

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



STUDENT HANDBOOK

BS and MA Programs in Occupational Therapy

2022-2023

Updated on September 20, 2022

Contents

DIVISION POLICIES	11
1. NON-DISCRIMINATION POLICY	11
2. ACADEMIC STANDING.....	12
3. SCHOLASTIC STANDARDS.....	13
4. ETHICAL STANDARDS AND ACADEMIC INTEGRITY	14
5. RIGHTS OF APPEAL.....	14
6. FACULTY ADVISORS and COMMUNICATION WITH FACULTY	15
7. DIVERSITY, ACCESS, AND EQUITY.....	15
8. PROFESSIONALISM	15
9. STUDENTS WITH DISABILITIES	20
10. THE FIELDWORK PROGRAM	21
11. THE NATIONAL BOARD FOR CERTIFICATION IN OCCUPATIONAL THERAPY (NBCOT) EXAMINATION	24
12. STATE LICENSURE - CALIFORNIA BOARD OF OCCUPATIONAL THERAPY (CBOT)	24
13. STUDENT ELECTRONIC NEWSLETTER SUBSCRIPTION SERVICE	25
14. COMMENCEMENT	25
15. GRADUATE STUDENT HOUSING – UNIVERSITY PARK CAMPUS AND HEALTH SCIENCES CAMPUS.....	25
16. COURSE AND/OR SCHEDULE ADJUSTMENTS	26
1. MISSION AND VISION.....	27
2. PHILOSOPHY OF THE MRS. T.H. CHAN DIVISION OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL THERAPY	29
3. CURRICULUM DESIGN: SCOPE, CURRICULUM THREADS, CONTENT AND SEQUENCE OF COURSEWORK, AND EDUCATIONAL GOALS.....	36
4. CHAN DIVISION OT PROGRAM CURRICULUM BLUEPRINTS	54
5. LENGTH AND REQUIREMENTS OF THE CHAN DIVISION EDUCATIONAL PROGRAMS	56
A. SEQUENCE OF PROFESSIONAL COURSES FOR OCCUPATIONAL THERAPY UNDERGRADUATES PURSUING THE BACCALAUREATE DEGREE ENROUTE TO THE MASTER OF ARTS DEGREE:.....	56
B. SEQUENCE OF COURSES FOR OCCUPATIONAL THERAPY ENTRY-MASTER’S STUDENTS.....	57
C. SEQUENCE OF COURSES FOR OCCUPATIONAL THERAPY POST-PROFESSIONAL MASTER’S STUDENT.....	58
D. OCCUPATIONAL THERAPY PRACTICE AND RESEARCH ELECTIVE COURSES	58
E. MASTER OF ARTS DEGREE GRADUATION REQUIREMENTS	59
6. ACADEMIC CALENDARS AND SCHEDULES: 2022 - 2023.....	60
APPENDICES	79
Appendix A. USC Code of Ethics	79
Appendix B. Occupational Therapy Code of Ethics	80
Appendix C: Professional Standards Policy	87

Appendix D. The USC Student Handbook	93
Appendix E: Academic Integrity	93
Appendix F: How to Avoid Plagiarism	94
Appendix G. Academic Misconduct Investigation Guidelines.....	99
Appendix H: Student Guidelines for Use of Social Media	102
Appendix I: APA Format	104
Appendix J: Emergency Information.....	105
Appendix K: Quick Guide to Student Resources at USC	108
Appendix L: Directions, Maps, Parking	111
Appendix M: Student Agreement Form	112

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

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

The USC Chan Division of Occupational Science & Occupational Therapy is fully accredited by the

Accreditation Council for Occupational Therapy Education (ACOTE) - 2014-2024

6166 Executive Blvd, Suite 200; North Bethesda, Maryland 20852-4929; (301) 652-2682

IMPORTANT TELEPHONE NUMBERS:	
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
<u>Division Offices</u>	
Chan Division Main Office (CHP-133, HSC 9003).....	(323) 442-2850
Office Fax:	(323) 442-1540
Occupational Therapy Faculty Practice (OTFP).....	(323) 442-3340
Keck Hospital OT Office	(323) 442-5370
<u>Registration Services</u>	
Registration and Records (UPC).....	(213) 740-8500
One Stop Express at HSC (SRH) https://mycard.usc.edu/hsc/	(323) 442-2110
Degree Progress (JHH 010, UPC).....	(213) 740-7070
The Graduate School (STU 301, UPC).....	(213) 740-9033
Office of International Services (Royal St. Parking Structure, Suite 101)	ois@usc.edu
<u>Student Services</u>	
USCard Services (PSX 1336, UPC) https://mycard.usc.edu/	(213) 740-8709
Office of Student Accessibility Services (GFS 120, UPC) ability@usc.edu	(213) 740-0776
Student Activities Center (SKS 410, UPC) https://campusactivities.usc.edu/	(213) 740-5693
The Testing Bureau (STU 300, UPC)	(213) 740-1188
The Writing Center (THH 216, UPC) https://dornsife.usc.edu/writingcenter/	(213) 740-3691
<u>Bookstores/Libraries</u>	
USC Bookstore (UPC) http://www.uscbookstore.com	(800)-447-8620
HSC Bookstore (Seaver Hall, HSC)	(323) 442-2674
Norris Medical Library (HSC) https://nml.usc.edu/	(323) 442-1116
Leavey Library	(213) 740-4350
<u>Health Services</u>	
USC Student Health line	(213) 740-9355
Student Health Insurance Office studenthealth@usc.edu	(213) 821-1550
Financial Aid (KAM 100B, HSC)	(323) 442-1016
(JHH Lobby, UPC)	(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>

ASSOCIATE DEAN, CHAIR AND PROFESSOR
Grace Baranek, PhD, OTR/L, FAOTA*

ASSOCIATE CHAIR FOR CURRICULUM AND FACULTY
Julie McLaughlin Gray, PhD, OTR/L, FAOTA*

ASSOCIATE CHAIR FOR ACADEMIC AND COMMUNITY PROGRAM SUPPORT AND DEVELOPMENT
Sarah Bream, OTD, OTR/L

ASSOCIATE CHAIR FOR RESEARCH
Mary Lawlor, ScD, OTR/L, FAOTA*

ASSOCIATE CHAIR FOR OCCUPATIONAL THERAPY CLINICAL SERVICES
Katie Jordan, OTD, OTR/L, FAOTA*

ASSOCIATE CHAIR FOR DIVERSITY, ACCESS, AND EQUITY
Jesus Diaz, OTD, OTR/L

DIRECTOR OF ENTRY-LEVEL OCCUPATIONAL THERAPY PROFESSIONAL PROGRAM
Samia H. Rafeedie, OTD, OTR/L, BCPR, CBIS

DIRECTOR OF PHD IN OCCUPATIONAL SCIENCE PROGRAM
Shawn Roll, PhD, OTR/L, RMSKS, FAOTA*

DIRECTOR OF POST-PROFESSIONAL OCCUPATIONAL THERAPY CLINICAL DOCTORATE PROGRAM
Sarah Bream, OTD, OTR/L

DIRECTOR OF POST-PROFESSIONAL MASTER'S PROGRAM
Emily Ochi, OTD, OTR/L

DIRECTOR OF MINOR IN OCCUPATIONAL SCIENCE PROGRAM
Catherine Crowley, OTD, OTR/L

DIRECTOR OF ACADEMIC FIELDWORK AND DOCTORAL CAPSTONE COORDINATOR
Mary Kay Wolfe, OTD, OTR/L

ACADEMIC FIELDWORK COORDINATORS
Candace Chatman, OTD, OTR/L
Deanna Mannarelli, OTD, OTR/L
Clarissa Saunders-Newton, PhD, OTR/L

