



**WEST COAST UNIVERSITY**  
**OCCUPATIONAL THERAPY PROGRAMS**  
**STUDENT HANDBOOK**

## TABLE OF CONTENTS

### I. MISSION, VALUES, LEARNING OUTCOMES, OBJECTIVES AND PHILOSOPHY

SECTION TITLE	PAGE
University Mission	2
University Values	2
University Learning Outcomes	3
University Objectives	3
MSOT Program Mission	4
MSOT Program Learning Outcomes	4
MSOT Program Objectives	4
OTD Program Mission	5
OTD Program Learning Outcomes	5
OTD Program Objectives	5
Occupational Therapy Statement of Philosophy	6
American Occupational Therapy Association Mission	9
AOTA Vision 2030	9

### II. POLICIES AND PROCEDURES

SECTION TITLE	PAGE
ACOTE Notification Requirements	10
Faculty/Student Ratio	10
Assignments	10
Practical Examination Policy	10
Minimum GPA	11
Course Credit & Fieldwork Requirements	11
Student Advising & Professional Development	11
Occupational Therapy Programs Dress Code	12
Student Statement Regarding Blood Borne Pathogens & OPIM	13
Safety Policies	13
OTD Culminating Project	14
OTD Doctoral Experiential Internship	14
OTD Timeline Policy	14

## I. MISSION, VALUES, LEARNING OUTCOMES, AND OBJECTIVES

### UNIVERSITY MISSION

At West Coast University, we embrace a student-centric learning partnership that leads to professional success. We deliver transformational education within a culture of integrity and personal accountability. We design market-responsive programs through collaboration between faculty and industry professionals. We continuously pursue more effective and innovative ways through which students develop the competencies and confidence required in a complex and changing world.

### UNIVERSITY VALUES

Student Centricity	Our organization puts students and their long-term success at the center of our values. We do not believe that customer-service as it applies to our students is mutually exclusive from student centricity, thus we are committed to serving our students even as we partner with them on the transformational educational journey, they are engaged in.
Learn + Grow = Thrive	As a learning organization, we are committed to helping each member of our organizational community learn, and in so doing, get just a little better all the time. We are committed to the notion that in a time of hyper turbulence, helping both our students and our associates continue to learn ultimately leads to their growth.
Team Oriented	As we observe in the world of professional athletics, the best teams emphasize the concept of team over the individual, realizing that the whole is truly greater than the sum of the parts.
Collegial	There are two definitions that are equally apropos for this value: that authority would be equally vested in a number of colleagues, and that collegiality is reflected by a sense of camaraderie amongst those colleagues.
Transparent	We are committed to ensuring visibility into the work and the outcomes of each associate, and ever-so-much-the-more when it comes to illuminating "bad news" so as to quickly intervene.
Consensus Driven	We believe that in the multitude of input, risk is diminished and quality decisions are more apt to be achieved, ultimately leading to improved outcomes.

## INSTITUTIONAL LEARNING OUTCOMES

Upon Graduating from a degree program offered by West Coast University, students should be able to:

1. **Critical Thinking:** Implement intellectual and practical problem-solving strategies through assessment and critical thinking.
2. **Quantitative Reasoning:** Apply appropriate mathematical and analytical methods to guide informed decision-making.
3. **Communication:** Effectively communicate in all mediums (such as oral, written, and nonverbal) to disseminate information and ideas.
4. **Digital and Information Literacy:** Utilize technology to identify and evaluate information.
5. **Inclusionary Excellence:** Demonstrate knowledge and awareness of individuals' perspectives and identity while promoting a sense of belonging.
6. **Ethics:** Apply and promote ethical reasoning in local, national, and/or global communities.
7. **Collaboration and Teamwork:** Engage proactively and cooperatively in a variety of settings while exhibiting mindful and professional awareness of team dynamics.

## UNIVERSITY OBJECTIVES

We keep our objectives always at the forefront:

- To provide degree programs in fields of study that lead to professional success.
- To provide academic and support services to enhance student success.
- To provide a caring environment that is supportive and concerned with each student's success.
- To provide curricula, facilities, equipment and qualified faculty to prepare students for employment in an ever-changing market.
- To offer innovative and alternative modes of education delivery.
- To assist in meeting the employment needs of related professions.

