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**August 19, 2009**

Dear FGCU Occupational Therapy Student,

It gives me great pleasure to welcome you to the Occupational Therapy Program. The faculty, staff, and I look forward to the next two years with excitement and eagerness. Your class comes to us with a diversity of background and knowledge that promises to create opportunities for enhanced learning, and we hope to make your educational experience with us interesting and rewarding.

Graduate study brings new challenges with increased expectations beyond those encountered as an undergraduate. You are preparing to enter a profession in an increasingly demanding health care environment. You must have the knowledge, skill, and integrity required to provide best practice with individual clients and with client groups. This requires that you obtain detailed knowledge, and that you be able to engage in strong clinical reasoning utilizing that knowledge when faced with specific client situations. You will also need to develop skill in discussing/presenting issues, information, or cases in scholarly and less formal contexts. Finally, you will need to develop professional behaviors that will serve you well in your future career. We believe you are equal to the task.

Welcome to the Program!

Linda M. Martin, PhD, OTR/L, FAOTA  
Professor and Program Director of Occupational Therapy  
Chair, Department of Occupational Therapy and Community Health

# **Accreditation, Certification, and Licensure Notice**

## **Program Accreditation**

The entry-level program in occupational therapy is accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association, 4720 Montgomery Lane, PO Box 31220, Bethesda, Maryland, 20824-1220; the telephone number is 301-652-2682.

## **National Certification Examination Requirements**

The National Board for Certification of Occupational Therapy (NBCOT) is a non-profit organization that was founded in 1987 to protect the public from incompetent and unethical occupational therapists and occupational therapy assistants. There are two primary mechanisms that the board uses to carry out their mission. One is by requiring that an individual make a minimum passing score on the National Certification Examination for Occupational Therapist. After successfully passing the certification examination, an individual may use the initials OTR (Occupational Therapist Registered) after his/her name. However, in many states with licensure, individuals cannot identify themselves as an OTR unless they are also licensed in the state.

An occupational therapist is certified for five years. After five years, an occupational therapist may apply for recertification by NBCOT.

Specific information regarding the application process for taking the exam will be provided during the final year of the student's program. For more information on the recertification program, please contact NBCOT, 12 South Summit Avenue, Suite 100, Gathersburg, MD 20877-4150. Telephone: (301) 990-7979 Website: [nbcot.org](http://nbcot.org)

**NOTE: A felony conviction may affect a graduate's ability to sit for the certification exam required by the National Board for Certification in Occupational Therapy. NBCOT will perform an early determination for persons who question whether this might apply to themselves.**

## **Licensure/Trademark**

Licensure laws vary from state to state, and it is the student's responsibility to be familiar with the licensure requirements in the state in which they plan to practice. Currently, all 50 states, Washington D.C., Puerto Rico, and Guam have some form of professional regulation affecting the practice of occupational therapy in that state/territory. All of the states that have licensure use the passing score on the National Certification Examination for Occupational Therapists as one of the criteria for licensure. Some states have a trademark law rather than licensure. A trademark law automatically recognizes a registered occupational therapist and a person does not have to apply individually for this recognition.

For the specific statutes that regulate the practice of occupational therapy in Florida, go to [http://www.doh.state.fl.us/mqa/occupational/ot\\_home.html](http://www.doh.state.fl.us/mqa/occupational/ot_home.html). Specific sections pertaining to the practice of occupational therapy can be found in Appendix III.

**NOTE: A criminal background can affect an individual's ability to obtain a license to practice in most states, including Florida. Prospective students should investigate whether incidents in their own background would preclude obtaining a license prior to enrollment in the Occupational Therapy Program.**

# **CALENDAR OF IMPORTANT OCCUPATIONAL THERAPY DATES**

## **2008 - 2009 Calendar**

August 25, 2008	The FGCU Occupational Therapy Class of 2009 begins study Ft. Myers, Florida
TBA	Florida Occupational Therapy Association (FOTA) Annual Conference Orlando, FL
April 2007	National Occupational Therapy Month
April 23-26, 2009	American Occupational Therapy Association (AOTA) Annual Conference Houston, Texas

# **Introduction to Program Foundations**

## **Mission Statement**

The mission of the Occupational Therapy Program is to prepare students to embrace the art and science of the profession, thus enabling graduates to provide creative, ethical, and evidence-based services in an increasingly diverse and technologically advanced world. The Program and its community partners collaborate to promote client-centered, occupation-based practice and provide leadership within multiple communities. We value an active learning environment that fosters the personal and professional development of students, faculty, and community members.

## **Statement of Philosophy**

The faculty of the Occupational Therapy Program subscribe to a set of core values and beliefs which provide the foundation for curriculum and other program decisions. These beliefs are comprised of ideas about the nature of human beings, about the profession of occupational therapy, and about the teaching/learning process.

### **View of Humanity**

Humans are complex, dynamic, and adaptable beings, who need to be engaged in meaningful and purposeful occupations (Wilcock, 1993). They have an innate drive to explore and master the environment, and this drive is essential to their development and adaptation throughout their lives. In the course of development, humans assume multiple roles within a variety of contexts that are influenced by the expectations of the culture and society in which they live; they define themselves in terms of the roles they assume in life and the quality of their performance in those roles. As individuals, humans find fulfillment in life through productive activity, and through the process of making choices about their lives, the pursuit of goals, and the engagement in occupations that are personally and socially meaningful.

Humans rely on habit patterns to sustain daily functioning, but are responsive to contextual influences, and adapt their behavior to variations, even broad extremes, in the physical or social environment. They are also able to adapt to changes in their own bodily functions and body structures (Kielhofner, 2002).

Each human is a unique being, an evolving product of biology, spirit, and experience within cultural, social, and physical contexts. Each person has intrinsic dignity and worth, and deserves humane treatment, regardless of values and beliefs. Humans prefer to be able to make choices for themselves, and they respond more positively when opportunities for choice are available than when a course of action is dictated to them (Townsend & Brintnell, 1997).

Human beings each follow a unique path, influencing and being influenced by both internal and external environments. The internal environment is comprised of the physiological effects of organic functioning as well as the wealth of memories of experiences, psycho-emotional states, and spiritual strength. The external environment consists of physical forces, spaces, and objects, as well as cultural and social influences. The effects of time are in fact effects of changing internal and external environments, and result in changing needs of the individual. The external environment and time are subsumed under the construct of context within the Occupational Therapy Practice Framework (2002) (henceforth referred to as the Framework).

## **Views on Occupation and Occupational Therapy**

The profession of occupational therapy views the individual's quality of interaction with the external environment as the major indicator of health. Interaction with the environment is, in essence, occupation; its success, quality, and meaning are uniquely interpreted by the individual. Viewed externally, this interaction might be termed 'human performance' and the quality of that performance evaluated by a therapist. Occupational therapists work to enhance the potential of an individual to master, control, or adapt to his or her environment. Occupation is defined by Law, Polatajko, Baptiste, and Townsend (1997) as:

Activities...of everyday life, named, organized, and given value and meaning by individuals and a culture. Occupation is everything people do to occupy themselves, including looking after themselves...enjoying life...and contributing to the social and economic fabric of their communities... (p.32).

Occupation, therefore, refers to groups of activities and tasks in which people engage throughout their lives to fill their time and give life meaning; these include "practical, productive, and playful pursuits" – activities comprising play or leisure, paid or unpaid work, and activities of daily living (Kielhofner, 2004, p. 67). Occupations have contextual dimensions that influence how individuals perceive and engage in them. These contextual dimensions include cultural, physical, social, personal, spiritual, temporal, and sometimes virtual factors (AOTA, 2002).

Occupations are pursued by individuals through purposeful activities, which are themselves comprised of a set of tasks. Purposeful activities are goal directed, but nevertheless have unique meaning and value to the client (Hinojosa, 1993). They are understood on a structural and social level by the occupational therapist, but require the individual's perspective, colored by culture, experience, and context, to render them "occupations" (Pierce, 2001).

Promotion of health and life satisfaction is determined by the balance of occupations in one's life. These occupations change over the lifespan in response to changing role expectations, values and priorities, physical capacity, and environmental contexts; but the centrality of occupation to life satisfaction remains (Law, et al, 1997).

Occupational therapy embraces occupation as the central focus of meaning and health for humans, and utilizes occupation and purposeful activity vehicles to promote healthy adaptation to the challenge of incapacity or a constricting environment. Purposeful activity serves as a major tool to evaluate, facilitate, restore, or maintain an individual's ability to function competently in daily occupations.

The use of occupation, the nature of which is unique to individuals, is at the heart of client-centered practice. Utilizing clients' own preferred occupations, occupational therapists guide clients in the use of purposeful activity. This draws on the power of intrinsic motivation and preference for personal choice that is inherent in human beings, and thereby increases the probability of successful intervention. Occupational therapists also address environmental influences on performance, and assist clients in efforts to adapt to or change environments to maximize function; this mastery of the environment is crucial to clients' satisfaction with their life circumstances.

Occupational therapists serve individual clients and client groups in various capacities. Though direct patient care is perhaps most obvious, other roles of the therapist include that of educator, consultant, researcher, consumer of research, and advocate. Services may be directed toward the benefit of individuals or of populations. In order to function effectively in these roles, occupational therapists must uphold strong ethical standards, which require practices supported by sound reasoning and continuously updated knowledge of evidence and technology (see Code of Ethics, Appendix I; Standards of Practice, Appendix II).

## **Views on the Education of Occupational Therapists**

As educators, faculty in the Occupational Therapy Program are charged with fostering the development of knowledge and core values and beliefs about human beings, about occupation, and about occupational therapy, in students who have chosen a career in the profession. In order to fulfill this commitment, the faculty has examined its beliefs about how education is best achieved. Our thinking about learning has come from both historically accepted pedagogical sources such as Dewey (1998) and Bloom (1913), and from more modern work in cognitive psychology (Bransford, Donovan, & Pellegrino, 2000; Granello, 2001) and learning theory, including adult learning (Knowles, 1998), constructivist (Steffe & Gale, 1995), and technology-based theories (Roberts, 2004).

Learning is an inherent human capacity which is the result of individuals' press for mastery of challenges presented in the environment. It remains as a primary vehicle for adaptation to changing circumstances throughout the lifespan. It can be informal, the result of trial and error, or formal, such as that occurring within the context of a planned curriculum to master the knowledge, skills and values of a profession.

