USC Mrs. T.H. Chan Division of
Occupational Science and Occupational Therapy

STUDENT HANDBOOK

Bachelor of Science (BS) and
Entry-Level Professional Doctorate (OTD)
Degree Programs in Occupational Therapy

2024-2025
Updated on Tuesday, November 5, 2024

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1540 Alcazar Street, CHP-133; Los Angeles, CA 90089-9003; (323) 442-2850

The entry-level occupational therapy doctoral degree program has applied for accreditation and has been granted Preaccreditation Status by the Accreditation Council for Occupational Therapy Education (ACOTE®) of the American Occupational Therapy Association (AOTA), located at 7501 Wisconsin Avenue, Suite 510E, Bethesda, MD 20814. ACOTE's telephone number c/o AOTA is (301) 652-AOTA and its web address is www.acoteonline.org. The program must complete an on-site evaluation and be granted Accreditation Status before its graduates will be eligible to sit for the national certification examination for the occupational therapist administered by the National Board for Certification in Occupational Therapy (NBCOT). After successful completion of this exam, the individual will be an Occupational Therapist, Registered (OTR). In addition, all states require licensure to practice; however, state licenses are usually based on the results of the NBCOT Certification Examination. A felony conviction may affect a graduate's ability to sit for the NBCOT certification examination or attain state licensure.

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Campus Security on Health Sciences Campus (HSC) **EMERGENCY ONLY**…………………………………………….	**(323) 442-1000**
Normal Business ………………………………………………	(323) 442-1200
Campus Security on University Park Campus (UPC) **EMERGENCY ONLY** ………………………………………..	**(213) 740-4321**
Normal Business ………………………………………………	(213) 740-6000
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Occupational Therapy Faculty Practice (OTFP)…………..	(323) 442-3340
Keck Hospital OT Office …………………………………….	(323) 442-5370
Registration Services https://arr.usc.edu/registration-counseling/registration/ Registrar (JHH 102, UPC)……https://arr.uysc.edu/ One Stop Express at HSC (SRH) https://mycard.usc.edu/hsc/ Degree Progress (JHH 010, UPC)……………………….. https://arr.usc.edu/students/degree-progress/frequently-asked-questions/ The Graduate School (STU 301, UPC)…………………… Office of International Services (Royal St. Parking Structure, Suite 101)	(213) 740-4080 (323) 442-2110 (213) 740-7070 (213) 740-9033 ois@usc.edu
Student Services USCard Services (PSX 1336, UPC) https://mycard.usc.edu/ Office of Student Accessibility Services (GFS 120, UPC) ability@usc.edu ………………………………………………….. Student Activities Center (SKS 410, UPC) https://campusactivities.usc.edu/ ……………………………. The Testing Bureau (STU 300, UPC) ……………………. The Writing Center (THH 216, UPC) https://dornsife.usc.edu/writingcenter/ ………………………	(213) 740-8709 (213) 740-0776 (213) 740-5693 (213) 740-1188 (213) 740-3691
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Health Services USC Student Health line ………………………………. Student Health Insurance Office studenthealth@usc.edu	(213) 740-9355 (213) 821-1550
Financial Aid (KAM 100B, HSC) …………………………. (JHH Lobby, UPC) …………………………………	(323) 442-1016 (213) 740-4444
Transportation, Parking Services (HSC) …………………..	(323) 442-1201

University publications supplemental to this handbook:
   USC Catalogue: http://catalogue.usc.edu/
   The USC Student Handbook https://policy.usc.edu/studenthandbook/
   Schedule of Classes and Registration Information: https://classes.usc.edu/

ADMINISTRATIVE FACULTY
For contact information go to: https://chan.usc.edu/people/faculty

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UNIVERSITY OF SOUTHERN CALIFORNIA
MRS. T.H. CHAN DIVISION of OCCUPATIONAL SCIENCE & OCCUPATIONAL THERAPY

DIVISION POLICIES

PROFESSIONAL CONDUCT, AS DEMONSTRATED BY COMPLIANCE WITH THE SPECIFICATIONS OF THESE POLICIES, IS EXPECTED OF ALL STUDENTS.

The purpose of this document is to present the policies of the USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy and to specify the standards of student academic performance and professional behaviors and expectations.

Students must read this document carefully to gain a precise understanding of Division expectations. These policies are intended to ensure nondiscriminatory recruitment and matriculation practices, preservation of student rights, and promotion of a standard of performance that will qualify you to meet the demands and challenges of occupational therapy practice. Your ability to practice as an occupational therapist will depend upon the extent of your knowledge and how you apply it to help people of all ages construct healthy, meaningful, and productive lives. Therefore, the faculty urges you to maintain the highest level of achievement. You are investing in your future as a professional person and in the success of the profession, and these policies have been implemented to assist you.

Student academic standards are facilitated by consultation with the Associate Chair for Academic, Faculty, and Student Affairs, Dr. Julie McLaughlin Gray, and the Program Directors. Faculty Advisors and Program Directors (2023-2024) are:

Dr. Samia H. Rafeedie	Entry-Level Occupational Therapy Professional Program (BS and Entry-OTD)
Dr. Sook-Lei Liew	PhD Program in Occupational Science
Dr. Sarah Bream	Post-Professional OTD Program
Dr. Emily Ochi	Post-Professional Master's Program
Dr. Ashley Uyeshiro Simon	Minor Program in Occupational Science

1.   **NON-DISCRIMINATION POLICY**

The University of Southern California prohibits discrimination and harassment based on the following protected characteristics: race, color, national origin, ancestry, religion, sex, gender, gender identity, gender expression, sexual orientation, age, physical disability, medical condition, mental disability, marital status, pregnancy, veteran status, genetic information, and any other characteristic protected by law.

The University of Southern California complies with Title IX of the Education Amendments of 1972, Section 534 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990, which respectively prohibit discrimination. Students who have an inquiry regarding these issues or who wish to file a complaint may contact the Office for Equity, Equal Opportunity, and Title IX at https://eeotix.usc.edu/, by email at eeotix@usc.edu or report.usc.edu, or by phone at (213) 740-2500 or (800) 348-7454.

2.   ACADEMIC STANDING

The Chan Division of Occupational Science and Occupational Therapy offers a Bachelor of Science (BS), a post-professional Master of Arts (MA), and an entry-level professional Doctorate in Occupational Therapy (OTD), as well as a Minor and a Doctor of Philosophy (PhD) in Occupational Science. Each academic program has its own specific educational requirements. Students are required to abide by the educational requirements and policies applying to the respective route of study chosen. This handbook specifically addresses the BS and entry-level OTD programs in occupational therapy.

The Chan Division offers a bachelor's to OTD program **leading to entry-level practice** in occupational therapy. In order to practice, students must successfully complete all course work for the entry-level OTD degree in occupational therapy, as well as successfully pass the equivalent of 24 full-time weeks of level II fieldwork. Following completion of the entry level OTD degree, candidates must successfully pass the national certification examination administered by the National Board for Certification in Occupational Therapy, Inc. (NBCOT), and acquire a state license. The NBCOT credential is a pre-requisite to state licensure.

The requirements of the Bachelor of Science degree include successful completion of all requirements for the BS degree of the USC Dornsife College of Letters, Arts and Sciences (LAS), and successful completion of occupational therapy coursework (see page 71).

Undergraduate students who choose to leave the educational program with the degree of Bachelor of Science in Occupational Therapy, or students who are not permitted to continue to the entry-level OTD program because of unacceptable grade point averages, will not be eligible to sit for the NBCOT certification examination. They may receive the BS degree in occupational therapy, but will not be eligible for certification needed to practice. Those seniors who are admissible to the entry-level OTD program will receive their BS degree en-route to their OTD degree.

The requirements of the entry-level OTD degree include successful completion of all required occupational therapy coursework specific to the entry-level OTD degree option. Students complete the doctoral capstone project and experience as a final requirement for the entry-level OTD degree (see page 29).

Leave of Absence: A graduate student in good standing, making satisfactory progress toward a degree, who must interrupt studies for compelling reasons, may petition for a leave of absence for a stated period.   Once a leave of absence is approved, a student may return to the program during the same semester of the following academic year, due to the sequence and progression of the courses offered. A leave must be approved in advance by the Dean of the degree-conferring unit. Students who find it necessary to be excused from registration must request a leave of absence by the last day to drop or add courses. The request should include a plan for academic progress upon return. Students who fail to apply for a leave of absence are subject to policies governing continuous enrollment and readmission. Previous acceptance to the program does not guarantee readmission at a later time. Please refer to the USC Catalogue for more information. All requirements for the entry-level OTD degree, including all level II fieldwork and the Doctoral Capstone, must be completed within five calendar years from the date on which the student entered the program and/or began taking coursework. This time limit includes the period during

which the student may be on special standing. Financial aid recipients considering a leave of absence should be aware of the financial aid implications. For more information, refer to the Leave of Absence website at: https://loa.usc.edu/; and the Withdrawal Implications for Recipients of Financial Aid section at https://loa.usc.edu/steps-for-withdrawal/financial-aid/

The faculty reserves the right to place a student on probation or dismiss any student whose lack of achievement in any academic area or whose lack of appropriate professional behavior may indicate potential problems in clinical performance. Once dismissed, a student may be reinstated only after initiating a faculty review (please see Rights of Appeal on p. 17).

Student Health Leave of Absence: The University recognizes that health needs may occasionally interfere with a student's academic program. Accordingly, the University provides two types of health leaves, a Voluntary Health Leave of Absence and a Mandated Health Leave of Absence. Please see the details of both outlined at: https://campussupport.usc.edu/students/health-and-wellness/health-leave-of-absence/and consult with your academic program director. For more information, please visit the website, or contact the Campus Wellbeing and Crisis Intervention office at https://www.provost.usc.edu/campus-wellness-and-crisis-intervention/, by e-mail at: uscprovost@usc.edu, or by phone at: 213-740-2101.

3.   **ACADEMIC STANDARDS**

   A.   Matters concerning any course grade or assignment shall be discussed first with the instructor of the course. Faculty will have regular, announced office hours. For matters of more general academic concern, students are encouraged to consult with the director of the student's program of instruction.

   B.   Undergraduate OT students must maintain a semester grade point average (GPA) of at least 3.0 in all required OT courses in order to continue in the program. If an undergraduate student's semester GPA (OT courses) falls below 3.0, the student will be placed on academic probation. An undergraduate OT student will not be permitted to continue in the program if the student's semester GPA (OT courses) falls below 3.0 for more than one semester.

   C.   A graduate OT student who is admitted to the program with a GPA less than 3.0 will have a registration hold based upon Graduate School requirements. The student must achieve a semester GPA of 3.0 or above in the first fall semester in order to continue in the program. Students are encouraged to meet with their faculty advisors mid-semester to review current standing and identify resources as needed.

   D.   A graduate OT student who fails to achieve a 3.0 semester GPA for any semester in the program will be placed on academic probation. The student will receive a letter of academic warning/probation outlining the following:

   - If the semester GPA falls below 3.0 in the subsequent semester, the student is dismissed.
   - If the semester GPA is 3.0 or above in the subsequent semester, but their cumulative GPA remains below 3.0, the student remains on academic probation until BOTH the semester GPA and the cumulative GPA are 3.0 or above. Because

they remain on probation, if the student's semester GPA falls below 3.0 in the subsequent semester, the student is dismissed.

- If the semester GPA is 3.0 or above in the subsequent semester and the cumulative GPA is 3.0 or above, the student is no longer on academic probation.
- If the student is no longer on academic probation and the semester GPA falls below 3.0 in a later semester, the student is NOT dismissed, but once again placed on academic probation.

E.   The minimum passing grade in all OT required courses is C or above. A student will be required to repeat any course in which the student earns a C- or below, or receives a W (Withdrawal). A student may repeat courses only once if the student earns a C- or below, or receives a W.

F.   Undergraduate students may not take any course required for the OT major as Pass/Fail (P/F). Graduate students will not receive credit for any course taken as P/F.

G.   To be eligible for graduation, a graduate OT student must achieve a final overall cumulative GPA of 3.0 or above AND a GPA of 3.0 or above on all courses applied to the entry-OTD degree.

4.   ETHICAL STANDARDS AND ACADEMIC INTEGRITY

Ethical standards are a fundamental component of professionalism. The ultimate objective is mutual respect, enhancement of performance in the professional role, and enhancement of the program from which one graduates. These standards encompass all the responsibilities one assumes in relationships with peers, clients, instructors, supervisors, and the public. The basic components of the ethics involved are truth, equality, honesty, respect, and responsibility for self and others. The Chan Division of Occupational Science and Occupational Therapy expects adherence to the following ethical standards in both academic and fieldwork settings.

A.   Reliable and responsible action in following Division rules of conduct in any relationship within the Division or between Divisions, staff members, students, and others.

B.   Thoughtful and courteous behavior to guests of the Division, to faculty and staff, and to fellow classmates.

C.   Truth and honesty in all activities, interactions, and relationships. This includes carrying out assignments and agreements, use of Division or University materials and facilities, and performance on examinations. The Chan Division of Occupational Science and Occupational Therapy fully abides by the policies regarding academic integrity (The USC Student Handbook, p.11 - Integrity and Accountability: Student Community Expectations); https://policy.usc.edu/studenthandbook/

D.   Confidentiality of student records and examinations at all times.

5. **RIGHTS OF APPEAL**

"For disputed academic evaluations, a student may receive up to two levels of formal appeal after review by the instructor. In the interest of preserving the very important student-instructor relationship, the student and instructor should try to resolve the grade dispute by direct communication. If the issue cannot be resolved by this dialogue, the grade dispute should move beyond the instructor to the next level of review. All grade appeals must be brought no later than the end of the semester following the semester for which the student received the disputed grade. The two levels of appeal beyond the instructor are the department chair and the school dean" (The USC Student Handbook, p. 35, Selected Academic Policies at https://policy.usc.edu/studenthandbook/).

For students in the Chan Division of Occupational Science and Occupational Therapy, the first level of appeal is the Associate Chair for Curriculum and Faculty. If the issue is not resolved, the second level of appeal is the Associate Dean of the Division. Students are required to address the appropriate person in writing, indicating details of their case. At each level of review, based upon University policy, the Associate Chair or the Associate Dean may personally review the appeal or appoint an ad hoc committee to review the issue.

6. **FACULTY ADVISORS and COMMUNICATION WITH FACULTY**

In the first fall semester of the entry-level OTD program, each student is assigned a faculty advisor who will be available throughout the program. Faculty advisors provide guidance and feedback on professional and academic matters and serve as a resource for personal matters should they arise. While each student will be assigned a designated faculty advisor, students are also encouraged to meet with a variety of Chan Division faculty throughout their academic program.

The Faculty Advisor and Student Advisee Program has been established to support entry-OTD students in both practice and classroom settings. The program includes:
- an introduction to the program and the role of the Faculty Advisor, presented during orientation week
- structured meetings between Faculty Advisors and Student Advisees, scheduled at least once a semester from Fall Year 1 to Spring Year 2, or more frequently as desired or requested by individual students or faculty
- a student self-assessment of professional behaviors completed in OT 511: Reflection in Practice, reviewed by the Student Advisee and Faculty Advisor to identify areas of strengths and areas for improvement
- regular and timely updates on student performance and professional behaviors submitted by Faculty Advisors to the Academic Program Director

During the third year of the program, entry-OTD students are matched with Faculty Mentors who have expertise consistent with the student's area of focus during their Level IIB Fieldwork and Doctoral Capstone Experience. Faculty Mentors regularly meet and advise students through the Doctoral Capstone Preparation Seminar courses facilitated in Fall and Spring of Year 3, and during the Doctoral Capstone Experience in the Summer.

Faculty-student communication is vital. In addition to providing input to individual faculty advisors and/or other faculty members, students may provide input to faculty through the Occupational

Therapy and Science Council (OTSC) Faculty Liaisons. These representatives from the Chan Division of Occupational Science and Occupational Therapy student organization meet regularly with faculty and staff representatives, ensuring student involvement and influence upon the Division and the curriculum.

7.   DIVERSITY, ACCESS, AND EQUITY

The Chan Division values and promotes diversity, access, and equity in all programs and activities. To that end, the Division has appointed an Associate Chair of Diversity, Access, and Equity (DAE), Dr. Jesús Díaz, and formed the DAE Committee with participation from faculty, staff, and students of the Chan Division. Priorities include:

- developing and maintaining an accessible, inclusive, diverse, equitable, and supportive climate within the Chan Division for all students, staff, and faculty
- recruiting and retaining diverse faculty, staff, and students
- supporting teaching faculty in the development and implementation of best practices for inclusive pedagogy, creating inclusive classroom and field settings, and facilitating student growth as responsive and reflective clinicians
- providing culturally relevant, inclusive, and responsive interventions across our clinical practices and Chan affiliated sites
- addressing health disparities and improving lives throughout our research endeavors

Students are invited and encouraged to participate in these efforts. For more information, visit the Chan DAE website at https://chan.usc.edu/about-us/dae .

8.   PROFESSIONAL BEHAVIORS AND EXPECTATIONS

Professional relationships and mentoring established via faculty advisors and peer mentors are part of the Division's overall approach to developing professional behaviors and expectations. A top-down approach emphasizes role modeling and immersion in professional culture and activities. Students have opportunities to participate in professional occupational therapy associations at both state and national levels, as well as student leadership organizations within the Division. Through such engagement, students gain experience in active volunteerism and leadership which fosters the development of humanitarianism, integrity, and accountability. Participation in professional opportunities also promotes a critical awareness of personal behaviors and respect for others. Each year, several students receive Student Leadership Awards in the form of monetary support toward attendance at state, national, and/or international professional occupational therapy conferences.

   A.   OCCUPATIONAL THERAPY PROFESSIONAL ORGANIZATIONS

   Student membership in both the American Occupational Therapy Association (AOTA) and the Occupational Therapy Association of California (OTAC) is required. AOTA and OTAC protect the scope of practice for occupational therapy and represent the profession at the national and state levels. Membership in these associations is comparable to holding "career insurance." It is our sincere hope that student membership will translate into lifelong membership. Therefore, student membership in AOTA and OTAC is essential.

Careful consideration of financial responsibilities is encouraged, as membership in both associations is required during the professional program. Students will also benefit personally and professionally from the advocacy, publications, member services, and events the associations provide. Various class assignments will require access to the AOTA member website, the OTAC member website, as well as other events, resources, and membership benefits.

Apply for student membership on-line at www.aota.org and www.otaconline.org. Students **must provide proof of membership in both associations (membership I.D. numbers) at the beginning of each fall semester. Students must maintain AOTA and OTAC memberships throughout enrollment in the professional program.**

B.   STUDENT ORGANIZATIONS and GROUPS

Chan Registered Student Organizations (RSOs)
The Chan Division has several Registered Student Organizations (RSOs) that are recognized by the University and self-governed by Chan students with advisement by Chan faculty. The following RSOs are currently active in the Chan Division:

The **Occupational Therapy and Science Council (OTSC)** is the coordinating body for student activity in the Division. The council includes students in the Bachelor's, post-professional Master's, post-professional OTD, entry-OTD, and PhD programs. The purpose of the council is to serve as the AOTA student occupational therapy association (SOTA), as well as represent student interests to the Chan Division of Occupational Science & Occupational Therapy, the Graduate Student Government (GSG), and the University of Southern California. OTSC is a student-led organization that strives to represent Chan Division student needs and interests through meaningful and inclusive connections to USC, OTAC, AOTA, and the community in order to support student engagement and professional development. There are opportunities for discipline-specific education, professional development, interdisciplinary networking and volunteering, as well as fundraising efforts dedicated to non-profit and non-governmental agencies within the community. OTSC holds elections for officers and executive committee coordinators each year; however, all Chan Division students are members of this organization. For more information on SOTA, please visit: https://www.aota.org/Education-Careers/Students/SOTAs.aspx

The mission of the **Interdisciplinary Community Outreach (ICO) – Occupational Therapy** is to offer volunteer opportunities for students to get involved in interprofessional health teams (pharmacy, physician assistant, physical therapy, and medicine) to promote health education and access to comprehensive support to the chronically ill and underserved communities of Los Angeles.

The **Pre-Occupational Therapy Club** is open to all USC undergraduate students who are interested in learning more about occupational therapy; it provides students with the opportunity to attend club activities and events on campus at USC and throughout the Los Angeles area.

Student Groups

In addition to Registered Student Organizations, the following **Chan Student Groups**, supported by Chan faculty, provide opportunities for student involvement in special areas of interest or represent local student chapters of national organizations:

The mission of the **Asociación Hispanohablante de Terapia Ocupacional (AHTO; Spanish-speaking Occupational Therapy Association)** is to improve the educational experience of Latinx and/or Hispanic-identifying occupational therapy students, serve as a resource for community members to support one another, and to advance clinical care for Spanish-speaking/Latin American populations both locally and around the world.

The goal of **USC's Coalition of Occupational Therapy Advocates for Diversity (COTAD)** chapter is to empower occupational therapy students and practitioners in Chan Division to engage in practices that increase justice, equity, diversity, inclusion, anti-racism, and anti-oppression in all its forms for a transformative occupational therapy profession. This student-led organization also aims to provide safe spaces where students can engage in meaningful discussions surrounding current affairs, implicit biases, culture's impact on occupations, and the importance of marginalized representation in healthcare. COTAD works towards increasing the profession's visibility and accessibility to underrepresented groups, and cultural humility by sharing and learning about different lived experiences. Additionally, chapter leaders will have the opportunity to collaborate with other COTAD chapters nationwide. Here, members can share ideas and resources on how to create more supportive and diverse occupational therapy education programs. As the USC chapter continues to grow, we hope to see today's student leaders become tomorrow's advocates by learning the skills necessary to provide equitable services through the intersectionality lens of anti-racism and anti-oppression towards clients.

OTs for OuTreach aims to build and strengthen the sense of community for LGBTQ students and allies by providing opportunities for social engagement and professional development. Through volunteer experiences, OTs for OuTreach members enhance the presence and reach of occupational therapy by developing programs and implementing engaging activities for diverse, marginalized, and underserved populations. The group has previously worked with the USC LGBT Resource Center, the Los Angeles LGBT Youth Center, and the Los Angeles County Central Juvenile Hall.   Membership and volunteer opportunities are open to _all students_ in the Chan Division of Occupational Science and Occupational Therapy.

The **Alpha Eta Chapter of Pi Theta Epsilon (PTE),** a specialized honor society for occupational therapy students and alumni, was established at USC in 1990-91 to recognize and encourage scholastic excellence. Using eligibility standards set by the national PTE organization, faculty advisors invite students to apply if first semester cumulative grade point averages fall within the top 35 percent of their class. PTE elects officers following selection of new initiates and sponsors scholarly presentations and activities throughout the year, to which all occupational therapy students are invited.

For additional details and information regarding various student organizations and groups, please visit https://chan.usc.edu/people/student-groups. In addition to role modeling and professional immersion, students are exposed to the knowledge and skills necessary for successful practice in occupational therapy by participating in the Chan Division's student organizations.

C.   Chan Division Student Support and Engagement
Students are encouraged to use office hours and interact with members of the teaching team outside of regularly scheduled class times. Students can access resources on the Chan website: https://chan.usc.edu/students.

Student support services are offered daily (Monday through Friday) in the Student Lounge, located in the Center for Health Professions (CHP) rooms 137 and 139, during the midday break from 12:15 – 1:15 pm. Services include educational support tailored to various courses, resources for developing effective studying and learning strategies, peer mentoring for program navigation, pathways for making connections with instructors and University resources, community building, and practice exploration. Additionally, student support services provide asynchronous evidence-based resources like infographics and videos, including writing tips, APA formatting, and study techniques. Students have the flexibility to "drop-in" to the Student Lounge during the midday break or schedule meetings in-person, via Zoom, or in group formats ranging from large gatherings to 1-on-1.

Contact Tessa Milman at tmilman@chan.usc.edu for additional information. Click on this Google form to request a meeting.

D.   ABSENCE PROTOCOL

We recognize that some students may need to miss class due to illness and/or unforeseen circumstances. Students will be permitted to make up work (in-class assignments), **only if approved by the course instructor**. If a student needs to miss class, they are **expected to notify their instructor(s) a minimum of one hour prior to class** so that arrangements can be made for make-up work and/or remote participation. Students will **only be permitted to participate remotely if approved by the instructor and aligned with the course learning goals and activities**. Make-up work will be determined by the course instructor and is due prior to the start of the next class session.

Understanding that sometimes extenuating circumstances make advanced notification difficult or impossible, if a student is unable to notify their instructor in advance, they are expected to notify their instructor(s) of their absence as soon as possible in order to arrange for make-up assignments.

It is the policy of the University of Southern California that students are excused from class for the observation of religious holy days, including final examinations that conflict with religious holy days. Students should arrange with individual course instructors *in advance* to complete work that is missed and/or to reschedule final

examinations as a result of conflict with religious/holy days. For additional information, students should consult with the USC Office of Religious and Spiritual Life.

E.   Policy Concerning Graded Assessments and Course Examinations:

Students are informed well in advance of the schedule for graded assessments (exams, quizzes, papers, etc.) in each course. It is the student's responsibility to prioritize these dates and times in order to meet course requirements, and it is advantageous to take all exams at the day/time when they are administered.

Accommodations needed, due to a student's specific disability(ies) or health condition, must be approved by the USC Office of Student Accessibility Services (OSAS) and should be requested at the beginning of the semester, **well in advance of exams**. Per the Chan Division Student Handbook, if a student has OSAS-approved accommodations and wishes to use them for graded assessments/course exams, the student should notify the course instructor a **minimum of two weeks prior to the exam** (p. 20). **Accommodations requested less than two weeks prior to an exam are not guaranteed.** Please see the section of the syllabus on academic accommodations.

Graded assessments **MUST be completed on the date and at the time scheduled**. Acknowledging that emergencies can arise on the day of a graded assessment, the following policy will apply:

- If a student is **late** for a graded assessment/exam, they may complete it as scheduled with any remaining time available.

- If a student **cannot be present** for a graded assessment/exam due to self-limiting conditions (e.g., flu, headache, gastroenteritis), the student must notify the course instructor of their absence as soon as possible in order to reschedule the graded assessment **at the instructor's convenience**.

For severe health concerns which may arise, or circumstances in which a student is late for/missing more than one scheduled assessment, the student will be referred to USC Student Health, the Director of the Academic Program, and/or Dr. Julie McLaughlin Gray, the Associate Chair for Academic, Faculty, and Student Affairs, for support in navigating campus resources and appropriate channels for academic adjustments.

Documentation supporting the emergency situations requiring extensive modifications to the course assessment schedule (i.e. multiple assessments must be rescheduled) must be provided for:

- Hospitalizations, significant injuries, or concussions
- Death of immediate family member

Failure to provide the appropriate documentation will result in a "0" for the assessment/examination.

F.   PROFESSIONAL ATTIRE

Appropriate mode of dress is reviewed annually to reflect professional responsibilities and role demands of students. Because one objective of the program is to develop professional awareness and to build professional habits, certain standards of dress and behavior are expected.

1. When students have classes in settings away from university premises, professionally suitable clothing is required and must conform to the standards of the setting.

2. Clothing for Level I and Level II fieldwork must conform to the facility standards and not be in conflict with any agency's policies. The student is expected to be familiar with these policies and to wear appropriate attire. If an agency does not require uniforms for occupational therapy personnel, suitable conservative, or business-casual, attire should be worn.

3. Unless otherwise instructed, jeans, shorts and open-toed shoes are not appropriate for either off-campus classes, site visits, or fieldwork.

4. All occupational therapy professional students are provided a name tag by the Division. Students are expected to wear their name tags at all times while in practice settings, unless otherwise instructed. Students must purchase a replacement name tag if lost.

5. In some facilities, students will be expected to wear a white lab coat with USC Chan Occupational Science and Occupational Therapy student insignia on the sleeve, hospital scrubs, or other uniform. Students will receive a white lab coat at the Division White Coat Ceremony the first fall semester in the program. Student insignia is available at the HSC bookstore.

G. USE OF SOCIAL MEDIA

Social media such as LinkedIn, Twitter, Instagram, Facebook, YouTube, among others, blurs the lines between the professional and the personal. Potential employers might examine an individual's social media site(s) to assess their behavior related to ethical decision-making and/or respectful and courteous communication. A recently published AOTA Advisory Opinion included the following statement with regards to on-line social networking (OSN):

> Although posting information on a social networking site is not inherently unprofessional, health care providers need to be cognizant of their responsibility to carefully select the content and amount of information they post. As health care providers, occupational therapy practitioners, educators, and students should ensure that their postings are consistent with professional, legal, and ethical standards, behavior the term *e-professionalism* was coined to describe.

> (AOTA Advisory Opinion for the Ethics Commission on Social Networking, p.3, 2016).

Be aware that when posting on any social media site students must adhere to privacy and confidentiality laws and guidelines, such as the Health Insurance Portability & Accountability Act (HIPAA) and copyright restrictions. Never post any material about a patient, client, or family.