## **MSOT PROGRAM MISSION**

West Coast University's Occupational Therapy Program is based on the belief that all humans are occupational beings in nature, and in the healing power of occupation whereby humans can influence their own health status. Occupational engagement and thus occupation-based interventions are therefore the central theme of the curriculum.

Our mission is to develop caring and competent entry-level generalists who are lifelong learners and who can develop into advocates and leaders for the Occupational Therapy profession in diverse local and global communities. Through a student-centric and interprofessional curriculum, the students will be prepared to be reflective practitioners by applying principles of evidence-based practice, research, and critical thinking to facilitate the well-being of consumers through engagement in valued occupations and as it relates to health promotion, prevention, and wellness.

## **MSOT PROGRAM LEARNING OUTCOMES**

Upon successful completion of the program the Master of Science in Occupational Therapy students will be able to:

1. Design and implement client centered care that is inclusive of cultural values, beliefs and needs.
2. Demonstrate effective communication skills to function effectively as a member of an inter-professional health care team.
3. Support all clinical decision making with evidence-based practice.
4. Create interventions with a central focus on occupation as the means and end of the profession's philosophy.
5. Employ health promotion and wellness in all interactions with individuals, communities and populations.
6. Defend and advocate for health care change.

## **MSOT PROGRAM OBJECTIVES**

The overall goal of the program is to award an MSOT degree to a student who developed as a life-long learner, and who can apply critical thinking and problem solving in developing client-centered, occupation-based interventions. Thus, a generalist who is:

- Grounded in knowledge of the concepts of occupation as ends and occupation as means in guiding intervention planning
- Committed to life-long learning, professional development, and evidence-based practice
- Able to use effective analytic and interpretive skills to solve problems and advance knowledge and skill
- Able to seek out and organize information effectively
- Able to practice in a variety settings and with diverse populations

## **OTD PROGRAM MISSION**

West Coast University's Occupational Therapy Program is based on the belief that all humans are occupational beings in nature, and in the healing power of occupation whereby humans can influence their own health status. Occupational engagement and thus occupation-based interventions are therefore the central theme of the curriculum.

Our mission is to provide doctoral-level education to develop caring and competent occupational therapy practitioners through the integration of theory, research and practice. These scholars of practice will be lifelong learners and can develop into advocates and leaders for the occupational therapy profession in diverse local and global communities. Through a student-centric and interprofessional curriculum, the students will be prepared to be reflective practitioners by applying principles of evidence-based practice, research, and critical thinking to facilitate the well-being of consumers through engagement in valued occupations and as it relates to health promotion, prevention, and wellness.

## **OTD PROGRAM LEARNING OUTCOMES**

Upon successful completion of the Occupational Therapy Doctorate program, students will be able to:

1. Develop and implement client-centered care that is inclusive of cultural values, beliefs and needs.
2. Demonstrate effective communication skills and function effectively as a member of an inter-professional health care team.
3. Apply critical analysis of evidence during the occupational therapy process and participate to increase the body of knowledge of the profession through the preparation and dissemination of scholarship.
4. Design and implement interventions with a central focus on occupation as the means and end of therapeutic process, in line with the professions philosophy.
5. Integrate health promotion and wellness in interventions with individuals, communities and populations.
6. Model leadership and advocacy for occupational therapy in the full range of service areas.

## **OTD PROGRAM OBJECTIVES**

The overall goal of the program is to award an OTD degree to a student who developed as a scholar of practice and life-long learner, who can apply critical thinking, problem solving, and evidence in developing client-centered, and occupation-based interventions. Additionally, the student will demonstrate leadership and innovation skills for growing the profession of occupational therapy.