DIRECTOR OF ADMISSIONS
Amber Bennett, OTD, OTR/L

LIST OF DIVISION FACULTY BY TITLE

Associate Dean, Chair, and Mrs. T.H. Chan Professor of Occupational Science and Occupational Therapy

Grace Baranek, PhD, OTR/L, FAOTA*

Professors

Sharon Cermak, EdD, OTR/L, FAOTA*

Mary Lawlor, ScD, OTR/L, FAOTA*

Associate Professors

Lisa Aziz-Zadeh, PhD

Sook-Lei Liew, PhD, OTR/L

Elizabeth Pyatak, PhD, OTR/L, CDE, FAOTA*

Shawn Roll, PhD, OTR/L, RMSK, FAOTA*

Professors of Clinical Occupational Therapy

Katie Jordan, OTD, OTR/L, FAOTA*

Julie McLaughlin Gray, PhD, OTR/L, FAOTA*

Deborah Pitts, PhD, OTR/L, BCMH, CPRP, FAOTA*

Part-Time Professor of Clinical Occupational Therapy

Erna Blanche, PhD, OTR/L, FAOTA*

Associate Professors of Clinical Occupational Therapy

Rebecca Aldrich, PhD, OTR/L

Arameh Anvarizadeh, OTD, OTR/L, FAOTA*

Amber Bennett, OTD, OTR/L

Sarah Bream, OTD, OTR/L

Allison Chu, OTD, OTR/L

Chantelle Rice Collins, OTD, OTR/L, CDE

Celso Delgado, OTD, OTR/L, BCMH

Camille Dieterle, OTD, OTR/L

Don Gordon, PhD, OTR/L

Jess Holguin, OTD, OTR/L

Karrie Kingsley, OTD, OTR/L

Kimberly Lenington, OTD, OTR/L

John Margetis, OTD, OTR/L

Michael McNulty, OTD, OTR/L

Stacy Morikawa, OTD, OTR/L

Emily Ochi, OTD, OTR/L

Daniel Park, OTD, OTR/L

Myka Persson, OTD, OTR/L

Elyse Peterson, OTD, OTR/L

Samia Rafeedie, OTD, OTR/L, BCPR, CBIS

Lindsey Reeves Shomer, OTD, OTR/L

Ashley Uyeshiro Simon, OTD, OTR/L, MSCS

Shelby Surfes, OTD, OTR/L

Mary Kay Wolfe, OTD, OTR/L

Jamieson Wilcox, OTD, OTR/L

Part-Time Associate Professors of Clinical Occupational Therapy

Janet Gunter, OTD, OTR/L, SWC

Ashley Halle, OTD, OTR/L

Assistant Professors of Clinical Occupational Therapy

Aimee Aguilon, OTD, OTR/L

Yasi Amanat, OTD, OTR/L

Melina Allahveridan, OTD, OTR/L

Erin Bussell, OTD, OTR/L

Ellie Clark, OTD, OTR/L

Catherine Crowley, OTD, OTR/L

Rebecca Cunningham, OTD, OTR/L

Nora Dixon, OTD, OTR/L

Heather Gates, OTD, OTR/L

Linsey Smith Grunes, OTD, OTR/L

Caroline Hardin, OTD, OTR/L

Marisa Hernandez, OTD, OTR/L

Lucy Nhan Hosoda, OTD, OTR/L

Tracy Jalaba, OTD, OTR/L

Jennifer Jones, OTD, OTR/L, SWC

Jenna Kobara, OTD, OTR/L, SWC

Joshua Kotler, OTD, OTR/L

James Lee, OTD, OTR/L, MSG

Carnie Lewis, OTD, OTR/L

Julia Lisle, OTD, OTR/L

Kimberly Perring Lenington, OTD, OTR/L

Diego Lopez, OTD, OTR/L

Marissa Marchioni, OTD, OTR/L

Elena Meng, OTD, OTR/L

Stephanie Mielke, OTD, OTR/L

Tessa Milman, OTD, OTR/L

Kimberly Morris-Eggleston, OTD, OTR/L

Kristy Payne, OTD, OTR/L

Kelsey Peterson, OTD, OTR/L

Allison Phillips, OTD, OTR/L

Bobbi Pineda, PhD, OTR/L, CNT

Janice Rocker, OTD, OTR/L, CHT

Rob Russow, OTD, OTR/L

Trevor San Antonio, OTD, OTR/L

Clarissa Saunders-Newton, PhD, OTR/L

Emma Schiewe, OTD, OTR/L

Winnie Soenaryo, OTD, OTR/L

Emily Sopkin, OTD, OTR/L

Lawrence Stevenson, OTD, OTR/L

Marilyn Thompson, OTD, OTR/L

Stephanie Tsai, OTD, OTR/L

Sonia Treijo, OTD, OTR/L

Christine Turnbull, OTD, OTR/L

Katherine Wechsler, OTD, OTR/L

Janis Yue, OTD, OTR/L
Elizabeth Zepeda, OTD, OTR/L

Part-Time Assistant Professor of Clinical Occupational Therapy
Joan Surfus, OTD, OTR/L, BCP, SWC

Instructors of Clinical Occupational Therapy
Cindy Luff
Deanna Mannarelli, OTD, OTR/L
Joan Vartanian, OTR/L

Research Professors
Michael Carlson, PhD
John Sideris, PhD

Research Associate Professors
Jesús Díaz, OTD, OTR/L
Leah Stein Duker, PhD, OTR/L
Stacey Schepens Niemiec, PhD, OTR/L

Adjunct Professor of Clinical Occupational Therapy
Diane Parham, PhD., OTR/L, FAOTA

Adjunct Assistant Professors of Clinical Occupational Therapy
Susan Bowles, OTD, MBA, OTR/L
Juliana Gutierrez, OTD, OTR/L
Dawn Hironaka, OTD, OTR/L
Merry Lee OTD, OTR/L, SWC
Colin Lenington, OTD, OTR/L
Gustavo Reinoso, PhD, OTR/L
Pamela Roberts, PhD, OTR/L, SCFES, FAOTA*, CPHQ, FNAP

Adjunct Instructors of Clinical Occupational Therapy
Remy Chu Jr., MHA, OTR/L
Lisa Deshaies, OTR/L, CHT
Heidi Dombish, MS, OTR/L
Rosemond Seligson, MA, OTR/L

Distinguished Emeritus Professor
Elizabeth June Yerxa, EdD, LHD (Hon), ScD (Hon), DMed (Hon), OTR, FAOTA*

Emeritus Professors
Florence Clark, PHD, FAOTA
Linda Fazio, PhD, OTR/L, FAOTA
Gelya Frank, PhD, MPW
William Morgan, PhD
Ruth Zemke, PhD, FAOTA*

** Denotes Fellow of the American Occupational Therapy Association. The honorary designation of FAOTA is awarded for significant contributions to the profession of occupational therapy.