Students entering a curriculum in pursuit of a career in occupational therapy are themselves "complex beings engaged in a dynamic process of interaction with the physical, social, temporal, cultural, psychological, and spiritual environments" (AOTA, 2003, ¶ 1). They each have unique experiences that influence their response to the educational experience and their contributions to it. They each are at different developmental stages of their own lives, with roles and developed capacities that reflect their individuality. Each has been selected for her or his potential to adapt to the demands of the program and succeed in acquiring knowledge, reasoning ability, performance skills, and attitudinal outcomes articulated by the faculty.

The faculty recognizes that students in the occupational therapy program are adults and require somewhat different approaches to teaching and learning. Knowles (1998) informs our thinking about andragogy and helps shape plans for learning experiences. The adult learner's life experiences enable him or her to actively engage in self-directed learning activities, establish personal learning goals, and expedite the learning process.

The Occupational Therapy Program faculty recognizes that as humans, these students will learn both inside and outside the classroom, and that the context of learning has power to influence habits of behavior. Attitudes regarding advocacy, ethical practice, and life-long learning are examples of outcomes that may be powerfully shaped by the context in which learning occurs. The curriculum therefore is planned to incorporate both didactic and experiential learning (Kayes, Kayes, & Kolb, 2005; Kolb, 1984), with experiences planned to provide a scaffold for continued professional development.

The Program faculty at FGCU considers the primary medium for graduate education to be an active learning environment where students and faculty engage together in study, exploration, discussion, and reflection. Passive methods of instruction are minimized, and faculty members strive to reach out to each student selectively to facilitate engagement in the learning process.

A core value embraced by the profession and the FGCU program faculty is that life-long learning provides vitality to the professional (as well as to the profession), and integrity to practice. This value is conveyed to students through an expectation of engagement, through implicit and explicit communications, and through the example of the learning environment and the faculty who practice life-long learning and communicate its excitement.

A second Program emphasis is the importance of community-campus partnerships in the education of today's professional. To the extent possible, learning experiences should take place in community-based settings, both traditional and non-traditional, encompassing a variety of work environments of an entry-level therapist, thus allowing the learner to apply knowledge and skills in realistic settings. These experiences facilitate the transition from role of student to role of occupational therapist and member of the professional community.



Education of the professional in today's world also requires development of technological know-how and high-level reasoning skills as well as a solid foundation of knowledge on which to base reasoning. Bloom's taxonomy of learning and more recent work on critical thinking/clinical reasoning (Neistadt, 1996) provide the foundation for achieving a curriculum that develops requisite knowledge as well as reasoning abilities of students.

Central to the education of a developing professional is the opportunity to discuss and reflect upon the material covered and its application in context. Courses in the curriculum, therefore, typically incorporate opportunities to discuss or journalize thoughts regarding situational application of content as issues emerge.

Today's professional must also have the ability to make practice decisions based on evidence that has been developed systematically through research. To this end, the faculty strives to develop students' capacity to be critical consumers of research, to be skilled evaluators of practice outcomes, and to be contributors to the body of knowledge of the profession.

Fundamental to practice in an increasingly diverse and stressful world is a strong sense of ethics. Ethical themes are integrated throughout the curriculum in order to develop confident, grounded, principled professionals. Only through examination of ethical issues can students develop the level of awareness and self-confidence necessary for independent functioning as a professional.

As a corollary to ethical training, students must also develop professional behaviors consistent with the ethics and values of the profession. These professional behaviors reflect "a respect for self, an empathetic regard for others, personal integrity, respect for the right of a person to hold differing points of view, and a sense of responsibility to contribute to the welfare of others" (Fidler, 1996). These professional behaviors develop over the course of occupational therapy education, and are fundamental to the individual's ability to communicate effectively with others (Kasar & Muscari, 2000).

The role of the educator is that of a facilitator who designs learning opportunities. With this in mind, the Program faculty recognize the following as guiding principles in structuring learning experiences:

- Emphasis should be placed on both content and process.
- Learning activities should build upon a learning continuum from simple to more complex concepts and skills, where students can continually build upon what they have already learned.
- Multiple approaches to learning, and multiple opportunities to apply knowledge in different contexts enhance clinical reasoning.
- Case-based activities enhance learning, and help students construct and apply knowledge in context.
- Learning opportunities should be presented within a safe environment, allowing exploration and practice, and leading to mastery of knowledge, skills, and attitudes consistent with entry-level practice.
- The use of technology in learning activities enhances access to extensive materials for learning while developing students' ability to take full advantage of the available technology in practice environments.
- Knowledge construction rather than mere transmission of information is important.
- Opportunities for transfer of knowledge beyond the initial learning situation should be provided where possible.
- Students' life experiences are valuable as a means to mobilize the strengths of adult learners in mastering curriculum objectives.
- Learning experiences that take place in community-based settings which represent a variety of work environments of an entry-level therapist will allow the learner to apply knowledge and performance skills within realistic settings, and to examine the ethical dimensions of practice.
- The learning process should enable the individual to progress professionally from the role of a student to that of an occupational therapist, an advocate for clients and communities, and a contributing member of the profession.

Finally, the words of John Dewey encourage us to embrace teaching as an art, and to bring to our vocation a "personal vision" which may have the power to inspire and excite our students:

...if education is going to live up to its profession, it must be seen as a work of art which requires the same qualities of personal enthusiasm and imagination as are required by the musician, painter or artist. Each of these artists needs a technique which is more or less mechanical, but in the degree to which he loses his personal vision to become subordinate to the more formal rules of the technique, he falls below the level and grade of the artist. He becomes reduced again to the level of the artisan who follows the blue prints, drawings, and plans that are made by other people (*The Middle Works of John Dewey*, 15, p. 186).

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## Student Learning Outcomes

The following learning outcomes have been established by the Department of Occupational Therapy and Community Health at FGCU to enable the individual to progress professionally from the role of the student to that of an experienced, active member of the occupational therapy community and the community at large.

Graduates of the occupational therapy program will:

1. Utilize a breadth and depth of knowledge in the liberal arts and sciences and an understanding of issues related to globalism and diversity, as a foundation for practice.
2. Practice in a wide variety of settings, having been exposed broadly to delivery models and systems utilized in settings where occupational therapy is currently practiced as well as those where it is emerging as a service.
3. Apply occupational therapy theories and best-practice methods to specific client situations in clinical settings.
4. Articulate and apply professional principles, intervention approaches and rationales, and expected outcomes as related to occupation.
5. Effectively collaborate with professionals in other disciplines.
6. Supervise and work in cooperation with the occupational therapy assistant and other occupational therapy support personnel.
7. Articulate the need for and value of lifelong learning, and keep current with best professional practice.
8. Uphold the ethical standards and values of the occupational therapy profession.
9. Effectively consume and utilize the latest research and knowledge bases that undergird practice.
10. Contribute to the growth and dissemination of research and knowledge.
11. Formulate and apply strategies for community leadership to contribute to the community through advocacy for the disabled, for other vulnerable populations, and for quality in health care.
12. Select and conduct evaluations appropriate to client's needs, and interpret then utilize results to plan interventions.
13. Analyze needs of community groups, and develop programming and outcomes assessment plans specific to the setting.

## Faculty & Staff Directory

<b><u>Name</u></b>	<b><u>Office</u></b>	<b><u>Phone</u></b>
<b>Tina Gelpi</b> , OTD, OTR/L Assistant Professor e-mail: <a href="mailto:tgelpi@fgcu.edu">tgelpi@fgcu.edu</a>	BHG 119	590-7551
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<b>Linda Martin</b> , PhD, OTR/L, FAOTA Professor and Chair Department of Occupational Therapy and Community Health Occupational Therapy Program Director e-mail: <a href="mailto:lmartin@fgcu.edu">lmartin@fgcu.edu</a>	BHG 127	590-7556
<b>Karen N. Mock</b> , MS, OT/L Assistant Professor, Academic Coordinator of Fieldwork Education e-mail: <a href="mailto:kmock@fgcu.edu">kmock@fgcu.edu</a>	BHG 243	590-7552
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<b>Wanda Smith</b> Office Manager e-mail: <a href="mailto:wsmith@fgcu.edu">wsmith@fgcu.edu</a>	BHG 117B	590-7550

### Adjunct Faculty

**Betsy Burgos, MA, OTR/L**  
Occupational Therapy Consultant  
Naples, FL

**Karen Judd, MHSA, OTR/L**  
Clinical Director of Rehabilitation Services  
NCHHCS, Naples FL

### Faculty Office Hours & Appointments

Since the occupational therapy curriculum is very demanding for students and faculty, faculty members are requested to have a minimum of 5 hours per week allocated for first-come, first-serve drop-in office hours. Office hours are noted in course syllabi. If a student is unable to meet with a faculty member during office

hours, the student is responsible for arranging an appointment with the faculty member. To make an appointment with a faculty member, (1) e-mail the faculty member, (2) call the faculty member at his/her office phone number, or (3) leave a message on the faculty member's office door. Messages with a stated purpose, name, phone number, and several time options for a call back, are easier to return.

## **Academic Advising**

An Academic Advisor will be assigned to you by the Chair of the Department of Occupational Therapy and Community Health at FGCU. Your Academic Advisor will counsel with you regarding your academic program, and advise you regarding your academic progress toward fieldwork and graduation. In cases where intervention is required for academic, professional behavior, or disciplinary issues, the Advisor will be consulted or engaged in the process, as appropriate. Advising for specific fieldwork placements will be provided by the Academic Coordinator of Fieldwork Education.

Academic and clinical education faculty members are sensitive to the need for adequate educational preparation of students. The faculty-student role should not be confused with a therapist-patient relationship. Students who experience major personal crises or long term interpersonal problems are encouraged to seek appropriate counselors outside of the Department of Occupational Therapy and Community Health in order to protect student confidentiality and rights. The University provides counseling services for enrolled students through Student Health, Counseling and Psychological Services, 590-7950.

## **Biographies of Faculty & Staff**

### **Tina Gelpi, OTD, OTR/L Assistant Professor**

Tina earned her undergraduate degree in occupational therapy in 1981, her master's degree in education with emphasis in adapted physical education and kinesiology in 1987 at the University of Kansas, and a practice doctorate in occupational therapy in 2003 at Nova Southeastern University (NSU).