Thus, a scholar of practice who is:

- Grounded in knowledge of the concepts of occupation as ends and occupation as means in guiding intervention planning
- Committed to life-long learning, professional development, and evidence-based practice
- Initiate effective analytic and interpretive skills to solve problems, conduct research, and advance knowledge and skill
- Proactive in seeking out and organizing information effectively
- Effectively able to practice in a variety of settings with diverse populations, and develop programs where needed
- Demonstrate leadership and advocacy capacities in a variety of professional settings

## **OCCUPATIONAL THERAPY STATEMENT OF PHILOSOPHY**

The philosophy of the Occupational Therapy (OT) programs reflects the mission statement and values of West Coast University, the values of the occupational therapy profession, and the mission and values of the faculty of the Master of Science in Occupational Therapy and Occupational Therapy Doctorate programs. Some of the themes that these entities share are: student-centricity; commitment to the communities served; innovation and creativity; and the efficient use of resources. The occupational therapy program curricula incorporate central beliefs about (1) health and wellbeing, (2) occupation, and (3) teaching and learning as evidenced in the following sections.

### **(1) Health and Well-being**

The curricular philosophy of the OT Programs at WCU provides a set of basic principles or concepts which determine the design of the curricula. The philosophy is based on one of the perspectives which underpin the nature of humankind-- holistic approach as opposed to a reductionist approach. The holistic approach is a foundational principle of the profession and integrates and maintains the person as a whole, "an interaction of biological, psychological, sociocultural and spiritual elements" (O'Brien, 2018). Thus, if any part of the system is affected by illness, disease or disability, the entire system will be disturbed. In this systems thinking, humans are viewed as active beings where control resides within the individual, and the person is an active participant (client) in the services designed to aid in improvement, as opposed to a passive recipient (patient) receiving treatment to recover. The systems are interactive and adaptive and the subjective components – spirituality, thoughts, feeling and perceptions – are incorporated. If the occupational therapist should only focus on certain body parts and function during interventions, the client is denied the uniqueness of occupational therapy services: a holistic approach.

Because the client is an integral part of the therapeutic process, the occupational therapist must understand the full range of elements that constitute quality of life for the individual. Health is necessarily understood "not just the absence of disease. It is a feeling of total well-being on the Physical, Mental, Emotional & Spiritual levels of a person's life" (World Health Organization [WHO]). This view of health supports a top-down approach to therapeutic problem solving and in keeping with the World Health Organization's International Classification of Functioning, Disability and Health (ICF) (2001). The top-down approach aims to enable the individual to participate in his/her chosen life tasks by adapting tasks or activities and ensuring the minimization of barriers to access posed by the environment (social and physical) or the task. These aspects are all addressed as part of the intervention. The top-down approach is further congruent with a client-centered focus, another founding principle of the profession. It ensures that information gathering, planning, and interventions are grounded in life activities relevant and important to the client. By contrast, a bottom-up approach, which focuses on particular deficits uncovered during a reductionist assessment process, tends to produce a fragmented and narrow definition of the client's problems, particularly from a body structure and function perspective (e.g., motor, sensory, perceptual, cognitive) and consequently leads to a narrow repertoire of possible interventions which are not client-centered. A bottom-up approach focuses on the client's deficits rather than acknowledging their interests, strengths, and enabling occupations.



In order to educate occupational therapy students to view their clients a whole versus as parts, the design of the curricula facilitates integrative and not fragmented thinking. Curricula design characterized by creating fragmentation or silos of knowledge is counterintuitive to a holistic process. Courses are designed and taught in order for students to focus on how the disease affects the occupational performance and quality of life of the person. In traditional curricula supporting the reductionist medical model, courses such as “pediatrics”, “orthopedics” or “neuro” can prevent the student from viewing the client as multifaceted, incorporating all aspects of occupational therapy’s domain which will “transact to support engagement, participation and [ultimately] health” (AOTA, 2008).

One WCU pedagogical solution to the issue of fragmentation of thought was in the creation of three occupational performance courses covering the child and adolescent; the adult; and the older adult. Within these occupational performance courses, the student is presented with physical and mental health conditions most relevant to that particular life stage, as well as relevant evaluations, assessments, and interventions. The main purpose utilizing an integrative pedagogical approach is to assist the student in viewing human beings from a biopsychosocial perspective, therefore integrating components of psychosocial interventions into physical health and vice versa.