Students should have no expectation of privacy on social networking sites. People using social networking sites have no legal obligation to maintain confidentiality. In addition, information you have deleted can be stored and viewed by others. In considering a post to any social media site, students should think about how it will reflect on them, the Division, or the University if it were to become widely known among students and faculty.

The rules for academic integrity also apply to postings on social media sites. For example, if a student learns about cheating from a Facebook post, they must report it.

If students have questions about this topic, they are encouraged to discuss them with faculty and/or review on-line information related to the best practices regarding the use of social media. The Division's Student Guidelines for Use of Social Media can be found in this handbook in Appendix H.

Helpful websites to reference:
http://sharing.mayoclinic.org/guidelines/for-mayo-clinic-employees/
https://www.aota.org/publications/student-articles/career-advice/social-media

Access the full AOTA Advisory Opinion at (requires AOTA membership to access):
https://www.aota.org/-/media/corporate/files/secure/practice/ethics/advisory/social-networking.pdf .

H.   COMPLIANCE WITH REQUIREMENTS FOR PATIENT/CLIENT CONTACT

Students may visit childcare centers, clinics, or hospitals as part of their didactic courses, as well as during fieldwork experiences. The University requires all occupational therapy students be in compliance with the following requirements **at all times** during their academic program (list is subject to change): health clearance compliance, cardiopulmonary resuscitation (CPR) certification, HIPAA training, Question, Persuade, Refer (QPR) training, and annual bloodborne pathogens training. Students are responsible for ensuring compliance in each of these areas. Refer to Section 10 (The Fieldwork Program) for additional details.

9.   **STUDENTS WITH DISABILITIES**

Office of Student Accessibility Services (OSAS): The OSAS staff is responsible for ensuring equal access for students with disabilities in compliance with state and federal law. OSAS assists in creating an accessible USC environment through reasonable accommodations, training, and collaboration. Services for students with disabilities include:

- Assistance in providing readers, scribes, note-takers, and interpreters
- Advocacy with faculty
- Special accommodations for test-taking needs

- Auxiliary aid and equipment loans
- Assistance with architectural barriers
- Information on accessible seating at USC sporting events
- Assistive technology
- Support for individual needs
- Information on various disabilities

Students requesting academic accommodations based on a disability are required to register with OSAS each semester. OSAS will provide a letter of verification for approved accommodations when adequate documentation is filed. In order to utilize accommodations, students must submit a copy of the verification letter to their course instructors or to the Director of the Professional Program.

With documentation of disability, students may request accommodations for coursework, exams (including the NBCOT exam), and fieldwork.

Should a student have approved accommodations through OSAS and wish to utilize them for course exams, the student should notify the faculty member a minimum of two (2) weeks prior to the exam. The Division will make a good faith effort to implement all accommodation requests; however, some accommodations may require additional time to put in place.

OSAS is located on UPC, Grace Ford Salvatori Hall (GFS) Room 120. Telephone: 213.740.0776. Information can be obtained and students can register online at the OSAS website: osas.usc.edu; or send an email to: OSASFrontDesk@usc.edu .

10.   **THE FIELDWORK PROGRAM**

Students participating in fieldwork experiences assume professional roles and responsibilities, including service and care delivery to clients. In compliance with accreditation standards, fieldwork provides experiences with diverse client groups across the lifespan; to persons with psychosocial, physical, and/or developmental performance deficits; and in various service delivery models reflective of current practice in the profession. Consistent presence on scheduled fieldwork days is required for successful completion (refer to the Level I fieldwork portion of each practice immersion course syllabus and Guidelines and Procedures for Absences in the Fieldwork and Capstone Manual).

Level I Fieldwork:
Level I fieldwork is embedded in academic coursework. The goal of Level I fieldwork is to gain exposure to and an understanding of the current and potential role of occupational therapy professionals in various practice settings with a variety of client populations. In addition, students begin to develop their professional identity and integrate classroom learning with practice opportunities. Students will engage in a level I fieldwork experience for one full day per week for nine weeks during each of the four practice immersion courses. Students will be placed in a practice setting related to the immersion course in which they are enrolled and are expected to follow the full-time schedule of the fieldwork site. Fieldwork experiences are assigned by the Fieldwork Team in collaboration with students and fieldwork sites. Students choose and rank available sites in order of preference through the PRISM database.

Level II Fieldwork:
Level II fieldwork is a more in-depth practice experience, in which students assume direct client care/practice responsibilities under the supervision of a licensed occupational therapist. The emphasis is on further developing clinical reasoning skills, acquiring and applying knowledge and skills in the practice environment, and professional behaviors and expectations, including communication. The student is expected to achieve entry-level competence in the specific practice area to which they are assigned by the completion of each level II fieldwork experience.

International students will need to apply for the Curriculur Practical Training (CPT), which is a type of off-campus work authorization that allows F-1 international students to participate in academic internships during their degree program. CPT also allows students to gain work experience in their field of study while earning academic credit and advancing toward program completion. CPT is available for full-time or part-time employment, depending on the academic department's requirement. All international students should reach out to the Office of International Services (OIS) for support and guidance in this process: https://ois.usc.edu/ .

Fieldwork to Capstone Pathway: Level II fieldwork is divided into two experiences in distinctly different practice areas. The first level II fieldwork experience is full-time for 12 weeks during the summer of the second year in the program. During the full time Level II experience, students are not permitted to participate in any other academic coursework. The second level II fieldwork is the first part of the fieldwork to capstone pathway which occurs across the entire third year of the program. The second level II fieldwork is 20 hours/week for a minimum of 24 weeks across the fall and spring semesters. Third-year courses will be taken concurrently with the fieldwork experience. The Doctoral Capstone Experience is 14 full-time weeks during the summer semester of the third year in the same practice setting as the second level II fieldwork.

 The student must register for two units of OT 636 (Fieldwork with Seminar) for their first Level II fieldwork experience. For the second level II fieldwork, students will register for one unit of OT 636 in the Fall and one unit in the Spring. Students are NOT permitted to attend Level II fieldwork unless they are registered for the course. Successful completion of 4 units of OT 636 is required for the entry-level doctoral degree in occupational therapy, and for NBCOT certification eligibility. If a student is on probationary status, Level II fieldwork may be postponed. A student may repeat an unsuccessful Level II Fieldwork only once. If a student fails TWO level II fieldworks, they will be dismissed from the occupational therapy doctorate program, will be ineligible for credentialing by NBCOT, and will not be able to practice occupational therapy.

Fieldwork Prerequisites Required by the University/Division:
In order to participate in Level I or II fieldwork, students must maintain compliance with all of the following prerequisite requirements:

- Health Clearance through USC Student Health. Refer to the USC Student Health website for specific University requirements: https://studenthealth.usc.edu/
- Bloodborne Pathogens exposure training (completed annually)
- Health Insurance Portability & Accountability Act (HIPAA) training. The HIPAA Privacy Education program for students is available at: http://ooc.usc.edu/hipaa-privacy-education-program
- Cardiopulmonary Resuscitation (CPR) certification by the American Heart Association in Basic Life Support (BLS) for Healthcare Providers. Students must complete this course through the

Chan Division in September of the first year. Certification is valid for 2 years. Students will be required to renew prior to the 3rd year of the program. There is an additional fee associated with this class.

- QPR (Question, Persuade, Refer) training provides students with the skills to recognize suicide warning signs and intervene promptly to provide support and referrals, as well as the confidence to take action in a crisis. More information can be found at: https://qprinstitute.com/

Site-Specific Onboarding Requirements:

In addition to the University/Division prerequisites listed above, some fieldwork sites require any one of the following: fingerprinting, criminal background check, drug testing, mask-fit testing, and/or on-site orientation. The student is responsible for the cost of additional requirements. It is the student's responsibility to complete all prerequisites and to allow 6-8 weeks for processing of results prior to the start of each fieldwork experience. Contact the Academic Fieldwork Contracts and Prerequisites Administrator at otfw@chan.usc.edu or 323-442-1851 for assistance if needed.

The Fieldwork Placement Process:

Level I and Level II fieldwork assignments are based on availability of placements, the student's self-identified priorities and preferences, a randomized matching process in PRISM, and site-specific interviews. In addition, the performance in Level I fieldwork and course learning activities will be taken into consideration during the Level II fieldwork placement process.

Communication with fieldwork sites (new or existing) for placement is the responsibility of the Academic Fieldwork Coordinators (AFWCs). Students are encouraged to provide the AFWCs with information about potential sites that are not included on the Fieldwork Site database, including contact information. **Students may NOT contact sites directly to arrange or request their own fieldwork placements. Doing so can put a student at risk of losing the opportunity for placement at those sites, which may delay their participation in fieldwork** and completion of the program

If a student initiates the cancellation of a fieldwork assignment once it is confirmed, reassignment will only be considered after all students are initially placed. Stipend opportunities are rare and can become available at any time. The Chan Division's placement process will be upheld regardless of when stipend opportunities become available.

Disability/Health-Related Accommodations for Fieldwork:

If a student requires disability-related accommodations specifically for fieldwork, the process of identifying and establishing the needed accommodation(s) should be initiated as early as possible in the student's academic program. The process of obtaining accommodations for fieldwork is completed separately from the process for classroom accommodations, as the needs may be distinctly different.

Accommodations for fieldwork must be approved by the USC Office of Student Accessibility and Services (OSAS). Students must register with OSAS at https://osas.usc.edu/ and submit supporting documentation as requested. If accommodations are granted, the student must register with OSAS each semester to maintain/revise such accommodations. Once the student's accommodations have been approved by OSAS, the student may wish to discuss their specific needs with an AFWC. Additionally, the AFWC can assist the student to identify accommodations that support successful completion of the fieldwork experience.

Once accommodations are approved by OSAS, the student will also decide whether or not to discuss their specific accommodation needs with the fieldwork educator (FWE). The decision to disclose the specific nature of their disability to the FWE is at the student's discretion.

Fieldwork sites are not required to provide accommodations unless the student is registered with OSAS, has approved accommodations for fieldwork, and provides documentation from OSAS to the FWE at the site. The site determines whether the requested accommodations will interfere with the student's ability to perform essential job functions. Open communication between the student and the fieldwork educator will facilitate successful completion of this process. The AFWC is available to provide support throughout the process.

Performance Concerns During Fieldwork:

Level I
Participation and professional behaviors in Level I fieldwork accounts for 10% of the practice immersion course grade. If a student receives a 5-point or more deduction in their level I fieldwork grade, is terminated from fieldwork, or receives an unsatisfactory overall fieldwork performance rating on the Level I Fieldwork Performance Development Form by Educator, the student must submit a written self-reflection with goals and plans for future improvement to the assigned Academic Fieldwork Coordinator by the last scheduled day of class.

NOTE: The student may not start their next fieldwork experience until the reflection is submitted.

Level II
If a student's performance is determined to be deficient *at any time during the fieldwork experience,* the on-site fieldwork educator and/or student will notify the AFWC. Ongoing communication between the site, the student, and the AFWC is essential during this process.   Following a discussion regarding the student's status, the following option(s) may be offered to the student:

- The student will continue the fieldwork experience. There is no guarantee of the outcome. Possible outcomes may include:

  - The student corrects the deficiencies and successfully completes the fieldwork experience. A learning contract may be utilized to facilitate this process, with all parties agreeing to the expectations.

  - The student continues but does not achieve a passing score despite remediation efforts. The student would receive a grade of "no credit" (NCR) for the fieldwork experience.

- The student may withdraw from the fieldwork experience immediately. The student must log on to their registration page and indicate that they are withdrawing from the course. Depending on the date of withdrawal from the course, the student will receive a grade of "W" or "NCR." The Level II fieldwork experience must be repeated in its entirety.

- The fieldwork site may request that the academic program withdraw the student from the

fieldwork experience. In accordance with the terms of the affiliation agreement (contract) between the site and the academic program, the facility may be required to state their reasons for the request in writing. If the academic program withdraws the student from the fieldwork experience, the student's fieldwork will end at that time, and a grade of "W" or "NCR" is given for the course. The Level II fieldwork experience must be repeated in its entirety.

If a student's fieldwork experience results in an unsuccessful outcome, the professional program will extend up to one year. The student will meet with program director to discuss an individualized plan for program completion and the AFWC to reflect on the experience and develop a remediation plan to address concerns which were identified during the fieldwork experience. The student may need to enroll in OT790 for 1 unit to complete the agreed upon remediation process prior to engaging in another Level II fieldwork experience. This may include additional clinical experience in the specific area of practice, reading, and/or other strategies. When the remediation process is successfully completed, the student will be scheduled for another Level II fieldwork experience according to the academic program's course registration requirements (i.e., semester registration deadlines) and the Student Handbook.

A student may repeat OT 636 either for the first Level II fieldwork OR for the second Level II fieldwork BUT NOT BOTH. A student who does not successfully complete Level II fieldwork as described above will be dismissed from the occupational therapy doctorate program at USC, will be ineligible for credentialing by NBCOT, and will not be permitted to practice occupational therapy.

11.   DOCTORAL CAPSTONE

The Doctoral Capstone is completed in the summer of year 3, as a culmination of the first two and a half years of the entry-OTD program, and more specifically, the two previous semesters (fall and spring of year 3). These two semesters leading into the Doctoral Capstone intentionally house two part-time Level II fieldwork experiences at the same site as the Doctoral Capstone for building confidence, collaboration, expertise, and investment in the site and population served. The Doctoral Capstone consists of two parts – the **Doctoral Capstone Experience** and the **Doctoral Capstone Project**. The Doctoral Capstone Experience provides opportunities for students to create their own 14-week learning plan in order to specialize in clinical practice, research, policy and advocacy, administration, or pedagogy. To demonstrate synthesis and application of knowledge gained, students develop and implement individual Doctoral Capstone Projects, designed in consultation with their site and faculty mentors.

The entire third year of the program, including the Doctoral Capstone, can be completed outside of Los Angeles, California, and accompanying coursework will be offered remotely. Students who intend to complete their Doctoral Capstone abroad would need to prepare in advance and closely coordinate their plans with the fieldwork team. During the final summer of enrollment, students are expected to submit a doctoral portfolio demonstrating competence in their chosen signature capstone concentration. The final portfolio will include documentation of both written and oral presentation skills, expertise as designated in their professional development plan, personal and professional alignment with the entry-OTD program outcomes, and their envisioned future as a leader in the profession. The Doctoral Capstone and portfolio represent the final requirements for the entry-OTD degree program.

12.   THE NATIONAL BOARD FOR CERTIFICATION IN OCCUPATIONAL THERAPY (NBCOT) EXAMINATION

The National Board for Certification in Occupational Therapy (NBCOT) offers a computerized examination for registration as an occupational therapist following the completion of an entry-level OTD degree in occupational therapy. Students should use the NBCOT website at www.nbcot.org to verify application procedures, costs, and corresponding deadlines. NBCOT contact information: National Board for Certification in Occupational Therapy, Inc., One Bank Street, Suite 300, Gaithersburg, MD 20878. Tel. 301.990.7979, or email at: info@nbcot.org.

Please be aware that a felony conviction *may* affect a graduate's eligibility for the NBCOT certification examination or in attaining state licensure. Refer to the NBCOT website for additional information.

13.   STATE LICENSURE - CALIFORNIA BOARD OF OCCUPATIONAL THERAPY (CBOT)

All states require a license in order to practice occupational therapy in the United States of America. NBCOT certification is a prerequisite for licensure in all states.   Students are responsible for researching and abiding by the licensure processes of each state. Students may access current information for the California Board of Occupational Therapy (CBOT) at www.bot.ca.gov. For additional information, please contact the California Board of Occupational Therapy, 1610 Arden Way, Suite 121, Sacramento, CA 95815; Telephone: 916.263.2294

Please be aware that the Occupational Therapy Practice Act (California Business and Professions Code, Section 2570-2571) includes a specific section on representation to the public, California Occupational Therapy Practice Act (Business and Professions Code, Section 2570.18). This section also applies to international students who are trained as occupational therapists outside of the United States.

The section states:

"(a) A person shall not represent to the public by title, by description of services, methods, or procedures, or otherwise, that the person is authorized to practice occupational therapy in this state, unless authorized to practice occupational therapy under this chapter.

(b) Unless licensed to practice as an occupational therapist under this chapter, a person may not use the professional abbreviations "O.T.," "O.T.R.," or "O.T.R./L.," or "Occupational Therapist," or "Occupational Therapist Registered," or any other words, letters, or symbols with the intent to represent that the person practices or is authorized to practice occupational therapy.

(c) Unless licensed to assist in the practice of occupational therapy as an occupational therapy assistant under this chapter, a person may not use the professional abbreviations "O.T.A.," "O.T.A/L.," "C.O.T.A.," "C.O.T.A./L.," or "Occupational Therapy Assistant," "Licensed Occupational Therapy Assistant," or any other words, letters, or symbols, with the intent to represent that the person assists in, or is authorized to assist in, the practice of occupational therapy as an occupational therapy assistant.

(d) The unauthorized practice or representation as an occupational therapist or as an occupational therapy assistant constitutes an unfair business practice under Section 17200 and false and misleading advertising under Section 17500." Retrieved from (http://www.bot.ca.gov/board_activity/laws_regs/cc_regulations.shtml#4125).

14.   STUDENT ELECTRONIC NEWSLETTER SUBSCRIPTION SERVICE

Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy maintains several electronic mailing lists for disseminating information to occupational therapy students in a timely manner. There are separate lists for undergraduate students, students taking first-year entry-OTD courses, students taking second-year entry-OTD courses, students taking third-year entry-OTD courses, students in the post-professional master's program, students in the post-professional OTD program, and students in the PhD program. Incoming students are automatically subscribed to the appropriate list if they have a USC email address by the time classes begin. It is critical to become a member of these email distribution lists, as important Division announcements and communication are sent via this mechanism. At the conclusion of each academic year, students are automatically moved to the next corresponding mailing list. All students are responsible for addressing email sent to their USC e-mail account. For information please contact USC Information Technology Services (ITS) at 213-740-5555 or find instructions online at: http://itservices.usc.edu/email/. If you discover you are not receiving emails sent from a list, or if you need assistance, please contact the Division Information Technology office at 323-442-1539 or at IT@chan.usc.edu.

15.   COMMENCEMENT

The USC Commencement Ceremony is composed of two parts. There is a University-wide ceremony with general conferring of degrees and there are also satellite ceremonies of the individual divisions or units at which individual names are called and individual achievement is recognized. Students are welcome to participate in the general commencement ceremony and in the Chan Division of Occupational Science and Occupational Therapy satellite ceremony.

16.   GRADUATE STUDENT HOUSING – UNIVERSITY PARK CAMPUS AND HEALTH SCIENCES   CAMPUS

There are several apartment complexes just north of the University Park Campus (UPC) which are available to occupational therapy graduate students. Applications for these apartments are managed by University Housing Services and more information can be found on their website: https://housing.usc.edu. The inter-campus shuttle service provides residents with transportation to and from USC's University Park Campus (UPC) and the Health Sciences Campus (HSC).

Additionally, there are housing options on the HSC which are not managed by the University, but can be explored at Currie Hall. For more information, visit https://www.americancampus.com/student-apartments/ca/los-angeles/currie-hall

17.   COURSE AND/OR SCHEDULE ADJUSTMENTS

All courses and/or schedules are subject to change. The Division will provide specific details

regarding schedules and courses as they become available.

CURRICULUM FRAMEWORK

1. **MISSION and VISION of the UNIVERSITY OF SOUTHERN CALIFORNIA**

The Mission and Strategic Vision of the University

The USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy (USC Chan) developed its mission to reflect the philosophy of occupational therapy, as well as to promote and enhance the mission and strategic vision of the University of Southern California.

> The central mission of the University of Southern California is the development of human beings and society as a whole through the cultivation and enrichment of the human mind and spirit. The principal means by which our mission is accomplished are teaching, research, artistic creation, professional practice and selected forms of public service. (*The Role and Mission of the University of Southern California*, 1993, p. 1)

As asserted in the *2018 USC Strategic Plan: Answering the Call*, "The University of Southern California's ascent as one of the world's premier research universities is unparalleled. Accelerating our rise will require a more expansive view of the role of higher education within and beyond the academy. To be the great 21st century research university:

- We must *lead through values* – reaffirming our commitment to our core academic principles, to our code of ethics, and to each other, while adding new voices and exploring new, equitable ways of acting in the world.
- We must *lead through people* – nurturing a cadre of faculty, students, and staff who embrace not just the entrepreneurial spirit, but the inclusive spirit and the convergent spirit as well.
- We must *lead through impact* – seizing opportunities and solving the intractable problems of our city and the world, supporting the underserved who wish to improve their lives and the lives of others, and reinventing medicine and caregiving to improve health and wellness for all.
- And we must *lead through transformation* – asking how we might reimagine higher education, elevate the value of a university degree, expand access and opportunity for those of immense talent who will make us the most prosperous society in the world, and reimagine the college experience to prepare graduates to face world challenges with optimism and purpose" (p.2).

In response to the 2018 USC Strategic Plan, the Chan Division recently updated its Strategic Plan, including our mission and vision. In that plan, we chart a course for the Chan Division to advance the University's priorities of transformative education and relevant scholarship. With compassion and integrity, our impact on community and global service will reflect a collaborative and inclusive spirit, priorities highly compatible with our profession's overarching purpose to meet society's diverse occupational needs.

The Mission and Vision of the Chan Division

Mission Statement

Through innovative research, education and clinical practice, the USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy optimizes people's engagement in the ordinary and extraordinary activities of life.

The mission of the Mrs. T. H. Chan Division of Occupational Science and Occupational Therapy mirrors and upholds the University's mission to benefit both individuals and society by fostering the development of the whole person: "the human mind and spirit" (The Role and Mission of the University of Southern California, 1993, p.1). The Chan Division's mission reflects our fundamental commitment to health through research, education, practice, innovation, and inclusion.

The Chan Division maintains a vivid presence on both the Health Sciences Campus and the University Park Campus, strongly reflecting the University's strategic initiatives encouraging excellence in professional programs that involve innovative collaborations, interdisciplinary research, and visionary education, as well as creative programs that build upon the local urban environment and extend internationally. Our mission complements that of the World Federation of Occupational Therapists (WFOT), "to promote occupational therapy as an art and science internationally….and to support the development, use and practice of occupational therapy worldwide, demonstrating its relevance and contribution to society" (WFOT, 2020).

Such partnerships have allowed us to create lasting impact within our communities and ensure those who stand to benefit from our work are integral to the process at its outset. Like the University at large, the Chan Division's core values of integrity, collaboration, innovation, compassion, inclusion, and distinction drive not just the endpoints we strive for, but also the ethics by which we achieve them (USC Strategic Plan, 2018). Through its multiple degree programs, the Chan Division supports both the mission and strategic vision of the University in its attention to teaching, the development of new knowledge through faculty and student research and scholarship, and service to the community. Our curricula promote integration and translation of research at all levels, from doctoral studies that build science in service of the profession and community, to the appraisal and synthesis of research findings for clinical decision-making by professional students. Furthermore, the University's aim to integrate flagship arts and professional programs in order to address social needs also influences the design of the entry-level occupational therapy doctorate program, which embraces diversity, full participation, and health equity. This curriculum will elevate a social justice framework and juxtapose it with medicine and the physical sciences to support both the art and the science of occupational therapy practice.

Vision Statement

Lead innovation to advance health and well-being through meaningful occupations.

The vision statement of the Chan Division was influenced by three major factors: 1) acknowledgement of the Chan Division's history of leadership and capacity for continued innovation and influence; 2) alignment with the Herman Ostrow School of Dentistry of USC, in which the Chan Division is housed, and its value of improving the systemic health and well-being of local, national,

and global communities; and 3) the American Occupational Therapy Association (AOTA) vision for the future of the occupational therapy profession. We aspire to expand the knowledge base of both occupational science and occupational therapy, and to strengthen the services and outcomes of the profession as we move forward in the 21st century. We share the AOTA Vision 2025, which foresees occupational therapy as an inclusive profession that, "maximizes health, well-being, and quality of life for all people, populations, and communities through effective solutions that facilitate participation in everyday living" (AOTA, 2017, p. 7103420010).

Our vision and strategic plan are aligned with USC's 2018 Strategic Plan to, "create informed and prepared citizens of the world, to advance new knowledge, and to serve the public good" (p.1). Through their preparation as **Experts in Occupation; Reflective, Responsive and Engaged Professionals; Practice Scholars; Global Citizens**; and **Visionaries Shaping Change**, our graduates will be well-situated to transform the health and well-being of individuals and society.

2.   **PHILOSOPHY OF THE MRS. T.H. CHAN DIVISION OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL THERAPY**

Fundamental Beliefs about Human Beings

Not only do human beings have an intrinsic need to engage in meaningful occupations throughout their lives, but they have a right to engage in occupations because occupations have a strong impact on development, health, and well-being across the lifespan (AOTA, 2017). With the complex understanding of occupation within the sociocultural, economic, and political contexts, occupational scientists are experts at studying the impact of occupation on health and well-being, and occupational therapists are experts in implementing occupation as a therapeutic modality, as both a means and an end in therapy (Gray, 1998). According to Bailliard (2020), "occupational scientists have a role to play in promoting justice" (p. 13).

Wilcock & Hocking (2015) define occupational justice as equitable or fair opportunities and resources, "to do, be, belong and become what people have the potential to be and the absence of avoidable harm" (p. 414) through three fundamental ideas: 1.) Humans need to engage in occupations as a determinant of health, in ways that are agreeable to their culture and belief systems and in ways that support sustaining well-being; 2.) Occupation is immersed in the environmental and personal contexts and includes many structural factors like the economy, various policies, and cultural values, which are all considered determinants of occupation (Stadnyk et al, 2010); and lastly, 3.) Engagement in occupation can improve the lives of people who are in vulnerable situations (Hocking, 2017). Our philosophy includes a belief in the significance of occupation for these reasons, and for the need to advance its radiating effects on overall life quality through academic, medical, political, and social spheres.

These fundamental beliefs align with the philosophical base of the profession of occupational therapy, which describes participation in meaningful occupation as a determinant of health, and "fundamental to health promotion and wellness, remediation or restoration, health maintenance, disease and injury prevention, and compensation and adaptation (AOTA, 2017, p. 7112410045p1).

We have historically conceptualized occupational science as the *Science of Everyday Living.* Current research in occupational science examines the complex array of personal, social, community, behavioral, developmental, sociocultural, and environmental factors that influence how we engage

in life's activities and how our participation shapes our health, identity, sense of purpose, and fulfillment (Chan Division, 2020, para. 3). Although occupations may appear simple, occupational scientists and occupational therapists recognize that performing them involves a complex interplay of physical, psychosocial, spiritual, and contextual dimensions. Ranging from the mundane to the exceptional, there is worth attached to each occupation whether it is one of the simple activities, rarely valued until gone, such as brushing teeth, or one of the driving occupations that form the core of identity, like parenting. Occupations can also develop organically, through political demonstrations where people organize themselves for shared goals and in protest of systemic injustice. This is reflected in the social movement supporting Black Lives Matter that has elevated the importance of collective occupation most recently in the United States (Lavalley & Johnson, 2020). These occupations are the focal point of occupational scientists and occupational therapists – the extraordinary nature of engaging in ordinary life.

Our mission to optimize people's engagement in these ordinary and extraordinary activities of life is manifested in the intersection between our research, our educational programs, and our practice, all of which are grounded in occupational science. As depicted in Figure 1, there are eight core content areas that comprise the domains of occupational science, which are focus areas of research in the Chan Division. Linking research, clinical practice, and educational activities to these core concepts supports the Chan Division's mission and philosophy, as well as the profession's, to meet society's occupational needs through expert practice and research grounded in occupation.

Occupational science answers the call of USC's Strategic Plan which encourages the translation of research from bench to bedside to serve people across the globe, as well as locally with a priority in investigating , "the early antecedents of good long-term health; the major health problems of Los Angeles, such as obesity, diabetes, high blood pressure, and cancer; disease related to environmental impacts such as pollution, health policy and health care delivery, and dementia and other health problems associated with an aging population" (USC Strategic Plan, 2018, p.8). These following domains in occupational science inform our research, pedagogy, and clinical practice.