ADMINISTRATIVE STAFF		
Andrea Abad, OTD, OTR/L Program Specialist	CHP 107B	andrea.abad@chan.usc.edu
Courtney Alfred Secretary II	CHP 132	(323) 442-1865 courtney.alfred@chan.usc.edu
Maribell Amador Account Representative	HRA 500	(323) 442-3346 Maribell.amador@med.usc.edu
Rubina Azaryan Billing supervisor	HRA 500 J	(323) 442-3356 Rubina.Azaryan@med.usc.edu
Paul Bailey Webmaster	CHP 107	(323) 442-2850 Paulbail@chan.usc.edu
Jane Baumgarten, OTR/L Occupational Therapist, Student Support	CHP 117	(323) 442-3523 jbaumgar@chan.usc.edu
Jeanine Blanchard, PhD, OTR/L Project Manager	CHP 101 A	(323) 442-1827 jeanine@chan.usc.edu
Carol Canedo Executive Assistant to the Associate Dean	CHP 100 C	(323) 442-0868 carol.canedo@chan.usc.edu
Ann Cassar Secretary II	CHP 133	(323)-442-2850 ann.cassar@chan.usc.edu
Sonia De Mesa Budget/Business Technician	CHP 100 E	(323) 442-2486 sonia.de.mesa@chan.usc.edu
Joseph Gonzalez Information Systems, Manager	G 34	(323) 442-4278 joseph.gonzales@chan.usc.edu
Gabby Granados, OTD, OTR/L Occupational Therapist I	CHP 101 E	(323) 442-2285 Gabrielle.granados@chan.usc.edu
Contracts and Grants Coordinator	CHP 100 E	(323) 442-2032
Melina Hernandez Administrative Assistant I	CHP 222K	(323) 442-2808 melina.hernandez@chan.usc.edu
Adam Hirsch Computer Consultant II	CHP 123	(323) 442-3104 adam.hirsch@chan.usc.edu
Polly Kellner Research Coordinator I	CHP 222M	(323) 442-2286 polly.kelner@chan.usc.edu
Kimberly Kho, MBA Director of Marketing & Student Recruitment	CHP-101K	(323) 442-2859 kimkho@chan.usc.edu
Lucy Lin Instructional Designer	CHP-124	(323) 442-2326 lucylin@chan.usc.edu
Jackie Mardirossian, MA, COTA, ROH Director of Continuing Education	CHP-107	(323) 442-2857 jmardiro@chan.usc.edu
Emily Mielke Senior Systems Engineer	Off Campus	(323) 442-2850 emielke@chan.usc.edu
Ryan Pineda, Ed.D. Student Services Advisor III	CHP 131 A	(323) 442-2889 ryan.pineda@chan.usc.edu
Roxana Munoz Administrative Assistant I	CHP 100 B	(323) 442-3085 roxana.munoz@chan.usc.edu
Bianca Ojeda Special Events Coordinator	CHP-101K	(323) 442-1571 bojeda@chan.usc.edu

Janis Wise Operations Manager	CHP-100 A	(323) 442-2851 jwise@chan.usc.edu
Peter Wittrock Administrative Assistant II	CHP-130	(323) 442-1861 wittrock@chan.usc.edu
David Xie Desktop Support & A/V Technician	CHP 123	(323) 442-1539 david.xie@chan.usc.edu
Katherine Hayes Data Management Coordinator	CHP 110 B	(323) 442-3290 katherine.hayes@chan.usc.edu

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 scholastic performance and professional conduct.

Students must read this document carefully to gain a precise understanding of Divisional 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 scholastic standards are facilitated by consultation with the Associate Chair of Curriculum and Faculty, Dr. Julie McLaughlin Gray, and the Program Directors. Faculty Advisors and Program Directors (2021-2022) are:

Dr. Samia H. Rafeedie	Entry-Level Professional Program (BS, Entry-Master's, and Entry-OTD)
Dr. Shawn Roll	PhD Program in Occupational Science
Dr. Sarah Bream	Post-Professional OTD Program
Dr. Emily Ochi	Post-Professional Master's Program
Dr. Catherine Crowley	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 Master of Arts (MA), a 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 MA programs in occupational therapy.

The Chan Division offers a bachelor's to master's degree program **leading to entry-level practice** in occupational therapy. In order to practice, students must successfully complete all course work for the master's degree in occupational therapy, as well as successfully pass the equivalent of 24 full-time weeks of level II fieldwork. Following completion of the master's 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 56).

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 Master of Arts program because of unacceptable grade point averages and/or low scores on the graduate record examination (GRE), 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 MA program will receive their BS degree en route to their MA degree.

The requirements of the MA degree include successful completion of all required occupational therapy and elective coursework specific to the master's degree option. Students complete either a comprehensive examination or thesis as a requirement for the MA degree (see page 59). Master's students who have a prior bachelor's degree in occupational therapy may apply for Advanced Standing, reducing the units required for the degree from 80 units to 32 units (or 76 units to 28 units for the thesis option).

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, usually one semester. 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 Master of Art's degree 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 Withdrawal Implications for Recipients of Financial Aid section at <https://financialaid.usc.edu/graduates/graduate-professionals.html>.

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. 14).

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 <http://policy.usc.edu/student-health-leave-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. SCHOLASTIC 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 registration hold will be placed on academic probation for two semesters. The student must achieve a semester GPA of 3.0 or above in the first summer semester in order to continue in the program. The student must also achieve a semester GPA of 3.0 or above in the first fall semester in order to continue in the program.
- 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 and must achieve a semester GPA of 3.0 or higher in all remaining semesters in order to continue in the program. A graduate OT student will not be permitted to continue in the program if the student's semester GPA falls below 3.0 for more than one semester.
- 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 MA 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”

(see The USC Student Handbook, p. 57 - 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 of 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 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 professional program, each student will be assigned a faculty advisor who will be available throughout the program. Faculty advisors serve as mentors on professional and academic matters, and as a resource for personal matters should they arise. Students have the option of meeting with faculty advisors at regular intervals or as requested by the individual student or faculty. While each student will be assigned a designated faculty advisor, students are encouraged to meet with a variety of Division faculty throughout their academic program.

Faculty-student communication is vital. In addition to individual faculty advisors, 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 are invited to provide input at faculty meetings, 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 for Diversity, Access, and Equity (DAE) 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 across these efforts. For more information, visit the Chan DAE website at <https://chan.usc.edu/about-us/dae> .