Within the integrative shell of these three occupational performance courses, through case studies, narratives, and principles of problem-based learning, conditions are presented as clusters; incorporating both physical as well as psychosocial components. The following beginning of a case study is an example of such integrative learning: Mr. Smith, who suffered a stroke one month ago, has signs of depressed mood and social isolation. Holistic pedagogical techniques enable the student to see their clients as multifaceted beings, thus integrating knowledge and skill to create client-centered intervention plans true to the nature of occupational therapy.

Furthermore, the core occupational performance courses focus on three life- or developmental stages. The child and adolescent, adult, and older adult courses are placed in the curricula in the 2nd, 3rd, and 4th trimesters. This life-course retrospective sequence starting with the older adult in the second trimester, followed by the adult, and ending in the child and adolescent in the fourth trimester enables students to build skills towards increasing complexity.



**(2) Occupation**

Occupation is defined by Law et al (1989) as activities people do every day to occupy themselves in order to look after themselves, enjoy their lives, and contribute to the social and economic fabric of their communities. The programs thus center their curricula on the value and meaning of occupation as performed by human-beings through the stages of human development. Occupational therapists rely on a client-centered approach to provide occupation-based interventions. The value of this approach is mirrored and reinforced through the university's student-centered commitment to education. Occupational therapy education in the MSOT and OTD programs requires students to develop critical and clinical reasoning skills, problems solving, creativity abstract thinking, capacity for empathy, and an understanding of diversity and perspectives of all stakeholders. This focus on occupation-based practice gives the student a critical understanding of the uniqueness of the profession, an informed perspective on society's view of the profession, as well as development of a strong professional identity within the student. Occupation-based occupational therapy can be seen as a major curricular thread in course design, fieldwork, and students' learning experiences.

**(3) Teaching and Learning**

The MSOT program provides an organized curriculum, based on human development and occupation that will assist students to develop the necessary knowledge, skills, professional attitudes and values to be independent entry-level generalists. The OTD program furthers and builds upon these skills in the areas of reflective practice, innovation, advocacy, leadership, and critical thinking to be a scholar of practice. Both curricula are rooted in constructivism, incorporating problem-based learning principles where faculty act as facilitators to enhance the students preexisting knowledge and help transform it to a higher level of understanding of human occupational performance through the acquisition of new knowledge didactically and practically. Besides student-centeredness, a constructivist approach requires active learning and the active engagement in the classroom and collaboration between students and faculty contributes to the education and transformation process. With faculty as partners, the students should strive to become self-directed and lifelong learners through self-reflection and feedback, making learning an empowering experience.

### **AMERICAN OCCUPATIONAL THERAPY ASSOCIATION MISSION**

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

### **AOTA Vision 2030**

The American Occupational Therapy Association's Vision for the Year 2030: Enriching life for ALL individuals and society through meaningful engagement in everyday activities.

<b>Foundational Pillars</b>			
<b>Inclusive and Equitable Professional Community</b>	<b>Evidence-Based, Client-Centered, and Innovative Practice</b>	<b>Universally Recognized with Valued Excellence</b>	<b>Occupational Justice and Advocacy</b>
Creates a supportive environment fostering belonging, collaboration, networking, and continuous learning for all professionals to enhance growth and development.	Delivers high-quality and skilled care using latest research, focusing on individual client needs and goals while encouraging innovative approaches to enhance treatment outcomes.	Establishes occupational therapy's importance across various settings, demonstrating its unique value in improving individuals' quality of life and functional abilities.	Promotes education, advocacy, accessibility, and the right for ALL to engage in meaningful occupations through collaboration with consumers, other professionals, and policymakers.

(American Occupational Therapy Association, 2025)

## **II. OCCUPATIONAL THERAPY PROGRAMS POLICIES AND PROCEDURES**

Students are required to adhere to all Policies and Procedures included in the WCU Catalog and Program Student Handbook. The contents of this handbook may be subject to change throughout the program. Please be advised that the University Catalog contains policies and procedures that apply to all students and is the primary source of reference. If there are any discrepancies or differences in policies or procedures that are contained in the University Catalog with those contained in the Occupational Therapy Programs Student Handbook, the University Catalog will be followed.