Figure 1. Domains of Research in Occupational Science under Investigation at the Chan Division
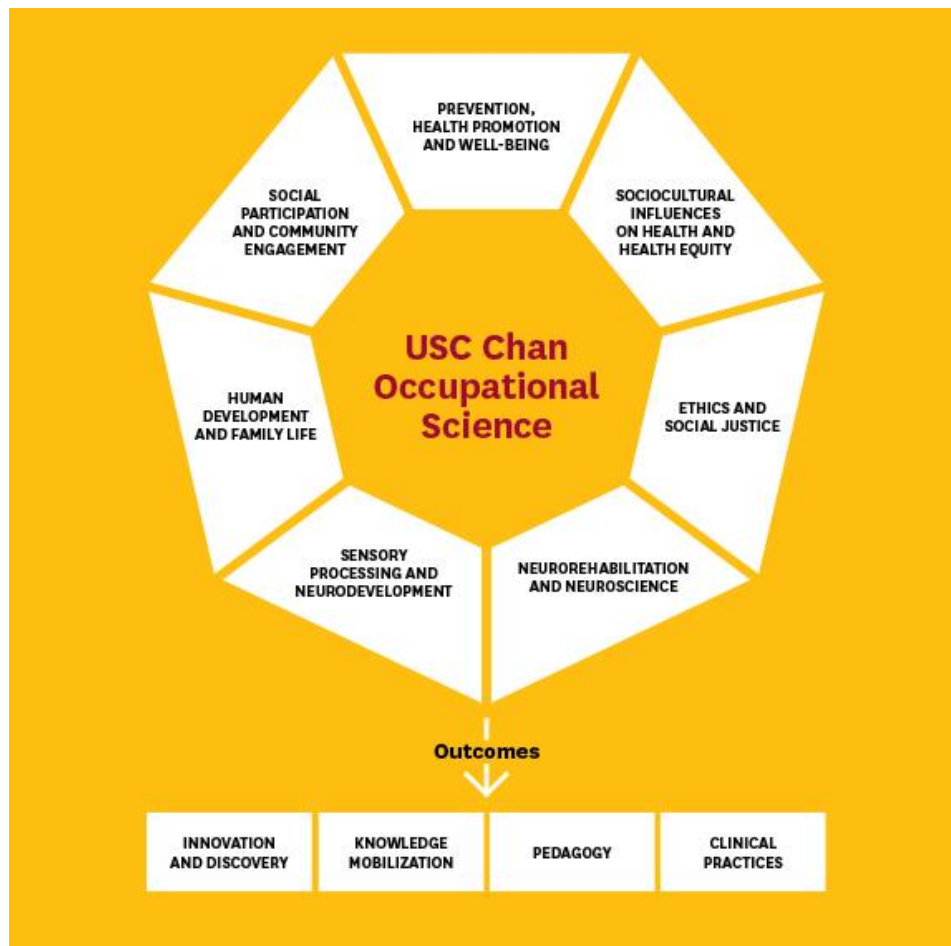
Fundamental Beliefs about Learning: A Learner-Centered Approach

A main tenet of the University of Southern California's 2018 Strategic Plan is to, "reimagine higher education, elevate the value of a university degree, expand access and opportunity for those of immense talent who will make us the most prosperous society in the world, and reimagine the college experience to prepare graduates to face world challenges with optimism and purpose" (p. 2). In line with this vision, as well as our fundamental belief that human beings learn through intentional engagement with the environment, our philosophy of education reflects a commitment to learner-centered approaches (Weimer, 2002) which are emphasized throughout the entry-level occupational therapy doctorate program curriculum, from admissions to classroom and co-curricular activities.

Learner-centered education is commensurate with AOTA's (2018) Philosophy of Occupational Therapy Education, which emphasizes supporting, "active, engaging, diverse, and inclusive learning within and beyond the classroom environment; a collaborative process that builds on prior knowledge and experience; continuous professional judgment, evaluation, and self-reflection; and lifelong learning and continuous advocacy for the profession and society's occupational needs" (p.1).

Learner-centered education emphasizes the student's role in being responsible for their learning, allowing students to establish a deep understanding of their knowledge (Baeton, Dochy, Struyven, Parmentier, & Vanderbruggen, 2015). The instructor's role in student learning shifts from "giver of information" to "facilitator of learning" as the educator employs a variety of learning strategies throughout the curriculum.   Opportunities for engaging with content; learning explicit skills with opportunities to think, problem-solve, evaluate evidence, analyze arguments, and generate hypotheses; reflecting on what is being learned and how it is being learned; empowerment and control over the learning process, and encouraging collaboration and communication are staples of this learning approach (Weimer, 2002) and critical in the occupational therapy profession.

Based upon these essential elements of education, we have designed our curriculum to offer opportunities to build a unified community of learning that fosters professionalization and real-world problem-solving to ensure transfer of knowledge. We prepare our graduates to be autonomous professionals who possess the knowledge and skills necessary for the changing diverse health care landscape. As articulated by Weimer (2002), the "net effect of the expansion and evolution of knowledge is that learning will be a much more important aspect of professional life than in the past" (p.49).

According to USC's Strategic Plan (2018), "what is required of a leading institution of higher learning is to rise to the challenges facing society and higher education for the 21st century" (p. 3). Toward the ultimate goal of creating innovating visionaries for change; reflective, responsive, and engaged professionals; and practice scholars, students are encouraged to take responsibility for their learning throughout the program and to interact with the content in relevant ways (Weimer, 2002). Critical reflection is central, for both students and faculty (Brookfield, 1995; Brookfield, 2006; Weimer, 2002), as is the commitment to consider multiple and diverse perspectives that extend beyond Western understandings that currently dominate healthcare professions (Hammell, 2019).

The following section details the underlying assumptions of our learner-centered approach (depicted in Figure 2) which further informs our curriculum design and selected learning strategies.

Figure 2. Assumptions of the USC Occupational Therapy Learner-Centered Approach.

The Chan Division's assumptions of the learner-centered approach align with AOTA's fundamental beliefs of occupational therapy education in that, "the learning context includes the curriculum and pedagogy and conveys a perspective and belief system that include a view of humans as occupational beings, occupation as a health determinant, and participation in occupations as a fundamental human right" (2018, p. 7212410070). Recognizing that not all students arrive with the same levels of knowledge and academic preparedness, implementing inclusive pedagogy is essential to our teaching approach because it attempts to support all learners to reach their full potential, without labeling some students as "different" (Florian, 2015). A key principle of inclusive pedagogy is that all students offer value to the learning environment, and the Chan Division designed a curriculum that values difference and embraces opportunities to work with students rather than impose predetermined actions upon them. As Hockings (2010) described, inclusive teaching and learning are the methods by which, "pedagogy, curricula, and assessment are designed and delivered to engage students in learning that is meaningful, relevant and accessible to all" (p.1).

Universal design in learning (UDL) and inclusive pedagogy are used interchangeably (Hitch, Macfarlane, & Nihill, 2015). Providing multiple means of representation (the "what" of learning); providing multiple means of action and expression (the "how" of learning); and providing multiple means of engagement (the "why of learning") are all principles of UDL which are embedded within our curriculum design. The intention of incorporating these ideas into our pedagogy is to increase accessibility of the curriculum and assessment processes, with the ultimate goal of extending the learning and strengthening its impact (Hanesworth, Bracken, Elkington, 2018).

Our instructional methods are grounded in learner-centered and inclusive pedagogy reflected in our belief that in order to effectively engage and learn, students must be involved in building on experience, learning by doing, mastery through immersion, transfer through application, and communities of learning.

Building on Experience

Our graduate students are not only ethnically and racially diverse, representing a myriad of cultures and identities, but they also bring a remarkable spectrum of age groups, life journeys and experiences, diversity of thought, and academic backgrounds that further enhance the depth of our community. This diversity of thought and experience is an invaluable asset that enriches classroom discussions, research collaborations, community engagement, and the overall academic discourse. For more information on the diversity and demographics of our Chan academic programs, please visit: https://chan.usc.edu/news/faqs.

We have structured the curriculum to ensure that our students have opportunities to share their experiences in the world and build a communal horizon of understanding (Gadamer, 1965/1982). Building upon and integrating such prior knowledge is recognized by AOTA (2018) as a component of occupational therapy education. Our approach is similar to the developmental and holistic perspective described by Ambrose, Bridges, DiPietro, Lovett and Norman (2010, p.3-4) in that we recognize that the developmental process of learning in which a student is engaged simultaneously intersects with a student's own personal development. While educators frequently recognize that a student comes to an educational program with prior abilities, knowledge and skills, Ambrose et al. stress that students also come with values grounded in their own personal experiences, as well as perceptions about themselves and others (2010). All of these factors influence engagement in the learning process. Within our programs, students are encouraged to share and build upon prior experiences, and to learn from others' perspectives and experiences, while developing their occupational therapy professional identities.

Learning by Doing

This assumption reflects a core principle of occupational therapy and is also compatible with a learner-centered philosophy (Weimer, 2002). As occupational therapists who believe that, "through active engagement within the internal and external environments, humans evolve, change, and adapt" (AOTA, 2007, p.678), we use "doing" in our therapy and in our teaching through methods of active learning.

Active learning is a teaching method that promotes students' skill development and exploration of values and attitudes through instructional activities that encourage students to think about what they are doing; therefore, engaging in higher order thinking. This allows students to build on their own knowledge, enhance understanding, and gain experiences in using that knowledge. Active learning can be facilitated through class discussions and group reflections, as students engage with others to think critically about the content at hand (Crumly, 2014).

Case-based learning facilitates learning by doing by providing students with scenarios that resemble real-life situations. Students are typically presented with a case and are asked questions which elicit clinical reasoning skills and analysis of the information in order to resolve the question. Case-based learning is important to provide students an opportunity to experience situations they may encounter in clinical practice and to enhance clinical decision-making skills (Bridges et al., 2020).

Team- based learning is another active learning, student-centered strategy that is comprised of three phases. Borges et al. (2010) briefly describes each phase of team- based learning which begins with preparation. In the preparation phase, the students study in advance through readings or through an assignment that is given by the instructor. The second phase is readiness assurance where students are tested individually and in groups through readiness assurance tests (RATs) to demonstrate their knowledge learned in the preparation phase. Lastly, the application phase is where the instructor provides problem-solving exercises to allow students to apply course concepts. Team- based learning also facilitates collaborative learning as students discuss questions in the group readiness assurance phase among one another to come to a single answer. Critical thinking is further developed in the application phase as students apply course concepts to problem solve. Team-based learning has been shown to improve skills in communication, teamwork, decision making, problem-solving, and other leadership skills (Goktepe, Turnmen, Yalonn & Zeybekoglu, 2018).

Experiential learning provides students an opportunity to apply knowledge in a supported practice environment, further enhancing the understanding of course material while also developing professional skills. Experiential learning occurs in a practice environment where students meet with a real patient and carry out practice skills through the guidance and feedback of an instructor or a practicing clinician. This method has been an effective method in filling the gap between theory and clinical practice, as students learn to apply knowledge in a real-life practice environment (Knecht-Sabres, 2013).

Based upon research findings, Bonwell and Eison (1991) described the types of engagement, necessary for students to learn, that extend well beyond just listening. Such engagement includes problem-solving, discussion, reading and writing and, most importantly, high-level analysis and synthesis of information (p.1). In support of these findings, we minimize the use of traditional lectures, and classes are regularly divided into small learning groups for discussion and problem-solving. Our physical spaces are specifically designed to promote frequent small group discussion and activities, and students participate in multiple experiential learning laboratories involving hands-on interaction with therapeutic media, experts by experience, and standardized patients.

Mastery through Immersion

In the various contexts of contemporary health care, recent graduates practice in demanding arenas in which they must often work autonomously to interpret and implement policy and institutional guidelines effectively and ethically upon entry (Del Bueno, 2005; Dyess & Sherman, 2009). Recognizing these contextual demands, our curriculum aims to develop mastery in preparation for self-directed practice as a generalist. Mastery is defined by Ambrose et al. (2010) as, "the attainment of a high degree of competence within a particular area" (p.95). We believe that mastery is best achieved through PRACTICE IMMERSION: concentrated study of only one practice area at a time throughout a given semester. Accordingly, each immersion is structured as an intensive 8-unit course encompassing didactic and laboratory experiences, along with corresponding Level I fieldwork in either *adult physical rehabilitation, mental health, productive aging and geriatrics,* or *pediatrics*. Through this curriculum component, students acquire all essential knowledge and skills for evaluation and intervention in only one of the respective practice areas within a semester timeframe. Students are assigned to one of four rotations, each of which rotates through the four practice immersions, taking one of the immersions in each of four semesters (see Figure 3). These practice immersions provide key elements, outlined by Ambrose et al., necessary for students to

attain mastery in a particular domain: "they need to develop a set of key component skills, practice them to the point where they can be combined fluently and used with a fair degree of automaticity, and know when and where to apply them appropriately" (2010, p.95). When applied here to the development of a generalist occupational therapist's knowledge and skills, this immersion principle mirrors the reasoning processes of experts who, "organize knowledge into large, conceptual 'chunks' that allow them to access and apply that knowledge with facility" (2010, p.98). Furthermore, practice immersions will prepare students to address the occupational and health needs of diverse and global communities through the incorporation of learning opportunities that foreground the lived experiences of diverse populations.

Figure 3. Rotations through Practice Immersions

		Rotations: Practice Immersions				
	Semester 1	Semester 2	Semester 3	Semester 4	Semester 5	Semester 6
Rotation A	Foundation Courses	OT 501 Adult Physical Rehabilitation	OT 502 Mental Health	OT 503 Pediatrics	OT 504 Productive Aging and Geriatrics	Rotation Ends
Rotation B	Foundation Courses	OT 502 Mental Health	OT 503 Pediatrics	OT 504 Productive Aging and Geriatrics	OT 501 Adult Physical Rehabilitation	Rotation Ends
Rotation C	Foundation Courses	OT 503 Pediatrics	OT 504 Productive Aging and Geriatrics	OT 501 Adult Physical Rehabilitation	OT 502 Mental Health	Rotation Ends
Rotation D	Foundation Courses	OT 504 Productive Aging and Geriatrics	OT 501 Adult Physical Rehabilitation	OT 502 Mental Health	OT 503 Pediatrics	Rotation Ends

Transfer through Application

We believe that professional autonomy also requires students to be actively engaged in real-world problem-solving, and that the best learning occurs when students can immediately apply knowledge learned in the classroom to clinical and practice contexts. Contemporary research suggests that transfer of learning is neither easy nor automatic, but can be enhanced through opportunities to practice application, and in multiple contexts (Ambrose et al., 2010). Based upon this research, we have designed our current practice courses to include experiential learning laboratories as well as weekly Level I fieldwork in a corresponding practice setting. These opportunities require immediate translation of concepts and skills from classroom to clinic, thus enhancing transfer of learning. In addition, because students rotate through four such practice immersion experiences, all with related fieldwork, they experience multiple and varied contexts in which to apply aspects of the occupational therapy process, further enhancing their knowledge transfer.

Communities of Learning

Our learner-centered philosophy is also grounded in the recognition that learning occurs in social contexts or communities (CAPT, 2005). Because we believe in the importance of shared communities of learning to foster a unified, coherent professional identity, students in our professional program are divided into four groups, each with its own rotation or sequence of practice immersion experiences, as described above (see Figure 3). At the same time, during every semester all students together study an essential core of knowledge and skills related to all practice areas, what we refer to as "thread courses." We deliberately bring students from different groups

together in several of these thread courses in order to foster students' professional socialization and overall class cohesiveness. Figure 4 below displays the thread courses that all rotation groups take concurrent with each practice immersion course, as well as those thread courses that combine student groups together. Finally, we extend this socialization into professional communities as well. Several co-curricular activities offer multiple opportunities for students to extend learning into professional contexts, as well as develop leadership experience and capacity. Student organizations host social, professional, and scholarly events. Students participate in Research Day, Interprofessional Education experiences, and other academic symposia. Several scholarships are offered annually to support student participation at local, state, and national professional conferences.

Habits of Critical Reflection

Lastly, mastery and professional socialization are also achieved through reflective practice. The AOTA Philosophy of Occupational Therapy Education (2018) describes the value of continuous professional judgment, evaluation, and self-reflection while developing a, "sound reasoning process that is client-centered, occupation-based, and theory-driven while also encouraging the use of best evidence and outcomes data to inform the teaching-learning experience" (p. 2). Critical thinking and reflection is threaded throughout our curriculum, as described below, and faculty development is key to our student and learner-centered philosophy (Brookfield, 1995; Brookfield, 2006). Students are taught to reflect on their occupations, their clinical reasoning, and their professional identities through multiple course assignments and activities. Faculty also model the self-reflective practice expected of professional students through ongoing curriculum review, mid-semester course evaluations, and thoughtful review of teaching evaluations during the merit review process.   We uphold that, "self-awareness is the foundation on which further development as a confident, self-directed, and self-regulated learner grows" (Weimer, 2002, p.51-52).

Figure 4. Cohorts Rotations: Practice Immersions Plus Thread Courses (all schedules are subject to change)

	Rotations: Practice Immersions + Thread Courses							
	Semester 1	Semester 2	Semester 3	Semester 4	Semester 5	Semester 7	Semester 8	Semester 9
Rotation A	Theoretical Foundations of Occupational Science and Occupational Therapy Foundations of Occupation: Creativity, Craft and Activity Analysis Kinesiology in Daily Life Neuroscience in Daily Life Reflection in Practice	OT 501*** Adult Physical Rehabilitation Practice Scholar: Applying Quantitative Evidence Communication in Practice Foundations of Occupation: Sensory Processing in Daily Life	OT 502*** Mental Health Practice Scholar: Applying Qualitative Evidence Facilitating Transformational Change in Practice Applying Occupational Science: Health Promotion and Primary Care	OT 503*** Pediatrics Visionaries: Innovation and Technology to Promote Occupation Visionaries: Global Health Systems, Policy, and Advocacy Applying Occupational Science: Lifestyle Redesign®	OT 504*** Productive Aging and Geriatrics Advanced Clinical Applications: Neurocognition and Occupation Advanced Clinical Applications: Medical Complexity and Occupation	Doctoral Capstone Preparation: Seminar 1 Practice Scholar: Synthesizing Evidence and Practice Needs Teaching and Learning Seminar: Becoming a Fieldwork Educator	Doctoral Capstone Preparation: Seminar 2 Practice Scholar: Mobilizing Knowledge to Advance Practice Pedagogy in Higher Education: Seminar and Practicum	Doctoral Capstone Experience with Seminar
Rotation B	Theoretical Foundations of Occupational Science and Occupational Therapy Foundations of Occupation: Creativity, Craft and Activity Analysis Kinesiology in Daily Life Neuroscience in Daily Life Reflection in Practice	OT 502*** Mental Health Practice Scholar: Applying Quantitative Evidence Communication in Practice Foundations of Occupation: Sensory Processing in Daily Life	OT 503*** Pediatrics Practice Scholar: Applying Qualitative Evidence Facilitating Transformational Change in Practice Applying Occupational Science: Health Promotion and Primary Care	OT 504*** Productive Aging and Geriatrics Visionaries: Innovation and Technology to Promote Occupation Visionaries: Global Health Systems, Policy, and Advocacy Applying Occupational Science: Lifestyle Redesign®	OT 501*** Adult Physical Rehabilitation Advanced Clinical Applications: Neurocognition and Occupation Advanced Clinical Applications: Medical Complexity and Occupation	Doctoral Capstone Preparation: Seminar 1 Practice Scholar: Synthesizing Evidence and Practice Needs Teaching and Learning Seminar: Becoming a Fieldwork Educator	Doctoral Capstone Preparation: Seminar 2 Practice Scholar: Mobilizing Knowledge to Advance Practice Pedagogy in Higher Education: Seminar and Practicum	Doctoral Capstone Experience with Seminar
Rotation C	Theoretical Foundations of Occupational Science and Occupational Therapy Foundations of Occupation: Creativity, Craft and Activity Analysis Kinesiology in Daily Life Neuroscience in Daily Life Reflection in Practice	OT 503*** Pediatrics Practice Scholar: Applying Quantitative Evidence Communication in Practice Foundations of Occupation: Sensory Processing in Daily Life	OT 504*** Productive Aging and Geriatrics Practice Scholar: Applying Qualitative Evidence Facilitating Transformational Change in Practice Applying Occupational Science: Health Promotion and Primary Care	OT 501*** Adult Physical Rehabilitation Visionaries: Innovation and Technology to Promote Occupation Visionaries: Global Health Systems, Policy, and Advocacy Applying Occupational Science: Lifestyle Redesign®	OT 502*** Mental Health Advanced Clinical Applications: Neurocognition and Occupation Advanced Clinical Applications: Medical Complexity and Occupation	Doctoral Capstone Preparation: Seminar 1 Practice Scholar: Synthesizing Evidence and Practice Needs Teaching and Learning Seminar: Becoming a Fieldwork Educator	Doctoral Capstone Preparation: Seminar 2 Practice Scholar: Mobilizing Knowledge to Advance Practice Pedagogy in Higher Education: Seminar and Practicum	Doctoral Capstone Experience with Seminar
Rotation D	Theoretical Foundations of Occupational Science and Occupational Therapy Foundations of Occupation: Creativity, Craft and Activity Analysis Kinesiology in Daily Life Neuroscience in Daily Life Reflection in Practice	OT 504*** Productive Aging and Geriatrics Practice Scholar: Applying Quantitative Evidence Communication in Practice Foundations of Occupation: Sensory Processing in Daily Life	OT 501*** Adult Physical Rehabilitation Practice Scholar: Applying Qualitative Evidence Facilitating Transformational Change in Practice Applying Occupational Science: Health Promotion and Primary Care	OT 502*** Mental Health Visionaries: Innovation and Technology to Promote Occupation Visionaries: Global Health Systems, Policy, and Advocacy Applying Occupational Science: Lifestyle Redesign®	OT 503*** Pediatrics Advanced Clinical Applications: Neurocognition and Occupation Advanced Clinical Applications: Medical Complexity and Occupation	Doctoral Capstone Preparation: Seminar 1 Practice Scholar: Synthesizing Evidence and Practice Needs Teaching and Learning Seminar: Becoming a Fieldwork Educator	Doctoral Capstone Preparation: Seminar 2 Practice Scholar: Mobilizing Knowledge to Advance Practice Pedagogy in Higher Education: Seminar and Practicum	Doctoral Capstone Experience with Seminar

***Includes Level I Fieldwork in a Corresponding Practice Setting

3. **CURRICULUM DESIGN: SCOPE, CURRICULUM THREADS, CONTENT AND SEQUENCE OF COURSEWORK, AND EDUCATIONAL GOALS**

Introduction: The Need to Transition to the Clinical Doctorate-Degree-Level Educational Program

The transition to an entry-level clinical doctorate degree at USC Chan was inevitable. The profession's point-of-entry has been a topic of discussion, through various informal and formal channels, for well over ten years. Elevating the entry into the field to a clinical doctorate was decided as the next best step for the future of occupational therapy education here in the Chan Division.

According to the AOTA Board of Directors' Position Statement on Entry-Level Degree for the Occupational Therapist, "the increased requirements for practice-based scholarship and research in the doctoral accreditation standards result in an occupational therapist who is able to rigorously implement evidence-based practice, understand care delivery models, and is prepared to meet the future occupational needs of society" (2014, para. 2). This particular skill set will also be essential for addressing the rapidly evolving and complex health care systems and policies in the United States, while working with people, groups, and populations who are living with chronic health conditions, locally and around the globe. These skills will enable the profession to address efficiency and quality of care as autonomous practitioners who are experts at utilizing occupation as a unique therapeutic modality, differentiating it from many other healthcare and rehabilitation professionals (AOTA, 2014).

Interprofessional care teams, increased focus on primary care and chronic conditions, and specialization in practice demand that occupational therapists have the ability to critically appraise and synthesize data in order to become change-makers and leaders on the front lines. Creative solutions and powerful relationships with collaborators and community partners have already led the Chan Division to nurture growing relationships and ensure residency opportunities where a terminal degree in occupational therapy is essential to level out the playing field.

The AOTA Board of Directors reported that, "current high credit load in master's programs makes it very difficult to add additional content in specialized areas of practice....at this time, the occupational therapy master's programs greatly exceed the average credit load of other master's programs, prompting students to ask why their colleagues in other professions are graduating with a doctorate when, in most cases, they are only in school for 1 to 2 more semesters" (2014, para. 5). In fact, the landscape of health care professions in general is moving (or has already moved) towards advanced degrees, such as physical therapy, nurse practitioner, pharmacy, and psychology (Bureau of Labor Statistics, 2018). It is becoming increasingly difficult for occupational therapy to be "sitting at the table" when legislative and policy decisions are being made at the national level as a "non-doctoring profession."

Each year, more students entering the master's degree program at USC continue directly into our post-professional clinical doctorate (OTD) program. In 2008, less than 50% of incoming students pre-intended to continue into the post-professional OTD program, compared to 70% of the class of 2013. Every year USC graduates more students with OTDs, and with a larger percentage of the workforce holding advanced degrees, the OTD will increasingly become the standard for advanced clinical practice. Additionally, new accreditation standards require 50% of occupational therapy faculty to possess doctoral level degrees. Universities are recruiting many OTD graduates to fill these vacancies

and more academic institutions (public, private, and for-profit organizations) are developing their own OTD programs.

The overall aim of the curriculum transformation effort was to create a Chan-branded "gold standard," intellectually challenging but highly focused program, aligned with AOTA's Accreditation Council for Occupational Therapy (ACOTE) standards, that effectively develops the professional skills and student confidence required in today's local and global health care environment. Key components of this entry-level OTD program will be grounded in the occupational justice and inclusive pedagogy framework, where justice, equity, diversity, and inclusion are threaded throughout the program as theory and practice are critically analyzed and applied.

Scope of the Curriculum

In order to realize our vision to l*ead innovation to transform health and well-being through meaningful occupations,* the Chan Division intends to graduate entry-level doctors of occupational therapy who are experts in occupation; reflective, responsive and engaged professionals; practice scholars; global citizens, and visionaries shaping change. Relating this to occupational therapy program preparation and to our curriculum specifically, we strive to develop professionals who are competent in the core knowledge and skills required for current practice settings, and who also understand holistically the complex nature of occupation and what it takes for people to flourish as occupational beings. Occupational therapy practitioners are now presented with more opportunities to not only participate on interdisciplinary teams, but also to lead them. To be maximally effective, they need to be nimble thinkers, innovative, and articulate, well-spoken advocates who convey the unique value of occupational therapy. They must overcome reticence and instead become comfortable in voicing their perspectives, and persuading others, in even the most intimidating of contexts. They must be credible, fully informed, and facile with the evidence that supports their practice.

Our graduates are well-prepared to *optimize people's engagement in the ordinary and extraordinary activities of life* through their deep and broad understanding of the complex nature of occupation and its relationship to health and well-being, and their knowledge and skills to address inequities in participation. We prepare students to realize this vision through a pervasive focus on our identified curriculum threads of occupational science, collaboration, knowledge mobilization, global perspectives and connections, and innovation. Justice, equity, diversity and inclusion serve as a unifying thread throughout the curriculum, supporting students to recognize and dismantle oppression as they learn to transform health and well-being through occupation, in practice and in their communities.

The USC entry-level occupational therapy doctorate program curriculum accomplishes these aims through a blend of **foundational education in occupation and occupational science, practice immersion courses, thread courses, targeted fieldwork, specialty electives and/or options for specialty pathways leading to advanced practice or certifications** and **culminates with a doctoral capstone experience.** An overview of the content of the curriculum follows a discussion of our curriculum threads.

**Figure 5. Model of the Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy
Entry-OTD Curriculum**
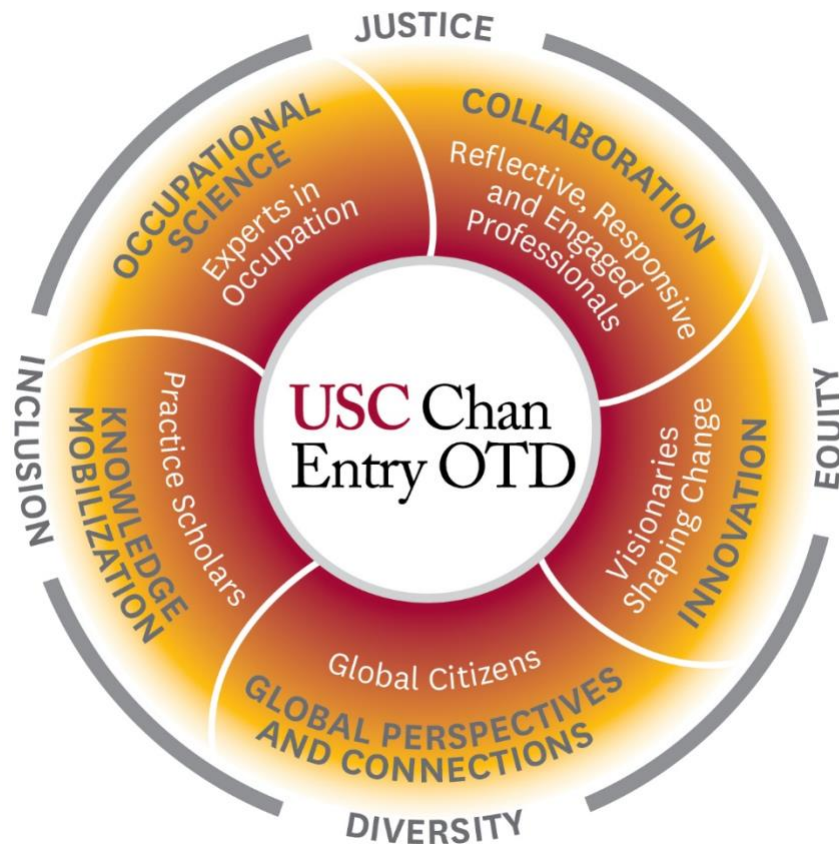
Program Outcomes and Associated Curriculum Threads

The core of our curriculum design is depicted in the model above (Figure 5). The model highlights
the entry-OTD program outcomes and associated curriculum threads. Program outcomes reflect
the educational goals of the program, or the attributes graduates possess upon completion. These
outcomes are achieved through associated curriculum threads representing thematic content that
is woven throughout the course scope and sequence and reflected in learning activities and
assessment. The threads are **occupational science, collaboration, knowledge mobilization, global
perspectives and connections,** and **innovation,** each of which is influenced by a universal thread of
justice, equity, diversity and inclusion. These threads permeate all courses and are also given
particular emphasis in a set of courses we specifically refer to as "thread courses." These thread
courses relate to all areas of occupational therapy practice and are presented in more detail below
under Content of the Curriculum.   Our curriculum threads inform our learning activities and
assessment measures and are designed to empower the USC occupational therapy graduate to be
a generalist practitioner who is an **expert in occupation;** a **reflective, responsive and engaged
professional;** a **practice scholar;** a **global citizen;** and a **visionary shaping change**.