Tina's previous academic experience in occupational therapy includes serving as an Assistant Professor and Academic Fieldwork Coordinator at Rockhurst University in Kansas City, MO and adjunct instructor at the University of Kansas Medical Center. Much of her practice experience has been in pediatric settings, including rural schools and the University Affiliated Program (UAP) at the University of Kansas Medical Center. While at NSU during 1999-2001, Tina worked as an occupational therapist at The Salvation Army Homeless Shelter in Fort Lauderdale.

Originally from Kansas City, Tina is enjoying the Florida sunshine and beaches!

### **Sue Gregitis, Ed.D, OTR/L Assistant Professor**

Dr. Sue Gregitis blew into Florida during Hurricane Charley in 2004. She earned her undergraduate degree in occupational therapy from Boston University, her master's degree in school psychology, and doctoral degree in educational psychology from American International College (AIC) in Springfield, MA. Dr. Gregitis also completed a Certificate of Advanced Graduate Study (C.A.G.S.) in educational psychology at AIC. She is licensed as an occupational therapist and certified as a school psychologist in Florida. Dr. Gregitis served on the occupational therapy faculty at AIC from 1996-2004. Her professional areas of expertise include psychosocial and pediatric occupational therapy and service learning in community settings. Dr. Gregitis' family is very important to her, including her Yellow Lab, Daisy.

**C. Collette Krupp, BS, OTR/L**  
**Assistant in Occupational Therapy**

Collette received a Bachelor of Science (Occupational Therapy) from Colorado State University, Fort Collins, Colorado. She has practiced in eight states in a variety of clinical settings including pediatrics and adult intensive care units, chronic pain and burn units, acute trauma, general hospital settings, rehabilitation units, and school settings including hearing impaired programs. Collette's years in Florida have included employment in acute care, long term care and rehabilitation. She has enjoyed supervising fieldwork students and teaming with other professionals.

Collette's daily occupations include biking, Pilates exercise, beach relaxation and reading.

**Linda Martin, PhD, OTR/L, FAOTA**  
**Professor and Chair**  
**Department of Occupational Therapy and Community Health**

Linda received her occupational therapy education at the University of Florida, and her Master's and Doctoral degrees from Syracuse University. She has worked in physical disabilities with a broad spectrum of diagnoses, but has focused her practice and interests on hand rehabilitation and research for the last several years.

Linda has been an occupational therapy educator for many years, serving in faculty and administrative roles at Utica College of Syracuse University in Utica, New York, Eastern Kentucky University in Richmond, Kentucky, and at FGCU since 2001. Her teaching interests include biomechanical assessment and treatment, kinesiology, research, and specialty topics in hand rehabilitation.

Linda, a native Floridian, has "come home", and lives with husband John and son, John Bryon, in Fort Myers. She also has a daughter and grandson who live in Columbus, Ohio.

**Karen Mock, MS, OT/L**  
**Assistant Professor and Academic Coordinator of Fieldwork Education**

Karen is a graduate of Michigan State University with a Bachelor of Arts degree in Education and a major in Special Education. She earned a Master of Science in Occupational Therapy from Virginia Commonwealth University. Karen was previously employed by Fairfax County Public Schools in Virginia where she held a variety of teaching and occupational therapy positions, as well as that of Specialist for the Program for Students with Physical Disabilities. Since coming to Florida, Karen has been employed as an occupational therapist in the rehabilitation department of a skilled nursing facility, an out-patient clinic serving the frail elderly in an assisted living facility, and as a private contractor with several home care agencies. Karen joined Florida Gulf Coast University in October, 1997.

**Doug Morris, MOT, OTR/L**  
**Assistant Professor**

Doug joined Florida Gulf Coast University in May of 1999. He was born and raised in India and lived in Asia until he graduated from high school. Doug spent four years in the U.S. Army following high school. After his departure from the Army, he received a Bachelor's degree in Health Science and a Master's degree in Occupational Therapy at Duquesne University in Pittsburg, Pennsylvania. Doug was employed as an occupational therapist at Allegheny General Hospital, a large urban medical center, where he had experience in acute neurological and orthopedic rehabilitation. He served as the occupational therapist on a multi-disciplinary treatment team at one of the nation's largest outpatient spina bifida clinics. Doug has provided occupational therapy services to homecare clients in Pennsylvania and geriatric residents at skilled nursing

facilities in Pennsylvania and Florida. Prior to moving from Pittsburg, he served as an adjunct faculty member to the occupational therapy program at his alma mater.

Doug's interests include computers and assistive technology, wellness programs for the elderly, fishing, camping, and playing with his two children.

**Wanda Smith**  
**Office Manager**

Wanda joined Florida Gulf Coast University in December of 1999. She lived in Indiana until the Summer of 1998 when she moved to Florida. Wanda has been employed as a secretary in middle school, high school and college settings.

Wanda's hobbies include walking on the beach, needlepoint, and playing with her grandchildren.



## **General Information**

### **Address/Telephone Changes**

It is the responsibility of each student to maintain a current residential address and phone number with the Department of Occupational Therapy and Community Health, whether the student is on campus or off campus for fieldwork. The department will not be held responsible for consequences incurred due to address changes which are not reported within five (5) working days.

### **Computers**

Many of the courses in the program are web-enhanced, meaning that course web pages are utilized for learning modules, resource links or storage, discussion boards, etc. Students are expected to have sufficient computer skills to access these educational resources.

Students are required to have free access to a computer, and are expected to check e-mail at least daily for communications from faculty. FGCU provides each student with an official e-mail address, and all program-related communications should go through that system (see FGCU policy regarding technology in the University Student Guidebook).

Students must have a Student ID in order to access library resources, including electronic resources. It is the student's responsibility to ensure that the ID is obtained.

There are numerous computer labs on campus; please refer to the FGCU catalog for the locations of these labs. Computers in the offices of the College of Health Professions are not available for use by students except for student workers.

### **Copies**

Please refer to the FGCU catalog for locations of copiers throughout the campus (library, etc.). Copy machines in the College of Health Professions work areas are not available for student use.

### **Lunch Area, Vending Machines**

There is an eating area at the Perch and Eagle Café on the FGCU Campus and vending machines are located next to the Eagle Café and the first floor of Ben Hill Griffin building as well as other buildings on campus. A coffee and sandwich cart is located in AB3 and a coffee bar is in the library building.

### **Mail and Mailboxes**

Each student will have a folder (mailbox) in a filing cabinet which is located on the first floor near the desk of the Occupational Therapy and Community Health Department Office Manager, BHG 117B, in the College of Health Professions. The filing cabinet is unlocked between the hours of 8:00 am – 5:00 pm, Monday through Friday. Students are expected to check their mail folders regularly.

### **Tapes: Audio, Video**

Students are allowed to audio tape classes with the permission of the class instructor. Videotaping of classes by students is not allowed; however, the University does videotape some classes and these may be available to students.

# **CURRICULUM DESCRIPTION & REQUIREMENTS**

## **Overview of the Occupational Therapy Curriculum (SEE THE UNIVERSITY CATALOG FOR FULL COURSE DESCRIPTIONS)**

SUMMER 2007	FALL 2007	SPRING 2008	SUMMER 2008	FALL 2008	SPRING 2009
Prerequisite Courses	OTH6002 Occupational Therapy History and Foundations 2 Credits	OTH6226C Evaluation of Occupational Performance Issues I 3 Credits	OTH6227C Evaluation of Occupational Performance Issues II 3 Credits	OTH6707 Management and Supervision in OT 3 Credits	OTH6845 Level II Fieldwork A 6 Credits
Musculoskeletal Anatomy	OTH6009 Theory in Occupational Therapy 3 Credits	OTH6235C Occupational Therapy Interventions I 3 Credits	OTH6236C Occupational Therapy Interventions II 3 Credits	OTH6910 Directed Study 3 Credits	OTH6846 Level II Fieldwork B 6 Credits
Human Neuroanatomy	OTH6536C Occupational Performance Issues I 3 Credits	OTH6018 Professional Practice 3 Credits	OTH6026 Group Process and Management 3 Credits	OTH6106C Technology in Practice 3 Credits	
	OTH6605C Occupational Performance Issues II 3 Credits	OTH6751 Outcomes Research 3 Credits	OTH 6973C Project Implementation 1 credit	OTH6725 Community Practice Seminar 3 Credits	
	OTH6415C Human Motion in Activity 3 Credits	OTH6840 Level I Fieldwork A 1 Credit		OTH6841 Level I Fieldwork B 1 Credit	
	TOTAL: 14 CREDITS	TOTAL: 13 CREDITS	TOTAL: 10 CREDITS	TOTAL: 13 CREDITS	TOTAL: 12 CREDITS

## Proficiency Requirements

The Occupational Therapy Program requires that students pass a Clinical Proficiency Checkout before beginning their Level II experiences. The checkout involves basic clinical skills such as transfers and muscle testing (as well as other basic evaluation techniques)—all material that is covered in prior course work. It is performed as a Practical Exam, given in November or December prior to the scheduled Level II Fieldwork. Students who do not pass this Proficiency Checkout will not be allowed to begin Level II Fieldwork as scheduled.

## Fieldwork Experience

The Accreditation Council of Occupational Therapy Education (ACOTE) states that Level I and Level II Fieldwork are crucial in the development of the occupational therapist. Fieldwork experiences within the FGCU program are designed to complement class experiences (on-site assignments) in order to expose the student to a variety of traditional and non-traditional practice settings with client populations across the life span. The fieldwork experiences are briefly described below, and are fully developed in the Occupational Therapy Program Fieldwork Education Manual.

Level I Fieldwork is designed to offer the students opportunities to begin integrating academic learning with clinical practice. The Department of Occupational Therapy and Community Health faculty have developed a two-course sequence of Level I fieldwork experiences which take the form of directed observation and participation in selected aspects of the practice of occupational therapy.

Level II Fieldwork experiences are designed to immerse the students in all aspects of the occupational therapy process and the culture of the profession. The Department of Occupational Therapy and Community Health has established a two-course sequence of Level II Fieldwork experiences, each 12 weeks in length. Fieldwork placements will be assigned in a manner that provides each student with opportunities to work in a variety of occupational therapy settings that serve clients across the age-span.