### **ACOTE NOTIFICATION REQUIREMENTS**

WCU accepts the responsibility to comply fully with these ACOTE Notification Requirements. The Occupational Therapy Program Director in conjunction with the Office of the Provost will provide ACOTE timely and accurate notification as it relates to program leadership, institutional sponsorship and accreditation status, and other significant changes. Honesty and integrity will be maintained in all interactions with ACOTE.

### **FACULTY/STUDENT RATIO**

- The student-faculty ratio is 1:34 for lectures and 1:17 for laboratory and practicals for OTD program.
- The student-faculty ratio is 1:34 for lectures and 1:17 for laboratory and practicals for the MSOT program.

### **ASSIGNMENTS**

Papers or assignments are accepted at the beginning of class on the date that it is due. Late papers or assignments will not be accepted. The instructor has the discretion to accept papers on the date that they are due up until 5:00 p.m. of due date, with a subsequent 25% grade penalty.

### **PRACTICAL EXAMINATION POLICY**

76% is the overall pass-rate for all practical examinations during midterms and final exams with the understanding that safety requirements are met per the items related to safety (for the client and therapist), and as identified on the practical grading rubric. Thus, if the safety requirements are not met, the student will receive an automatic failing grade for the practical examination. If the student meets safety requirements but receives less than 76% as total score in performing the technical skills, the student will also receive a failing grade (C). In either case, the student must retake the practical examination.

The student can only retake the practical on the same day of the originally scheduled practical exam, if the instructor determined that the student failed due to the safety requirements not being met. If the student fails due to their performance of the technical skills, the student should have an opportunity (1-2 days) to remediate before they can have a retake opportunity.

During the retake, the student must meet the safety requirements and technical skills with a minimum of 76%. If both these requirements are met and the student therefore passes, the student will only receive 76% (C+) as a passing grade.

## MINIMUM GPA

The OT program requires that all students will meet the following minimum GPA criteria:

- At the completion of the 1<sup>st</sup> trimester have a cumulative GPA of 2.5
- At the completion of the 2<sup>nd</sup> trimester have a cumulative GPA of 2.8
- At the completion of the 3<sup>rd</sup> trimester have a cumulative GPA of 3.0
- Maintain a cumulative GPA of 3.0 for the rest of the program

## COURSE CREDIT & FIELDWORK REQUIREMENTS

For occupational therapy programs, graduation will depend on satisfactory grade point average, professional conduct, applying principles of safety consistently, and satisfactory completion of Fieldwork and exit exams. Thus, a student must satisfactorily complete all academic and fieldwork courses and be in academic good standing.

- Complete at least 75% of all credits attempted each trimester.
- A student must complete all the course work before a student can enter Fieldwork Level II.
- Fieldwork Level II A and B (12 credits each; total 24 credits) must be completed to graduate.
- Students are allowed a maximum of three attempts to complete Fieldwork Level II A & B. This means a student can only have one failed attempt during Level II A & B.
- Students have maximum timeframe of 9 trimesters for the MSOT and 12 for the OTD to complete the didactic and fieldwork components of the program which is compatible with WCU Leave of Absence Policy.

## STUDENT ADVISING & PROFESSIONAL DEVELOPMENT

Students in the OT programs will be assigned a faculty mentor during orientation in the first term. Faculty mentors are required to meet with their student mentees at least once a trimester individually – before finals week. Students will be encouraged to meet and discuss their progress with their faculty mentors on an as-needed basis. Students who need assistance with academic issues are identified through a joint effort between faculty and the Student Affairs Office. Appropriate resources can be arranged by Student Affairs such as tutoring or referral to the Student Affairs Specialist. Student Success Workshops will be available at the CGS Campus each trimester. Faculty mentors will also meet with the students when any concern regarding professional behavior is identified.

At the end of the trimester, the faculty mentor and student will also complete the Student Professional Development Evaluation. This evaluation will provide feedback to the students regarding their professional development towards becoming an occupational therapist. Ratings are based on faculty observations of the student in classroom, laboratory, clinical and professional situations. Towards the end of the trimester, each faculty mentor will make an appointment with the students they are advising to complete the evaluation.