Program Outcome: Experts in Occupation
Curriculum Thread: Occupational Science

Central to our curriculum, and woven into all curricular and co-curricular experiences, are understandings about the multi-faceted and complex nature of human occupation, its impact on individual and collective health and well-being, and its therapeutic utility and value. These understandings undergird occupational therapists' professional identity and capacity for effective practice. As previously described in our statement of philosophy, at USC, these complex understandings are informed by the discipline of occupational science. Our curriculum includes coursework specifically addressing the meanings and dynamics of occupation and activity, including the interaction of domains of occupation, performance skills, performance patterns, activity demands, environmental and personal contexts, and client factors; critical appraisals and applications of occupational science research findings; and historical and contemporary discourses within and about occupational science; all of which are also applied to building students' necessary knowledge and skills for current and emergent occupational therapy practice.

Students also participate in occupational self-analyses including self-reflection upon one's own occupational profile and exploration of occupation's impact upon health, well-being, identity and personal and social transformations. These learning activities are grounded in personal experiences, and shape our students' complex understandings of occupation and the self. Through a pervading perspective on occupation-centered practice and the infusion of research evidence and findings, the combined coursework is designed to develop professional leaders who will advance occupational therapy and occupational science.

"Thread courses" with concentrated focus on occupational science are: Foundations of Occupation: Creativity, Craft, and Activity Analysis; Theoretical Foundations of Occupational Science and Occupational Therapy; Foundations of Occupation: Kinesiology in Daily Life; Foundations of Occupation: Sensory Processing in Daily Life; Foundations of Occupation: Neuroscience in Daily Life; Applying Occupational Science: Health Promotion and Primary Care; and Applying Occupational Science: Lifestyle Redesign. Finally, the importance of occupation as both ends and means of the occupational therapy process is addressed in the practice immersion courses: Adult Physical Rehabilitation; Mental Health; Pediatrics; and Productive Aging and Geriatrics.

Program Outcome: Reflective, Responsive, and Engaged Professionals
Curriculum Thread: Collaboration

Students will be engaged in the continuous process of self-reflection on their capacities and diverse experiences to enhance their therapeutic skills, develop a strong professional identity, and provide compassionate and culturally-responsive care. In order to do this, practicing self-recognition will be prioritized so that students develop an awareness of their personal biases, positionality, and privilege. Nicholls and Elliot (2019) advocate for more reflexivity in occupational science and occupational therapy, even if it is challenging, particularly when it comes to acknowledging shame about racism and mourning losses over our ideal selves. Our students will embrace humility and service, and foster equity within and through their practice. They will be deeply committed to understanding the lived experiences, strengths, and motivations of the people with whom they interact in order to foster a collaborative process of pursuing and achieving person-centered,

occupation-based goals. They will be responsive to the situated barriers, needs, opportunities, and constraints of contexts that influence health, well-being, and social participation. They will learn how to do what it takes to recognize the capabilities of others and shift their perspectives from being the expert to being a collaborator in care.

It is important for occupational therapy and occupational science to consider different models or approaches when working with diverse people with various abilities and disabilities to focus on a person or group's capability and less on deficits. There is a clear connection between occupational equity and occupational rights, informed by existing literature on human capabilities (Hammell, 2020). A more critical perspective of occupation is emerging through the lens of the capabilities approach, originally developed by Amartya Sen in 1979, and further adapted by Nussbaum in 2000. It appeals to interdisciplinary scholars and students alike, although originally intended to answer questions related to social justice, economics, social sciences, and public affairs, in addition to the study of welfare states reform and issues related to the global South or North.

The capabilities approach links development, quality of life, and freedom for human beings with key ideas about capabilities, functioning, agency, human diversity, and public participation in generating valued capabilities (Walker, 2005). In its simplest form, the capabilities approach, "refers to what people are actually able to be and do, rather than to what resources they have access to. It focuses on developing people's capability to choose a life that they have reason to value" (Walker, 2005, p. 103). Walker argues that freedom and capabilities go hand-in-hand, and in order to develop capabilities, one must have the freedom to do so. The approach highlights that people should have the opportunity to make meaningful choices from a range of options, and have the freedom to choose a life that they value. This is an approach that aligns with those clinicians who, "seek to address inequalities of occupational opportunity and inequities in participation" (Hammell, 2015, p. 78). This is relevant for our students, who are studying to become reflective, responsive and engaged professionals.

Our students will value ethical practice, cultural responsiveness, and inclusiveness. In addition to working with people, groups, and populations, our students will learn to navigate the complexities of the systems in which they will work and then proceed to work towards systemic change with people and their communities. "Thread courses" with a concentrated focus on collaboration are: Reflections in Practice, Communication in Practice, Facilitating Transformational Change in Practice, as well as the Practice Immersions in Adult Physical Rehabilitation, Mental Health, Pediatrics, and Productive Aging and Geriatrics.

Program Outcome: Practice Scholars
Curriculum Thread: Knowledge Mobilization

Contemporary clinical reasoning in occupational therapy and throughout the medical community is informed by evidence-based decision-making (Law, 2008). Evidence-based decision-making is a dynamic process that is congruent with the Chan Division's overall mission to develop leaders by empowering students to establish themselves as self-directed, life-long learners. A definition of evidence-based medicine, attributed to David Sackett and his colleagues (1996; 2000), portrays a process in which the best available research findings are integrated with clinical expertise and the patient or client's values, preferences, and circumstances (Hoffmann, Bennett, & Del Mar, 2017; Melnyk & Fineout-Overholt, 2010). Coursework and classroom activities are structured to develop and practice skills required in evidence-based service provision, namely: review of research, self-

directed learning, and experiences in critical thinking and problem solving (Forrest & Miller, 2001).

Deliberate selection of textbooks and other course readings encompassing evidence for intervention decisions and methods, as well as in-class analysis of methods that are less supported, lay the groundwork for evidence-based practice. Our curriculum emphasizes the importance of all types of research for clinical decision-making and teaches students to critically appraise and match research findings to specific clinical questions. Heavily influenced by the work of Gabbay and Le May (2011), who used ethnography to study the "messy world of practice" in an interdisciplinary primary care setting, we view evidence-based practice as integrally tied to the clinical reasoning of an individual clinician who must, "blend formal, informal, tacit and experiential evidence into his or her main signposts for action" (p.xiii). Accordingly, the evidence-based practice process is also supported by the process of professional self-reflection (Pollock & Rochon, 2002). Students in the entry-OTD program are provided with multiple opportunities to develop their skills and habits as self-reflective practitioners by beginning as self-reflective students.

As trained critical thinkers and lifelong learners, our students will engage in all phases of knowledge mobilization, including knowledge generation, knowledge dissemination, knowledge uptake, and knowledge implementation (Phipps et al., 2016). By proficiently drawing upon scientific evidence, qualitative and quantitative approaches, and pragmatist theories, they will inform their clinical reasoning while engaging in best practices, supporting positive and equitable outcomes within diverse client populations, and driving both innovative program evaluation and quality improvement initiatives. Students will demonstrate competence in the primary tenets of knowledge mobilization, including a commitment to the development of meaningful and bi-directional partnerships with external stakeholders such as community members, clients, and other health professionals in order to inform and guide both clinical practice and engaged research. Through this process, they will facilitate the adoption and integration of innovative discoveries and interventions to shape practice and policy for broader societal impact.

"Thread courses" with concentrated focus on knowledge mobilization include Practice Scholar 1: Applying Quantitative Evidence; Practice Scholar 2: Applying Qualitative Evidence; Practice Scholar 3: Synthesizing Evidence and Practice Needs; and Practice Scholar 4: Mobilizing Knowledge to Advance Practice.

Program Outcome: Global Citizens
Curriculum Thread: Global Perspectives and Connections

Our curriculum will prepare students to address the occupational and health needs of our increasingly global communities, which can be found both within local contexts in the United States, as well as around the world. Throughout the curriculum, students will build their capacities as "global citizens," which entails both a critical awareness of the wider world and one's positionality within it (Simaan, 2000; Lattanzi, 2012), as well as a commitment to act for the benefit of all societies and not solely one's own. (United Nations, n.d.). Global citizenship is conceptualized as, "awareness, caring, and embracing cultural diversity while promoting social justice and sustainability, coupled with a sense of responsibility to act" (Reysen & Katzarska-Miller, 2013, p. 858) and is grounded in an understanding of a "shared humanity" (Goddard & Sinclair, 2008). In this light, our students will build their understanding of the shared responsibilities of individuals, groups, communities, and societies to enable occupational wellbeing and justice in the world.

The curriculum thread of "global perspectives and connections" is interwoven throughout the coursework across all three years of the program. Our curriculum prominently features occupational therapy and occupational science theories and models relevant to the lived experiences of diverse global populations. Students have opportunities to apply these concepts in their assignments in which they may analyze a client case, occupation, or context from a culturally diverse lens. Importantly, the curriculum is intentional in integrating the perspectives and scholarship originating from non-Western and non-English speaking communities, and will orient our students to engage in decolonizing their learning and practice through global connections (Simaan, 2020; see a fuller discussion of decolonization in Universal/Unifying Thread: Justice, Equity, Diversity and Inclusion). Course readings and materials are selected to reflect a diversity of viewpoints and highlight scholars from around the world.

The curriculum also provides opportunities for students to build alliances and collaborations with members of global communities (both locally in the Los Angeles metropolitan area and internationally) to advocate for occupational justice and policy solutions that address complex global health issues. Students develop skills in building sustainable global partnerships while employing cultural humility and ensuring true bi-directional dialogue and respect for the wisdom of each partner (Hammell, 2015). Opportunities include occupational science seminars with international partners, fieldwork and doctoral capstone experiences both domestic and abroad, and interdisciplinary workshops. Students have access to two unique offices within the Division, China Initiative and Global Initiatives, which provide students with mentorship and avenues to build global partnerships.

"Thread courses" with a concentrated focus on global perspectives and connections include: Theoretical Foundations of Occupational Science and Occupational Therapy; Reflection in Practice; Communication in Practice; Facilitating Transformational Change in Practice; and Visionaries: Global Health Systems, Policy, and Advocacy.

Program Outcome: Visionaries Shaping Change
Curriculum Thread: Innovation

Innovation and informed risk-taking are lasting core values of the University and are heavily emphasized in the 2018 USC Strategic Plan. The USC Stevens Center for Innovation also notes that innovation can come from the arts and social sciences, as well as engineering or medicine. It can take the shape of new products or services; new ventures ranging from capitalized startups to non-profit organizations; as well as new organizational models. Innovation is not just the development or implementation of new technologies, software, or hardware, but instead can be any groundbreaking approaches or advancement that change the ways we live, work, and play. Innovation is central to USC's "scholarship with consequence" pillar described in the 2018 Strategic Plan.

According to Anthony (2012), the potential for innovation lies within every individual. We concur with this dynamic perspective of people, organizations, and communities, and therefore, innovation will be a requirement for success and sustainability for all. We believe that our students are uniquely suited to ideate, create, and implement new innovations to optimize people's engagement in the ordinary and extraordinary activities of life.

We identify innovation as a core curricular thread because of this imperative, and because of the

key concepts which innovation combines. Anthony (2012) defines innovation as simply, "something different that has impact" (p. 18) when creativity yields action and implementation. In other words, innovation is not in thinking creatively; it is in doing or acting upon one's creative ideas. Making the leap from thinking to doing involves risk-taking, a characteristic also mentioned in Clark's (2010b) review of literature on power and confidence in relation to occupational therapy. Clark stressed the connections between practice, determination, risk-taking, and developing confidence. Risk-taking is particularly relevant to knowing and expressing one's capacities for occupation.

Innovation occurs through the generation of new concepts, protocols, and frameworks that will change how we conceptualize occupation and its role in promoting well-being. As such, fostering innovative thinking has a critical role in our curriculum, and we strive to develop students who are innovative and forward-thinking, and who will shape the futures of their local, national, and international communities.

Serdyukov (2017) proclaims that the need for educational innovation has become acute, and increased change in educational innovation is necessary. Innovation requires three major steps starting with an idea, moving to its implementation, and then analyzing its outcomes. In education, innovation takes many forms including new pedagogical theory, methodological approach, instructional tool, or institutional structure, all of which can produce a significant change in teaching and learning.

As noted above, new methodological approaches can foster innovation in educational settings. Teleteaching is one example of such an innovation which has steadily gained traction in the past decade. Crampsey (2013) describes teleteaching as a collective term pertaining to the shared concepts of telemedicine, telerehabilitation, and telehealth. Teleteaching is a type of blended learning which incorporates the use of electronic media with the traditional classroom set-up (Crampsey, 2013). This approach is cost-effective and accessible to many, and once the necessary technology is acquired, enables increased student engagement and participation. Teleteaching encourages critical thinking and clinical reasoning, which are concepts that need to be applied through active learning. The opportunities afforded by teleteaching have become more apparent than ever, as a result of the COVID-19 pandemic. Enfolding such innovations into our curriculum, as the Chan Division has done, has been critical to meeting the increased demand for providing remote-based services that meet society's changing needs, during the pandemic and beyond.

"Thread courses" with concentrated focus on innovation include: Visionaries: Innovation and Technology to Promote Occupational Engagement; Visionaries: Global Health Systems, Policy, and Advocacy; Advanced Clinical Application: Neurocognition and Occupation: Advanced Clinical Applications: Medical Complexity and Occupation; Teaching and Learning Seminar: Becoming a Fieldwork Educator; and Pedagogy in Higher Education: Seminar and Practicum.

Universal/Unifying Thread: Justice, Equity, Diversity and Inclusion

Justice, equity, diversity and inclusion comprise a unifying thread across the curriculum. This thread prepares students to build their reflective capacity, and to recognize oppression and take action against it in partnership and collaboration with individuals, communities and organizations, in order to promote justice, equity, and inclusion for diverse populations. The thematic content for this thread is interwoven throughout all courses and contributes explicitly to all of the program

outcomes. Each program outcome explicitly addresses forms of oppression and inequities intentionally in at least one student learning objective (Hagopian et al., 2018).

Ideological, institutional, interpersonal and internalized oppression negatively impact individuals' abilities to choose and participate in occupation. These include systemic racism, ethnocentrism, sexism, heterosexism, ableism, lack of access, classism, unjust laws and inequities, among other forms of oppression (Hammel, 2016). Occupational therapy and occupational science have developed within a primarily White, individualistic, Western, middle class, able-bodied and Judeo-Christian cultural system and may unintentionally reproduce the above forms of oppression (Dirette, 2018; Grenier, 2020; Aldrich et al., 2017; Gerlach et al., 2018). Decolonizing practice and education can support practitioners and educators to counter the assumptions that may unintentionally oppress individuals from non-Western cultures or structurally marginalized groups. Decolonizing entails incorporating (new) concepts and examples from beyond the Anglophone perspective and academic arena (Simaan, 2020) and, "acknowledging, challenging, and unlearning the dominance of Western ways of knowing about occupation" (Gibson & Farias, 2020, p. 445). It requires unsettling assumptions about what occupations or types of participation are healthful or normative, directly addressing the conditions that shape lived realities, and interrogating why particular types of knowledge are not included in curriculum and practice (Gibson & Farias, 2020; Mahoney & Kiraly-Alvarez, 2019).

The justice, diversity, equity and inclusion thread will prepare students to dismantle oppression and decolonize occupational therapy through a four-tiered approach based on the Social Justice Standards (Learning for Justice, 2018): strengthening reflective capacity and ability to recognize oppression, seeing capacity in others, empowering others, and taking action in partnership.

The first step involves strengthening students' reflective capacity so that they are aware of and able to articulate their own positionality, intersectionality, explicit and implicit biases, and privilege (Sue, et al., 2009), in addition to any shame they may have surrounding their experiences of racism or internalized oppression (Nicholls & Elliot, 2019). Students must be "active participants" in the learning process in order to engage in this work (Gat & Ratzon, 2014; Grady, Brungardt & Doll, 2018). Group discussions and small group work will be utilized to facilitate reflection and dialogue (Kumagai & Lypson; 2009). Reflective journaling combined with interactive and discussion-based learning activities will support students to understand themselves, recognize differences between themselves and others, and be able to recognize forms of oppression-- ideological, institutional, interpersonal and internalized (Brown et al., 2011; Grady et al., 2018; Jackson et al., 2018; Tervalon & Murray-Garcia, 1998; Trentham et al., 2007). Students will be supported to both reflect on their own experiences and critique structural processes and conditions (Emery-Whittington & Te Maro, 2018; Gibson & Farias, 2020). Therefore, this step will also involve learning with communities that have been historically colonized/marginalized to understand how structural forces marginalize groups and communities, as well as how communities resiliently adapt (Zafran et al., 2020).

Second, this thread will support students to become aware of the strengths, assets, and resources of individuals, communities, and populations. This part may involve decolonizing their own way of looking at the world, so that they do not focus on deficits but rather see capacity in others (Simaan, 2020). This will also involve developing the understanding that individuals have different conceptions of reality, truth, and the meaning of occupation (Iwama, 2003), and questioning assumptions regarding the value of certain constructs such as competency and independence (Grenier, 2020).

The third step involves gaining tools to empower others, whether that is individuals, communities, or populations (Hyett, Kenny & Dickson-Swift 2019). Here, we use the definition of empowerment shared by Hammel (2016) and the World Bank (2014) that involves strengthening, "people's capabilities: their freedom—or opportunity—to choose what they wish to do and to be and their ability to act on these wishes" (Hammel, 2016, p. 285). People are not unable to take action due to a lack of ability, but rather, because of "restricted opportunities" (Hammel, 2016, p. 283). This approach to empowerment acknowledges that, "cultural values and expectations and structural barriers, such as poverty, racism, and sexism, determine that, for many, choices are severely constrained" (Hammel, 2016, p. 284). Students will learn to assess what people are able to do, what their circumstances currently allow, and then support individuals and communities' assets and capabilities to take action (Hammel, 2016).

Decolonizing practice must be accompanied by training in anti-racist or "oppression busting" strategies so reflection and critique can be connected to action (Gibson & Farias, 2020). This thread will support students to partner or collaborate with others to enact broader systemic changes to dismantle oppression, not through assuming the role of expert who can solve intractable problems on their own, but through the role of collaborator, partner and life-long learner. Through this thread, students will strengthen their ability to question their own perspective; listen to individuals, communities and populations; and be a part of dismantling oppression, and supporting justice, equity and inclusion for diverse communities.

Content and Sequence of the Curriculum

Prerequisite Courses:
Sociology or Cultural Anthropology, Abnormal Psychology,
Developmental Psychology or Human Development,
Human Anatomy with Laboratory, Human Physiology, Medical Terminology
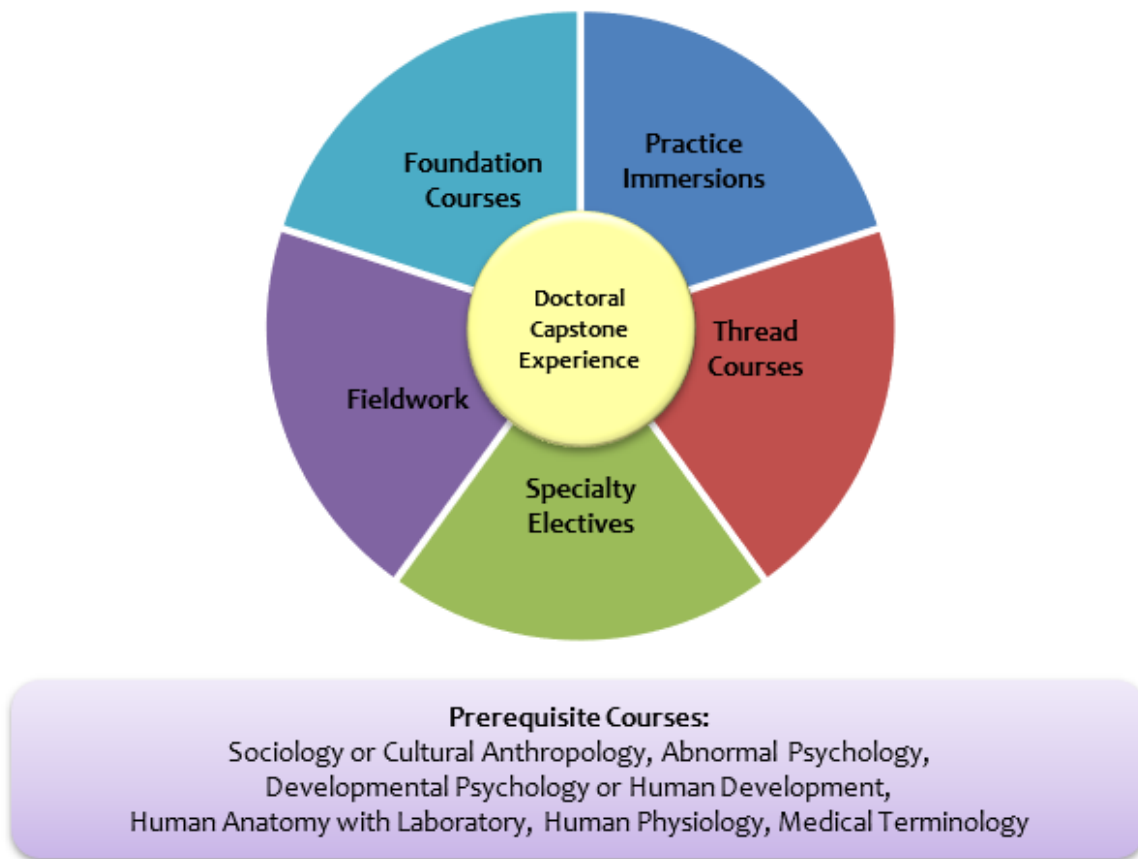
Figure 6. Components of the Chan Division Entry-Level Occupational Therapy Clinical Doctorate Program Curriculum

Key components of our curriculum design are depicted in Figure 6 above. Each component is detailed below.

Prerequisite Courses

Courses prerequisite to the professional program are carefully selected to provide introductory knowledge associated with our curriculum threads. Consequently, they also support students' opportunities to build upon prior knowledge. Related to our curriculum thread of *occupational science,* students must take courses Sociology or Anthropology, Abnormal Psychology, (for which General Psychology is typically required), and Developmental Psychology or Human Development. Analysis of occupation in current practice settings, is informed by preparation in Human Anatomy with Laboratory and Human Physiology. Medical Terminology readies our students to enter Level I practice settings early in their professional preparation, jump-starting their knowledge and skills for generalist practice and, as a result, accelerated transition into *collaborative* roles.

Foundation Courses

Students in the professional program start with foundational courses which begin to develop their

understanding of the complex nature of occupation. These begin with the Theoretical Foundations of Occupational Science and Occupational Therapy; Foundations of Occupation: Creativity, Craft and Activity Analysis; Foundations of Occupation: Kinesiology in Daily Life; Foundations of Occupation: Neuroscience in Daily Life in the first semester of the entry-level OTD program; and Foundations of Occupation: Sensory Processing in Daily Life in the second semester.

Practice Immersions

Following and building upon these foundational courses, students begin their rotations through practice immersion courses meant to develop mastery through immersion, as described in our learning philosophy. The entire class is divided into four rotation groups. Over four semesters, each rotation group takes one practice immersion course per semester in adult physical rehabilitation, mental health, productive aging and geriatrics, and pediatrics. Each of these intensive courses combines classroom activity, team-based learning, lecture, and experiential learning laboratories, along with corresponding weekly Level I fieldwork, to allow students to focus on one area of practice at a time and to immediately integrate classroom learning with practical application in order to develop competence in the knowledge and skills required for evaluation and intervention in each practice setting.

Thread Courses

The practice immersion courses are taken concurrently with thread courses that further develop essential professional knowledge and skills related to all practice areas. These courses reflect and underscore key curriculum threads which are simultaneously woven through all courses: occupational science; collaboration; knowledge mobilization; global perspectives and connections; innovation; and justice, equity, diversity, and inclusion.

These thread courses are: Foundations of Occupational Science and Occupational Therapy; Foundations of Occupation: Creativity, Craft, and Activity Analysis; Foundations of Occupation: Kinesiology; Foundations of Occupation: Neuroscience; and Foundations of Sensory Processing: Neuroscience and Behavior; Reflection in Practice; Communication in Practice; Facilitating Transformational Change in Practice; Practice Scholar 1: Applying Quantitative Evidence; Practice Scholar 2: Applying Qualitative Evidence; Practice Scholar 3: Synthesizing Evidence and Practice Needs; Practice Scholar 4: Mobilizing Knowledge to Advance Practice; Visionaries: Global Health Systems, Policy, and Advocacy, Visionaries: Innovation and Technology to Promote Occupation(see Figure 7 below for an outline of curriculum threads and thread content).

Specialty Electives and Graduate Certificates

Throughout the entry-level OTD program, students may take optional specialty elective courses to expand their knowledge and advance their skillset. Students select from advanced clinical courses in topics including: Hand Rehabilitation, Advanced Practice in Physical Agent Modalities, Enhancing Motor Control for Occupation, Ergonomics, Sensory Processing and Sensory Integration, and Dysphagia Across the Lifespan, among others. Students may also choose to work towards a graduate certificate in Foundations of Lifestyle Redesign ® or Sensory Processing and Sensory Integration, while completing their clinical doctorate degree.

Fieldwork

Fieldwork experiences are central to the design of the professional program curriculum and, as previously described, are threaded throughout to provide students with exposure to a diverse array of practice settings as well as multiple opportunities to apply and enhance learning. Level I fieldwork is a component of each practice immersion course (Adult Physical Rehabilitation, Mental Health, Productive Aging and Geriatrics, and Pediatrics) in which each student is assigned to a fieldwork setting related to the practice area. These experiences emphasize exposure to settings and populations as well as the application of classroom learning in the practice context. Students begin Level I fieldwork during the second or third week of each immersion course (depending on the semester) and participate at the site one day a week for 9 weeks.

In addition to these four Level I fieldwork experiences, students typically complete the required minimum 24 weeks of Level II fieldwork in two distinct practice areas. The first Level II fieldwork will occur in the summer of year 2 as one 12-week full-time experience. The second Level II fieldwork will be completed part-time in two semesters during the fall and spring of year of 3, while enrolled in several thread courses and engaging in the doctoral capstone preparation work which will segue into the doctoral capstone experience in the summer of year 3. Figure 8 below displays the timing and integration of Level I and Level II fieldwork experiences throughout the curriculum for each group rotation.

Doctoral Capstone

The impact of our students' doctoral capstone work is shaped not only by what they do and how they think, but ultimately who they become and the actions they take. While not explicitly tied to the doctoral capstone, students' commitment and ability to influence meaningful change is intricately tied to their development as **Experts in Occupation; Reflective, Responsive and Engaged Professionals; Practice Scholars; Global Citizens; and Visionaries Shaping Change** through thread courses that foster self-reflection, critical perspectives, collaboration, innovation, and advocacy to address health disparities and other forms of sociocultural and socioeconomic oppression that limit opportunities for engagement in meaningful, purposeful, satisfying and health-promoting occupation. The doctoral capstone experience is a culmination of the first two and a half years of the program, and more specifically, the two previous semesters (fall and spring of year 3). The two semesters leading into the doctoral capstone experience (DCE) intentionally house two part-time Level II fieldwork experiences at the same site as the DCE for building confidence, collaboration, expertise, and investment in the site and population served.