Students are advised that ACOTE states that it is desirable for Level II experiences to be full-time and that they should equal a total of 24 weeks. In today's health care system, many therapists do not work the traditional 40-hour week; therefore, it may not be possible to complete these assignments within 6 months. Students should be aware that fieldwork is a very time intensive component of the program, and that it generally does not include a stipend or other payment. Students are advised not to plan on being employed during this time and that they will need their own transportation. Furthermore, students are advised that while placement assignments are made, according to each student's preference, as much as possible, there are no guarantees that both Level II placements will meet their stated criteria.

Students must complete all didactic and Level I Fieldwork courses with a grade of B or better before they may begin Level II Fieldwork. They must then complete all Level II fieldwork within 2 years of completion of the didactic program.

### **Other Requirements: Liability Insurance, CPR Certification, Immunizations, Health Insurance, Professional Association Membership and Background Checks.**

Students are required to provide proof of each of the following to the Department of Occupational Therapy and Community Health at the start of the first semester of the program. Students will not be permitted to attend off-campus class experiences, Level I, or Level II fieldwork placements if current proof of each is not on file. Failure to engage in these planned experiences on the designated dates may result in grade penalties; in the case of Level I fieldwork, failure to start on the designated date may result in an extension of the fieldwork placement into weekends and holidays. Failure to start Level II fieldwork on the designated date may result in the student being withdrawn from that placement, the loss of that specific placement opportunity, and delay in graduation.

- I. **Malpractice insurance**, also referred to as professional liability insurance, with minimum limits of \$1,000,000/\$3,000,000. Students are not covered by malpractice insurance carried by FGCU, the Florida State University System or the fieldwork affiliate to whom the student is assigned. Two companies providing this type of insurance to therapists and students are:

Marsh  
[www.proliability.com/26306A](http://www.proliability.com/26306A)  
1-800-323-2106 (ext 34209)

OR

Healthcare Provides Services Organization  
[www.hpsso.com](http://www.hpsso.com)

- II. **Immunizations and/or screening tests** include:  
Positive Rubella (**German Measles**) Titer Test or Immunization.  
Positive Rubeola (**Measles**) Titer Test or Immunization.  
Positive Varicella (**Chicken Pox, Herpes Zoster**) Titer Test or Immunization or validation of having **Chicken Pox**.  
Current Tetanus booster (within 10 years).  
Mantoux TB screening test within 1 year of application and yearly thereafter. *A positive Mantoux test result must be followed up with a chest x-ray and verification of inactive status.*  
Evidence of Hepatitis B Vaccine series completed or initiated, positive titer or a student signed waiver. Hepatitis B (HB) Vaccine is given as a series of 3 immunizations, with the final 2 given 1 and 6 months following the initial immunization. As a health care worker, you run a greater risk of contracting Hepatitis B than HIV. Hepatitis B is a debilitating disease that can lead to lifelong infection, cirrhosis (scarring) of the liver, liver cancer, liver failure, and death. *A student who does not wish to take or who is unable to take the immunization is required to sign a waiver for the Hepatitis B Vaccine series.*
- III. **CPR certification**, applicable to infants, children and adults, is required. Training is available from the American Heart Association, the Red Cross, and most local hospitals.
- IV. **Health insurance** must be maintained by all students. This is especially important as students are not covered by any worker's compensation program in the event of an injury while on fieldwork. The cost of emergency and medical care is always the responsibility of the student. Information regarding the FGCU Student Health Insurance plan is available at <http://studentservices.fgcu.edu/Healthservices/Insurance.htm>
- V. **Membership in the American Occupational Therapy Association** is required. This policy is consistent with the program goals to foster involvement in professional associations as a responsible citizen of the profession, and for the opportunities for lifelong learning that they afford. The membership is listed as a textbook requirement in the History and Foundations course, and will provide student access to professional journals and official documents used in that course and subsequent courses. Membership in the Florida Occupational Therapy Association is also encouraged.
- VI. **Criminal Background Checks** are required before students may go out on community or fieldwork experiences, which occur throughout the program. The checks can be obtained from the campus police department for a modest fee. Specific fieldwork sites may require more extensive background checks (at student's expense) prior to placement.

# **CURRICULUM POLICIES & PROCEDURES**

## **MASTER OF SCIENCE IN OCCUPATIONAL THERAPY PROGRAM STANDARDS & REQUIREMENTS FOR PROGRESSION**

These Program standards shall supplement University standards, such that the Department of Occupational Therapy and Community Health has the right to remove students from the program if professional behavior and/or academic standards are not upheld.

Students in the Occupational Therapy Program are admitted for full-time study, and are expected to complete their degree requirements 23 months following admission. Faculty are committed to providing a high-quality educational experience which should prepare students well for successful performance on the National Certification Examination and for clinical practice. Students are responsible for their own learning, and are expected to participate fully in the educational experiences planned for them.

Students are admitted each fall within a class cohort, and are expected to register for all classes planned for the cohort each term. Failure of students to progress with the cohort interferes with the efficient operation of the program as well as the timely graduation of students, and is therefore a central topic within the Program standards.

### **Academic Standards**

Students must earn a grade of B or higher in all courses. Failure to achieve a minimum grade of B will result in interruption of progression through the program.

Additionally, students must maintain a GPA of 3.0 or higher on a 4.0 scale (each semester) to remain in the occupational therapy program. Failure to achieve this standard will result in dismissal from the program; students so dismissed may re-apply for admission to a subsequent class cohort, but will not be given preference over new applicants to the program. See section on Progression, Probation, Dismissal, and Grievance for detailed information.

### **Grading Scale**

The following grading scale is used for all OTH courses:

- A = 90-100
- B = 80-89
- C = 70-79
- D = 60-69
- F = 59 and below

Faculty are responsible for fully informing students of performance requirements and grading weights for assignments (typically communicated through the syllabus). They are also expected to supply grades and provide feedback on assignments in a timely fashion. Clinical educators will provide formal mid-term evaluations of students on Level II Fieldwork.

Students are responsible for monitoring their performance in courses and obtaining sufficient grade information to enable them to meet the minimum grade requirements of the Program.

### **Final Course Grade**

The student has the right to utilize the formal grade appeals process detailed in the University Student Guidebook and in the Grievance section of this document. In instances where a grade below

B or 'pass' is earned, the student can decide if he/she would like to discuss the grade with the instructor and/or utilize the formal grade appeals process.

### **Incomplete Course Grade**

Students may request a grade of Incomplete (I) if bona fide personal or family health problems prevent completion of a course, **AND** the student was performing at a passing level prior to the problem. A student must make the request of the course instructor and notify his/her Academic Advisor and the Program Director if a grade of I is being requested for any required course(s). Such notification is to be received by the Academic Advisor and the Program Director in writing prior to a decision regarding the request, and no later than two weeks before the end of the semester.

According to University guidelines, a student has one year to complete a course if a grade of I has been assigned. If the course is not completed within one year, the grade of I will be converted automatically to an F. If a grade of I has been assigned to a required course for the major, the student must develop and sign an Incomplete Grade Agreement Form with the course instructor and his/her Academic Advisor for successful completion of the course by a designated date.

A grade of I in program coursework will, in most cases, interrupt progress in the program unless the course requirements are completed prior to the beginning of the following term. This is necessary because early courses provide the foundation for subsequent courses in this curriculum design (see section on "Progression").

### **Level II Fieldwork**

Level II Fieldwork is graded on a pass-fail basis. A student who fails to earn a "pass" grade on a Level II fieldwork experience will have to repeat that experience, as soon as an adequate site is available. A student may not withdraw from a Level II fieldwork experience (OTH6845 or OTH6846) without the negotiated agreement of the FGCU Occupational Therapy Program's Academic Fieldwork Coordinator and the site's Clinical Fieldwork Educator. All Level II Fieldwork experiences must be completed within one calendar year of the beginning of the fifth semester of the student's planned program except where bona fide personal or family health problems interfere. In no circumstances will Level II Fieldwork extend beyond 2 calendar years from the designated start date for Level II fieldwork.

## **Part-Time Status and Leave-of-Absence Provisions**

### **Part-Time Status**

The occupational therapy program is designed as a full-time course of study; therefore, students will not be initially admitted on a part-time basis. However, a student may request part-time status for personal reasons. The request must be made in writing to the student's academic advisor. The advisor shall forward the request and his/her written recommendation to the Program Director, along with a proposed progression plan negotiated with the student. The Program Director, in consultation with the occupational therapy faculty, shall review the request and recommendation of the Academic Advisor, and provide the student with a written approval or denial of the request. If approval is granted, the student will be required to adhere to the progression plan in order to remain in the program. In no case will a student be allowed to extend the program length beyond three years except where bona fide personal or family health problems interfere with completion of Level II fieldwork (as noted above).

## **Leave of Absence**

A student may request a leave of absence from the occupational therapy program. The request must be made in writing to the student's Academic Advisor. The Academic Advisor shall forward the request and his/her written recommendation to the Occupational Therapy Program Director.

The Program Director shall review the request and recommendation of the Academic Advisor, and provide the student with a written approval or denial of the request. A leave of absence shall be granted for a maximum of one year. The student must notify the Program Director of his/her desire to return to the program by the first day of registration for the semester he/she intends to return. If the student does not notify the Occupational Therapy Program Director by the designated date, he/she will not be permitted to re-enter the program.

## **Academic Dishonesty**

Occupational Therapy Program students are expected to demonstrate the highest standards of honesty, including academic honesty, consistent with the Code of Conduct espoused by the profession. Any student caught cheating (which includes plagiarizing) will be dismissed from the program. Written assignments are routinely screened by anti-plagiarism software available through [www.turnitin.com](http://www.turnitin.com).

## **Professional Behavior Standards**

### **Professional Behaviors**

Professional behaviors are those actions by which occupational therapy students and practitioners demonstrate the values and beliefs that are commonly held by members of the profession. These behaviors are a manifestation of the individual's personal ethics, and are a reflection of his/her sense of personal integrity, acceptance of opposing points of view, respect for self and others, and commitment to the welfare of others (Fidler, 1996). Professional behaviors are demonstrated through the student's and practitioner's dependability, professional presentation, initiative, empathy, cooperation, organization, clinical reasoning, participation in the supervisory process, and verbal and written communication (Kasar & Clark, 2000).

Students entering the occupational therapy program possess a personal perception of the meaning of these behaviors. The depth of understanding and commitment to the importance of these behaviors in occupational therapy practice settings may not be as clear for students as they are for experienced occupational therapists. These behaviors are developed over time as students are mentored and nurtured by faculty within the academic setting. This nurturance is continued by fieldwork educators who model professional behaviors in occupational therapy practice settings, and students are expected to continue to develop and demonstrate these behaviors in their daily fieldwork activities.