8. PROFESSIONALISM

Professional relationships and mentoring established via faculty advisors are part of the Division's overall top-down approach to developing professionalism. 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 and national 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 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 all occupational therapy programs.**

B. STUDENT LEADERSHIP ORGANIZATIONS

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, Master’s, 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 and Professional Student Senate (GPSS), 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 (as long as they are members of AOTA and OTAC). For more information on SOTA, please visit: <https://www.aota.org/Education-Careers/Students/SOTAs.aspx>

The goal of USC’s Coalition of Occupational Therapy Advocates for Diversity (COTAD) chapter is to build diversity and inclusion within the Chan Division by increasing the profession’s visibility and accessibility to underrepresented groups and increasing cultural humility by sharing and learning about different lived experiences. 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 representation in healthcare. Additionally, chapter leaders will have the opportunity to collaborate with other COTAD chapters

around the nation. 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 to clients, whilst promoting diversity and inclusion.

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.

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. For more information, or to suggest a community that might benefit from their focus, please contact a member of the executive board via email or connect on Facebook. Email: OTsForOutreach@gmail.com
Facebook: <https://www.facebook.com/groups/otsforoutreach/>

In addition to role modeling and professional immersion, students gain the knowledge and skills necessary for successful practice in occupational therapy, which include the following behaviors and attitudes essential to a successful professional career.

C. ABSENTEE 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 if they need to miss class. 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 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.

D. EXAMINATIONS

Students are informed well in advance when exams are scheduled. Thus, it is your responsibility to arrange your personal agendas to adhere to the exam schedules, and it is to your advantage to take all exams at the day/time when they are administered.

Accommodations needed due to a disability/health condition should be requested at the beginning of the semester, well in advance of exams. Per the Chan Division handbook, should a student have approved accommodations through the **USC Office of Student Accessibility Services (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 (p.20). Accommodations requested less than two weeks prior to an exam are not guaranteed. Please see the section of the syllabus on disability accommodations.

Examinations **MUST** be taken on the date and at the time scheduled. Acknowledging that legitimate emergencies can arise on the day of a scheduled examination, the following policy will apply:

If a student is late for an exam, they may complete the exam as scheduled with any remaining time available.

If a student misses an exam, the student must provide documentation supporting the following emergencies:

- Serious Illness/Injury of student
- Death of immediate family member

There is no provision for routine makeup of examinations. The instructor will consult with the Associate Chair for Curriculum and Faculty, Dr. Julie McLaughlin Gray, and *may* approve a makeup exam **ONLY** if the documentation is verified and advanced notification is provided (whenever possible). If approved, the make-up exam may be in an alternative format to the missed exam.

Failure to provide the appropriate documentation will result in a “o” for the examination.

E. 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.

F. 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 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. A helpful website 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> .

G. 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 certification; Question, Persuade, Refer (QPR) certification; and annual bloodborne pathogens training certification. 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 life span; 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 the procedure for absences from Level II fieldwork in the Fieldwork Manual for details).

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.

Level II Fieldwork:

Level II fieldwork is a more advanced practice experience, in which students assume direct client care responsibilities under the supervision of a licensed occupational therapist. Emphasis is on further developing clinical reasoning skills, professionalism and professional communication, and acquiring and applying knowledge and skills in the practice environment. 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.

Level II fieldwork is divided into two full-time 12-week experiences in distinctly different practice areas. The curriculum is designed for completion of Level II fieldwork during the summer between the first and second year of the program, and the summer following year two of the program. The student must register for two units of OT 586 (Fieldwork with Seminar) for each Level II fieldwork experience. Students are NOT permitted to attend Level II fieldwork unless they are registered for the course. Successful completion of 4 units of OT 586 is required for the master's degree in occupational therapy, and for NBCOT certification and state licensure eligibility. Because Level II fieldwork is a full-time intensive experience, students are not permitted to participate in any other academic coursework during Level II fieldwork.

Level II fieldwork on a part-time basis is only allowed if the student has approved accommodations for part-time fieldwork from the USC Office of Student Accessibility Services. Part-time Level II fieldwork must be at least 50% of a full-time equivalent (FTE) at the particular site, and can only be scheduled after completion of the second year of the curriculum.

A student must successfully complete the first year of the curriculum, including two practice immersion courses, in order to be placed in their first Level II fieldwork experience.

Level II fieldwork placement in a particular practice area requires completion of the related practice immersion course. Failure to successfully complete one first-year Level I fieldwork experience can result in postponement of Level II fieldwork. Failure to successfully complete both first-year Level I fieldwork experiences will result in postponement of Level II fieldwork. If a student is on probationary status at the end of the fall or spring semester of the first year, summer Level II fieldwork may be postponed.

Fieldwork Pre-requisites:

In order to participate in Level I or II fieldwork, students must maintain compliance with all of the following pre-requisite 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) certification. 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. There is an additional fee associated with this class.
- QPR (Question, Persuade, Refer) QPR 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/>

Additional pre-requisites required by some fieldwork sites may include but are not limited to: fingerprinting, criminal background check, drug 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 pre-requisites and to allow 4-6 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 II fieldwork assignments are based on availability of placements, the student's self-identified priorities and preferences, a randomized matching process in EXXAT and, in some instances, an interview with the site. 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.

Communication with fieldwork sites for placement (new or existing) 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.**

Disability/Health-Related Accommodations for Fieldwork:

If a student requires disability-related accommodations 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.

Accommodations must be approved by the USC Office of Student Accessibility and Services. 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 disability is verified and the need for accommodations approved by OSAS, the student may wish to discuss their specific needs with an AFWC. The AFWC can assist the student to identify accommodations that may be necessary for successful completion of the fieldwork experience.

The Job Accommodation Network (JAN) at <http://www.jan.wvu.edu/> offers suggestions for reasonable accommodations, as well as information about a variety of disabilities, the Americans with Disabilities Act (ADA), and employment for individuals with disabilities.

Once accommodations are approved by OSAS, the student will decide whether or not to discuss their specific accommodation needs with the fieldwork educator (FWE). The decision whether or not to disclose the specific nature of the student's disability to the FW Educator at the site is at the discretion of the student. The AFWC is available to provide support throughout this process if needed.

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 AFWC. The site determines whether the requested accommodations will interfere with the student's ability to perform essential job functions. Best practice is to have open communication between the student, fieldwork educator, and the Academic Fieldwork Coordinator.

Performance Concerns during Fieldwork:

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 include:
 - The student will correct deficiencies and successfully complete the fieldwork experience. A learning and/or behavioral 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 his/her registration page and indicate that he/she is 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 will have to be repeated.
- 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 will have to be repeated.

11. 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 a master’s 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.

12. 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).

13. 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 lists for students in the undergraduate program, students taking first-year occupational therapy courses, students taking second-year occupational therapy courses, students in the post-professional master’s degree program, students in the post-professional occupational therapy clinical doctorate (OTD) program, and students in the doctor of philosophy (Ph.D.) in occupational science 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 list-servs, as important Division announcements and communication are sent via this service. 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.

14. 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.