Figure 7. Entry-OTD Curriculum Threads

Curriculum Threads: 3-year Progression			
Curriculum Threads	**Year 1**	**Year 2**	**Year 3**
Occupational Science	• Describe and outline foundational concepts of occupational therapy and occupational science. • Complete an occupational self-analysis; reflect upon one's own occupational profile, and explore relationships between occupation and well-being, identity and health. Analyze occupations for their therapeutic properties. • Integrate occupational therapy and occupational science principles in various practice contexts. • Begin to explore applications of occupational science to Lifestyle Redesign.	• Explore applications of occupational science to health promotion and primary care. • Continue to integrate occupational therapy and occupational science principles in various practice contexts, and advanced applications for neurocognition and numerous medical complexities. across the life spen • Apply occupational science principles, research evidence, and practice-based evidence to support clinical reasoning.	• Plan for the direct application of broad concepts of occupation and occupational science into deliverables relevant to particular populations within specific contexts. • Integrate occupational science concepts/perspectives into dialogues within a community of practice. • Apply knowledge of occupational therapy and occupational science to the design and implementatoin of a doctoral capstone project. • Advocate for the therapeutic benefits of using occupation as a modality as a member of an interdisciplinary team.
Collaboration	• Strengthen one's capacity for self-reflection. • Increase awareness of personal biases, positionality, and privilege. • Engage in community building circles and develop skills for connecting, partnering, and collaborating with others. • Begin to develop a strong professional identity.	• Continue to refine communication skills and therapeutic use of self. • Provide compassionate care with cultural humulity in practice contexts and immersions. • Continue to develop one's professional identity, including the continued development of skills addressing compassionate and culturally-responsive care.	• Actively engage in reflective work within a community of practice, focusing on ethical practice, cultural responsiveness, and inclusiveness. • Collaborate and partner with stakeholders to design and implement a doctoral capstone project. • Establish one's professional identity. • Demonstrate a deep commitment to appreciating the lived experiences, strengths, and motivations of the people with whom students will interact, in order to foster a collaborative process of pursuing and achieving person-centered occupation-based goals. • Respond to the situated barriers, needs, opportunities, and constraints of the contexts that influence health, well-being, and social participation during the doctoral capstone experience. • Navigate the complexities of the systems in which they will work and then proceed to work towards systemic change with people and
Knowledge Mobilization	• The curriculum emphasizes the importance of all types of research for clinical decision-making and teaches students to critically appraise and match research findings to specific clinical questions, particularly in the practice scholar courses that focus on quantitative and qualitative evidence. • Become self-reflective students, as part of the evidence-based practice process. • Describe key concepts of knowledge mobilzation principles • Analyze and critique the validity and usefulness of both qualitative and quantitative research studies, including the design and methodology. • Use scholarly literature and data from the individual	• Utilize national and international resources, including appropriate literature within and outside of occupational therapy and occupational science, for consideration in clinical decision-making. • Continue to use scholarly literature to make evidence-based decisions within a variety of fieldwork practice contexts, and advanced clinical application courses.	• Conduct a comprehensive contextual practice analysis that explores the factors influencing practice context. • Synthesize research evidence for a population's occupational needs and best practices to meet those needs. • Design and implement a program evaluation/quality improvement plan at the doctoral capstone site. • Demonstrate competence in the primary tenets of knowledge mobilization, including a commitment to the development of meaningful and bidirectional partnerships with external stakeholders in order to inform and guide both clinical practice & engaged research during the third year, leading to the doctoral capstone experience.
Global Perspectives and Connections	• Develop a global perspective through a review of international literature and by utilizing a global lens within dialogues. • Develop and demonstrate cultural humility within practice context and immersions. *Identify occupational and health needs of local and global communities.	• Critically examine local and global cultures and their influence on health, well-being, and management of care. • Explore international and intercultural issues, including those of non-Western and non-English-speaking cultures, within course readings, discussions, and dialogues related to occupational therapy and occupational science. • Consider and appreciate cultural diveristy and apply culturally relevant intervations within a variety of pratice contexts *Students will continue to build their capacities to embrace cultural diversity and build their understanding of "shared humanity and responsibilities" during clinical rotations (Level II	• Evaluate and address global and diverse needs within a practice context, whether in the United States or internationally. • Participate in international exchange experiences. *Students will continue to build their capacities as "global citizens" requiring both a critical awareness of the wider world and one's positionality within it.
Innovation	• Identify best practice and emerging trends in the use of technology across practice settings. • Practice innovative thinking through the intentional creation of occupational therapy interventions. • Develop one's capacity for innovative approaches and problem solving by navigating novel clinical scenarios, practice context, and immersions. • Collaboratively engage in various groups, working with diverse peers, which requires risk-taking and provides opportunities for leadership roles.	• Identify and implement design principles and practices that support the development of new and existing technologies. • Understand and apply principles of systems thinking to current practice environments where occupational therapy is provided. • Develop critical advocacy skills for practice advancement and change. • Design and apply innovative solutions, technology, and occupational therapy interventions across different settings.	• Engage in creative problem solving, innovative program design, and critical forward thinking required to design and implement a doctoral capstone project. • Implement a doctoral capstone project that build on concepts, protocols, and frameworks that define occupation in a novel way and emphasize its role in promoting well-being. • Explore the the art and science of teaching, with a focus on innovations and best practice in how to use various instructional methods including teleteaching, flipped classrooms, and student-centered learning approaches
JEDI (Justice, Equity, Diversity, and Inclusion)	• Articulate and reflect on one's identity (including intersectionality, positionality, and privilege) and develop compassion for one's self. • Evaluate values and biases, as well as their impact on developing therapeutic use of self and ethical decision making. • Describe the value of diversity within relationshops and within the profession.	• Identify the strengths, assets and resources of individuals, communities and populations. • Develop skills to critique structural processes. • Evaluate systems of oppression and how structural inequities maintain and create oppression within systems and could limit access to occupation and health.	• Take action related to decolonizing practice and disrupting oppression. • Engage in microinterventions to combat aspects of systemic oppression. • Partner with individuals, communities and populations to address barriers to access and participation, in order to take action. • Reflect on personal and professional values and create a personalized vision for addressing justice, equity, diversity and inclusion in future practice and professional life.

Figure 8. Rotations: Practice Immersions plus Thread Courses plus Fieldwork (all schedules subject to change)

		Rotations: Practice Immersions + Thread Courses + Fieldwork							
		Semester 1	Semester 2	Semester 3	Semester 4	Semester 5	Semester 6	Semester 7	Semester 8	Semester 9
Rotation A	Theoretical Foundations of Occupational Science and Occupational Therapy Foundations of Occupation: Creativity, Craft and Activity Analysis Kinesiology in Daily Life Neuroscience in Daily Life Reflection in Practice	OT 501*** Adult Physical Rehabilitation Practice Scholar: Applying Quantitative Evidence Communication in Practice Foundations of Occupation: Sensory Processing in Daily Life	OT 502*** Mental Health Practice Scholar: Applying Qualitative Evidence Facilitating Transformational Change in Practice Applying Occupational Science: Health Promotion and Primary Care	OT 503*** Pediatrics Visionaries: Innovation and Technology to Promote Occupation Visionaries: Global Health Systems, Policy, and Advocacy Applying Occupational Science: Lifestyle Redesign®	OT 504*** Productive Aging and Geriatrics Advanced Clinical Applications: Neurocognition and Occupation Advanced Clinical Applications: Medical Complexity and Occupation	Level II Fieldwork	Level II FW (Part-Time) In Different Practice Area Doctoral Capstone Preparation: Seminar 1 Practice Scholar: Synthesizing Evidence and Practice Needs Teaching and Learning Seminar: Becoming a Fieldwork Educator	Level II FW (Part-Time) In Different Practice Area Doctoral Capstone Preparation: Seminar 2 Practice Scholar: Mobilizing Knowledge to Advance Practice Pedagogy in Higher Education: Seminar and Practicum	Doctoral Capstone Experience with Seminar
Rotation B	Theoretical Foundations of Occupational Science and Occupational Therapy Foundations of Occupation: Creativity, Craft and Activity Analysis Kinesiology in Daily Life Neuroscience in Daily Life Reflection in Practice	OT 502*** Mental Health Practice Scholar: Applying Quantitative Evidence Communication in Practice Foundations of Occupation: Sensory Processing in Daily Life	OT 503*** Pediatrics Practice Scholar: Applying Qualitative Evidence Facilitating Transformational Change in Practice Applying Occupational Science: Health Promotion and Primary Care	OT 504*** Productive Aging and Geriatrics Visionaries: Innovation and Technology to Promote Occupation Visionaries: Global Health Systems, Policy, and Advocacy Applying Occupational Science: Lifestyle Redesign®	OT 501*** Adult Physical Rehabilitation Advanced Clinical Applications: Neurocognition and Occupation Advanced Clinical Applications: Medical Complexity and Occupation	Level II Fieldwork	Level II FW (Part-Time) In Different Practice Area Doctoral Capstone Preparation: Seminar 1 Practice Scholar: Synthesizing Evidence and Practice Needs Teaching and Learning Seminar: Becoming a Fieldwork Educator	Level II FW (Part-Time) In Different Practice Area Doctoral Capstone Preparation: Seminar 2 Practice Scholar: Mobilizing Knowledge to Advance Practice Pedagogy in Higher Education: Seminar and Practicum	Doctoral Capstone Experience with Seminar
Rotation C	Theoretical Foundations of Occupational Science and Occupational Therapy Foundations of Occupation: Creativity, Craft and Activity Analysis Kinesiology in Daily Life Neuroscience in Daily Life Reflection in Practice	OT 503*** Pediatrics Practice Scholar: Applying Quantitative Evidence Communication in Practice Foundations of Occupation: Sensory Processing in Daily Life	OT 504*** Productive Aging and Geriatrics Practice Scholar: Applying Qualitative Evidence Facilitating Transformational Change in Practice Applying Occupational Science: Health Promotion and Primary Care	OT 501 *** Adult Physical Rehabilitation Visionaries: Innovation and Technology to Promote Occupation Visionaries: Global Health Systems, Policy, and Advocacy Applying Occupational Science: Lifestyle Redesign®	OT 502*** Mental Health Advanced Clinical Applications: Neurocognition and Occupation Advanced Clinical Applications: Medical Complexity and Occupation	Level II Fieldwork	Level II FW (Part-Time) In Different Practice Area Doctoral Capstone Preparation: Seminar 1 Practice Scholar: Synthesizing Evidence and Practice Needs Teaching and Learning Seminar: Becoming a Fieldwork Educator	Level II FW (Part-Time) In Different Practice Area Doctoral Capstone Preparation: Seminar 2 Practice Scholar: Mobilizing Knowledge to Advance Practice Pedagogy in Higher Education: Seminar and Practicum	Doctoral Capstone Experience with Seminar
Rotation D	Theoretical Foundations of Occupational Science and Occupational Therapy Foundations of Occupation: Creativity, Craft and Activity Analysis Kinesiology in Daily Life Neuroscience in Daily Life Reflection in Practice	OT 504*** Productive Aging and Geriatrics Practice Scholar: Applying Quantitative Evidence Communication in Practice Foundations of Occupation: Sensory Processing in Daily Life	OT 501*** Adult Physical Rehabilitation Practice Scholar: Applying Qualitative Evidence Facilitating Transformational Change in Practice Applying Occupational Science: Health Promotion and Primary Care	OT 502*** Mental Health Visionaries: Innovation and Technology to Promote Occupation Visionaries: Global Health Systems, Policy, and Advocacy Applying Occupational Science: Lifestyle Redesign®	OT 503*** Pediatrics Advanced Clinical Applications: Neurocognition and Occupation Advanced Clinical Applications: Medical Complexity and Occupation	Level II Fieldwork	Level II FW (Part-Time) In Different Practice Area Doctoral Capstone Preparation: Seminar 1 Practice Scholar: Synthesizing Evidence and Practice Needs Teaching and Learning Seminar: Becoming a Fieldwork Educator	Level II FW (Part-Time) In Different Practice Area Doctoral Capstone Preparation: Seminar 2 Practice Scholar: Mobilizing Knowledge to Advance Practice Pedagogy in Higher Education: Seminar and Practicum	Doctoral Capstone Experience with Seminar

***Includes Level I Fieldwork in a Corresponding Practice Setting

4. CHAN ENTRY-OTD CURRICULUM, SCOPE & SEQUENCE

Year 1 (2024 - 2025)						
Fall 1	Units	**Spring 1**	Units	**Summer 1**	Units	
OT 519 Theoretical Foundations of Occupational Science and Occupational Therapy	3	Immersion 1 + Level I FW OT 501, 502, 503 OR 504 (13 weeks)	8	Immersion 2 + Level I FW OT 501, 502, 503 OR 504 (13 weeks)	8	
OT 516 Foundations of Occupation: Creativity, Craft and Activity Analysis	3					
OT 510 Foundations of Occupation: Kinesiology in Daily Life	3	OT 526 Practice Scholar: Applying Quantitative Evidence	3	OT 536 Practice Scholar: Applying Qualitative Evidence	3	
OT 514 Foundations of Occupation: Neuroscience in Daily Life	3	OT 517 Foundations of Occupation: Sensory Processing in Daily Life	3	OT 539 Applying Occupational Science: Health Promotion and Primary Care	3	
OT 511 Reflection in Practice	3	OT 521 Communication in Practice	3	OT 531 Facilitating Transformational Change in Practice	3	
	15		17		17	49
Year 2 (2025 - 2026)						
Fall 2	Units	**Spring 2**	Units	**Summer 2**	Units	
Immersion 3 + Level I FW OT 501, 502, 503 OR 504 (13 weeks)	8	Immersion 4 + Level I FW OT 501, 502, 503 OR 504 (13 weeks)	8	OT 636 Level II Fieldwork with Seminar (12 weeks)	2	
OT 617 Visionaries: Innovation and Technology to Promote Occupation	3	OT 622 Advanced Clinical Applications: Neurocognition and Occupation	3			
OT 618 Visionaries: Global Health Systems, Policy, and Advocacy	3	OT 623 Advanced Clinical Applications: Medical Complexity and Occupation	3			
OT 619 Applying Occupational Science: Lifestyle Redesign®	3	Optional Elective(s)	2-4			
	17		14 - 18		2	33
Year 3 (2026 - 2027)						
Fall 3	Units	**Spring 3**	Units	**Summer 3**	Units	
OT 636 Level II Fieldwork with Seminar (12 weeks; Part Time; Same setting as the DCE)	1	OT 636 Level II Fieldwork with Seminar (12 weeks; Part Time; Same setting as the DCE)	1	OT 730 Doctoral Capstone Experience with Seminar	3	
OT 715 Practice Scholar: Synthesizing Evidence and Practice Needs	3	OT 725 Practice Scholar: Mobilizing Knowledge to Advance Practice	3			
OT 713 Doctoral Capstone Preparation: Seminar 1	1	OT 723 Doctoral Capstone Preparation: Seminar 2	1			
OT 710 Teaching and Learning Seminar: Becoming a Fieldwork Educator	1	OT 720 Pedagogy in Higher Education: Seminar and Practicum	1			
Optional Elective(s)	2-4	Optional Elective(s)	2-4			
	6 - 10		6 - 10		3	15
					Total Units	97

Educational Goals: Student Learning Outcomes and Strategies for Evaluation

Program Outcomes	Student Learning Outcomes	Strategies for Evaluation
Experts in Occupation	1. Graduates will integrate occupational science theories and concepts into occupational therapy practice, education, and research.	OT 502: Occupation and Recovery Evidence Activity OT 519: Prep Notes Assignment & Application Paper OT 636: Fieldwork Performance Evaluation OT 713: Professional Development Plan OT 723: Professional Development Plan OT 730: Final Portfolio and Final OTD Capstone Presentation
	2. Graduates will evaluate occupation and occupational needs considering the complex relationships among people, contexts, and occupations	OT 501: Team and Individual OT Process Case Applications OT 502: Case Learning Activities in Best Practice Setting; Lessons and OT Assessment In-Service Presentation; and OT Assessment Protocol OT 503: Pediatric Evaluation Assignment; Pediatric OT Case Study OT 504: OT Geriatric Fieldwork Case Study; Home Assessment OT 516: Activity Analyses 1-3; Final Summative Reflection Paper OT 622: Cognitive Activity Analyses; Cognitive-Functional Evaluation (C-FE) assignment; Cognitive Environmental Scan of Local Public Transportation OT 623: Clinical Case Investigations 1-5 OT 636: Fieldwork Performance Evaluation OT 713: Professional Development Plan OT 715 Evidence Synthesis Matrix and Narrative, Stakeholder Interview Findings and Synthesis OT 723: Professional Development Plan OT 725 Synthesis Matrix and Narrative Review of Select Outcomes Measures OT 730: Final Portfolio and Final OTD Capstone Presentation
	3. Graduates will design and implement occupation-based interventions to optimize people's engagement in life.	OT 501: Final Exam - Intervention Practicum; Team and Individual OT Process Case Applications OT 502: Client Care Coordination Plan; Learning Activities; and Written/Oral Final OT 503: Intervention Toolkit; Pediatric OT Case Study OT 504: OT Geriatric Fieldwork Case Study OT 623: Final Case Investigation OT 636: Fieldwork performance evaluation OT 713: Professional Development Plan OT 723: Professional Development Plan OT 725 Design Consultation Plan

		OT 730: Engagement in Monthly Seminar/Community of Practice
	4. Graduates will partner with persons, groups, or populations to address barriers that limit full occupational participation.	OT 504: OT Geriatric Fieldwork Case Study; Home Assessment OT 618: Presentation: International Comparisons of Health Care Systems OT 623: Clinical Case Investigations 1-5 OT 636: Fieldwork performance evaluation OT 713: Professional Development Plan OT 723: Professional Development Plan OT 725 Design Knowledge Mobilization (KMb) Plan and Products/Events OT 730: Final Portfolio and Final OTD Capstone Presentation
	5. Graduates will collaboratively design and implement occupation-focused programs and systems to impact health among persons, groups, and populations.	OT 501: Team OT Process Case Application OT 619: Lifestyle Redesign Intervention Design Assignment OT 713: Professional Development Plan OT 723: Professional Development Plan OT 725 Design Consultation Plan OT 730: Final Portfolio and Final OTD Capstone Presentation
Global Citizens	1. Graduates will articulate current topics in occupational therapy and occupational science across global contexts in order to engage with global communities, both domestically and internationally.	OT 516: Final Summative Reflection Paper OT 519: Prep Notes and Conversation Synthesis Assignments OT 713: Professional Development Plan OT 723: Professional Development Plan OT 730: Monthly Excerpts from Reflective Journal Entries and Final Portfolio
	2. Graduates will analyze current global health issues in relation to occupational therapy and occupational science.	OT 516: Final Summative Reflection Paper OT 713: Professional Development Plan OT 723: Professional Development Plan OT 730: Monthly Excerpts from Reflective Journal Entries and Final Portfolio
	3. Graduates will collaborate with stakeholders to address the occupational and health needs of global communities.	OT 503: Reflective Journal OT 527: Presentation: International Comparisons of Health Care Systems OT 636: Fieldwork Performance Evaluation OT 713: Professional Development Plan OT 723: Professional Development Plan OT 730: Monthly Excerpts from Reflective Journal Entries and Final Portfolio
	4. Graduates will partner with individuals, groups, and communities to advocate for occupational justice and policy solutions addressing complex global health issues.	OT 618: Presentation: International Comparisons of Health Care Systems OT 531: Occupational Reconstruction Proposal OT 636: Fieldwork Performance Evaluation OT 713: Professional Development Plan

		OT 723: Professional Development Plan OT 730: Monthly Excerpts from Reflective Journal Entries and Final Portfolio
	5. Graduates will utilize occupational therapy and occupational science theories relevant to the lived experiences of culturally and linguistically diverse populations from the Global South.	OT 636: Fieldwork Performance Evaluation OT 713: Professional Development Plan OT 723: Professional Development Plan OT 730: Monthly Excerpts from Reflective Journal Entries and Final Portfolio
Reflective, Responsive, and Engaged Professionals	1. Graduates will enact personal and unique assets, abilities, and characteristics in order to cultivate, nurture, and sustain therapeutic partnerships.	OT 504: Life Story Project, Home Assessment OT 511: Summative Analysis and Reflection Skill Building Plan OT 521: Transcribed Motivational Interview and Interpersonal Analysis Paper OT 619: Facilitation of Lifestyle Redesign Sessions OT 636: Fieldwork Seminar OT 713: Professional Development Plan OT 723: Professional Development Plan OT 730: Candidate's Self-Evaluation and Monthly Excerpts from Reflective Journal Entries
	2. Graduates will demonstrate resilience through self-compassion and restorative activities.	OT 636: Fieldwork Seminar OT 511: Mindfulness Paper or Presentation OT 713: Professional Development Plan OT 723: Professional Development Plan OT 730: Candidate's Self-Evaluation and Engagement in Monthly Seminar/Community of Practice
	3. Graduates will integrate principles of inclusivity, equity, and dignity for all persons into practice.	OT 501: Final Exam - Intervention Practicum and Team and Individual OT Process Case Applications OT 503: Intervention Toolkit, Pediatric OT Case Study; Reflective Journal OT 504: OT Geriatric Fieldwork Case Study OT 516: Activity Analyses 1-3; Craftivism Project OT 622: Exploring a Clinical Question and Case Application Assignments OT 623: Final Case Study OT 730: Monthly Excerpts from Reflective Journal Entries
	4. Graduates will cultivate and sustain therapeutic partnerships that integrate the lived experiences of persons, groups, and populations	OT 504: Life Story Project, Home Assessment OT 521: Transcribed MI Interview OT 636: Fieldwork Performance Evaluation OT 730: Monthly Excerpts from Reflective Journal Entries

	5. Graduates will demonstrate culturally responsive practices both within and across sociocultural groups.	OT 503: Intervention Toolkit, Pediatric OT Case Study OT 504: Life Story Project; OT Geriatric Fieldwork Case Study; Home Assessment OT 511: Implicit Bias Reflection OT 516: Activity Analyses 1-3 OT 521: Interpersonal Analysis Paper OT 623: Case Assignments 1-5 OT 636: Fieldwork Performance Evaluation OT 730: Candidate's Self-Evaluation
Practice Scholars	1. Graduates will use rigorous, trustworthy, and relevant evidence to inform practice, pedagogy, and research decisions.	OT 501: Team and Individual OT Process Case Applications OT 502: Assessment Protocol OT 503: Intervention Toolkit; Pediatric OT Case Study OT 504: OT Geriatric Fieldwork Case Study OT 516: Final Summative Reflection Paper OT 526: Critically Appraised Paper; Critically Appraised Topic; Journal Club OT 536: Making Qualitative Research Matter, Team Oral Defense: Appraising, Synthesizing, and Applying Multiple Types of Evidence to Promote EBP: OT 619: Lifestyle Redesign Intervention Design Assignment OT 622: CAP focused on one of AOTA identified cognitive interventions taught in course OT 623: Case Assignments 1-5; Final Case Study OT 710: Group Presentation on Fieldwork Dilemma OT 715: Evidence Synthesis Matrix and Narrative OT 720: Review of the Evidence Assignment; Practicum Experience OT 730: Final Portfolio
	2. Graduates will collect, analyze, and synthesize information in order to strengthen practice processes and outcomes.	OT 503: Pediatric OT Case Study OT 526: Literature Search; Critically Appraised Paper; Critically Appraised Topic OT 536: Team Oral Defense: Appraising, Synthesizing, and Applying Multiple Types of Evidence to Promote EBP OT 622: Cognitive-Functional Evaluation (C-FE) assignment OT 713: Professional Development Plan OT 723: Professional Development Plan OT 730: Synthesis of Program Evaluation Report, Presentation of Program Evaluation Report and, Final Portfolio
	3. Graduates will mobilize knowledge in collaboration with stakeholders to address the evolving occupational needs of individuals and society.	OT 526: Critically Appraised Topic Poster Presentation OT 713: Professional Development Plan OT 715: Stakeholder Interview Findings and Synthesis

		OT 723: Professional Development Plan OT 730: Final Portfolio and Final OTD Capstone Presentation
	4. Graduates will critically evaluate and use evidence to address barriers to occupational justice, equity, diversity, and inclusion.	OT 504: Home Assessment OT 531: Group Facilitation and Reflection OT 536: Critical Appraisal OT 618: Ethical Dilemma Analysis OT 623: Midterm Exam OT 710: Group Presentation on Fieldwork Dilemma OT 713: Professional Development Plan OT 723: Professional Development Plan OT 730: Synthesis of Program Evaluation Data and Final OTD Capstone Presentation
Visionaries Shaping Change	1. Graduates will navigate complex systems to address society's intractable needs encountered at local, national, and global levels.	OT 516: Craftivism Project OT 618: Presentation: International Comparisons of Health Care Systems OT 618: Public Policy Forum OT 636: Fieldwork Performance Evaluation OT 710: Group Presentation on Fieldwork Dilemma OT 713: Professional Development Plan OT 723: Professional Development Plan OT 730: Final OTD Capstone Presentation
	2. Graduates will create and implement innovative solutions to transform practice and impact research.	OT 617 Visionaries: Innovation and Technology to Promote Occupation OT 710: Group Presentation on Fieldwork Dilemma OT 713: Professional Development Plan OT 723: Professional Development Plan OT 730: Final OTD Capstone Presentation
	3. Graduates will leverage the power of occupation to transform people, teams, and organizations.	OT 503: Pediatric OT Case Study OT 504: OT Geriatric Fieldwork Case Study OT 516: Craftivism Project; Final Summative Reflection Paper OT 623: Final Case Study OT 622: Case application OT 730: Final OTD Capstone Presentation
	4. Graduates will integrate contemporary theories and best practices in teaching and learning in order to advance occupational therapy's workforce and effectiveness in academic and practice settings.	OT 618: Summative Assignment OT 710: Self-Assessment Tool for FW Educator OT 720: Practicum Experience OT 730: Candidate's Self-Evaluation and Final OTD Capstone Presentation

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5.   LENGTH AND REQUIREMENTS OF THE CHAN DIVISION EDUCATIONAL PROGRAMS

Upon completion of all prerequisite courses by August of the junior year (prior to the start of senior year), undergraduate students are eligible to enroll in professional courses alongside entry-OTD students during the fall semester of their senior year. Students pursuing the six-year BS to OTD program must apply for admission to the OTD program by **February 15** of their senior year. Students who have completed the Bachelor's degree in occupational therapy and meet the necessary qualifications will be granted Advanced Standing and may proceed to the OTD program.