The occupational therapy program utilizes an adaptation of the Professional Development Assessment © (PDA) developed by Kasar, Clark, Watson, & Pfister (1996) to assess students' professional behaviors (see Appendix IV). Students complete the PDA as part of one course in each of the four academic semesters of the program. Additionally, the program faculty collaborates on the assessment of each student's professional behaviors at the end of each semester. The faculty provides students with clear and direct feedback regarding their demonstration of professional behaviors in the classroom and in course related activities in various community settings. Students meet with their academic advisor at the beginning of each semester to discuss the similarities and differences between their self-assessment and the faculty's assessment of their demonstrated professional behaviors. Students who do not receive ratings by faculty of a 3 or 4 in each area will

work with their faculty advisor to determine strategies for achieving these expected ratings during the current semester. These strategies, expressed as personal objectives with timelines for achievement, will be documented on the departmental Corrective Action Plan form (Appendix V). The form will be entered into the student's file, with a copy provided to the student. Achievement of the Corrective Action Plan objectives will be discussed at follow-up meetings between the student and his/her advisor.

Students' professional behaviors are assessed by the fieldwork educators on each of the two Level I and Level II rotations using the adapted PDA (Watson, et al., 1996). Students who do not receive ratings on the PDA of a 3 or 4 will meet with the Academic Coordinator of Fieldwork Education to discuss strategies for achieving these ratings. These strategies will be documented on the Corrective Action Plan. During Level II rotations, several aspects of professional behaviors are also evaluated on the Fieldwork Performance Evaluation for the Occupational Therapy Student © (The American Occupational Therapy Association, Inc., 2002). Poor ratings in these areas could result in failure of the fieldwork rotation.

Failure to correct or modify behaviors identified in the academic or fieldwork settings and described in a formal Corrective Action Plan will result in disciplinary process as described in the Disciplinary Action section of this document.

#### References

Fidler, G. S. (1996). Developing a repertoire of professional behaviors. *The American Journal of Occupational Therapy, 50*, 583-587.

Kasar, J., Clark, N., Watson, D. & Pfister, S., (1996). Professional development assessment. In J. Clark & N. Clark (Eds.), *Developing professional behaviors* (pp. 147 – 148). Thorofare, NJ: Slack Incorporated.

Kasar, J., & Clark, N. (Eds.). (2000). *Developing professional behaviors*. Thorofare, NJ: Slack Incorporated.

The American Occupational Therapy Association, Inc. (2002). *Fieldwork performance evaluation for the occupational therapy student* ©. Bethesda, MD: Author.

### **Professional Dress**

Students are expected to dress appropriately for all educational experiences in the occupational therapy program. Specific dress requirements for Level I and Level II fieldwork are outlined in the Fieldwork Manual, and these requirements are also in effect for other class experiences off-campus. On campus, students may dress more casually, but in all cases must adhere to a 'business casual' standard: No midriffs or cleavage, body piercings or buttocks showing; no suggestive T-shirts or spaghetti straps. Individual instructors may also impose dress requirements for their own courses, and will probably have specific dress instructions when conducting particular lab activities.

### **Clinical Competency Requirement**

Prior to beginning Level II Fieldwork, students are required to pass a "Competency" check-out. Sessions are scheduled on specific Fridays of the fourth semester of study; students are notified in advance so they may plan around the dates. At the time of the check-out, students demonstrate skills learned in the program related to specific assessment and treatment skills. A list of skills to review will be provided to students in advance so that they have time to review and practice.

### **Progression, Probation, Dismissal, and Grievance**



## **Failure to Progress in the Program**

Academic Advisors will review students' progression in the occupational therapy program at the end of each semester, as needed. A student is progressed to the next semester of the occupational therapy program upon earning a grade of B or higher in all courses taken within a semester. If a grade of C is earned, the student will be placed on Departmental Academic Probation (see below). If a grade of D or F is earned, the student will be dismissed from the program.

If a student falls below the required 3.0 semester or cumulative GPA, the student will be dismissed from the program. In such cases, students will not be automatically eligible to re-enroll in the course the following year, but may re-apply for admission into the next class cohort.

## **Departmental Academic Probation**

A student is placed on Departmental Academic Probation when he/she fails to pass a course with a grade of B or higher (or a grade of "pass" for Level II Fieldwork). When a student is placed on probation, he or she must meet with the assigned Academic Advisor to discuss development of a corrective action plan. This plan shall be forwarded to the Program Director for review and approval. The student will not be allowed to register for any subsequent occupational therapy course until he/she has repeated the course in which he/she failed to earn a B (typically not available for repeat until the following year except in the case of fieldwork courses). The student must retake the course at the first opportunity (typically within one year) in order to guarantee his/her place in the program. The student shall be removed from academic probation when he/she has repeated and passed the course. Students who fail to repeat the course within one year or who repeat and fail to meet the minimum B grade requirement will be dropped from the program.

## **Departmental Disciplinary Action**

When an FGCU occupational therapy student fails to meet departmental standards such that they interfere with the educational process or jeopardize the welfare of a client, fellow classmate, faculty, or staff member within the College of Health Professions, the University, or any fieldwork or community placement site, the following disciplinary action shall take place:

- The Departmental Disciplinary Committee consisting of at least 2 faculty members (one of whom is the student's advisor), an outside observer, and the Program Director shall review all documentation related to the behavior(s) in question.
- Any student referred to the Disciplinary Committee will be invited to meet with that Committee in order to assist the group to determine the facts of the situation.
- The Disciplinary Committee shall elect to take any of the following actions:
  - formulate a corrective action plan
  - decide to dismiss the student from the program, or
  - refer the case to the Dean of Students for disciplinary action as outlined in the University Student Guidebook
- The student shall be notified in writing within 10 school days of the Departmental Disciplinary Committee's decision

## **Dismissal From the Program**

A student may be dismissed from the Program for any of the following reasons:

- Failure to pass a repeated course with a B or higher
- Failure to earn at least a C on any course (probation is bypassed)
- Failure to meet the minimum B grade requirement in more than one course (e.g., fails a course, retakes it and passes, then fails a subsequent course, including Level II fieldwork)

- Failure to maintain a semester GPA of 3.0 or higher (Students may reapply for admission to a subsequent class cohort after dismissal for GPA reasons, but will not be given preference over other applicants).
- Failure to follow negotiated part-time progression plan or notify the Program Director prior to returning from a leave of absence (see sections related to Part-Time Status and Leave-of-Absence)
- Failure to meet professional behavior or other expectations following counseling and corrective action planning
- Failure to comply with provisions of a corrective action plan approved by the Program Director
- Conduct violations that threaten the safety/security of individuals within the academic or community learning environments, including fieldwork sites.
- Academic dishonesty or other behavior specifically prohibited in the University's Code of Conduct

### **Departmental Grievances**

Students are entitled to formal grievance and potential reversal of Instructor, Program or Departmental rulings that are or may be perceived as detrimental to the student. This may include grades received, decisions regarding probation or dismissal from the program, or other decisions.

The Department of Occupational Therapy and Community Health encourages the informal resolution of grievances directly between the student and the respondent at the Department level as stated in the University Student Guidebook, Grievance Procedure.

Steps for informal grievance resolution within the Department of Occupational Therapy and Community Health include the following:

- The student and respondent attempt to informally resolve the grievance
- Failing an informal resolution, the next step is arbitration by the Program Director

If this arbitration is unsuccessful, the student may proceed within 10 school days of receipt of the Program Director's decision to file a written appeal with the Office of the Dean of the College of Health Professions. The Dean shall ask the Academic and Admission Appeals Committee (CHP Student Affairs Committee) to conduct a formal review, in accordance with the Academic Procedures as outlined in the University Student Guidebook.

## **Equipment and Procedure Safety Policy**

Some of the laboratory and clinical experiences will necessarily involve the use of equipment and procedures that could pose a safety hazard if safety precautions are not followed. In the case of equipment use or patient care procedures, the instructor will demonstrate and instruct students in the safe use of equipment or implementation of a procedure. It is the student's responsibility to attend to the instruction and to follow proper safety precautions.

If a student is unsure about the safe use of equipment or of the safe implementation of a procedure, it is the student's responsibility to seek clarification from the instructor. At fieldwork sites, students must follow instructions of fieldwork educators regarding safety, and modify behavior immediately if the fieldwork educator corrects them on a safety issue. A student can be withdrawn immediately from a fieldwork site for violations of safety precautions, with a resulting grade of F in the course.

In the event of an accident or injury on the premises of FGCU, the student and faculty member will complete the FGCU Incident Report within 24 hours of the incident's occurrence. In case of an accident, personal injury or injury to a client while on fieldwork or at an off-campus site for another class, the student will report the accident or injury to her/his immediate supervisor at the site and complete the necessary paperwork for that organization. In addition, the student will notify the Academic Coordinator of Fieldwork Education or course faculty member immediately, and complete the FGCU Incident Report for Non-Employees.

# **University Academic Standards**

See University catalog at <http://www.fgcu.edu/catalog/> and click on Graduate Programs; also refer to the University Student Guidebook at <http://studentservices.fgcu.edu/JudicialAffairs/StudentGuidebook06-07.pdf> .

## **Grades, Assignments**

For each course, the grading criteria will be outlined by the instructor at the beginning of the course. Assignments will be defined and assigned by each instructor.

## **Questions During Exams**

All students have the right to ask for clarification of test items. Student questions and instructor responses will be shared with the entire class verbally or written on the board. The instructor will use his/her discretion to determine which terms will be defined.

## **Assignments on Time**

An instructor may ask that an assignment be turned into the department's Office Manager. When the assignment is handed to the department Office Manager, the assignment will be initialed and time noted by the Office Manager. Each instructor has the option of assessing grade penalties for late assignments.

## **Letters of Reference**

A student may request a letter of reference from faculty/staff in the Department of Occupational Therapy and Community Health while they are still enrolled as a student. Faculty/staff then decide whether they can provide such a reference. If the faculty/staff member agrees, it is suggested that the student provide topics or general information that needs to be covered in the letter of reference.

## **Release of Information**

Student information is private by law, except for directory information, unless a student requests such information to be kept confidential. If a student wants specific information to be provided to outside parties including parents, employers, or scholarship-granting organizations, the student needs to provide written consent for the information to be released. A letter must be signed by the student, dated, and must specify what information and to whom the information may be released.

