to complete coursework of a single course</td>
<td>Student awarded “I” per University guideline/Instructor decision.</td>
<td>Student and Instructor develop a Contract for Completion defining remaining exams/assignments/work, and due dates. Student’s OT Academic Advisor notified. Student continues in concurrently enrolled OT courses. If contract met, student awarded earned grade. If contract not met, see item F.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Student has 5 working days to appeal to CAHP.</td>
</tr>
<tr>
<td><strong>F.</strong></td>
<td>Student without history of probation, fails to complete a single course “I” by date in Contract for Completion</td>
<td>Handling of course grade follows contract. If grade assigned to replace the “I” is below C or S, student placed on probation and required to repeat the course.</td>
<td>If passing grade is issued – Student is allowed to continue enrollment. If grade is below C or S, student is not permitted to continue in enrolled courses or to continue in program until course retaken successfully. Original course grade issued per Contract for Completion, remains on record for course; new course appears as retake. Student may re-enroll and retake the course when it is next offered. Student has 5 working days to appeal to CAHP.</td>
</tr>
<tr>
<td><strong>G.</strong></td>
<td>Student who has prior history of probation, fails to complete coursework of one or more courses</td>
<td>Student case brought to the OT faculty for determination.</td>
<td>Per majority vote of the OT faculty, student may be allowed to continue in curriculum to make up incomplete course(s) in good standing, or may be sent for determination to the OT Academic Progress Review Committee. Student has 5 working days to appeal to CAHP.</td>
</tr>
<tr>
<td><strong>H.</strong></td>
<td>Student who has no history of probation, incomplete, or similar academic issues withdraws from a single course or fieldwork.</td>
<td>Student is placed on probation.</td>
<td>Student is permitted to retake course or fieldwork per Contract for Completion. Scheduling of Fieldwork is done based on availability of sites. Student permitted to retake the course or fieldwork with firm end date. Unlike a negotiated “Incomplete”, no credit or work is granted toward new completion.</td>
</tr>
</tbody>
</table>

Coursework needs to be taken/re-taken, what grades earned for retaken courses). If readmitted, original grade remains on record for course; new courses appear as retake.
Student is not permitted to continue in enrolled courses or to continue in program until they have completed the course/fieldwork from which they withdrew.

Withdrawal with re-enrollment constitutes the sole re-take permitted towards completion of the curriculum.

<table>
<thead>
<tr>
<th>I</th>
<th>Student with history of probation who withdraws from a course or fieldwork.</th>
<th>Student dismissed</th>
<th>Student not permitted to continue in enrolled courses or to continue in program</th>
<th>Student has 5 working days to appeal to CAHP.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Professional Behaviors of Students

Students are expected to demonstrate professionalism as they progress through the curriculum. Professional behaviors are those that would be expected of an occupational therapist in the workplace, e.g., being on time, using respectful language in communications, adhering to work place rules, etc. Professional behaviors are expected at all times in classroom sessions, online interactions, as well as during fieldwork and public and professional engagement experiences. Students will be given feedback on their professional behaviors through a variety of mechanisms such as formal evaluations, fieldwork evaluations and feedback from faculty and peers. Students who demonstrate behaviors that are unprofessional will create a plan with the course instructor and in some instances their academic advisor for remediation of the identified behaviors. Failure to develop professional behaviors can lead to failure in fieldwork courses.
Overview
Welcome to the Center for Allied Health Programs (CAHP)! As a Program in Occupational Therapy student, you are part of CAHP, as well as the Academic Health Center at the University of Minnesota. CAHP is best described as an emerging statewide resource for health professions education. The Center was created in July, 2006 by the University of Minnesota Regents as an academic structure to foster innovation and collaboration in the development of new educational programs. The aim is to address Minnesota’s projected statewide shortages in the health professions.

CAHP evolved as a result of reorganization in the Academic Health Center that began in 2003. The Academic Health Center recommended to the Board of Regents that the CAHP be created, and the Regents gave their approval in July, 2006. With that action, the first programs of the Center became the Bachelor of Science in Clinical Laboratory Sciences and the Master’s Degree in Occupational Therapy. The Regents also approved that the second performance site (location) for programs exist in Rochester, which has become a new coordinate campus for the University of Minnesota.

The Academic Health Center, one of the most comprehensive education and research facilities for health professionals in the nation. The six schools and colleges that make up our Academic Health Center include the disciplines of medicine, dentistry, nursing, pharmacy, public health, and veterinary medicine. Strong interdisciplinary centers and programs in bioethics, cancer, genomics, infectious disease, drug design, food safety, and spirituality and healing augment our broad range of professional health education and research efforts.

Mission
The mission of the Center for Allied Health Programs is to develop a 21st century approach for preparing allied health professionals for Minnesota’s healthcare workforce. The center works in collaboration with higher education and health delivery systems across Minnesota and beyond to create and deliver signature innovative, sustainable, accessible, responsive and learner-centered educational programs.

Administration
CAHP administration provides centralized support to the Program in Occupational Therapy and Clinical Laboratory Sciences Program. We have support offices and staff in the Twin Cities and Rochester.

Dr. Barbara F. Brandt, Ph.D., is the Interim Director of the Center for Allied Health Programs, and the Associate Vice President of the Academic Health Center Office of Education. More information about the Office of Education is available on the Academic Health Center website at http://www.ahceducation.umn.edu/.
Student Services

OT students are supported by CAHP student services staff. Program advising, including course selection, policy and procedure assistance, and student personal and academic concerns, are overseen by Sarah Corrigan, Student Services Associate. Student services staff calendars are available on our website at [http://cahp.umn.edu/studentservices](http://cahp.umn.edu/studentservices).

Sarah Corrigan, Student Services Associate
Telephone: 612-625-8936
Fax: 612-626-8127
E-mail: huhta001@umn.edu

Robyn Zastrow, Student Personnel Coordinator
Telephone: 612-615-1627
Fax: 612-626-8127
E-mail: zast0027@umn.edu
Resources & Forms
Student resources, including all forms referenced in this handbook, are available on our website at http://cahp.umn.edu/studentservices.

CAHP Contact Information
Mailing Address: Center for Allied Health Programs
University of Minnesota
Mayo Mail Code 714
516 Delaware St SE
Minneapolis, MN 55455

Main Office Location: 15-194 Phillips-Wangensteen Bldg
Twin Cities Satellite Support Office Location: 585 Children’s Rehabilitation Center
Rochester Satellite Support Office Location: 300 University Square
Telephone: (877) 334-2659 | Fax: (612) 626-8127
E-mail: cahpinfo@umn.edu | Web: cahp.umn.edu