A. SEQUENCE OF PROFESSIONAL COURSES FOR OCCUPATIONAL THERAPY UNDERGRADUATES PURSUING THE <u>BACCALAUREATE DEGREE ENROUTE TO THE OTD DEGREE</u>:

Semester	Course #	Units	Title
Fall Senior Year (1st professional year)	OT 511	3	Reflections in Practice
	OT 516	3	Foundations of Occupation: Creativity, Craft and Activity Analysis
	OT 519	3	Theoretical Foundations of Occupational Science and Occupational Therapy
	OT 514	3	Foundations of Occupation: Neuroscience in Daily Life
Spring of Senior Year (1st professional year)	OT 50x	8	Practice Immersion*
	OT 517	3	Foundations of Occupation: Sensory Processing in Daily Life
	OT 521	3	Communication in Practice
	OT 526	3	Practice Scholar: Applying Quantitative Evidence

Following successful completion of the Bachelor's degree and admission to the OTD program, Bachelor's to OTD students complete the following sequence of courses for the OTD degree with Advanced Standing:

OTD DEGREE: ADVANCED STANDING FOR BACHELOR'S TO OTD STUDENTS

Semester	Course #	Units	Title
Summer (1st professional year)	OT 50x	8	Practice Immersion*
	OT 531	3	Facilitating Transformational Change in Practice
	OT 536	3	Practice Scholar: Applying Qualitative Evidence
	OT 539	3	Applying Occupational Science: Health Promotion and Primary Care
Fall (2nd professional year)	OT 50x	8	Practice Immersion*
	OT 617	3	Visionaries: Innovation and Technology to Promote Occupation
	OT 618	3	Visionaries: Global Health Systems, Policy, and Advocacy
	OT 619	3	Applying Occupational Science: Lifestyle Redesign®
Spring (2nd professional year)	OT 50x	8	Practice Immersion*
	OT 622	3	Advanced Clinical Applications: Neurocognition and Occupation
	OT 623	3	Advanced Clinical Applications: Medical Complexity and Occupation
Summer (2nd professional year)	OT 636	2	Level II Fieldwork with Seminar

Fall (3rd professional year)	OT 636	1	Level II Fieldwork with Seminar (Part-Time)
	OT 710	1	Teaching and Learning Seminar: Becoming a Fieldwork Educator
	OT 713	1	Doctoral Capstone Preparation: Seminar 1
	OT 715	3	Practice Scholar: Synthesizing Evidence and Practice Needs
Spring (3rd professional year)	OT 636	1	Level II Fieldwork with Seminar (Part-Time)
	OT 720	1	Pedagogy in Higher Education: Seminar and Practicum
	OT 723	1	Doctoral Capstone Preparation: Seminar 2
	OT 725	3	Practice Scholar: Mobilizing Knowledge to Advance Practice
Summer (3rd professional year)	OT 730	3	Doctoral Capstone Experience with Seminar

B. SEQUENCE OF COURSES FOR OCCUPATIONAL THERAPY ENTRY-OTD STUDENTS

YEAR I

Semester	Course #	Units	Title
Fall: (1st professional year)	OT 510	3	Foundations of Occupation: Kinesiology in Daily Life
	OT 511	3	Reflection in Practice
	OT 514	3	Foundations of Occupation: Neuroscience in Daily Life
	OT 516	3	Foundations of Occupation: Creativity, Craft and Activity Analysis
	OT 519	3	Theoretical Foundations of Occupational Science and Occupational Therapy
Spring: (1st professional year)	OT 50x	8	Practice Immersion*
	OT 517	3	Foundations of Occupation: Sensory Processing in Daily Life
	OT 521	3	Communication in Practice
	OT 526	3	Practice Scholar: Applying Quantitative Evidence
Summer: (1st professional year)	OT 50x	8	Practice Immersion*
	OT 531	3	Facilitating Transformational Change in Practice
	OT 536	3	Practice Scholar: Applying Qualitative Evidence
	OT 539	3	Applying Occupational Science: Health Promotion and Primary Care

YEAR II

Semester	Course #	Units	Title
Fall (2nd professional year)	OT 50x	8	Practice Immersion*
	OT 617	3	Visionaries: Innovation and Technology to Promote Occupation
	OT 618	3	Visionaries: Global Health Systems, Policy, and Advocacy
	OT 619	3	Applying Occupational Science: Lifestyle Redesign®
Spring (2nd professional year)	OT 50x	8	Practice Immersion*
	OT 622	3	Advanced Clinical Applications: Neurocognition and Occupation
	OT 623	3	Advanced Clinical Applications: Medical Complexity and Occupation
Summer (2nd professional year)	OT 636	2	Level II Fieldwork with Seminar

YEAR III

Semester	Course #	Units	Title
Fall (3rd professional year)	OT 636	1	Level II Fieldwork with Seminar (Part-Time)
	OT 710	1	Teaching and Learning Seminar: Becoming a Fieldwork Educator
	OT 713	1	Doctoral Capstone Preparation: Seminar 1
	OT 715	3	Practice Scholar: Synthesizing Evidence and Practice Needs
Spring (3rd professional year)	OT 636	1	Level II Fieldwork with Seminar (Part-Time)
	OT 720	1	Pedagogy in Higher Education: Seminar and Practicum
	OT 723	1	Doctoral Capstone Preparation: Seminar 2
	OT 725	3	Practice Scholar: Mobilizing Knowledge to Advance Practice
Summer (3rd professional year)	OT 730	3	Doctoral Capstone Experience with Seminar

* Students take ONE of the following practice immersions each semester - OT 501 Practice Immersion: Adult Physical Rehabilitation, or OT 502 Practice Immersion: Mental Health, or OT 503 Practice Immersion: Pediatrics, or OT 504 Practice Immersion: Productive Aging and Geriatrics

C. OCCUPATIONAL THERAPY PRACTICE AND RESEARCH ELECTIVE COURSES

- **OT Specialty Elective Courses:** A number of specialty elective courses are offered within the Chan Division to enable students to both broaden and deepen their knowledge and expertise in contemporary practice areas. Elective courses are offered as either 4-unit or 2-unit courses with varying schedules. Please see the list of specialty courses below. More detailed information regarding electives will be made available to students prior to the spring semester of the second year. In addition to OT courses in specialty topics, students may choose to participate in clinical and/or research experiences.
- **Clinical Experiences (OT 500; A, B, C)** include participation in various clinical/health settings in the community. May be taken for 2 to 4 units.

- **Research Experiences (OT 790)** include participation in research projects with USC community partners. May be taken for 2 to 4 units.
- **Independent Study (OT 790)** enables students to research a topic of their choice, supervised by a USC faculty member. May be taken for 2 to 4 units
- **OT Specialty Elective Courses** (list subject to change):

OT 550 (2 Units)	Lifestyle Redesign ® for Pain and Headache Management
OT 551 (2 Units)	Lifestyle Redesign ® for Weight Management and Related Conditions
OT 552 (2 Units)	Lifestyle Redesign ® for Neurological Conditions
OT 560 (4 Units)	Contemporary Issues in School-Based Practice
OT 562 (4 Units)	Advanced Practice in Hand Therapy and Physical Agent Modalities1
OT 566 (2 Units)	Healthcare Communication with Spanish-Speaking Clients
OT 567 (4 Units)	Contemporary Issues: Occupational Therapy in Early Intervention
OT 569 (2 Units)	Sensory Integration Theory
OT 570 (2 Units)	Evaluation and Clinical Reasoning: Sensory Integration
OT 572 (4 Units)	Ergonomics
OT 573 (4 Units)	Hand Rehabilitation
OT 574 (4 Units)	Enhancing Motor Control for Occupation
OT 575 (2 Units)	Dysphagia Across the Lifespan: Pediatrics through Geriatrics
OT 577 (2 Units)	Seminar in Occupational Therapy (National Board for Certification in Occupational Therapy Preparation)
OT 579 (4 Units)	Occupational Therapy in Adult Neurorehabilitation
OT 588 (2 Units)	Building Technologies that Promote Health and Well-Being
OT 590 (2-4 Units)	Rancho Los Amigos National Rehabilitation Center: Canadian Occupational Performance Measure (COPM)
	Rancho Los Amigos National Rehabilitation Center: OT Driver Rehabilitation and Training Program
	Rancho Los Amigos National Rehabilitation Center: Traumatic Brain Injury and/or Diabetes Mellitus - Improving Patient's Self-Management of Chronic Conditions
	Rancho Los Amigos National Rehabilitation Center: OT Lifestyle Redesign® Program
OT 599 (2-4 Units)	Special Topics:
	Anti-Racism, Anti-Oppression and JEDI in Occupational Therapy
	Function, Participation, and Health of Infants and Families in the NICU
	Cultivating Global Citizenship through Responsive, Reflective, and Engaged Practice: International Externships
	Occupational Therapy in Japan: Health Care Systems, Values, and Occupations
	Discovering Occupations in the Aboriginal Communities of Southern Taiwan
OT 610 (4 Units)	Sensory Integration Dysfunction
OT 638 (2 Units)	Mentored Practicum in Lifestyle Redesign

D. GRADUATE CERTIFICATES

There are two Graduate Certificate Programs offered by the Chan Division: the Graduate Certificate in the Foundations Lifestyle Redesign® and the Graduate Certificate in Sensory Processing and Sensory Integration. Both require a minimum of 12 units of core and elective course work as follows:

1. **Foundations of Lifestyle Redesign® Graduate Certificate**

Program Description:
The Graduate Certificate in Foundations of Lifestyle Redesign® is designed for occupational therapy students who wish to obtain advanced training in Lifestyle Redesign®. Certificate courses fulfill the didactic

requirements to be eligible for certification in Lifestyle Redesign®, and prepare occupational therapy students to be able to design and implement Lifestyle Redesign® interventions with diverse client populations.

Admissions Requirements:
Applicants for the Certificate in Lifestyle Redesign® who are currently enrolled in a Chan graduate program at USC and are in good standing with a 3.0 GPA or better, need only complete the online application form located here: https://chan.usc.edu/students/applications/graduate-certificate

Required Courses:
OT 521: Reflective, Responsive and Engaged Professionals 2 (3 units)
OT 619: Applying Occupational Science: Lifestyle Redesign® (3 units)

Followed by **TWO of the following**:
OT 550: Lifestyle Redesign® for Pain and Headache Management (2 units)
OT 551: Lifestyle Redesign® for Weight Management and Related Conditions (2 units)
OT 552: Lifestyle Redesign® for Neurological Conditions (2 units)

Culminating with:
OT 638: Mentored Practicum in Lifestyle Redesign® (2 units)

For more information, please visit: https://chan.usc.edu/education/lifestyle-redesign-graduate-certificate

2. **Graduate Certificate in Sensory Processing and Sensory Integration**

Program Description:
The Sensory Processing/Sensory Integration Graduate Certificate (SP/SI GC) is intended for those students who would like to develop an expertise in identifying sensory processing disorders and use sensory integration interventions to address them. The certificate encompasses five courses with the last one delivered in conjunction with hands-on clinical practice. The SP/SI GC will position the students to translate the latest research on SI and SP into practice. Once the program is completed graduates will be able to apply the information to clinical practice, research, advocacy, and education.

Admissions Requirements:
Applicants for the Certificate in SI and SP who are currently enrolled in a Chan graduate program at USC and are in good standing with a 3.0 GPA or better, complete an online application here: https://chan.usc.edu/students/applications/graduate-certificate .

Required Courses:
OT 517: Foundations of Occupation: Sensory Processing in Daily Life (3 units)
OT 569: Sensory Integration Theory (2 units)
OT 570: Evaluation and Clinical Reasoning: Sensory Integration (2 units)
OT 610: Sensory Integration Treatment/Ayres Sensory Integration (4 units)
OT 636: Fieldwork with Seminar* (2 unit)

*Must be completed in pediatric-related site with a therapy room with suspended equipment

For more information, please visit: https://chan.usc.edu/education/sp-si-graduate-certificate

Fall Semester 2024		
Classes Begin	Mon	September 9
Add/Drop Deadline	Friday	September 27
Veterans Day Holiday	Mon	November 11
Thanksgiving Holiday	Wed-Sun	November 27-December 1
Classes End	Fri	December 13
Study Days	Sat-Mon	December 14 - 16
Exams	Tues-Fri	December 17-20
Winter Recess	Mon-Fri	December 23-January 10
Spring Semester 2025		
Open Registration	Thu-Fri	January 9-10
Classes Begin	Mon	January 13
Add/Drop Deadline	Mon	February 3
Martin Luther King's Birthday Holiday	Mon	January 20
President's Day Holiday	Mon	February 17
Spring Recess	Sun-Sun	March 16-23
Classes End	Fri	April 25
Study Days	Sat-Mon	April 26-28
Exams	Tues-Fri	April 29-May 2
Commencement	Fri	May 16
Summer Semester 2025	Summer Session	
Registration	TBD	To Be Announced
Classes Begin	Mon	May 19
Memorial Day Holiday	Mon	May 26
Juneteenth Holiday	Thurs	June 19
Independence Day Holiday	Fri	July 4
Classes End	Fri	August 15
Study Days	Sat – Mon	August 16-18
Exams	Tues – Fri	August 19 - 22

Table above was modified from the USC Schedule of Classes at: https://classes.usc.edu/term-20243/calendar/ specifically for the Entry Level OTD Program.

Academic Calendar for Entry-OTD Program: 2024-2029 (all dates subject to change)

PROPOSED ACADEMIC CALENDAR – E-OTD

Orientation (1st Years only)	Fall Semester (14 weeks)	Final Exams (1 week*)	Winter Break (3 weeks)	Spring Semester (14 weeks + Spring Break)	Finals Exams (1 week*)	Semester Break (2 weeks)	Summer Semester (13 weeks***)	Final Exams (1 week*)	Program End Date (for 3rd Years)	Semester Break (2 weeks for 1st and 2nd Years)
2024-2025										
Sept 3 – Sept 6	Sept 9 – Dec 13	Dec 16 - 20	Dec 23 – Jan 10	Jan 13 – Apr 25	Apr 28 – May 2	May 5 – May 16	May 19 – Aug 15	Aug 18 – 22	Aug 29, 2025	Aug 25 – Sept 5
2025-2026										
Sept 2 – Sept 5	Sept 8 – Dec 12	Dec 15 – 19	Dec 22 – Jan 9	Jan 12 – April 24	April 27 – May 1	May 4 – May 15	May 18 – Aug 14	Aug 17 – 21	Aug 28, 2026	Aug 24 – Sept 4
2026-2027										
Aug 31 – Sept 4	Sept 8 – Dec 11	Dec 14 – 18	Dec 21 – Jan 8	Jan 11 – Apr 23	Apr 26 – April 30	May 3 – May 14	May 17 – Aug 13	Aug 16 – 20	Aug 29, 2027	Aug 23 – Sept 3
2027-2028										
Aug 30 – Sept 3	Sept 7 – Dec 10	Dec 13 – 17	Dec 20 – Jan 7	Jan 10 – April 21	April 24 – April 28	May 1 – May 12	May 15 – Aug 11	Aug 14 – 18	Aug 25, 2028	Aug 21 – Sept 1
2028-2029										
Aug 28 – Sept 1	Sept 5 – Dec 8	Dec 11 – 15	Dec 18 – Jan 5	Jan 8 – April 20	April 23 – April 27	April 30 – May 11	May 14 – Aug 10	Aug 13 – 17	Aug 24, 2029	Aug 20 – Aug 31

*Monday = Study Day (finals: Tues-Fri)

**Additional week of semester break (3 weeks) due to shift in the university academic calendar, when applicable

*** Third-year Doctoral Capstone Experience (DCE) continued through finals week

Fall 2024 – Class Schedule #1, #2, #3, and #4 (all schedules subject to change)

USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy
First Year Students Entry-OTD
SCHEDULE #1
FALL 2024

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00					
8:30					
9:00		OT 519 - Sect. 48043			
9:30		Theoretical	OT 510 - Sect. 48062	OT 514 - Sect. 48070	
10:00		Foundations of	Foundations of	Foundations of	
10:30		Occupational Science	Occupation:	Occupation:	
11:00		and Occupational	Kinesiology in Daily Life	Neuroscience in	
11:30		Therapy		Daily Life	
12:00					
12:30					
1:00					
1:30		OT 511 - Sect. 48066		OT 516 - Sect. 48074	
2:00		Reflection in Practice		Foundations of	
2:30				Occupation: Creativity	
3:00				Craft and Activity	
3:30					
4:00					
4:30					
5:00					
5:30					

USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy
First Year Students Entry-OTD
SCHEDULE #2
FALL 2024

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00					
8:30					
9:00		OT 511 - Sect. 48067			
9:30		Reflection in Practice		OT 516 - Sect. 48075	
10:00				Foundations of	
10:30				Occupation: Creativity	
11:00				Craft and Activity	
11:30					
12:00					
12:30					
1:00					
1:30		OT 519 - Sect. 48082	OT 510 - Sect. 48063	OT 514 - Sect. 48071	
2:00		Theoretical	Foundations of	Foundations of	
2:30		Foundations of	Occupation:	Occupation:	
3:00		Occupational Science	Kinesiology in Daily Life	Neuroscience in	
3:30		and Occupational		Daily Life	
4:00		Therapy			
4:30					
5:00					
5:30					

USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy
First Year Students Entry-OTD
SCHEDULE #3
FALL 2024

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00					
8:30					
9:00				OT 511 - Sect. 48068	
9:30		OT 510 - Sect. 48064	OT 514 - Sect. 48072	Reflection in Practice	
10:00		Foundations of	Foundations of		
10:30		Occupation:	Occupation:		
11:00		Kinesiology in Daily Life	Neuroscience in		
11:30			Daily Life		
12:00					
12:30					
1:00					
1:30			OT 516 - Sect. 48076	OT 519 - Sect. 48084	
2:00			Foundations of	Theoretical	
2:30			Occupation: Creativity	Foundations of	
3:00			Craft and Activity	Occupational Science	
3:30				and Occupational	
4:00				Therapy	
4:30					
5:00					
5:30					

USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy
First Year Students Entry-OTD
SCHEDULE #4
FALL 2024

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00					
8:30					
9:00				OT 511 - 48069	
9:30			OT 516 - Sect. 48077	Reflection in Practice	
10:00			Foundations of		
10:30			Occupation: Creativity		
11:00			Craft and Activity		
11:30					
12:00					
12:30					
1:00					
1:30		OT 519 - 48085	OT 514 - Sect. 48073	OT 510 - Sect. 48065	
2:00		Theoretical	Foundations of	Foundations of	
2:30		Foundations of	Occupation:	Occupation:	
3:00		Occupational Science	Neuroscience in	Kinesiology in Daily Life	
3:30		and Occupational	Daily Life		
4:00		Therapy			
4:30					
5:00					
5:30					

Spring 2025 – Class Schedule for Groups A, B, C, and D (all schedules subject to change)

First Year Students Entry-OTD — GROUP A — Spring 2025

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00					
8:30					
9:00–11:30	OT 521 Comm in Practi	OT 501 Practice Immersion: Adult Phys. Rehab.		OT 501 La Practice Immersion Adult Reh (1/2 Grou	OT 526 Practice Scholar: Applying Quantitative Evidence (1/2 Group)
12:00–1:00	.	.	Level I Fieldwork: Off-Site	.	Level I Fieldwork: Off-Site
1:30–4:00	OT 517 Sensory Processi Daily Life	OT 501 Lab Practice Immersion: Adult Rehab (1/2 Group)	OT 526 Practice Scho Applying Quantitative Evidence (1/2 Group)	linical Experienc (hours vary) Wed or Friday	OT 501 Practice Immersion: Adult Phys. Rehab.	linical Experience (hours vary) Wed or Friday
4:30					
5:00					
5:30					

First Year Students Entry-OTD — GROUP B — Spring 2025

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00					
8:30					
9:00–11:30	OT 521 Comm in Practice		OT 502 Practice Immersion: Mental Health		OT 502 L; Practice Immersion Mental Health (1/2 Grou	OT 526 Practice Scholar: Applying Quantitative Evidence (1/2 Group)
12:00–1:00	.	Level I Fieldwork: Off-Site	.	Level I Fieldwork: Off-Site	.
1:30–4:00	OT 517 Sensory Processi Daily Life	linical Experienc (hours vary) Tues or Thurs	OT 502 La OT 526 Practice Practice Scholar Immersion Applying Mental Quantitative Health Evidence (1/2 Grou (1/2 Group)	linical Experienc (hours vary) Tues or Thurs	OT 502 Practice Immersion: Mental Health
4:30					
5:00					
5:30					

USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy - Professional Program

First Year Students Entry-OTD — GROUP C — Spring 2025

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00					
8:30					
9:00–11:30	OT 517 Sensory Processi Daily Life	OT 503 Practice Immersion: Pediatrics		OT 503 L; Practice Immersion Pediatrics (1/2 Grou	OT 526 Practice Scholar: Applying Quantitative Evidence (1/2 Group)
12:00–1:00	.	.	Level I Fieldwork: Off-Site	.	Level I Fieldwork: Off-Site
1:30–4:00	OT 521 Comm in Practi	OT 503 Lab Practice Immersion: Pediatrics (1/2 Group)	OT 526 Practice Scho Applying Quantitative Evidence (1/2 Group)	linical Experienc (hours vary) Wed or Friday	OT 503 Practice Immersion: Pediatrics	linical Experience (hours vary) Wed or Friday
4:30					
5:00					
5:30					

USC Chan Division of Occupational Science and Occupational Therapy - Professional Program

First Year Students Entry-OTD — GROUP D — Spring 2025

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00					
8:30					
9:00–11:30	OT 517 Sensory Processing in Daily Life		OT 504 Practice Immersion: Productive Aging and Geri		OT 504 L; Practice Immersion Geriatrics (1/2 Grou	OT 526 Practice Scholar: Applying Quantitative Evidence (1/2 Group)
12:00–1:00	.	Level I Fieldwork: Off-Site	.	Level I Fieldwork: Off-Site	.
1:30–4:00	OT 521 Comm in Practi	linical Experienc (hours vary) Tues or Thurs	OT 504 La OT 526 Practice Practice Scholar Immersion Applying Geriatrics Quantitative (1/2 Grou Evidence (1/2 Group)	linical Experienc (hours vary) Tues or Thurs	OT 504 Practice Immersion: Productive Aging and G
4:30					
5:00					
5:30					

Summer 2025 - Class Schedule for Groups A, B, C, and D (all schedules subject to change)

USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy - Professional Program
First Year Students Entry-OTD
GROUP A
Summer 2025

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00–8:30					
9:00–11:30	OT 539 Applying OS: Health Promotion and Primary Care	OT 502 Practice Immersion: Mental Health		OT 502 Lab Practice Immersion: Mental Health (1/2 Group) · OT 536 Practice Scholar: Applying Qualitative Evidence (1/2 Group)	
12:00–1:00			Level I Fieldwork: Off-Site	Level I Fieldwork: Off-Site	
1:30–5:30	OT 531 Facilitating Transformation: Change in Practice	OT 502 Lab Practice Immersion: Mental Health (1/2 Group) · OT 536 Practice Scholar: Applying Qualitative Evidence (1/2 Group)	Clinical Experience (hours vary) Wed or Friday	OT 502 Practice Immersion: Mental Health	Clinical Experience (hours vary) Wed or Friday

USC Chan Division of Occupational Science and Occupational Therapy - Professional Program
First Year Students Entry-OTD
GROUP B
Summer 2025

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00–8:30					
9:00–11:30	OT 539 Applying OS: Health Promotion and Primary Care		OT 503 Practice Immersion: Pediatrics		OT 503 Lab Practice Immersion: Pediatrics (1/2 Group) · OT 536 Practice Scholar: Applying Qualitative Evidence (1/2 Group)
12:00–1:00		Level I Fieldwork: Off-Site		Level I Fieldwork: Off-Site	
1:30–5:30	OT 531 Facilitating Transformational Change in Practice	Clinical Experience (hours vary) Tues or Thurs	OT 503 Lab Practice Immersion: Pediatrics (1/2 Group) · OT 536 Practice Scholar: Applying Qualitative Evidence (1/2 Group)	Clinical Experience (hours vary) Tues or Thurs	OT 503 Practice Immersion: Pediatrics

USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy - Professional Program
First Year Students Entry-OTD
GROUP C
Summer 2025

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00–8:30					
9:00–11:30	OT 531 Facilitating Transformation: Change in Practice	OT 504 Practice Immersion: Productive Aging and Geriatrics		OT 504 Lab Practice Immersion: Geriatrics (1/2 Group) · OT 536 Practice Scholar: Applying Qualitative Evidence (1/2 Group)	
12:00–1:00			Level I Fieldwork: Off-Site		Level I Fieldwork: Off-Site
1:30–5:00	OT 539 Applying OS: Health Promotion and Primary Care	OT 504 Lab Practice Immersion: Geriatrics (1/2 Group) · OT 536 Practice Scholar: Applying Qualitative Evidence (1/2 Group)	Clinical Experience (hours vary) Wed or Friday	OT 504 Practice Immersion: Productive Aging and Geriatrics	Clinical Experience (hours vary) Wed or Friday

USC Chan Division of Occupational Science and Occupational Therapy - Professional Program
First Year Students Entry-OTD
GROUP D
Summer 2025

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00–8:30					
9:00–11:30	OT 531 Facilitating Transformational Change in Practice		OT 501 Practice Immersion: Adult Phys. Rehab.		OT 501 Lab Practice Immersion: Adult Rehab (1/2 Group) · OT 536 Practice Scholar: Applying Qualitative Evidence (1/2 Group)
12:00–1:00		Level I Fieldwork: Off-Site		Level I Fieldwork: Off-Site	
1:30–5:00	OT 539 Applying OS: Health Promotion and Primary Care	Clinical Experience (hours vary) Tues or Thurs	OT 501 Lab Practice Immersion: Adult Rehab (1/2 Group) · OT 536 Practice Scholar: Applying Qualitative Evidence (1/2 Group)	Clinical Experience (hours vary) Tues or Thurs	OT 501 Practice Immersion: Adult Phys. Rehab.

APPENDICES

Appendix A

USC Code of Ethics

CODE OF ETHICS
OF THE UNIVERSITY OF SOUTHERN CALIFORNIA

At the University of Southern California, ethical behavior is predicated on two main pillars: a commitment to discharging our obligations to others in a fair and honest manner, and a commitment to respecting the rights and dignity of all persons. As faculty, staff, students, and trustees, we each bear responsibility not only for the ethics of our own behavior, but also for building USC's stature as an ethical institution.

We recognize that the fundamental relationships upon which our university is based are those between individual students and individual professors; thus, such relationships are especially sacred and deserve special care that they not be prostituted or exploited for base motives or personal gain.

When we make promises as an institution, or as individuals who are authorized to speak on behalf of USC, we keep those promises, including especially the promises expressed and implied in our Role and Mission Statement. We try to do what is right even if no one is watching us or compelling us to do the right thing.

We promptly and openly identify and disclose conflicts of interest on the part of faculty, staff, students, trustees, and the institution as a whole, and we take appropriate steps to either eliminate such conflicts or insure that they do not compromise the integrity of the individuals involved or that of the university.

We nurture an environment of mutual respect and tolerance. As members of the USC community, we treat everyone with respect and dignity, even when the values, beliefs, behavior, or background of a person or group is repugnant to us. This last is one of the bedrocks of ethical behavior at USC and the basis of civil discourse within our academic community. Because we are responsible not only for ourselves but also

for others, we speak out against hatred and bigotry whenever and wherever we find them.

We do not harass, mistreat, belittle, harm, or take unfair advantage of anyone. We do not tolerate plagiarism, lying, deliberate misrepresentation, theft, scientific fraud, cheating, invidious discrimination, or ill use of our fellow human beings — whether such persons be volunteer subjects of scientific research, peers, patients, superiors, subordinates, students, professors, trustees, parents, alumni, donors, or members of the public.

We do not misappropriate the university's resources, or resources belonging to others which are entrusted to our care, nor do we permit any such misappropriation to go unchallenged.

We are careful to distinguish between legal behavior on the one hand and ethical behavior on the other, knowing that, while the two overlap in many areas, they are at bottom quite distinct from each other. While we follow legal requirements, we must never lose sight of ethical considerations.

Because of the special bonds that bind us together as members of the Trojan Family, we have a familial duty as well as a fiduciary duty to one another. Our faculty and staff are attentive to the well-being of students and others who are entrusted to our care or who are especially vulnerable, including patients, volunteer subjects of research, and the children in our daycare and community outreach programs.

By respecting the rights and dignity of others, and by striving for fairness and honesty in our dealings with others, we create an ethical university of which we can all be proud, and which will serve as a bright beacon for all peoples in our day and in the centuries to come.

Adopted by the Board of Trustees of the University of Southern California, March 28, 2004

Occupational Therapy Code of Ethics

Occupational Therapy Code of Ethics (2015)

Preamble

The 2015 Occupational Therapy Code of Ethics (Code) of the American Occupational Therapy Association (AOTA) is designed to reflect the dynamic nature of the profession, the evolving health care environment, and emerging technologies that can present potential ethical concerns in research, education, and practice. AOTA members are committed to promoting inclusion, participation, safety, and well-being for all recipients in various stages of life, health, and illness and to empowering all beneficiaries of service to meet their occupational needs. Recipients of services may be individuals, groups, families, organizations, communities, or populations (AOTA, 2014b).

The Code is an AOTA Official Document and a public statement tailored to address the most prevalent ethical concerns of the occupational therapy profession. It outlines Standards of Conduct the public can expect from those in the profession. It should be applied to all areas of occupational therapy and shared with relevant stakeholders to promote ethical conduct.

The Code serves two purposes:

It provides aspirational Core Values that guide members toward ethical courses of action in professional and volunteer roles.

It delineates enforceable Principles and Standards of Conduct that apply to AOTA members.

Whereas the Code helps guide and define decision-making parameters, ethical action goes beyond rote compliance with these Principles and is a manifestation of moral character and mindful reflection. It is a commitment to benefit others, to virtuous practice of artistry and science, to genuinely good behaviors, and to noble acts of courage. Recognizing and resolving ethical issues is a systematic process that includes analyzing the complex dynamics of situations, weighing consequences, making reasoned decisions, taking action, and reflecting on outcomes. Occupational therapy personnel, including students in occupational therapy programs, are expected to abide by the Principles and Standards of Conduct within this Code. Personnel roles include clinicians (e.g., direct service, consultation, administration); educators; researchers; entrepreneurs; business owners; and those in elected, appointed, or other professional volunteer service.

The process for addressing ethics violations by AOTA members (and associate members, where applicable) is outlined in the Code's Enforcement Procedures (AOTA, 2014a).

Although the Code can be used in conjunction with licensure board regulations and laws that guide standards, of practice, the Code is meant to be a free-standing document, guiding ethical dimensions of professional behavior, responsibility, practice, and decision making. This Code is not exhaustive; that is, the Principles and Standards of Conduct cannot address every possible situation. Therefore, before making complex ethical decisions that require further expertise, occupational therapy personnel should seek out resources to assist in resolving ethical issues not addressed in this document. Resources can include, but are not limited to, ethics committees, ethics officers, the AOTA Ethics Commission or Ethics Program Manager, or an ethics consultant.

Core Values

The profession is grounded in seven long-standing Core Values: (1) Altruism, (2) Equality, (3) Freedom, (4) Justice, (5) Dignity, (6) Truth, and (7) Prudence. *Altruism* involves demonstrating concern for the welfare of others. *Equality* refers to treating all people impartially and free of bias. *Freedom* and personal choice are paramount in a profession in which the values and desires of the client guide our interventions. *Jus- tice* expresses a state in which diverse communities are inclusive; diverse communities are organized and structured such that all members can function, flourish, and live a satisfactory life. Occupational therapy personnel, by virtue of the specific nature of the practice of occupational therapy, have a vested interest in addressing unjust inequities that limit opportunities for participation in society (Braveman & Bass-Haugen, 2009).