## **Confidentiality**

Information regarding fellow students, FGCU personnel and/or patient (client) records, communications, and activities are strictly confidential. The confidential information should only be discussed within an educational/professional context and NEVER discussed outside of that context. Do not discuss confidential information with family, friends or in a public place. It is your responsibility to retain confidential information as confidential.

## **Conduct**

Students are expected to demonstrate high standards of performance and integrity during classroom, laboratory and fieldwork activities. Being a student in Florida Gulf Coast University's Occupational

Therapy program is different from the typical university or college curriculum. During both casual and academic activities in the Department of Occupational Therapy and Community Health, you will be representing Florida Gulf Coast University and a health profession. Please demonstrate behavior consistent with the professional code of ethics appropriate for the setting.

## **Sexual Harassment**

Sexual harassment includes any unwelcome sexual behavior and is not limited by the gender of either the alleged victim or perpetrator. Sexual harassment may include physical or verbal conduct. Members of the Department of Occupational Therapy and Community Health and the educational community at FGCU are entitled to an environment that enables them to learn and contribute to their full capacity. When sexual harassment occurs, the learning environment is disrupted. Sexual harassment committed within the occupational therapy program or at clinical sites by a student, faculty or staff member against any student, faculty, staff member or visitor will not be tolerated. Allegations of sexual harassment should be reported to the University Ombudsman, 590-7405.

## **Illegal Use of Alcohol and Drugs**

The unlawful or unauthorized possession, use, consumption, sale or distribution of illicit drugs and /or alcohol by employees and students within the Department of Occupational Therapy and Community Health on FGCU property or at community based educational sites is strictly prohibited.

## **Class Attendance/Participation**

Class attendance and participation is important for academic success. Each faculty member establishes attendance requirements, make-up procedures, and guidelines for excused absences at the beginning of a course. Students are expected to attend all class meetings for courses in which they are enrolled. Each student is responsible for complying with the announced procedures for making up missed work.

## **Course Scheduling**

The Department of Occupational Therapy and Community Health, College of Health Professions, reserves the right to cancel, postpone, or reschedule any course, course section, practice or fieldwork experience.

# **STUDENT RESOURCES**

## **Department of Occupational Therapy and Community Health Lending Library**

In the interest of making additional learning materials available to faculty and students in occupational therapy and related fields (physical therapy, community health, athletic training, & human performance), as well as area clinicians, the Department of Occupational Therapy and Community Health has established a lending library that includes books, audiotapes, videotapes, CD-ROMs, DVDs, and various types of equipment and assessments.

### **Hours**

The Lending Library is accessible **Monday through Friday, 8:00 a.m. to 4:30 p.m.** In order to access the lending library, an individual must contact the Faculty Assistant or Office Manager of the Department of Occupational Therapy and Community Health.

### **Checking-Out Procedure**

- Make your selection from the inventory available in the student mail file.
- Assessments and equipment in boxes or cases: sign out in the blue folder.
- Books and audio or video resources: complete the attached card (all required information) and put a paper clip on the card.
- Clinical supervisors of fieldwork and other area clinicians can check out equipment or books for one week. Assessments require approval from the department two weeks before checkout and can be obtained from the Faculty Assistant or Office Manager. These materials are for evaluation by the clinician for potential usefulness, not to be used for generating billable units.

### **General Books/Items**

- Students may check out up to five books or other items at a time.
- Assessments may be borrowed for one week; other items may be borrowed for up to three weeks unless they are on reserve status. Requests to check out assessments must be made to the Faculty Assistant or Office Manager two weeks before checkout.
- Anatomic models may not leave the campus and must be returned before 4:30 PM each day Monday through Friday. Models have a one hour checkout. Exceptions to this procedure will require faculty permission.

### **Reserve Books/Items**

- Books/items on reserve are for student use only.
- Students may check out one reserved book/item at a time. Students must be enrolled in the class for which the resource is reserved.
- Reserved items may not leave the campus and must be returned before 4:30 PM each day Monday through Friday. Exceptions to this rule will require permission of the faculty member who has reserved the resource.
- All books/items must be returned to the Faculty Assistant, not faculty members. If she is not available, then the books/items should be returned to the Office Manager of the Department of Occupational Therapy and Community Health.
- Failure to return items on time or violation of other Resource Library rules may result in forfeiture of borrowing privileges. Repeated violation of the rules *will* result in said forfeiture.
- Borrowing privileges may only be reinstated by the Chair of the Department of Occupational Therapy and Community Health.
- All books/items must be returned by the last day of classes each semester.

- If a book or other item is damaged upon return, the borrower shall be responsible for the cost of having the book/item repaired or replaced. The decision to repair or replace shall be made by the Chair of the Department of Occupational Therapy and Community Health.

## **Student Government Association (SGA)**

Students are encouraged to be active in student government on the FGCU campus since this is an opportunity to develop interdisciplinary activity and leadership. Vote for changes that are important to you and the future of this University.

## **Student Occupational Therapy Association (SOTA)**

All Occupational Therapy students and pre-OT students (Community Health majors) are eligible for membership in SOTA. Organizing meetings are held early in the fall semester.

President: Chris Julian  
 Faculty Advisor: Karen Mock  
 SOTA e-mail address: sota@eagle.fgcu.edu

## **Student Name Tags**

Name tags are required for all community site experiences, including class assignments and fieldwork; it is necessary that students wear their name tag in all situations where the student is involved in observation and laboratory education off campus.

## **Student Representatives**

Each class will have a representative who will act as a liaison to the department faculty and attend that part of the departmental meeting which discusses general student issues.

Responsibilities:

- The class representative will represent the occupational therapy class, during the Department of Occupational Therapy and Community Health faculty meetings, as needed
- The class representative will communicate concerns/points of view/questions from class members' perspective, rather than from a personal one
- The class representative will report to the class all information/ decisions/ suggestions/ inquiries from faculty, in a timely manner
- The class representative will make sure that items to be brought to the attention of the Department of Occupational Therapy and Community Health faculty are not related to specific courses, as these need to be discussed with the individual professor(s) in charge of the course. Matters pertaining to broad curricular issues are appropriate to be brought to the faculty in this manner.

Procedure (Process):

- The class representative shall notify the Chair of The Department of Occupational Therapy and Community Health of agenda items to be discussed, at least 1 week prior to a faculty meeting
- The agenda items related to student issues shall be placed first on the agenda
- The class representative shall attend the faculty meeting for the duration of the discussion related to student issues

- If the class representative is unable to attend the faculty meeting, he/she shall notify the Office Manager of the department and let her know if the alternate class representative will be in attendance

### **Safe Passage At Night (SPAN) – Campus escort service**

Florida Gulf Coast University provides an escort to students and faculty on campus after dark upon request. Students should consult the University Student Guidebook for contact information to request these services.

### **Additional Resources**

The academic program in occupational therapy is rigorous and requires student commitment. Although some students may work and have other responsibilities or time commitments, our primary focus in the occupational therapy program is the acquisition of knowledge, skills and abilities for professional practice as an occupational therapist. It is anticipated that students will study approximately 3 hours per week for every academic credit hour.

Several resources for time and stress management are available to any FGCU student and you are encouraged to use any of the following support services:

Counseling and Psychological Services, x 7950  
Campus Recreation, x 7935  
Prevention & Wellness Services, x7733  
Student Health Services/Clinic, x7966  
Student Support Services, x7834



## **Appendix I**

### **Occupational Therapy Code of Ethics (reprinted with permission of AOTA)**

















## **Appendix II**

**Standards of Practice for Occupational Therapy**  
**(reprinted with permission of AOTA)**

















## **Appendix III**

### **Florida Statutes: Occupational Therapy Practice**

# The 2005 Florida Statutes

## PART III

### OCCUPATIONAL THERAPY

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#### **468.201 Short title; purpose.--**

- (1) This act shall be known and may be cited as the "Occupational Therapy Practice Act."
- (2) It is the purpose of this act to provide for the regulation of persons offering occupational therapy services to the public in order to:
  - (a) Safeguard the public health, safety, and welfare.
  - (b) Protect the public from being misled by incompetent, unscrupulous, and unauthorized persons.
  - (c) Assure the highest degree of professional conduct on the part of occupational therapists and occupational therapy assistants.
  - (d) Assure the availability of occupational therapy services of high quality to persons in need of such services.

**History.--**ss. 1, 2, ch. 75-179; s. 2, ch. 81-318; ss. 12, 13, ch. 84-4; s. 4, ch. 91-429.

**468.203 Definitions.--**As used in this act, the term:

- (1) "Association" means the Florida Occupational Therapy Association.
- (2) "Board" means the Board of Occupational Therapy Practice.

(3) "Occupational therapist" means a person licensed to practice occupational therapy as defined in this act and whose license is in good standing.

(4) "Occupational therapy" means the use of purposeful activity or interventions to achieve functional outcomes.

(a) For the purposes of this subsection:

1. "Achieving functional outcomes" means to maximize the independence and the maintenance of health of any individual who is limited by a physical injury or illness, a cognitive impairment, a psychosocial dysfunction, a mental illness, a developmental or a learning disability, or an adverse environmental condition.
2. "Assessment" means the use of skilled observation or the administration and interpretation of standardized or nonstandardized tests and measurements to identify areas for occupational therapy services.

(b) Occupational therapy services include, but are not limited to:

1. The assessment, treatment, and education of or consultation with the individual, family, or other persons.
2. Interventions directed toward developing daily living skills, work readiness or work performance, play skills or leisure capacities, or enhancing educational performance skills.
3. Providing for the development of: sensory-motor, perceptual, or neuromuscular functioning; range of motion; or emotional, motivational, cognitive, or psychosocial components of performance.

These services may require assessment of the need for use of interventions such as the design, development, adaptation, application, or training in the use of assistive technology devices; the design, fabrication, or application of rehabilitative technology such as selected orthotic devices; training in the use of assistive technology; orthotic or prosthetic devices; the application of physical agent modalities as an adjunct to or in preparation for purposeful activity; the use of ergonomic principles; the adaptation of environments and processes to enhance functional performance; or the promotion of health and wellness.

(c) The use of devices subject to 21 C.F.R. s. 801.109 and identified by the board is expressly prohibited except by an occupational therapist or occupational therapy assistant who has received training as specified by the board. The board shall adopt rules to carry out the purpose of this provision.