The *Student Professional Development Evaluation* also includes a section to document Professional Development Activities. Students are required to accrue 85 Professional Development Points prior to graduation. Students must accrue the points in the following areas: Professional Activities; Student Governance; and University/ Community Services. The form provides examples of activities and their associated point values. Students must complete the form prior to meeting with the faculty mentor at the end of the trimester and provide evidence of their involvement and participation. The balance of points accrued in a trimester will be “carried over” to the next trimester until the 85-point requirement is met.

## **OCCUPATIONAL THERAPY PROGRAMS DRESS CODE**

WCU OT students are highly visible to the public and must be sensitive to this fact. Students must abide by the following policies regarding professional dress and appearance while on the University campus.

- The University ID must be properly exposed above the waist on your front collar or on a lanyard at all times.
- Students will portray the well-groomed appearance of a responsible health professional.
- Nails must be groomed to  $\frac{1}{4}$ " or less with neutral colors polish only (no artificial nails).
- Facial hair is acceptable when cleanly shaven or well groomed. All accessories and jewelry shall be free of writing, pictures, symbols or any other insignia, which are crude, vulgar, profane, obscene, libelous, slanderous, or sexually suggestive. Any accessory or jewelry which creates a safety or health concern, causes or threatens to cause a disruption to the educational process, is prohibited. Body piercing jewelry other than lobe earrings (maximum of two earrings per lobe) is prohibited on campus and fieldwork.
- Dark glasses, sunglasses, hats, caps, visors and other head coverings shall not be worn indoors unless for religious reasons.
- For lectures, collared shirts only (button-down oxford or polo-type) are permitted. Dress- or walking shorts (above the knee) or casual dress pants are preferred. Jeans are acceptable provided they are in good condition. Dress sandals, clean tennis or running shoes, or any other closed-toed shoe with socks are acceptable.  
Shirts must have sleeves; however, a "professional-looking" sleeveless blouse is acceptable. Dress- or walking shorts (above the knee) or casual dress pants are preferred. Jeans are acceptable provided they are in good condition. Skirts and dresses can be no more than 3 inches above the knee. Dress sandals, clean tennis or running shoes, or any other closed-toed shoe with socks/stockings are acceptable. No exposure of midriffs, cleavage or gluteal fold is permitted.
- Students are required to wear business attire on days when guest lecturers and/or others are visiting the University. Students may also be required to wear business attire when giving formal presentations or case presentations as a part of their coursework. Appropriate business attire is a business suit including jacket, dress shirt and a tie or a blazer and dress pants with a dress shirt and tie. Appropriate business attire for women is business suit (skirt or pants) including jacket and blouse.
- Laboratory attire consists of solid color gym shorts that allow for modesty and free movement and a solid-colored T-shirt. Athletic shoes with socks are required. For many labs, women will need to wear a sports bra, halter-top or a bathing suit top that exposes the scapulae and may be unfastened at the back. Underwear is not permitted to show outside or through the clothing. NO exposure of midriffs, cleavage or gluteal fold is permitted.
- For Fieldwork and Internship, students must reflect both professional dress and behavior during all Fieldwork or Internship activities. It is University policy that students maintain the University dress code while on fieldwork or internship experiences unless this poses a problem with direct patient care and treatment application as determined by the fieldwork or internship site. For example, many pediatric and psychiatric settings request that white lab coats not be worn as some patients may be fearful or apprehensive of authority figures in white coats.

## **STUDENT STATEMENT REGARDING BLOOD BORNE PATHOGENS & OPIM**

- Occupational therapy students may be exposed to blood borne pathogens or other potentially infectious materials (OPIM) and may be at risk of acquiring the Hepatitis B Virus (HBV) infection or other potentially dangerous diseases such as influenza as an occupational hazard.
- WCU strongly recommends students obtain the influenza vaccine and Hepatitis B immunization series followed by a titer to determine immunity from the disease. In addition to following WCU recommendations, students may be required to have specific vaccines and clearance (i.e., tuberculosis) by the fieldwork or experiential site.
- Students must use standard precautions when indirectly or directly exposed to blood borne pathogens or other potentially infectious materials. Additionally, students must adhere to the policies and procedures of fieldwork or experiential sites. If/when an exposure occurs while on campus or at a fieldwork or experiential site, students must follow the site protocols and report the incident to the supervisor and WCU.
- By choosing occupational therapy as a career path, students acknowledge the risk of exposure to blood borne pathogens and other potentially infectious materials such as the influenza virus and accept full responsibility.