Inherent in the practice of occupational therapy is the promotion and preservation of the individuality and *Dignity* of the client by treating him or her with respect in all interactions. In all situations, occupational therapy personnel must provide accurate information in oral, written, and electronic forms (*Truth*). Occupational therapy personnel use their clinical and ethical reasoning skills, sound judgment, and reflection to make decisions in professional and volunteer roles (*Prudence*).

The seven Core Values provide a foundation to guide occupational therapy personnel in their interactions with others. Although the Core Values are not themselves enforceable standards, they should be considered when determining the most ethical course of action.

Principles and Standards of Conduct

The Principles and Standards of Conduct that are enforceable for professional behavior include (1) Beneficence, (2) Nonmaleficence, (3) Autonomy, (4) Justice, (5) Veracity, and (6) Fidelity. Reflection on the historical foundations of occupational therapy and related professions resulted in the inclusion of Principles that are consistently referenced as a guideline for ethical decision making.

BENEFICENCE

Principle 1. Occupational therapy personnel shall demonstrate a concern for the well-being and safety of the recipients of their services.

Beneficence includes all forms of action intended to benefit other persons. The term *beneficence* connotes acts of mercy, kindness, and charity (Beauchamp & Childress, 2013). Beneficence requires taking action by helping others, in other words, by promoting good, by preventing harm, and by removing harm. Examples of beneficence include protecting and defending the rights of others, preventing harm from occurring to others, removing conditions that will cause harm to others, helping persons with disabilities, and rescuing persons in danger (Beauchamp & Childress, 2013).

RELATED STANDARDS OF CONDUCT

Occupational therapy personnel shall

A. Provide appropriate evaluation and a plan of intervention for recipients of occupational therapy services specific to their needs.
B. Reevaluate and reassess recipients of service in a timely manner to determine whether goals are being achieved and whether intervention plans should be revised.
C. Use, to the extent possible, evaluation, planning, intervention techniques, assessments, and therapeutic equipment that are evidence based, current, and within the recognized scope of occupational therapy practice.
D. Ensure that all duties delegated to other occupational therapy personnel are congruent with credentials, qualifications, experience, competency, and scope of practice with respect to service delivery, supervision, fieldwork education, and research.
E. Provide occupational therapy services, including education and training that are within each practitioner's level of competence and scope of practice.
F. Take steps (e.g., continuing education, research, supervision, training) to ensure proficiency, use careful judgment, and weigh potential for harm when generally recognized standards do not exist in emerging technology or areas of practice.
G. Maintain competency by ongoing participation in education relevant to one's practice area.

H. Terminate occupational therapy services in collaboration with the service recipient or responsible party when the services are no longer beneficial.

I. Refer to other providers when indicated by the needs of the client.

J. Conduct and disseminate research in accordance with currently accepted ethical guidelines and standards for the protection of research participants, including determination of potential risks and benefits.

NONMALEFICENCE

Principle 2. Occupational therapy personnel shall refrain from actions that cause harm.

Nonmaleficence "obligates us to abstain from causing harm to others" (Beauchamp & Childress, 2013, p. 150). The Principle of *Nonmaleficence* also includes an obligation to not impose risks of harm even if the potential risk is without malicious or harmful intent. This Principle often is examined under the context of due care. The standard of *due care* "requires that the goals pursued justify the risks that must be imposed to achieve those goals" (Beauchamp & Childress, 2013, p. 154). For example, in occupational therapy practice, this standard applies to situations in which the client might feel pain from a treatment intervention; however, the acute pain is justified by potential longitudinal, evidence-based benefits of the treatment.

RELATED STANDARDS OF CONDUCT

Occupational therapy personnel shall

A. Avoid inflicting harm or injury to recipients of occupational therapy services, students, research participants, or employees.

B. Avoid abandoning the service recipient by facilitating appropriate transitions when unable to pro- vide services for any reason.

C. Recognize and take appropriate action to remedy personal problems and limitations that might cause harm to recipients of service, colleagues, students, research participants, or others.

D. Avoid any undue influences that may impair practice and compromise the ability to safely and competently provide occupational therapy services, education, or research.

E. Address impaired practice and, when necessary, report it to the appropriate authorities.

F. Avoid dual relationships, conflicts of interest, and situations in which a practitioner, educator, student, researcher, or employer is unable to maintain clear professional boundaries or objectivity.

G. Avoid engaging in sexual activity with a recipient of service, including the client's family or significant other, student, research participant, or employee, while a professional relationship exists.

H. Avoid compromising the rights or well-being of others based on arbitrary directives (e.g., unrealistic productivity expectations, falsification of documentation, inaccurate coding) by exercising professional judgment and critical analysis.

I. Avoid exploiting any relationship established as an occupational therapy clinician, educator, or researcher to further one's own physical, emotional, financial, political, or business interests at the expense of recipients of services, students, research participants, employees, or colleagues.

J. Avoid bartering for services when there is the potential for exploitation and conflict of interest.

AUTONOMY

Principle 3. Occupational therapy personnel shall respect the right of the individual to self-determination, privacy, confidentiality, and consent.

The Principle of *Autonomy* expresses the concept that practitioners have a duty to treat the client according to the client's desires, within the bounds of accepted standards of care, and to protect the client's confidential information. Often, respect for Autonomy is referred to as the *self-*

determination principle. However, respecting a person's autonomy goes beyond acknowledging an individual as a mere agent and also acknowledges a person's right "to hold views, to make choices, and to take actions based on [his or her] values and beliefs" (Beauchamp & Childress, 2013, p. 106). Individuals have the right to make a determination regarding care decisions that directly affect their lives. In the event that a person lacks decision-making capacity, his or her autonomy should be respected through involvement of an authorized agent or surrogate decision maker.

RELATED STANDARDS OF CONDUCT

Occupational therapy personnel shall
A. Respect and honor the expressed wishes of recipients of service.
B. Fully disclose the benefits, risks, and potential outcomes of any intervention; the personnel who will be providing the intervention; and any reasonable alternatives to the proposed intervention.
C. Obtain consent after disclosing appropriate information and answering any questions posed by the recipient of service or research participant to ensure voluntariness.
D. Establish a collaborative relationship with recipients of service and relevant stakeholders to pro- mote shared decision making.
E. Respect the client's right to refuse occupational therapy services temporarily or permanently, even when that refusal has potential to result in poor outcomes.
F. Refrain from threatening, coercing, or deceiving clients to promote compliance with occupational therapy recommendations.
G. Respect a research participant's right to withdraw from a research study without penalty.
H. Maintain the confidentiality of all verbal, written, electronic, augmentative, and nonverbal communications, in compliance with applicable laws, including all aspects of privacy laws and exceptions thereto (e.g., Health Insurance Portability and Accountability Act [Pub. L. 104–191], Family Educational Rights and Privacy Act [Pub. L. 93–380]).
I. Display responsible conduct and discretion when engaging in social networking, including but not limited to refraining from posting protected health information.
J. Facilitate comprehension and address barriers to communication (e.g., aphasia, differences in language, literacy, culture) with the recipient of service, (or responsible party), student, or research participant.

JUSTICE

Principle 4. Occupational therapy personnel shall promote fairness and objectivity in the provision of occupational therapy services.

The Principle of *Justice* relates to the fair, equitable, and appropriate treatment of persons (Beauchamp & Childress, 2013). Occupational therapy personnel should relate in a respectful, fair, and impartial manner to individuals and groups with whom they interact. They should also respect the applicable laws and standards related to their area of practice. Justice requires the impartial consideration and consistent following of rules to generate unbiased decisions and promote fairness. As occupational therapy personnel, we work to uphold a society in which all individuals have an equitable opportunity to achieve occupational engagement as an essential component of their life.

RELATED STANDARDS OF CONDUCT

Occupational therapy personnel shall
A. Respond to requests for occupational therapy services (e.g., a referral) in a timely manner as deter- mined by law, regulation, or policy.

B.   Assist those in need of occupational therapy services in securing access through available means.
C.   Address barriers in access to occupational therapy services by offering or referring clients to financial aid, charity care, or pro bono services within the parameters of organizational policies.
D.   Advocate for changes to systems and policies that are discriminatory or unfairly limit or prevent access to occupational therapy services.
E.   Maintain awareness of current laws and AOTA policies and Official Documents that apply to the profession of occupational therapy.
F.   Inform employers, employees, colleagues, students, and researchers of applicable policies, laws, and Official Documents.
G.   Hold requisite credentials for the occupational therapy services they provide in academic, research, physical, or virtual work settings.
H.   Provide appropriate supervision in accordance with AOTA Official Documents and relevant laws, regulations, policies, procedures, standards, and guidelines.
I.   Obtain all necessary approvals prior to initiating research activities.
J.   Refrain from accepting gifts that would unduly influence the therapeutic relationship or have the potential to blur professional boundaries, and adhere to employer policies when offered gifts.
K.   Report to appropriate authorities any acts in practice, education, and research that are unethical or illegal.
L.   Collaborate with employers to formulate policies and procedures in compliance with legal, regulatory, and ethical standards and work to resolve any conflicts or inconsistencies.
M.   Bill and collect fees legally and justly in a manner that is fair, reasonable, and commensurate with services delivered.
N.   Ensure compliance with relevant laws, and promote transparency when participating in a business as owner, stockholder, partner, or employee.
O.   Ensure that documentation for reimbursement purposes is done in accordance with applicable laws, guidelines, and regulations.
P.   Refrain from participating in any action resulting in unauthorized access to educational content or exams (including but not limited to sharing test questions, unauthorized use of or access to content or codes, or selling access or authorization codes).

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VERACITY

Principle 5. Occupational therapy personnel shall provide comprehensive, accurate, and objective information when representing the profession.

Veracity is based on the virtues of truthfulness, candor, and honesty. The Principle of *Veracity* refers to comprehensive, accurate, and objective transmission of information and includes fostering understanding of such information (Beauchamp & Childress, 2013). Veracity is based on respect owed to others, including but not limited to recipients of service, colleagues, students, researchers, and research participants.

In communicating with others, occupational therapy personnel implicitly promise to be truthful and not deceptive. When entering into a therapeutic or research relationship, the recipient of service or research participant has a right to accurate information. In addition, transmission of information is incomplete with- out also ensuring that the recipient or participant understands the information provided.

Concepts of veracity must be carefully balanced with other potentially competing ethical principles, cultural beliefs, and organizational policies. Veracity ultimately is valued as a means to establish trust and strengthen professional relationships. Therefore, adherence to the Principle of Veracity also requires thoughtful analysis of how full disclosure of information may affect outcomes.

RELATED STANDARDS OF CONDUCT

Occupational therapy personnel shall

A.　　Represent credentials, qualifications, education, experience, training, roles, duties, competence, contributions, and findings accurately in all forms of communication.

B.　　Refrain from using or participating in the use of any form of communication that contains false, fraudulent, deceptive, misleading, or unfair statements or claims.

C.　　Record and report in an accurate and timely manner and in accordance with applicable regulations all information related to professional or academic documentation and activities.

D.　　Identify and fully disclose to all appropriate persons errors or adverse events that compromise the safety of service recipients.

E.　　Ensure that all marketing and advertising are truthful, accurate, and carefully presented to avoid misleading recipients of service, research participants, or the public.

F.　　Describe the type and duration of occupational therapy services accurately in professional contracts, including the duties and responsibilities of all involved parties.

G.　　Be honest, fair, accurate, respectful, and timely in gathering and reporting fact-based information regarding employee job performance and student performance.

H.　　Give credit and recognition when using the ideas and work of others in written, oral, or electronic media (i.e., do not plagiarize).

I.　　Provide students with access to accurate information regarding educational requirements and academic policies and procedures relative to the occupational therapy program or educational institution.

J.　　Maintain privacy and truthfulness when using telecommunication in the delivery of occupational therapy services.

FIDELITY

Principle 6. Occupational therapy personnel shall treat clients, colleagues, and other professionals with respect, fairness, discretion, and integrity.

The Principle of Fidelity comes from the Latin root *fidelis,* meaning loyal. *Fidelity* refers to the duty one has to keep a commitment once it is made (Veatch, Haddad, & English, 2010). In the health professions, this commitment refers to promises made between a provider and a client or patient based on an expectation of loyalty, staying with the client or patient in a time of need, and compliance with a code of ethics. These promises can be implied or explicit. The duty to disclose information that is potentially meaningful in making decisions is one obligation of the moral contract between provider and client or patient (Veatch et al., 2010).

Whereas respecting Fidelity requires occupational therapy personnel to meet the client's reasonable expectations the Principle also addresses maintaining respectful collegial and organizational relationships (Purtilo & Doherty, 2011). Professional relationships are greatly influenced by the complexity of the environment in which occupational therapy personnel work. Practitioners, educators, and researchers alike must consistently balance their duties to service recipients, students, research participants, and other professionals as well as to organizations that may influence decision making and professional practice.

RELATED STANDARDS OF CONDUCT

Occupational therapy personnel shall

A.　　Preserve, respect, and safeguard private information about employees, colleagues, and students unless otherwise mandated or permitted by relevant laws.

B.　　Address incompetent, disruptive, unethical, illegal, or impaired practice that jeopardizes the safety or well-being of others and team effectiveness.

C.　　Avoid conflicts of interest or conflicts of commitment in employment, volunteer roles, or research.

D.　　Avoid using one's position (employee or volunteer) or knowledge gained from that position in such a manner as to give rise to real or perceived conflict of interest among the person, the employer, other AOTA members, or other organizations.

E.　　Be diligent stewards of human, financial, and material resources of their employers, and refrain from exploiting these resources for personal gain.

F.　　Refrain from verbal, physical, emotional, or sexual harassment of peers or colleagues.

G.   Refrain from communication that is derogatory, intimidating, or disrespectful and that unduly discourages others from participating in professional dialogue.

H.   Promote collaborative actions and communication as a member of interprofessional teams to facilitate quality care and safety for clients.

I.   Respect the practices, competencies, roles, and responsibilities of their own and other professions to promote a collaborative environment reflective of interprofessional teams.

J.   Use conflict resolution and internal and alternative dispute resolution resources as needed to resolve organizational and interpersonal conflicts, as well as perceived institutional ethics violations.

K.   Abide by policies, procedures, and protocols when serving or acting on behalf of a professional organization or employer to fully and accurately represent the organization's official and authorized positions

L.   Refrain from actions that reduce the public's trust in occupational therapy.

M.   Self-identify when personal, cultural, or religious values preclude, or are anticipated to negatively affect, the professional relationship or provision of services, while adhering to organizational policies when requesting an exemption from service to an individual or group on the basis of conflict of conscience.

Professional Standards Policy

HERMAN OSTROW SCHOOL OF DENTISTRY
OF USC

Policy Title:	Professional Standards Policy		
Policy #: PC-01	*Effective Date:* 12/1/2010		*Revision Dates:* 10/2016; 11/2019
	Review Cycle: 3 years		*Next Revision Date:* 11/2022
Approved By: Clinical Practice Committee			
Functional Entities: Herman Ostrow School of Dentistry and its Affiliates – Faculty Practice, Biokinesiology and Physical Therapy, and Occupational Science and Occupational Therapy			
Originating Department: Professional Standards and Policies Subcommittee			

PROFESSIONAL STANDARDS FOR FACULTY, STAFF AND STUDENTS AT THE HERMAN OSTROW SCHOOL OF DENTISTRY OF USC

The faculty, staff and students are committed to creating a welcoming environment that is conducive to optimal education, research, and clinical care. This is sustained by a renewed commitment to the highest level of professionalism in all interactions with patients, peers, supervisors, staff and faculty in all disciplines. Respect for every person is the value central to all encounters with students, staff, faculty and patients.

The School is committed to teaching and evaluating professionalism for students and faculty/staff members at all levels. We will celebrate expressions of positive professional attitudes and behavior as well as achievement of academic excellence.

Everyone at the School should be familiar with and abide by academic policies of the University relating to professional behavior. In health care institutions, faculty members, staff and students are expected to abide by relevant policies and procedures governing codes of conduct. These professional standards are complementary to such academic and institutional policies. In nurturing the intellectual and personal development of students, it is important to recognize the inherent power imbalance in the teacher-student relationship and to create a respectful, interactive environment suitable for learning. The professional standards articulated here demonstrate the

School's recognition of the special professional privileges granted by society which in turn expects us to reflect in work and deed our commitment to their welfare. Consistent with this, the conduct of professionals should be characterized by the highest sense of ethical integrity and humanistic values. Sustaining all of the professions within the School through the transmission of such values is a moral obligation for all.

All faculty members, all students in every program and all clinical and non-academic staff are expected to abide by these standards while in any setting where the activities are under the auspices of the Herman Ostrow School of Dentistry of USC and the University of Southern California.

SECTION I AFFIRMATION OF THE COMMITMENTS OF PROFESSIONALS

Honesty

Have a commitment to:
- Maintain the highest standards of personal and academic honesty and integrity;
- Conduct research in an ethical and unbiased manner, report results truthfully, and credit ideas developed and work done by others;
- Record accurately history and physical findings, test results, and other information pertinent to the care of the patient;
- Communicate truthfully and compassionately with patients, students, faculty members and staff both verbally and in writing;
- Neither give or receive aid in examinations unless such cooperation is expressly permitted by the instructor.

Respect for Others

Have a commitment to:
- Not discriminate in any interactions with others, on protected grounds such as age, race, color, ancestry, place of origin, political belief, religion, marital status, family status, physical or mental disability, gender, sexual orientation or unrelated criminal convictions.
- Contribute to a classroom atmosphere conducive to learning;
- Respect the personal boundaries of others including, but not limited to, refraining from making unwanted romantic or sexual overtures, protecting personal information, and respecting individual workspace;
- Treat patients and their families with respect and dignity both in their presence and in discussions with other members of the health care team;
- Assure that interactions with students, teachers, patients, families, health care and research colleagues, both academic and non-academic, are always respectful and considerate;
- Respect patient autonomy at all times by discussing treatment options with the patient or surrogate/guardian;
- Ensure appropriate consultation with the identified family member or guardian when a patient lacks the capacity to make treatment decisions.

- Respect the privacy of patients and research participants;

Confidentiality

Have a commitment to:
- Regard the confidentiality of patients and research and educational participants as a central obligation;
- Assure confidentiality by limiting discussion of patient health issues to appropriate settings for clinical or educational purposes and to care givers identified by patient consent.

Responsibility

Have a commitment to:
- Assure the privacy of patient wellbeing in the clinical setting;
- Create environments that are conducive to learning and the performance of professional academic work;
- Recognize your own limitations, seek help and consult when your level of experience is inadequate or exceeded
- Be accountable for personal decisions in the workplace;
- Adopt strategies to deal with errors or misjudgments;
- Not engage in exploitative relationships with colleagues, students, patients, or their families for emotional, financial, research, educational or sexual purposes;
- Conduct themselves professionally regarding demeanor, use of language, and appearance in health care settings;
- Encourage and model language, appearance, and demeanor appropriate to the professional healthcare setting;
- Not use alcohol or drugs in any way that could interfere with academic, professional and clinical responsibilities;
- Appropriately acknowledge contributions made to research publications by others;
- Display ethical interactions with industry, declaring conflict of interest situations when they occur;
- Disclose to sponsors, universities, journals or funding agencies, any material conflict of interest, financial or other, that might influence their decisions on review of manuscripts or applications, testing products or undertaking work sponsored from outside sources;
- Participate in the processes of self-regulation of the professions;
- Report professional misconduct and unskilled practice to the appropriate authorities, respecting the need to avoid unjustly discrediting the reputation of other members of the health care team.

SECTION II
RIGHTS AND RESPONSIBILITIES OF STUDENTS IN THE SCHOOL

Rights:

Students have the right to:

- Be challenged to learn, but not abused, harassed, or humiliated;
- Be free of romantic or sexual overtures from those who are supervising their work;
- Ask questions or express disagreement with faculty members or supervisors without fear of negative consequences;
- Clear guidelines regarding assignments and examinations, as well as to testing environments that are conducive to academic honesty;
- Fair, respectful, objective, timely, frequent, and constructive evaluations from faculty members and supervisors;
- Meaningful and purposeful educational experiences in the clinical setting;
- Have research contributions appropriately represented and acknowledged;
- A clear outline of clinical responsibilities, and not to be asked to accept a level of responsibility that is inappropriate for the level of education;
- Refuse to perform procedures or examinations/assessments which are felt to be unethical or inappropriate;
- A clear process to address any evaluations or requested activities the student deems to be inaccurate or inappropriate.

Responsibilities:

- Always be truthful in relationships with patients, and not misrepresent their qualifications;
- Provide fair, respectful, objective, timely, and constructive evaluations regarding the academic program and its instructors;
- Not engage in sexual or romantic relations with those being taught or supervised or with supervisors;
- Not unjustly discredit the reputations of other learners, teachers, or members of the health care team;
- Address any violations of the standards that are observed in the course of their professional development.

SECTION III
RIGHTS AND RESPONSIBILITES OF FACULTY & STAFF MEMBERS

Rights:

Faculty and staff members have the right to:
- Be free of abuse, harassment or humiliation;
- Be free of romantic or sexual overtures from students;
- Ask relevant, responsible questions or respectfully express disagreement with students;
- Fair, constructive, respectful, timely and objective evaluations from students and peers;
- Challenge learners to address complex issues through a high level of critical thinking and clinical reasoning;
- Discuss in the classroom any material which has a significant relationship to the subject matter as defined in the approved course description;
- Discuss controversial matters in the learning context, providing they are within their own particular field of study;
- Freedom in the exposition of a subject which he or she teaches, either in the classroom or elsewhere, providing appropriate discretion and good judgment is exercised;
- Engage in public service activities;
- Full freedom in research and the publication of results in accordance with University policy;
- Seek changes in institutional policy through established University procedures.

Responsibilities:
The Faculty and staff are committed to creating a welcoming environment that is conducive to optimal education, research, and clinical care. To achieve this,

Faculty and staff members have a responsibility to:
- Model professional behavior for students;
- Teach the concepts of professional behavior, ethical research and practice;
- Provide students with challenges to learn, without abuse, harassment, or humiliation;
- Not engage in sexual or romantic relations with those being taught or supervised;
- Provide teaching, supervision and training while respecting personal boundaries;
- Allow the expression of disagreement without the fear of punishment, reprisals or retribution;
- Provide clear guidelines to learners and others regarding assignments, examinations, and test environments;
- Provide objective, timely, fair and constructive evaluations of students, faculty, and support staff;

- Ensure that the research and clinical teaching environment and experiences are appropriate for the needs of the student;
- Clearly outline for students and trainees the appropriate levels of clinical responsibility;
- Allow students to decline to perform procedures for which they feel are outside their area of competence or inconsistent with their personal beliefs;
- Not unjustly discredit the reputations of peers, students, staff, or members of the health care team
- Maintain and enhance personal competence through commitment to lifelong professional development and practice evaluation.
- Accept external scrutiny of professional performance;
- Maintain fiscal responsibility in relation to clinical and research programs and contracts.

Appendix D

The USC Student Handbook

The USC Student Handbook is the official University student handbook, which contains student community expectations, other policies applicable to students, and information about university resources available to assist students in their pursuit of academic success. The USC Student Handbook is available through the USC website here:
https://policy.usc.edu/studenthandbook/

Appendix E

Academic Integrity

The USC Disciplinary Process
(See The USC Student Handbook, p. 31 - Integrity and Accountability:
THE USC DISCIPLINARY PROCESS at https://policy.usc.edu/studenthandbook/)

Students are expected to make themselves aware of and abide by the university community's standards of behavior as articulated in the Prohibited Discrimination, Harassment, and Retaliation policy, and in related policy statements. Students accept the rights and responsibilities of membership in the USC community when they are admitted to the university. In the university, as elsewhere, ignorance is not an acceptable justification for violating community standards. Lack of intent or awareness of university standards normally will not be accepted as excuses for violations and will normally receive the same consequences as deliberate violations.

Because the functions of a university depend on honesty and integrity among its members, the university expects from its students a higher standard of conduct than the minimum required to avoid disciplinary action. Likewise, while many of the university's standards of conduct parallel the laws of society in general, university standards may exceed those found elsewhere in society.

Please complete the following tutorial concerning academic integrity at USC:
https://libraries.usc.edu/tutorials?search=academic+integrity

Further information about academic integrity processes may be found at:
https://academicintegrity.usc.edu/

Appendix F

How to Avoid Plagiarism

Plagiarism is the unethical use of someone else's words or ideas. As part of its commitment to academic integrity, USC has provided the following online tutorial:
http://libguides.usc.edu/c.php?g=234929&p=1559180

GUIDE TO AVOIDING PLAGIARISM (The guide "Avoiding Plagiarism" is available online, along with many additional writing resources at The Writing Center:
https://dornsife.usc.edu/writingcenter/handouts/
https://dornsife.usc.edu/assets/sites/903/docs/Working_with_Sources/Trojan_Integrity_-_Guide_to_Avoiding_Plagiarism.pdf

The following information, with minor modifications, is excerpted from the Student Guide to the Expository Writing Program (1996-97) Students should assume these general principles apply to all courses at USC unless an individual instructor gives explicit alternate instructions for his or her assignment.

By its very nature, writing involves both individual and collaborative activity. Even when a piece of writing has but one author, that author employs a language system that is shared with others and draws upon ideas and values that are not his or hers alone. Indeed, one of the most important parts of becoming a writer within the academic community is learning how to balance the obligations of individuality and collaboration. As a college writer, you are expected to use writing to develop and assert your own ideas and beliefs -- to think for yourself. But at the same time you are expected, in college writing, to engage the thinking of others. You are expected to place your own writing within the context of academic discourse by using or criticizing arguments from that discourse. This double obligation provides a framework in which to discuss plagiarism.

Plagiarism
Plagiarism is the unacknowledged and inappropriate use of the ideas or wording of another writer. Plagiarism undermines the intellectual collaboration -- the exchange of ideas -- that should mark academic discourse because it permits the writer to avoid any genuine involvement with the concepts or opinions of others. Because the false discourse of plagiarism corrupts values to which the university community is fundamentally committed -- the pursuit of knowledge, intellectual honesty -- plagiarism is considered a grave violation of academic integrity and the sanctions against it are correspondingly severe (sanctions recommended by the university range from a grade of "F" in the course to suspension from the university). Most simply, plagiarism can be characterized as "academic theft."

As defined on p.11 of The USC Student Handbook - Integrity and Accountability: Student Community Expectations (https://policy.usc.edu/studenthandbook/), plagiarism includes:
- "The submission of material authored by another person but represented as the student's own work, whether that material is paraphrased or copied in verbatim or near-verbatim form.
- Re-using any portion of one's own work (essay, term paper, project, or other

assignment) previously submitted without citation of such and without permission of the instructor(s) involved.
    • Improper acknowledgment of sources in essays or papers, including drafts. Also, all students involved in collaborative work (as permitted by the instructor) are expected to proofread the work and are responsible for all particulars of the final draft.
    • Acquisition of academic work, such as term papers, solutions, or other assignments, from any source and the subsequent presentation of those materials as the student's own work, or providing academic work, such as term papers, solutions, or assignments that another student submits as their own work."

Avoiding Plagiarism
Because of the serious penalties for plagiarism, you should insure that any writing you submit represents your own assertions and abilities and incorporates other texts in an open and honest manner. The best way to avoid plagiarism is to be careful to document your sources, even when you are only making use of data or ideas rather than an actual quotation. In academic assignments, writing is assumed to be the original words and thoughts of the student unless told otherwise (i.e.: material from other sources is clearly and properly cited).

When to Document Outside Sources

Example 1
    o   Repeating Another's Words Without Acknowledgment

Original Source
(From Neil Postman. Amusing Ourselves to Death. New York: Penguin, 1985. 127-128.)
The television commercial is the most peculiar and pervasive form of communication to issue forth from the electric plug....The move away from the use of propositions in commercial advertising began at the end of the nineteenth century. But it was not until the 1950's that the television commercial made linguistic discourse obsolete as the basis for product decisions. By substituting images for claims, the pictorial commercial made emotional appeal, not tests of truth, the basis of consumer decisions.

Plagiarized Version (essentially verbatim)
Television commercials have made language obsolete as a basis for making decisions about products. The pictorial commercial has substituted images for claims and thereby made emotional appeal, rather than tests of truth, the basis of consumer decisions.

Although the writer has changed, rearranged, and deleted words in the version above, the text is essentially the same as the original source. In paraphrasing, you take the writer's ideas and put them in your own words. It is not a process of substituting synonyms or rearranging the order of words. Even if the version above gave credit to Postman for his ideas, the passage would be considered plagiarized.

Correctly Paraphrased and Documented Version
Postman argues that television commercials do not use language or "test of truth" to help viewers decide whether to buy a product. Instead, they rely on images to create an emotional appeal that influences consumers' decisions (127-128).

In the correctly paraphrased and documented version above, most of the ideas have been paraphrased or restated in the writer's own words. Quotation marks have been placed around a key phrase that is taken directly from the original source. In addition, the name of the author refers readers to a corresponding entry in the Works Cited page, and the page number indicates the location of the information in the source cited.