(5) "Occupational therapy aide" means a person who assists in the practice of occupational therapy, who works under the direct supervision of a licensed occupational therapist or occupational therapy assistant, and whose activities require a general understanding of occupational therapy pursuant to board rules.

(6) "Occupational therapy assistant" means a person licensed to assist in the practice of occupational therapy, who works under the supervision of an occupational therapist, and whose license is in good standing.

(7) "Person" means any individual, partnership, unincorporated organization, or corporate body, except that only an individual may be licensed under this act.

(8) "Supervision" means responsible supervision and control, with the licensed occupational therapist providing both initial direction in developing a plan of treatment and periodic inspection of the actual implementation of the plan. Such plan of treatment shall not be altered by the supervised individual without prior consultation with, and the approval of, the supervising occupational therapist. The supervising occupational therapist need not always be physically present or on the premises when the assistant is performing services; however, except in cases of emergency, supervision shall require the availability of the supervising occupational therapist for consultation with and direction of the supervised individual.

**History.**--s. 3, ch. 75-179; s. 1, ch. 78-18; s. 333, ch. 81-259; s. 2, ch. 81-318; ss. 1, 12, 13, ch. 84-4; s. 1, ch. 90-22; s. 4, ch. 91-429; s. 107, ch. 92-149; s. 123, ch. 97-264.

**468.204 Authority to adopt rules.**--The board has authority to adopt rules pursuant to ss. 120.536(1) and 120.54 to implement the provisions of this part conferring duties upon it.

**History.**--ss. 2, 13, ch. 84-4; s. 4, ch. 91-429; s. 133, ch. 98-200.

#### **468.205 Board of Occupational Therapy Practice.--**

(1) There is created within the department the Board of Occupational Therapy Practice, composed of seven members appointed by the Governor, subject to confirmation by the Senate.

(2) Four members shall be licensed occupational therapists in good standing in this state who are residents of this state and have been engaged in the practice of occupational therapy for at least 4 years immediately prior to their appointment. One member shall be a licensed occupational therapy assistant in good standing in this state who is a resident of the state and

has been engaged in the practice of occupational therapy for at least 4 years immediately prior to the appointment. Two members shall be consumers who are residents of the state who are not connected with the practice of occupational therapy.

(3) Within 90 days after the effective date of this act, the Governor shall appoint the board as follows:

(a) Two members for terms of 2 years each.

(b) Two members for terms of 3 years each.

(c) Three members for terms of 4 years each.

(4) As the terms of the members expire, the Governor shall appoint successors for terms of 4 years and such members shall serve until their successors are appointed.

(5) All provisions of chapter 456 relating to activities of the board shall apply.

**History.**--s. 6, ch. 75-179; s. 171, ch. 77-104; s. 2, ch. 81-318; s. 1, ch. 82-46; s. 2, ch. 83-265; ss. 3, 12, 13, ch. 84-4; s. 2, ch. 90-22; s. 4, ch. 91-429; s. 124, ch. 97-264; s. 82, ch. 98-166; s. 140, ch. 2000-160.

**468.207 License required.**--No person shall practice occupational therapy or hold himself or herself out as an occupational therapist or an occupational therapy assistant or as being able to practice occupational therapy or to render occupational therapy services in the state unless he or she is licensed in accordance with the provisions of this act.

**History.**--s. 4, ch. 75-179; s. 2, ch. 81-318; ss. 12, 13, ch. 84-4; s. 4, ch. 91-429; s. 276, ch. 97-103.

#### **468.209 Requirements for licensure.**--

(1) An applicant applying for a license as an occupational therapist or as an occupational therapy assistant shall file a written application, accompanied by the application for licensure fee prescribed in s. 468.221, on forms provided by the department, showing to the satisfaction of the board that she or he:

(a) Is of good moral character.

(b) Has successfully completed the academic requirements of an educational program in occupational therapy recognized by the board, with concentration in biologic or physical science, psychology, and sociology, and with education in selected manual skills. Such a program shall be accredited by the American Occupational Therapy Association's Accreditation Council for Occupational Therapy Education, or its successor.

(c) Has successfully completed a period of supervised fieldwork experience at a recognized educational institution or a training program approved by the educational institution where she or he met the academic requirements. For an occupational therapist, a minimum of 6 months of supervised fieldwork experience is required. For an occupational therapy assistant, a minimum of 2 months of supervised fieldwork experience is required.

(d) Has passed an examination conducted or adopted by the board as provided in s. 468.211.

(2) An applicant who has practiced as a state-licensed or American Occupational Therapy Association-certified occupational therapy assistant for 4 years and who, prior to January 24, 1988, completed a minimum of 6 months of supervised occupational-therapist-level fieldwork experience may take the examination to be licensed as an occupational therapist without meeting the educational requirements for occupational therapists made otherwise applicable under paragraph (1)(b).

(3) If the board determines that an applicant is qualified to be licensed by endorsement under s. 468.213, the board may issue the applicant a temporary permit to practice occupational therapy until the next board meeting at which license applications are to be considered, but not for a longer period of time. Only one temporary permit by endorsement shall be issued to an applicant, and it shall not be renewable.

(4) If the board determines that the applicant has not passed an examination, which examination is recognized by the board, to determine competence to practice occupational therapy and is not qualified to be licensed by endorsement, but has otherwise met all the requirements of this section and has made application for the next scheduled examination, the board may issue the applicant a temporary permit allowing her or him to practice occupational therapy under the supervision of a licensed occupational therapist until notification of the results of the examination. An individual who has passed the examination may continue to practice occupational therapy under her or his temporary permit until the next meeting of the board. An individual who has failed the examination shall not continue to practice occupational therapy under her or his temporary permit; and such permit shall be deemed revoked upon notification to the board of the examination results and the subsequent, immediate notification by the board to the applicant of the revocation. Only one temporary permit by examination shall be issued to an applicant, and it shall not be renewable. However, applicants enrolled in a full-time advanced master's occupational therapy education program who have completed all requirements for

licensure except examination shall, upon written request, be granted a temporary permit valid for 6 months even if that period extends beyond the next examination, provided the applicant has not failed the examination. This permit shall remain valid only while the applicant remains a full-time student and, upon written request, shall be renewed once for an additional 6 months.

- (5) An applicant seeking reentry into the profession who has not been in active practice within the last 5 years must, prior to applying for licensure, submit to the board documentation of continuing education as prescribed by rule.

**History.**--s. 7, ch. 75-179; s. 1, ch. 77-174; s. 2, ch. 78-18; s. 2, ch. 81-318; ss. 4, 12, 13, ch. 84-4; s. 4, ch. 91-429; s. 277, ch. 97-103; s. 125, ch. 97-264.

#### **468.211 Examination for licensure.--**

(1) Any person applying for licensure shall, in addition to demonstrating his or her eligibility in accordance with the requirements of s. 468.209, make application to the board or the appropriate examining entity for examination, upon a form and in such a manner as the board or the examining entity prescribes. Such application shall be accompanied by the nonrefundable fee prescribed by s. 468.221 or by a fee established by the examining entity. A person who fails an examination may make application for reexamination accompanied by the prescribed fee; such person shall also reapply to the board for licensure in the manner prescribed in s. 468.209.

(2) Each applicant for licensure under this act shall be examined in a manner determined by the board in a written examination to test his or her knowledge of the basic and clinical sciences relating to occupational therapy and occupational therapy theory and practice, including the applicant's professional skills and judgment in the utilization of occupational therapy techniques and methods, and such other subjects as the board may deem useful to determine the applicant's fitness to practice. The board shall establish standards for acceptable performance.

(3) Applicants for licensure shall be examined at such times and places and under such supervision as the board may determine. Examinations shall be given at least twice each year at such places within this state as the board may determine, and the board shall give reasonable public notice of such examinations in accordance with its rules at least 60 days prior to their administration and shall notify by mail each individual examination applicant of the time and place of their administration.

(4) The board may, by rule, adopt the use of a national examination in lieu of part or all of the examination required by this section; and a reasonable passing score shall be set by rule of the board.

(5) Applicants may obtain their examination scores and review their papers in accordance with such rules as the board may establish.

(6) If an applicant fails to pass the examination in three attempts, the applicant shall not be eligible for reexamination unless the applicant completes additional education or training requirements prescribed by the board. An applicant who has completed the additional education or training requirements prescribed by the board may take the examination on two more occasions. If the applicant has failed to pass the examination after five attempts, the applicant is no longer eligible to take the examination.

**History.**--s. 8, ch. 75-179; s. 2, ch. 81-318; ss. 5, 12, 13, ch. 84-4; s. 4, ch. 91-429; s. 278, ch. 97-103; s. 126, ch. 97-264.

#### **468.213 Licensure by endorsement.--**

(1) The board may waive the examination and grant a license to any person who presents proof of current certification as an occupational therapist or occupational therapy assistant by a national certifying organization if the board determines the requirements for such certification to be equivalent to the requirements for licensure in this act.

(2) The board may waive the examination and grant a license to any applicant who presents proof of current licensure as an occupational therapist or occupational therapy assistant in another state, the District of Columbia, or any territory or jurisdiction of the United States or foreign national jurisdiction which requires standards for licensure determined by the board to be equivalent to the requirements for licensure in this act.

**History.**--s. 9, ch. 75-179; s. 2, ch. 81-318; ss. 6, 12, 13, ch. 84-4; s. 4, ch. 91-429; s. 127, ch. 97-264.

#### **468.215 Issuance of license.--**

(1) The board shall issue a license to any person who meets the requirements of this act upon payment of the license fee prescribed.

(2) Any person who is issued a license as an occupational therapist under the terms of this act may use the words "occupational therapist," "licensed occupational therapist," or "occupational therapist registered," or he or she may use the letters "O.T.," "L.O.T.," or "O.T.R.," in connection with his or her name or place of business to denote his or her registration hereunder.

(3) Any person who is issued a license as an occupational therapy assistant under the terms of this act may use the words "occupational therapy assistant," "licensed occupational therapy assistant," or "certified occupational therapy assistant," or he or she may use the letters, "O.T.A.," "L.O.T.A.," or "C.O.T.A.," in connection with his or her name or place of business to denote his or her registration hereunder.