15. 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>

16. COURSE AND/OR SCHEDULE ADJUSTMENTS

Due to the COVID-19 pandemic, 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

MISSION, PHILOSOPHY and CURRICULUM DESIGN of the USC MRS. T.H. CHAN DIVISION of OCCUPATIONAL SCIENCE and OCCUPATIONAL THERAPY

1. MISSION AND VISION

The Mission and Strategic Vision of the University

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

Likewise, as asserted in its 2004 Strategic Plan document entitled *USC's Plan for Increasing Academic Excellence: Building Strategic Capabilities for the University of the 21st Century*, USC will continue to prioritize the cutting-edge: "USC remains committed to continually improving the world-class innovative education we provide to our undergraduate, graduate and professional students" (p. 2).

More recently, the University published its 2011 Strategic Vision, an update and amplification of the 2004 Strategic Plan, intended to guide strategic planning and action across all schools and Divisions. The 2011 Strategic Vision elucidates the following three paths which must be taken in order for the University to adapt to an environment that is, "far more global, urban and integrated than ever before" and is characterized by "unprecedented health, social and economic challenges, revolutions in communication and technology, growing diversity, evolving concepts of democracy, and changing ideas surrounding creativity and individual expression":

1. **Transforming Education for a Rapidly Changing World:** We must create a transformative faculty whose scholarship crosses disciplinary boundaries and whose energy sparks intellectual creativity across our campuses. New modes of learning and societal needs require that we reinvent undergraduate, graduate, and postdoctoral education.
2. **Creating Scholarship with Consequence:** We must increase our commitment to translational research, creative work and practice in order to address grand challenges, notably in healthcare, life sciences and engineering, but also in the arts, humanities, professions and social sciences. Collaboration among scientists, clinicians, artists, teachers, humanists, researchers and other professionals should be a defining feature of research universities.
3. **Connecting the Individual to the World:** We must promote global and local engagement to foster mutual understanding and encourage citizenship in a global context. As the world grows more interconnected, so does the need for self-reflection and critical thought, appreciation of diversity, aesthetic sensibility, civility, reconciliation and empathy across all spheres of life. The

quest to understand others begins with self-knowledge and adherence to the value of human wholeness (*USC Strategic Vision*, 2011, p.1)

In response to the 2011 Strategic Vision, the Division recently updated its Strategic Plan, including our mission and vision. In that plan, we chart a course for the Division to advance the University's priorities of transformative education and relevant scholarship, as well as community and global engagement, priorities highly compatible with our profession's overarching purpose to meet society's occupational needs.

The Mission and Vision of the 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 Division's mission reflects our fundamental commitment to health through research, education, practice and leadership.

The Division maintains a vivid presence on both the Health Sciences Campus and the University Park Campus, strongly reflecting the University's recent 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 (*USC Strategic Vision*, 2011). Through its multiple degree programs, the 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 occupational therapy professional program, which combines fundamental social science theory along with medicine and physical science to support both the art and the science of occupational therapy practice.

Vision Statement

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

The vision statement of the Division was influenced by three major factors: 1) acknowledgement of the Division's history of leadership and capacity for continued innovation and influence; 2) alignment with the Herman Ostrow School of Dentistry of USC 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 Centennial Vision, which foresees that “by the year 2017, occupational therapy will be a powerful, widely recognized, science-driven, and evidence-based profession with a globally connected and diverse workforce meeting society’s occupational needs” (AOTA, 2007, p. 613). Our vision and strategic planning are aligned with USC’s 2011 Strategic Vision to transform education for a rapidly changing world, to create scholarship with consequence, and to connect the individual to the world. The expert, compassionate leaders we develop will meet the strategic vision’s stated need for “self-reflection and critical thought, appreciation of diversity, aesthetic sensibility, civility, reconciliation and empathy across all spheres of life” (p.2). Through their preparation as leaders, life-long learners, innovators and evidence-based practitioners, our graduates will be well situated to improve 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

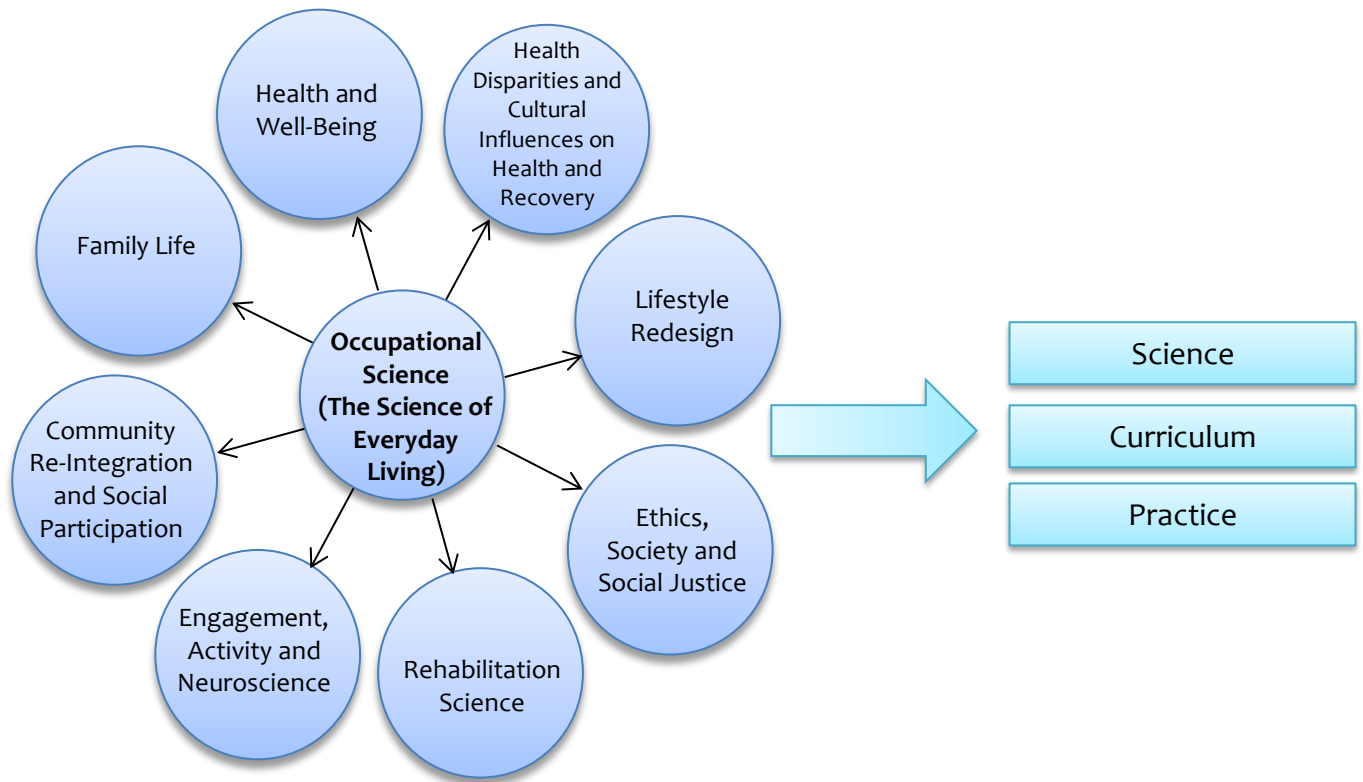
We view humans as occupational beings with an innate drive to participate in meaningful and productive activities. As outlined in our original proposal for the PhD program in Occupational Science, occupations can be defined as, “self-initiated, goal-directed, socially sanctioned, organized, and, optimally although not always, personally satisfying activities in which people engage.” Our philosophy includes a belief in the significance of occupation to individual and public health, the subjective and objective characteristics of occupation, the multidimensional and dynamic nature of occupation, and the need to advance both academic and public knowledge regarding occupation and its radiating effects on overall life quality (Clark et al., 1991; Wilcock, 1998; Zemke & Clark, 1996). These fundamental beliefs align with the philosophical base of the profession of occupational therapy, which incorporates the notion that, “all individuals have an innate need and right to engage in meaningful occupations throughout their lives [and that] participation in these occupations influences their development, health and well-being across the lifespan” (AOTA, 2011, p. S65).