## **SAFETY POLICIES**

Safety policies with regards to patient/client handling, equipment, and the therapist will be introduced and discussed as appropriate during various courses. These policies will also be uploaded on WCU learning management system (LMS) as attachments for the specified courses. Further information on specific dress code for labs and expected students' participation during lab/practicals will be provided weekly on WCU's LMS (Canvas).

For example:

- *Adaptive Equipment* – Basic Patient Care Skills course
- *Care of patients with IV access* – Basic Patient Skills course
- *Cleaning hydrocollator* – Preparatory Methods course
- *Cleaning paraffin bath* - Preparatory Methods course
- *Draping and maintaining privacy of patients* – Basic Patient Care Skills course
- *Dysphagia diet modification* – Older Adult course
- *Electrical galvanic stimulation* – Preparatory Methods course
- *Electrical muscle stimulation* – Preparatory Methods course
- *Exposure to blood or body fluids* – Basic Patient Care Skills course
- *Hand washing* - Basic Patient Care Skills course
- *Using hydrocollator packs* – Preparatory Methods course
- *Infections control* - Basic Patient Care Skills course
- *Isolation precautions* - Basic Patient Care Skills course
- *Ultrasound* – Preparatory Methods course
- *Safety during gait training* - Basic Patient Care Skills course
- *Personal protective equipment* - Basic Patient Care Skills course
- *Phonophoresis* – Preparatory Methods course
- *Standard precautions* - Basic Patient Care Skills course
- *Transcutaneous electric nerve stimulation* – Preparatory Methods course
- *Wound care* – Preparatory Methods course



## **ADDITIONAL OTD POLICIES**

The following section describes the general requirements for the Doctor of Occupational Therapy (OTD) program.

### **CULMINATING PROJECT**

The OTD is a practice-scholar model doctoral plan that emphasizes didactic study (lecture, reading, and observation), fieldwork and a culminating project consisting of several courses including; Preparation for Capstone I & II; Doctoral Capstone Experience I & II, and the final Capstone. This combination of experiential internship and capstone project replaces the traditional doctoral thesis. The goal of the experiential component is to develop occupational therapists with specialized skills consistent with the program's curricular design (ACOTE, 2008). The experiential component must be consistent with the student's individual learning plan and objectives and the culminating project. The student must be able to demonstrate specialized knowledge to practice through the experiential activities.

### **DOCTORAL EXPERIENTIAL INTERNSHIP**

The Doctoral Capstone Experience (DCE) is completed in the final two trimesters of the program and is the opportunity for the student to engage in a specialized area of practice. The DCE is completed in conjunction with the final capstone project. Under the guidance of the Capstone Coordinator, the student will plan and develop an experience that fulfills the advanced standards and expectations of a doctoral level degree. The DCE will be mentored by a fulltime faculty member, adjunct faculty/consultant, or a qualified person at the site where the DCE will be completed. The focus will be chosen from the specifies areas found in the ACOTE standards. The occupational therapy program's philosophy and curriculum design supports all students to participate in varied levels and focus of experiences, with an increasingly greater breadth and depth of skill and knowledge expected in order to develop entry level competency. The location of the experience and specialty objectives for the capstone project will be developed as part of the Preparation for Capstone courses.

### **TIMELINE POLICY**

Before the DCE and Capstone can be initiated the student must successfully complete all didactic coursework and Level II Fieldwork (A & B). The DCE is designed to be completed on a full-time basis in two trimesters (7 & 8) of the program meeting the programmatic requirement of 14 weeks - 560 hours. No more than twenty percent of this time may be completed outside of the experiential setting. Timeline must be consistent with specific objectives and culminating project. Completing the DCE on a part-time basis will result in a delay of graduation. Prior fieldwork or work experience may not be substituted for any work completed during the capstone experience.