**History.**--s. 10, ch. 75-179; s. 2, ch. 81-318; ss. 12, 13, ch. 84-4; s. 4, ch. 91-429; s. 279, ch. 97-103.

**468.217 Denial of or refusal to renew license; suspension and revocation of license and other disciplinary measures.--**

- (1) The following acts constitute grounds for denial of a license or disciplinary action, as specified in s. 456.072(2):
- (a) Attempting to obtain, obtaining, or renewing a license to practice occupational therapy by bribery, by fraudulent misrepresentation, or through an error of the department or the board.
  - (b) Having a license to practice occupational therapy revoked, suspended, or otherwise acted against, including the denial of licensure, by the licensing authority of another state, territory, or country.
  - (c) Being convicted or found guilty, regardless of adjudication, of a crime in any jurisdiction which directly relates to the practice of occupational therapy or to the ability to practice occupational therapy. A plea of nolo contendere shall be considered a conviction for the purposes of this part.
    - (d) False, deceptive, or misleading advertising.
    - (e) Advertising, practicing, or attempting to practice under a name other than one's own name.
  - (f) Failing to report to the department any person who the licensee knows is in violation of this part or of the rules of the department or of the board.
  - (g) Aiding, assisting, procuring, or advising any unlicensed person to practice occupational therapy contrary to this part or to a rule of the department or the board.
    - (h) Failing to perform any statutory or legal obligation placed upon a licensed occupational therapist or occupational therapy assistant.
    - (i) Making or filing a report which the licensee knows to be false, intentionally or negligently failing to file a report or record required by state or federal law, willfully impeding or obstructing such filing or inducing another person to do so. Such reports or records include only those which are signed in the capacity as a licensed occupational therapist or occupational therapy assistant.
  - (j) Paying or receiving any commission, bonus, kickback, or rebate to or from, or engaging in any split-fee arrangement in any form whatsoever with, a physician, organization, agency, or person, either directly or indirectly, for patients referred to providers of health care goods and services, including, but not limited to, hospitals, nursing homes, clinical laboratories, ambulatory surgical centers, or pharmacies. The provisions of this paragraph shall not be construed to prevent an occupational therapist or occupational therapy assistant from receiving a fee for professional consultation services.
  - (k) Exercising influence within a patient-therapist relationship for purposes of engaging a patient in sexual activity. A patient is presumed to be incapable of giving free, full, and informed consent to sexual activity with the patient's occupational therapist or occupational therapy assistant.
  - (l) Making deceptive, untrue, or fraudulent representations in the practice of occupational therapy or employing a trick or scheme in the practice of occupational therapy if such scheme or trick fails to conform to the generally prevailing standards of treatment in the occupational therapy community.
  - (m) Soliciting patients, either personally or through an agent, through the use of fraud, intimidation, undue influence, or a form of overreaching or vexatious conduct. A "solicitation" is any communication which directly or implicitly requests an immediate oral response from the recipient.
  - (n) Failing to keep written records justifying the course of treatment of the patient, including, but not limited to, patient histories, examination results, and test results.
  - (o) Exercising influence on the patient or client in such a manner as to exploit the patient or client for financial gain of the licensee or of a third party which includes, but is not limited to, the promoting or selling of services, goods, appliances, or drugs.
    - (p) Performing professional services which have not been duly authorized by the patient or client, or his or her legal representative, except as provided in s. 768.13.

- (q) Gross or repeated malpractice or the failure to practice occupational therapy with that level of care, skill, and treatment which is recognized by a reasonably prudent similar occupational therapist or occupational therapy assistant as being acceptable under similar conditions and circumstances.
- (r) Performing any procedure which, by the prevailing standards of occupational therapy practice in the community, would constitute experimentation on a human subject without first obtaining full, informed, and written consent.
- (s) Practicing or offering to practice beyond the scope permitted by law or accepting and performing professional responsibilities which the licensee knows or has reason to know that he or she is not competent to perform.
- (t) Being unable to practice occupational therapy with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, chemicals, or any other type of material or as a result of any mental or physical condition. In enforcing this paragraph, the department shall have, upon probable cause, authority to compel an occupational therapist or occupational therapy assistant to submit to a mental or physical examination by physicians designated by the department. The failure of an occupational therapist or occupational therapy assistant to submit to such examination when so directed constitutes an admission of the allegations against him or her, upon which a default and final order may be entered without the taking of testimony or presentation of evidence, unless the failure was due to circumstances beyond his or her control. An occupational therapist or occupational therapy assistant affected under this paragraph shall at reasonable intervals be afforded an opportunity to demonstrate that he or she can resume the competent practice of occupational therapy with reasonable skill and safety to patients. In any proceeding under this paragraph, neither the record of proceedings nor the orders entered by the board shall be used against an occupational therapist or occupational therapy assistant in any other proceeding.
- (u) Delegating professional responsibilities to a person when the licensee who is delegating such responsibilities knows or has reason to know that such person is not qualified by training, experience, or licensure to perform them.
- (v) Violating a lawful order of the board or department previously entered in a disciplinary hearing or failing to comply with a lawfully issued subpoena of the department.
- (w) Conspiring with another licensee or with any other person to commit an act, or committing an act, which would tend to coerce, intimidate, or preclude another licensee from lawfully advertising his or her services.
- (x) Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto.

(2) The board may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1).

(3) The board may not reinstate the license of an occupational therapist or occupational therapy assistant, or cause a license to be issued to a person it has deemed unqualified, until such time as the board is satisfied that such person has complied with all the terms and conditions set forth in the final order and is capable of safely engaging in the practice of occupational therapy.

**History.**--s. 11, ch. 75-179; s. 36, ch. 78-95; s. 2, ch. 81-318; ss. 7, 12, 13, ch. 84-4; s. 4, ch. 91-429; s. 280, ch. 97-103; s. 39, ch. 2001-277; s. 15, ch. 2005-240.

#### **468.219 Renewal of license; continuing education.--**

(1) Licenses issued under this part are subject to biennial renewal as provided in s. 456.004.

(2) The board may by rule prescribe continuing education requirements, not to exceed 30 contact hours biennially, as a condition for renewal of licensure. The program criteria for those requirements must be approved by the board.

**History.**--s. 12, ch. 75-179; s. 2, ch. 81-318; ss. 8, 12, 13, ch. 84-4; s. 4, ch. 91-429; s. 194, ch. 94-119; s. 83, ch. 98-166; s. 141, ch. 2000-160.

#### **468.221 Fees.--**

(1) The board shall prescribe, and publish in the manner established by its rules, fees in amounts determined by the board for the following purposes:

- (a) Application for license.
- (b) Examination fee.
- (c) Initial license fee.
- (d) Renewal of active license fee.

(e) Delinquency fee.

(f) Application for inactive license fee.

(g) Renewal of inactive license fee.

(h) Reactivation fee.

(2) Such fees shall be set in such amounts as to reimburse the state, to the extent feasible, for the cost of the services rendered.

**History.**--s. 13, ch. 75-179; s. 2, ch. 81-318; ss. 9, 12, 13, ch. 84-4; s. 4, ch. 91-429; s. 195, ch. 94-119.

**468.223 Prohibitions; penalties.--**

(1) A person may not:

(a) Practice occupational therapy unless such person is licensed pursuant to ss. 468.201-468.225;

(b) Use, in connection with his or her name or place of business, the words "occupational therapist," "licensed occupational therapist," "occupational therapist registered," "occupational therapy assistant," "licensed occupational therapy assistant," "certified occupational therapy assistant"; the letters "O.T.," "L.O.T.," "O.T.R.," "O.T.A.," "L.O.T.A.," or "C.O.T.A."; or any other words, letters, abbreviations, or insignia indicating or implying that he or she is an occupational therapist or an occupational therapy assistant or, in any way, orally or in writing, in print or by sign, directly or by implication, to represent himself or herself as an occupational therapist or an occupational therapy assistant unless the person is a holder of a valid license issued pursuant to ss. 468.201-468.225;

(c) Present as his or her own the license of another;

(d) Knowingly give false or forged evidence to the board or a member thereof;

(e) Use or attempt to use a license which has been suspended, revoked, or placed on inactive or delinquent status;

(f) Employ unlicensed persons to engage in the practice of occupational therapy; or

(g) Conceal information relative to any violation of ss. 468.201-468.225.

(2) Any person who violates any provision of this section commits a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083.

**History.**--s. 14, ch. 75-179; s. 2, ch. 81-318; ss. 10, 12, 13, ch. 84-4; s. 3, ch. 90-22; s. 4, ch. 91-429; s. 196, ch. 94-119; s. 281, ch. 97-103.

**468.225 Exemptions.--**

(1) Nothing in this act shall be construed as preventing or restricting the practice, services, or activities of:

(a) Any person licensed in this state by any other law from engaging in the profession or occupation for which he or she is licensed.

(b) Any person employed as an occupational therapist or occupational therapy assistant by the United States, if such person provides occupational therapy solely under the direction or control of the organization by which he or she is employed.

(c) Any person pursuing a course of study leading to a degree or certificate in occupational therapy at an accredited or approved educational program, if such activities and services constitute a part of a supervised course of study and if such a person is designated by a title which clearly indicates his or her status as a student or trainee.

(d) Any person fulfilling the supervised fieldwork experience requirements of s. 468.209, if such activities and services constitute a part of the experience necessary to meet the requirements of that section.

(2) No provision of this act shall be construed to prohibit physicians, physician assistants, nurses, physical therapists, osteopathic physicians or surgeons, clinical psychologists, speech-language pathologists, or audiologists from using occupational therapy as a part of or incidental to their profession, when they practice their profession under the statutes applicable to their profession.

**History.**--s. 5, ch. 75-179; s. 1, ch. 77-174; s. 2, ch. 81-318; ss. 12, 13, ch. 84-4; s. 4, ch. 90-22; s. 4, ch. 91-429; s. 282, ch. 97-103; s. 128, ch. 97-264.



## **Appendix IV**

### **Professional Development Assessment**









**Appendix V**

**Corrective Action Plan**



**Department of Occupational Therapy  
and Community Health**  
Corrective Action Plan

Date: \_\_\_\_\_

Student Name (printed): \_\_\_\_\_

Faculty Advisor (printed): \_\_\_\_\_

Reason for Corrective Action: \_\_\_\_\_

\_\_\_\_\_

Outline of Corrective Action Plan:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Expected Outcome (include date/time frame for completion):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student Signature: \_\_\_\_\_ Advisor Signature: \_\_\_\_\_