We currently conceptualize occupational science as the *Science of Everyday Living*. 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. This is 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 the Science. Linking both research and educational activities to these core concepts supports the 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 supports the vision for USC’s future in which, “along with excellence in the traditional basic research domain, we will be recognized as the university with the greatest social impact – the place where rigorous fundamental and applied research can be

brought together to create solutions to the pressing concerns of society” (USC Strategic Plan, 2004, p.2). These domains inform our science, curriculum and practice.

Figure 1. Domains of Occupational Science (The Science of Everyday Living)



Fundamental Beliefs about Learning: A Learner-Centered Approach

A main tenet of the University of Southern California’s 2011 Strategic Vision is to tailor all educational programs to new models of learning in order to achieve academic excellence within a rapidly changing global community. 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 professional program curriculum, from admissions to classroom and co-curricular activities. Learner-centered education is commensurate with AOTA’s (2007) Philosophy of Occupational Therapy Education, which emphasizes the active engagement necessary for change and promotes a collaborative learning process that, “builds on prior knowledge and experience and integrates professional academic knowledge, experiential learning, clinical reasoning, and self-reflection” (p.678). Furthermore, as defined by the USC Committee on Academic Programs and Teaching (CAPT) (2005), a learner-centered approach is one that combines a commitment to student learning in which the educator and student learn from each other with an emphasis on assessment of learning outcomes.

As described in USC’s 2004 Strategic Plan, “learner-centered education gives primacy to the needs of students. This means thinking expansively about who our students are, how their backgrounds and needs may change in the future, and how best to engage them in learning” (p. 4). Based upon

this philosophy, 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 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). Toward the ultimate goal of creating life-long learners, 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). 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



Building on Experience

Our students matriculate with diverse academic backgrounds and life experiences. Their undergraduate degrees range from the arts and humanities to science and engineering. Arguably, we have one of the most diverse student bodies with an average of 44% Asian, 2% Black/African-American, 11% Hispanic, 38% White/Caucasian and 5% other, as well as nearly 12% male students enrolled each year. And, finally, 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 (2007) 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 his or her 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. All of these factors influence engagement in the learning process. Within our

programs, students are encouraged to share and build upon prior experiences while developing their occupational therapy professional identities.

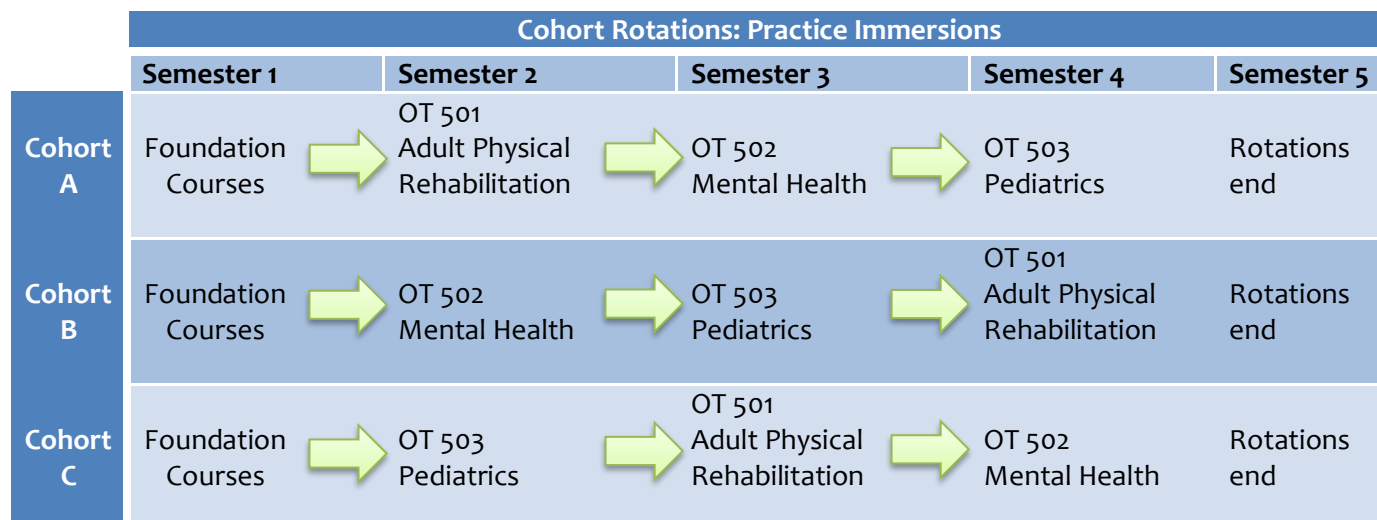
Learning by Doing

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” (OTA, 2007, p.678), we use “doing” in our therapy and in our teaching through methods of active learning. 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. Students are encouraged to learn through case studies, cooperative learning, peer instruction, role playing and simulation while faculty assume the role of guide or facilitator (Weimer, 2002). 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.

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 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 three cohorts, each of which rotates through the three practice immersions, taking one of the immersions in each of three 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” (p.95). When applied here to the development of generalist occupational therapist 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” (p.98).

Figure 3. Cohort Rotations through Practice Immersions



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 three 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. We facilitate the transfer of leadership skills in a similar manner. Each student has the opportunity to develop leadership skills in context through an individually designed and implemented externship attached to our Leadership Capstone course.

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 cohorts, each with its own 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 all three cohorts 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 cohorts take concurrent with each practice immersion course, as well as those thread courses that combine all three cohorts into one section. 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 and other multidisciplinary symposia. Several scholarships are offered annually to support student participation at local, state and national conferences.