Example 2
- o   Presenting Another Writer's Argument or Point of View Without Acknowledgment

Original Source
(From Arlene Skolnick. Embattled Paradise. New York: Basic Books, 1991. 11.)
The changes in larger society, as well as their reverberations in the family, call into question basic assumptions about the nature of American society, it family arrangements, and Americans themselves. A "cultural struggle" ensues as people debate the meaning of change. One of these periods of cultural upheaval occurred in the early decades of the nineteenth century; a second occurred in the decades just before and after the turn of the twentieth century. For the last thirty years, we have been living through another such wave of social change.
Three related structural changes seem to have set the current cycle of family change in motion: first, the shift into a "postindustrial" information and service economy; second, a demographic revolution that not only created mass longevity but reshaped the individual and family life course, creating life stages and circumstances unknown to earlier generations; third, a process I call "psychological gentrification," which involves an introspective approach to experience, a greater sense of one's own individuality and subjectivity, a concern with self-fulfillment and self-development. This is the change misdiagnosed as narcissism.

Plagiarized Version
Three periods of cultural upheaval in the nineteenth and twentieth centuries have caused major changes in American society. The first occurred during the beginning of the nineteenth century, the second during the decades before and after 1900, and the third has been underway for the last thirty years. Three structural changes occurring during the current upheaval are primarily responsible for changes in American families. These include the development of a postindustrial information and service economy, demographics changes (including longer life spans that have created new and different life stages), and an increased sense of individuality including a desire for self-fulfillment and self-development.

The writer of the passage above correctly paraphrases Skolnick's ideas but does not give her credit for her ideas or line of argument. The version below eliminates the plagiarism by attributing the ideas to Skolnick.

Correctly Documented Version
According to Skolnick, three periods of cultural upheaval in the nineteenth and twentieth centuries have caused major changes in American society. The first occurred during the beginning of the nineteenth century, the second during the decades before and after 1900, and the third has been underway for the last thirty years. Three structural changes occurring during the current upheaval are primarily responsible for changes in American families. These include the development of a postindustrial information and service economy, demographics changes (including longer life spans that have created new and different life stages), and an increased

sense of individuality including a desire for self-fulfillment and self-development (11).

In the version above, a reader would be able to locate the source by finding the title of Skolnick's book in the Works Cited page and looking on page 11, the number indicated at the end of the paragraph.

Example 3
- o   Repeating Another Writer's Particularly Apt Phrase or Term Without Acknowledgment

Original Source
(From Arlene Skolnick. Embattled Paradise. New York: Basic Books, 1991. 11.)
Three related structural changes seem to have set the current cycle of family change in motion: first, the shift into a "postindustrial" information and service economy; second, a demographic revolution that not only created mass longevity but reshaped the individual and family life course, creating life stages and circumstances unknown to early generations; third, a process I call "psychological gentrification," which involves an introspective approach to experience, a greater sense of one's own individuality and subjectivity, a concern with self-fulfillment and self-development. This is the change misdiagnosed as narcissism.

Plagiarized Version
The large number of "self-help" books published each year attest to Americans' concern with self-improvement and achieving more fulfilling lives. This process might be described as "psychological gentrification."

Correctly Documented Version
The large number of self-help books published each year attest to Americans' concern with self-improvement and their desire to have a more fulfilling life. Skolnick labels this process as "psychological gentrification" (11).

As the example above illustrates, putting quotation marks around a borrowed word or phrase is not sufficient documentation. You must also acknowledge the author and give the page numbers so a reader would be able to consult the original source and locate the word or phrase. In the original source, Skolnick takes credit ("a process I call") for coining the term "psychological gentrification." Quotation marks in the original appear to be used for emphasis. Phrases in quotations should be cited unless they have become common usage (e.g., "postindustrial" in the original source above).

Summary
Students should be aware that the above information addresses general standards taught by the Expository Writing Program concerning plagiarism and citation of sources. Individual instructors in all courses may specify additional requirements for their assignments, and the instructor responsible for an assignment should be consulted when students have questions regarding standards for that assignment.

Resources
Specific Course Professors
Instructors may require more specific standards for documenting source materials in written assignments. Any questions or uncertainty about citation should be addressed to the instructor for the course, either during established office hours or by arrangement.

The Writing Center

Part of the USC Writing Program, (https://dornsife.usc.edu/writingcenter/) The Writing Center (THH-310, 740-3691) offers tutoring for writing papers and improving writing skills for students.

Appendix G

Academic Misconduct Investigation Guidelines

The Office of Academic Integrity (OAI) (https://academicintegrity.usc.edu/) has guidelines regarding academic misconduct investigation as follows:

"USC empowers and expects its faculty to respond to all suspected acts of academic dishonesty that occur in their courses. If an instructor has reason to believe, based on observation or other information, that a student has violated the university's academic integrity standards, the instructor is expected to submit a report to the Office of Academic Integrity. Some allegations of academic dishonesty may be resolved informally between a faculty and student through a Faculty-Student Resolution (FSR), while others will be resolved through the formal, Administrative Review process.

Faculty-Student Resolution
The FSR permits instructors to resolve academic dishonesty directly with a student if the following criteria are met:

- The student accepts responsibility for the allegation (and the instructor's proposed resolution);
- The alleged behavior is deemed appropriate by OAI for resolution between the instructor and student; and
- The student has not previously been held accountable for academic dishonesty through an FSR or through OAI.

An FSR form is completed and signed by the faculty and student involved and then submitted to OAI.

Administrative Review
Incidents reported to OAI and not resolved through an FSR will be reviewed through the Administrative Review process. OAI will send notice to the student involved (via USC email). The instructor on record will also be copied on the notification to the student.

The student will be invited to meet with OAI staff to discuss the incident, answer questions, and provide their perspective of what occurred.

If it is determined that there exists insufficient information to conclude that the student violated university policy by a preponderance of the evidence (i.e., what is more likely to have occurred) standard, then the case will be dismissed with no findings or outcomes issued.

If the student accepts responsibility for the allegations, OAI staff may seek to reach an agreement with the student during the administrative review as to appropriate outcomes. If an agreement is reached (i.e., the student accepts responsibility for the alleged violations and the outcomes proposed by OAI staff), the matter is considered resolved and no appeal is available.

If the student challenges either the findings of responsibility and/or the outcomes proposed by OAI staff, the next steps are dependent on the possible outcomes proposed by OAI staff.

If an outcome could include suspension, expulsion, revocation of admission, or revocation of degree, OAI staff will refer the matter to a review panel for its determination of responsibility and outcomes. The student's previous disciplinary record will be considered in determining appropriate outcomes and the student retains their ability to appeal the decision issued.

If there is no potential outcome of suspension, expulsion, revocation of admission, or revocation of degree, OAI staff will use a preponderance of evidence standard to determine if the student is responsible for the allegation(s) (there is no option for a review panel). If so, OAI staff will determine the appropriate outcomes with consideration of the student's previous disciplinary record (if any). The student may submit an appeal.

Review Panel
Review Panels consist of three to five members, designated by the Vice Provost for Academic Programs or designee, comprised of any combination of faculty, staff, and students, to consider the report/documentation and to hear from/ask questions in real time of the student, instructor (if available) and any relevant identified parties. The review panel shall determine by a preponderance of evidence standard if the student is responsible for the alleged violation, and, if applicable, outcomes.

Appeals
Appeals are documentary reviews determined solely on the merits of the student's submission. Appeals do not include an in-person or virtual presentation. Therefore, written submissions should be as complete as possible and no longer than five single-spaced typed pages with a font no smaller than a size of 10 point.

- Appeals are permitted by the student on one or more of the following grounds:
  New information that is sufficient to alter the determination of responsibility, and which the student/organization was not aware of or could not have reasonably obtained at the time of the initial review.
- Procedural error(s) that materially impacted the determination of responsibility. (Procedural or technical irregularities will not be sufficient to sustain an appeal unless found to have affected the determination of responsibility.)
- The outcome(s) assigned is (are) disproportionate to the determination of responsibility.

  The Vice Provost for Academic Programs or designee will consider the written appeal and information/documents considered in the review and provide a written decision to the student and OAI. The Vice Provost for Academic Programs or designee may uphold the initial decision in its entirety, send the case back to OAI for further review, reverse a finding of responsibility, modify the outcome(s), or dismiss the case. This decision is final and binding and there is no further avenue for appeal."

Complete information on policies and procedures that govern the relationship of students with the University can be found at the website of The Office of Academic Integrity at https://academicintegrity.usc.edu/.

Figure 9: Flow Chart of Academic Misconduct Investigation
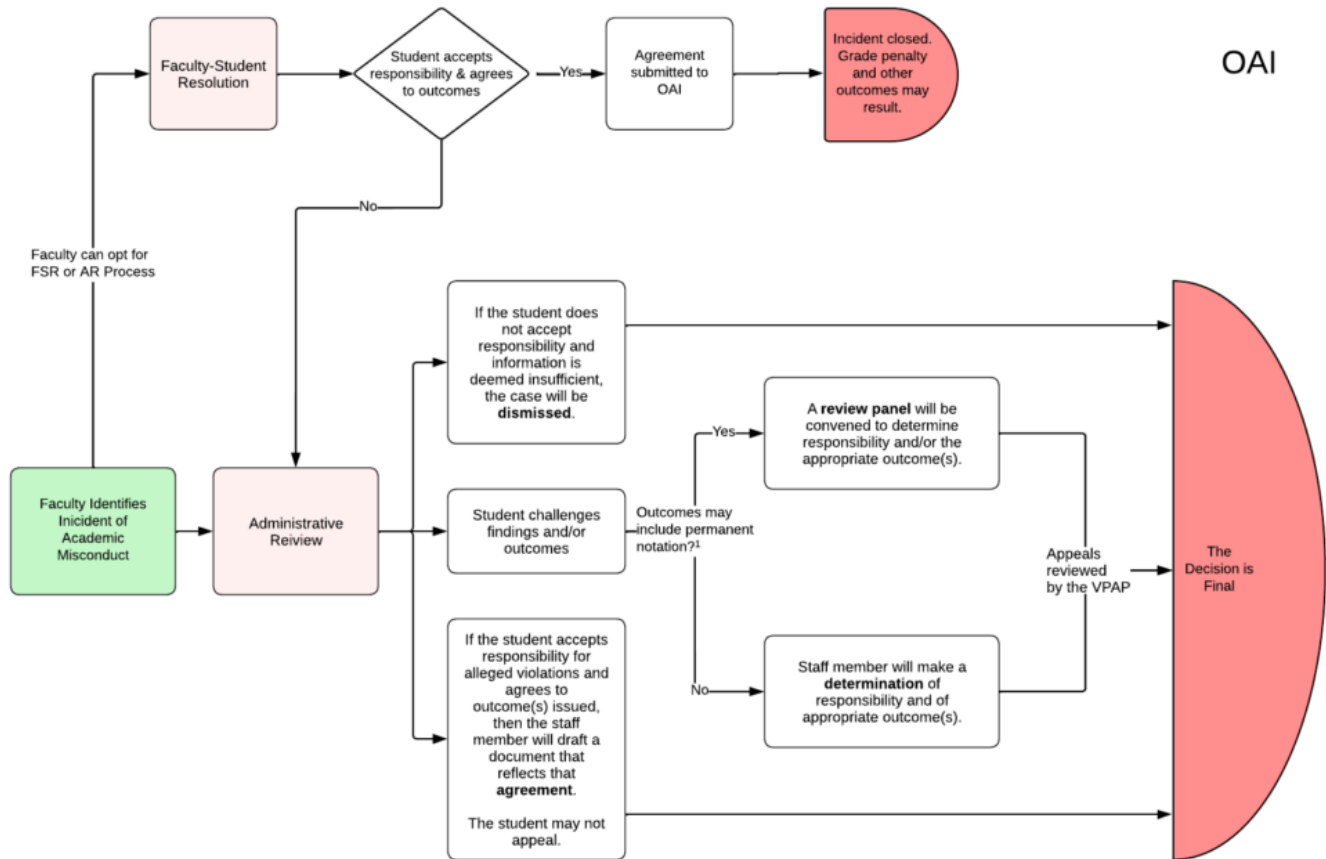
[1] Permanent notations include suspension, expulsion, revocation of degree, revocation of admission, and loss of formal recognition (student organizations)

Excerpted from The Office of Academic Integrity's website: https://academicintegrity.usc.edu/

Appendix H

Student Guidelines for Use of Social Media

Social media are an important part of communications among students in the USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy. USC Chan welcomes this form of active engagement and exchange, which helps us all build stronger connections with each other. USC Chan has adopted some guidelines to ensure that we make the best possible use of these pages, accounts, and groups.

We ask that all students agree to the following guidelines:

- Register any USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy - affiliated student group social media page as well as identify the administrator of the page, account or group, with the division's Director of Marketing.

- Explicitly state that the page or group has been created by USC Chan students and does not officially represent policies, practices, or views of the USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy.

- Open membership in any and all such social media groups to everyone affiliated with USC Chan.

- Respect others' views and opinions.

- Notify the USC Chan Director of Marketing of the closure or deletion of any such page, account or group, and/or any administrative change for any such page, account or group.

By participating in the USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy and its affiliate (Student Organization, caucuses and interest groups.) social media, USC students and other public users agree they will not do the following:

- Post material during any USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy class, fieldwork, or residency without receiving express permission from the instructor, fieldwork educator/supervisor, and/or residency preceptor in advance.

- Post material that the USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy and/or its affiliate groups determine is threatening, harassing, illegal, obscene, defamatory, libelous or hostile toward any individual or entity.

- Post any identifying information about an individual or an entity (contact information, birthday, social security number, etc.) in the body of personal comments without consent. This includes any information related to fieldwork sites, residencies, or other clinical facilities.

- Post material that infringes on the rights of the USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy or any individual or entity, including privacy, intellectual

property or publication rights. This includes the improper use of (but is not limited to) images, logos, videos, course content, documents, and white papers, among other examples. This also applies to fieldwork sites, residencies, and other clinical facilities.

- Post any content that is in violation of HIPAA (Health Insurance Portability and Accountability Act of 1996).

- Post advertisements for non-USC products or accept money to do promoted posts.

- Post chain letters, post the same comment multiple times, or otherwise distribute SPAM.

- Post comments under multiple names or using another person's name.

- Allow any other individual or entity to use personal student identification for posting or viewing comments.

If a user is found to be in violation of any of these standards, the USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy and its affiliate groups reserve the right to:

- Ban future posts from people who repeatedly violate the USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy's terms and conditions.

- Remove comments at any time.

- Report the incident to the student's academic Program Director.

Appendix I

APA Format

American Psychological Association (APA) Format Requirements for Papers

The APA Publication Manual is utilized by many professional journals including the *American Journal of Occupational Therapy* as a guide for manuscript submissions. Therefore, it is important for students to be familiar with these guidelines. The professional program faculty has designated the following areas as essential requirements for all papers assigned in the program. Students' papers that do not accurately follow these APA guidelines will be negatively impacted. Students are required to purchase the *Publication Manual of the American Psychological Association* (Seventh Edition) that provides details regarding these criteria.

Title page
Reference list (including on-line references)
Reference citations in text
Page numbers
Margins
Font type and size
Line spacing
Abbreviations
Direct quotes

Further information and support may be found under the Resources tab at The Writing Center Website: https://dornsife.usc.edu/writingcenter and at https://apastyle.apa.org.

Appendix J

Emergency Information

EMERGENCY INFORMATION
In the event of an emergency, information regarding conditions on the campus will be posted at
http://emergency.usc.edu. Students can also call the Emergency Information Line at **(213) 740-9233.**

VEOCI
VEOCI is a mass notification system that allows the Division to send updates and emergency alerts to everyone in our community through emails, phone calls, text messages, or social media channels. Any message regarding the safety or welfare of our community would be disseminated using VEOCI.

MAJOR EMERGENCY PROCEDURES
Emergencies such as earthquakes, civil disturbances, fires, and other major incidents can strike without warning. All students should be aware of procedures to be followed and sources of information in the event of a major campus emergency. Please visit
https://www.usc.edu/emergency/resources/ to familiarize yourself with university procedures. All students are urged to register with TrojansAlert (https://dps.usc.edu/services/trojans-alerts/)

UNIVERSITY EMERGENCY OPERATIONS
In a major emergency, the University will establish an Emergency Center in the CHP Building, in the Risk Management and Safety Office (Location: East Lake Parking Lot just outside of the CHP building). USC emergency teams will be dispatched to all areas of the campus to assist with urgent problems should the emergency warrant.

To Report an Emergency
Call the USC Department of Public Safety at **(323) 442-1000** on the Health Sciences Campus, or **(213) 740-4321** on the University Park Campus, or call **911**. The Department of Public Safety (DPS) prefers that they are contacted first, and then they can lead emergency responders to the exact location.

EVACUATION
If the building appears to be unsafe and must be evacuated, the outdoor evacuation assembly point for the Chan Division of Occupational Science and Occupational Therapy will be near the rose garden on the Alcazar side of the building. Evacuation will be facilitated by safety team members, who will direct building occupants to stairways, assist in ensuring that all building occupants evacuate safely, and account for personnel at the assembly area. If evacuation is necessary, the emergency coordinator, safety team, and available volunteers shall assist individuals with various needs, abilities, and/or disabilities. When evacuating, students should use the closest exit and assemble near the rose garden (Video for Evacuation Plan - How to Get to the Rose Garden)

EMERGENCY ON THE WEEKENDS, EVENINGS, AND HOLIDAYS
Call the University's emergency information line (**213-740-9233**) and/or the Chan Division of Occupational Science and Occupational Therapy (323-442-2850) for updates.

EMERGENCY IN THE CLASSROOMS
In the event of an emergency during a class, the faculty member present shall provide guidance to students in safe emergency procedures.

EMERGENCY KITS
Prepare an emergency kit for your home and vehicle. Consider purchasing the following items to have on hand:

- Fire extinguisher
- Adequate supplies of medications that you or family members are taking
- Crescent and pipe wrenches to turn off gas and water supplies
- First-aid kit and handbook
- Flashlights with extra bulbs and batteries
- Portable radio with extra batteries
- Water for each family member for at least two weeks (allow at least 1 gallon per person per day) and purification tablets or chlorine bleach to purify drinking water from other sources
- Canned and package foods, enough for several days and *mechanical* can opener. Extra food for pets if necessary
- Camp stove or barbecue to cook on outdoors (store fuel out of the reach of children)
- Waterproof, heavy-duty plastic bags for waste disposal.

If you take medication on a regular basis, you should carry extra medication with you at all times. The Division has purchased small emergency kits that have a nutrition bar and water in them.

EMERGENCY RECOMMENDATIONS
Consider mapping out an alternative route home that does not involve freeways in case the freeway you typically travel is damaged or closed (consider the WAZE app). Download the American Red Cross Emergency App which is available in the Apple Store and on Google Play (or text "GETEMERGENCY" to 90999). With the "I'm Safe" feature in the app, you can let people know you are safe following an emergency even if electrical power is down.

The Red Cross also offers the Safe and Well website which is a secure and more private option than the "I'm Safe" feature on the Emergency App. It allows people to list their own status and allows friends and family to search for messages form their loved ones. The Safe and Well website is a free public reunification tool: www.redcross.org/safeandwell .

An additional resource to consider is the USC Live Safe App, which is managed by the USC Department of Public Safety and the USC Department of Emergency Planning. Download here: https://dps.usc.edu/services/safety-app/

EMERGENCY DURING FIELDWORK
All students engaging in level I or level II fieldwork are under the supervision of a fieldwork educator at the fieldwork site. Each student should provide and maintain an active emergency contact number (friend or family member) in Exxat PRISM which will be provided to the fieldwork educator. Should an emergency occur while on fieldwork, the student will follow the emergency procedure at the site. If a student is injured while at fieldwork, the student or fieldwork educator should notify the fieldwork office of the incident and its ramifications immediately. The student should follow the

incident reporting procedure at the site and also file an incident report with the USC Risk Management and Insurance office: http://risk.usc.edu .

EARTHQUAKE

During an earthquake, duck and cover under a desk or table, or near an interior wall, and hold on until the shaking stops. When the shaking stops, assist others in the area, report any serious problems, and evacuate if the area appears unsafe, using stairways, not elevators. Assemble at the outside evacuation assembly area (CHP rose garden).

CIVIL DISTURBANCE

In the event of civil disturbance, all personnel will be informed of developments by Trojan Alert text message, voicemail broadcast, and other means. Depending on the situation, members of the campus community may be advised to remain temporarily on campus and inside a building. Emergency teams will inform everyone in the campus community of recommended safety measures and alerts.

Appendix K

Quick Guide to Student Resources at USC

For a more complete list of student resources at USC and the Chan Division, please refer to the Student Supports Resource Packet found in the Student Resource Drive: https://chan.usc.edu/students/drive

1. USC Student Health
https://studenthealth.usc.edu

HSC Campus (Eric Cohen):
1510 San Pablo St., Suite 104 LA, CA 90033
323.442.5631
UPC Campus (Engemann):
1031 West 34th Street, LA, CA 90089
213.740.9355
https://studenthealth.usc.edu/hours/

2. Campus Support and Intervention
https://campussupport.usc.edu/
Tutor Campus Center, TCC Suite 421
Los Angeles, CA 90089
uscsupport@usc.edu
213.740.0411

3. Trojans Care 4 Trojans (TC4T)
This site allows a member of the USC community to anonymously report a concern about a fellow member of the USC community. The site is also available to family members/non-USC individuals so that they can initiate a report. The report is routed to the Campus Support and Intervention office.
https://campussupport.usc.edu/trojans-care-4-trojans/
Campus Support & Intervention
Tutor Campus Center, TCC Suite 421
Los Angeles, CA 90089
213.740.0411
uscsupport@usc.edu

4. Student Basic Needs
https://studentbasicneeds.usc.edu/
basicneeds@usc.edu

5. Relationship and Sexual Violence Prevention Services (RSVP) Confidenctial Advocates Program
https://sites.usc.edu/clientservices/talk-to-an-advocate/what-are-advocates/
1031 West 34th St., Suite 356
LA, CA 90089 (3rd floor of Engemann Student Health Center)
24-hour crisis counseling: 213.740.9355, ask to be connected to a confidential advocate.

6. Office of Religious Life
https://orl.usc.edu/
UPC Office: University Religious Center, Rm 106
HSC Office: McKibben Hall, Rm 160
213.740.6110

7. Chan Division's Occupational Therapy Faculty Practice (OTFP)
http://chan.usc.edu/patient-care/faculty-practice/contact-us
323.442.3340

8. USC Kortschak Center for Learning and Creativity
https://kortschakcenter.usc.edu/
3601 Trousdale Parkway Student Union, Suite 311
Los Angeles, California 90089-0191
kortschakcenter@usc.edu
213.740.7884

9. USC Office for Equity, Equal Opportunity, and Title IX
https://eeotix.usc.edu/
USC Credit Union Building
3720 South Flower Street, 2nd Floor
Los Angeles, CA 90089-0704
213.740.5086

10. Asian Pacific American Student Services (APASS)
STU 410
https://apass.usc.edu/
apass@usc.edu
213.740.4999

11. Center for Black Cultural and Student Affairs (CBCSA)
STU 415
https://seip.usc.edu/centers/cbcsa/
cbcsa@usc.edu
213.740.8257

12. La CASA Latinx Chicanx Center
STU 402
https://lacasa.usc.edu/
lacasa@usc.edu
213.740.1480

13. Lesbian, Gay, Bisexual and Transgender Resource Center (LGBTRC)
STU 415
https://lgbtqplus.usc.edu/
lgbtqplus@usc.edu
213.740.7619

14. Veterans Resource Center
TCC 330
vrc@usc.edu
213.821.6028

15. USC Department of Public Safety (DPS)
https://dps.usc.edu/
UPC: 213.740.4321
HSC: 323.442.1000
Non-Emergency Phone Numbers:
UPC: 213.740.6000
HSC: 323.442.1200

16. We are SC: COVID-19 Hotline
https://we-are.usc.edu/
https://coronavirus.usc.edu/
covid19@usc.edu
213.740.6291

17. USC Office of the Ombuds
https://ombuds.usc.edu/
UPC: 213.821.9556 or upcombuds@usc.edu
HSC: 323.442.0382 or hscombuds@usc.edu

Appendix L

Directions, Maps, Parking

Health Sciences Campus

Located just three miles from downtown Los Angeles and seven miles from the USC University Park Campus (UPC), the USC Health Science Campus (HSC) is a focal point for students, patients, and scientists from around the world.

For a map of HSC go to: https://maps.usc.edu/?id=1928#!ct/53723,53722,55414,55415,55418?s/?sbc/

Parking at USC:
All information about parking at both campuses may be found here:

https://transnet.usc.edu/index.php/parking-at-usc/

Parking information and lot locations for Health Sciences Campus will also be found at the following site: https://transnet.usc.edu/index.php/hsc-map/

Parking permit rates can be found at: http://transnet.usc.edu/index.php/parking-rates/.
Metered parking may also be available surrounding the campus (rates vary).

University Park Campus

Located next to one of the city's major cultural centers, Exposition Park, the 155-acre University Park Campus (UPC) is just minutes from downtown Los Angeles and is easily accessible by major freeways.

For a map of UPC go to: https://maps.usc.edu/?id=1928#!ct/53723,53722,55414,55415,55418?s/?sbc/

Parking

For information on parking at UPC go https://transnet.usc.edu/index.php/daily-and-hourly-parking/
Parking on main campus (UPC) is currently $14. A limited amount of one-hour metered parking is also available. Four-hour and two-hour metered parking is available on Figueroa Street and Jefferson Boulevard.

USC Transportation
Please check http://transnet.usc.edu/ for all USC transportation information and options.

USC Tram Service
Please check http://transnet.usc.edu/index.php/bus-map-schedules/ for complete schedules and latest updates.

Appendix M

CHP 137 Kitchen Responsibilities

The CHP 137 kitchen is a common space. If the space is used for any reason, it MUST be thoroughly CLEANED.

- Remove all food remnants from the sink, the stovetop, and the counters.
- If using the refrigerator or freezer, items MUST BE:
  o labeled with FIRST & LAST NAME and DATE
  o discarded if expired
  o Items not labeled, or left in the refrigerator/freezer for more than one week will be discarded
- Clean the microwave thoroughly after each use
- Put all kitchen tools/supplies/equipment back where they were originally found
- Do NOT leave food or supplies out on the counters
- Turn off stove or oven immediately after each use

Thank you for helping us keep this communal space usable, safe, and clean for all students.

NOTE: If these responsibilities are not respected, access to the kitchen space may be revoked.

Appendix N

Procedure for Electronic Device Plug-In Safety to Prevent Tripping Hazards

The Chan Division of Occupational Science and Occupational Therapy is committed to providing a safe and conducive environment for students, staff, and faculty to engage in academic and professional activities. This procedure aims to prevent tripping hazards caused by the improper placement of electronic devices and their cords, ensuring the safety and well-being of all individuals within the Division's classrooms, laboratories, and office spaces.

Scope: This procedure applies to all students, staff, faculty members, and visitors within the Chan Division designated spaces.

Guidelines:
1. **Proper Device Placement:**
   - All electronic devices brought into Division spaces must be placed in a manner that prevents the cords and plugs from creating tripping hazards. Devices should be situated close to the wall where possible, with cords arranged neatly and secured to avoid obstruction. This will ensure that cords are not extended across pathways and reduces the risk of individuals tripping over them.
2. **Tripping Hazard Identification:**
   - All faculty, students, and staff are responsible for promptly identifying and reporting any potential tripping hazards caused by improperly placed electronic devices, cords, or plugs. It is the duty of everyone within the Division to maintain a safe environment for all occupants.
3. **Prompt Action:**
   - If a potential tripping hazard is identified, anyone within the Division has the authority to unplug the device immediately to eliminate the hazard. Unplugged devices should be placed in a safe location, and the individual who unplugged the device should notify the relevant personnel (e.g., professor, colleague, peer) as soon as possible.
4. **Device Charging Areas:**
   - Designated areas for charging electronic devices have been provided within Division classrooms ("power towers"). These areas will have appropriately placed outlets and charging stations, minimizing the need for devices to be plugged in elsewhere.

Enforcement and Compliance:
- Students, staff, and faculty members are responsible for enforcing this procedure and ensuring that their areas are compliant.
- All individuals within the Division are encouraged to actively contribute to a safe environment by identifying and addressing potential tripping hazards promptly.
- If a device is damaged due to noncompliance with this procedure, the owner of the device is responsible for damages/cost of repair.

Appendix O

Student Agreement Form

STUDENT AGREEMENT FORM
Academic Year 2024-2025

I have received and read the USC Mrs. T.H. Chan Division of Occupational Science and

Occupational Therapy Student Handbook.

I understand that I am responsible for all materials therein.

I understand that both OTAC and AOTA memberships are required throughout the

duration of my enrollment in the occupational therapy program:

Name (Printed Legibly): _____

Student I.D. Number: _____

OTAC Membership Number: (if available) _____

AOTA Membership Number: (if available) _____

Signature: _____

Date: _____

Please print, sign, and upload to Prism by Friday, September 27, 2024, by 5:00 pm