Habits of Critical Reflection

Lastly, mastery and professional socialization are also achieved through reflective practice. The AOTA Philosophy of Occupational Therapy Education (2007) states that, “the occupational therapy education process emphasizes continuing critical inquiry in order that occupational therapists and occupational therapy assistants be well prepared to function and thrive in the dynamic environments of a diverse and multicultural society” (p.678). Critical thinking 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 professionalism 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

Cohort Rotations: Practice Immersions + Thread Courses					
	Semester 1	Semester 2	Semester 3	Semester 4	Semester 5
Cohort A	Foundations: Occupation Creativity Kinesiology Neuroscience	OT 501 Adult Physical Rehabilitation	OT 502 Mental Health	OT 503 Pediatrics	Rotations end
		OT 511 Therapeutic Use of Self*	OT 521 Clinical Reasoning* OT 523 Communication Skills for Effective Practice*	OT 534 Health Promotion and Wellness** OT 537 Occupation-Centered Programs for the Community*	OT 540 Leadership Capstone**
		OT 515 Neuroscience of Behavior** OT 518 Quantitative Research for EBP*	OT 525 Qualitative Research for EBP*	OT 538 Current Issues in Practice: Adulthood and Aging**	OT 545 Advanced Seminar in OS* Specialty Electives
Cohort B	Foundations: Occupation Creativity Kinesiology Neuroscience	OT 502 Mental Health	OT 503 Pediatrics	OT 501 Adult Physical Rehabilitation	Rotations end
		OT 511 Therapeutic Use of Self*	OT 521 Clinical Reasoning* OT 523 Communication Skills for Effective Practice*	OT 534 Health Promotion and Wellness** OT 537 Occupation-Centered Programs for the Community*	OT 540 Leadership Capstone**
		OT 515 Neuroscience of Behavior** OT 518 Quantitative Research for EBP*	OT 525 Qualitative Research for EBP*	OT 538 Current Issues in Practice: Adulthood and Aging**	OT 545 Advanced Seminar in OS* Specialty Electives
Cohort C	Foundations: Occupation Creativity Kinesiology Neuroscience	OT 503 Pediatrics	OT 501 Adult Physical Rehabilitation	OT 502 Mental Health	Rotations end
		OT 511 Therapeutic Use of Self*	OT 521 Clinical Reasoning* OT 523 Communication Skills for Effective Practice*	OT 534 Health Promotion and Wellness** OT 537 Occupation-Centered Programs for the Community	OT 540 Leadership Capstone**
		OT 515 Neuroscience of Behavior** OT 518 Quantitative Research for EBP*	OT 525 Qualitative Research for EBP*	OT 538 Current Issues in Practice: Adulthood and Aging**	OT 545 Advanced Seminar in OS* Specialty Electives
*Three sections					
**All cohorts together in one section					

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

Introduction: The Need to Revise the Master's-Degree-Level Educational Program

In the spring of 2010, after extensive consideration and planning, we revised the professional program in occupational therapy. Faculty determined that reorganization was warranted and timely in order to strengthen the program as well as to provide occupational therapy students with an optimal learning experience across the two years now required for entry into professional practice. Crucial factors prompting the revision were: 1) the shift to a master's-degree-level curriculum for entry into the profession beginning in 2007; 2) a new vision for entry-level occupational therapists based on the AOTA Centennial Vision (2007) and the changing health care landscape; 3) the ever-expanding knowledge base within occupational therapy; and 4) an effort to deliver content more effectively and efficiently in keeping with current pedagogical theory. Changes were implemented beginning in summer 2011.

The overall aim of the curriculum re-design effort was to create a coherent, 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 health care environment. Additionally, we sought to create a program that would lead to a seamless transition from the master's-degree-level program into the post-professional Doctorate of Occupational Therapy (OTD) degree program to meet these concerns. The curriculum re-organization facilitates the integration of theory with practice in order to prepare students to provide effective and autonomous evidence-based occupational therapy in a variety of contexts.

Scope of the Curriculum

The design of the revised curriculum was inspired by the "high definition" approach discussed in Clark's (2010a) AOTA Presidential Address in which she emphasized the "breadth, depth and complexity" (p.849) of an occupational therapy professional's perspective and the occupational therapy process itself. Clark highlighted the ways in which an effective occupational therapy lens must bring into clarity both the details and the depth of a person's occupational life. Relating this to occupational therapy professional 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, extremely creative problem solvers, 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 in even the most intimidating of contexts. They must be credible, fully informed, and facile with the evidence that supports their practice. The USC professional program curriculum accomplishes these aims through a blend of **foundational education in occupation, practice immersion courses, thread courses, targeted fieldwork**, and a capstone semester in which students combine **leadership experiences** with **advanced study of occupational science** and **specialty electives**. An overview of the content of the curriculum follows a discussion of our curriculum threads.

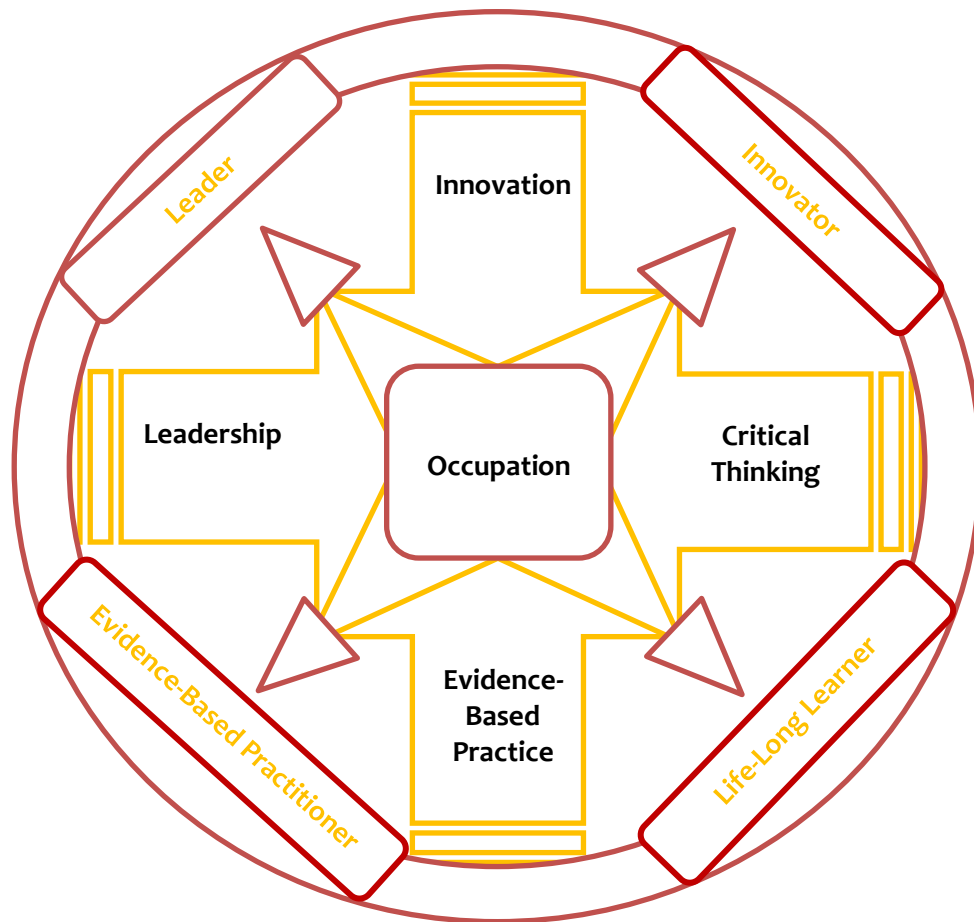


Figure 5. Model of the Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy Professional Program Curriculum

Curriculum Threads

The core of our curriculum design is depicted in the model above (Figure 5). The model highlights our curriculum threads of **occupation, evidence-based practice, critical thinking, leadership** and **innovation**. These threads permeate all courses and learning activities throughout the curriculum and are reflected in our assessment measures, but 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, described below, inform our learning activities and assessment measures and are designed to empower the USC occupational therapy graduate to be a generalist practitioner who is a competent and confident **leader, innovator, evidence-based practitioner** and **life-long learner**.

Occupation

Central to our curriculum, and woven into all curricular and co-curricular experiences, is an understanding of the multi-faceted and complex nature of occupation, its impact on health and well-being, and therapeutic uses. This understanding undergirds occupational therapy’s professional identity as well as effective practice. As described previously in our statement of

philosophy, at USC this complex understanding is informed by occupational science. Our curriculum includes coursework specifically addressing the meaning and dynamics of occupation and activity, including the interaction of areas of occupation, performance skills, performance patterns, activity demands, context(s) and environments, and client factors; critical appraisal and application of the findings from occupational science research; and historical and contemporary discourse within occupational science, all applied to current and emergent occupational therapy. Students also participate in structured occupational self-analysis in which they examine their own occupational profiles and analyze occupation for its health benefits and potential impact as a therapeutic modality. These experiences shape our students' complex understanding of occupation as they learn to analyze the relationship between occupation and health through experience. The combined coursework in the professional program is designed to develop professional leaders who will advance occupational therapy practice and occupational science through a pervasive emphasis on occupation-centered practice and infusion of findings in occupational science throughout the curriculum.

“Thread courses” with concentrated focus on occupation are: OT 515 Neuroscience of Behavior, OT 534 Health Promotion and Wellness, and OT 545 Advanced Seminar in Occupational Science. Occupation is also central to all of the foundation courses: OT 405 Foundations: Occupation, OT 406 Foundations: Creativity, Craft and Activity Analysis, OT 440 Foundations: Kinesiology and OT 441 Foundations: Neuroscience. Finally, the importance of occupation as both the ends and means of the occupational therapy process is addressed in the practice immersion courses: OT 501 Adult Physical Rehabilitation, OT 502 Mental Health, and OT 503 Pediatrics.

Evidence-Based Practice

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 Division's overall mission to develop leaders by empowering students to establish themselves as self-directed, life-long learners. The contemporary 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, 2010; 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 treatment 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 professional program are provided with multiple opportunities to develop their skills and habits as self-reflective practitioners by beginning as self-reflective students.

“Thread courses” with concentrated focus on evidence-based practice are: OT 518 Quantitative Research for Evidence-Based Practice and OT 525 Qualitative Research for Evidence-Based Practice. The process of evidence-based practice is also integrated within the practice immersion courses: OT 501 Adult Physical Rehabilitation, OT 502 Mental Health, and OT 503 Pediatrics.

Critical Thinking

Critical thinking is intricately linked to clinical reasoning, and identified as a cognitive process involved in clinical problem-solving (Facione & Facione, 2008). We have intentionally selected critical thinking as our curriculum thread, rather than clinical reasoning, in order to teach a more extensive process and habit ranging beyond any specific discipline, situation or context (Facione & Facione, 2008). Critical thinking supports our students’ clinical reasoning, but also offers valuable guidance for evidence-based practice, professional conduct and ethical decision-making in multiple contexts, including practice.

Brookfield (2012) outlines four basic steps or processes of critical thinking: 1) identifying the assumptions that underlie the ways in which we think and act; 2) verifying both the validity and accuracy of these assumptions; 3) considering a variety of different perspectives in relation to our thoughts and actions; and 4) acting in a more informed way, based upon the self-reflection and thought investigation outlined in steps 1 through 3. Because this “habit of mind” incorporates examining one’s own perspective and assumptions, along with a willingness to consider the perspectives of others and even to change one’s mind (Paul & Elder, 2002), critical thinking is intricately tied to self-reflection and empathy. A simple application in our curriculum is our commitment, reflected in all courses, to integrate both the medical and social perspectives on disability and to foreground the perspectives of people with disabilities in our understanding of participation in occupation and in the therapeutic process. Practitioners must be able to evaluate and design relevant interventions to address participation restrictions stemming from the interaction of both medical and social factors. In addition, students learn to incorporate Brookfield’s four critical thinking processes, as outlined by Haffer and Raingruber (2001), to analyze complex clinical and/or professional dilemmas encountered in fieldwork experiences. We view this level of critical analysis as crucial to addressing the complexities of occupation and to effective occupational therapy. As described in the Philosophical Base of Occupational Therapy (AOTA, 2011), “the quality of occupational performance and the experience of each occupation are unique in each situation due to the dynamic relationship between factors intrinsic to the individual, the contexts in which the occupation occurs, and the characteristics of the activity” (p. S65).

Finally, habits of critical thinking also complement the curriculum threads of leadership and innovation. Because critical thinking involves examining and questioning one’s own assumptions and considering the perspectives of others, Tittle (2011) claims that critical thinking engenders autonomy in those who employ this process, rather than simply accepting things as given (p.9). Tittle adds that, “people who engage in critical thinking tend to be able to provide evidence and reasoning for the opinions they hold” (p. 9) and more easily consider situations from a number of vantage points. “Thread courses” with concentrated focus on critical thinking are: OT 511 Therapeutic Use of Self and OT 521 Clinical Reasoning. In addition, critical thinking is modeled and practiced throughout the curriculum, particularly in the practice immersion courses: OT 501 Adult Physical Rehabilitation, OT 502 Mental Health and OT 503 Pediatrics. Key processes of critical thinking are reflected in our pervasive curricular emphasis on understanding and respecting the perspectives of others, particularly the perspectives of people with disabilities and those from underserved populations.

Leadership

The professional program at USC strives to prepare leaders in the field of occupational therapy, leaders who are knowledgeable about occupational science and who will contribute to practice breakthroughs in current, as well as emergent, practice settings. Leadership within occupational therapy is requisite to achieving AOTA's Centennial Vision (2007). In order to become more powerful and widely-recognized, we must understand associations between power, leadership and confidence (Clark, 2010b; Northouse, 2013).

In his seminal text, Burns (1987) described leadership as, "a special form of power" (p.12). Leadership is a complex process that has been conceptualized in a variety of ways, and studied and applied in many fields (Northouse, 2013). Our approach to developing leaders most closely reflects the transformational approach which Northouse attributed to Burns (1987) whereby, "one or more persons engage with others in such a way that leaders and followers raise one another to higher levels of motivation and morality" (p.20). As Northouse describes, this type of leadership takes into consideration the desires and needs of others and aims to help them achieve at the highest level possible (p.186). This complements Clark's (2010b) vision for occupational therapy professionals as powerful, persistent and confident practitioners who are aware of their talents and potential contributions and are skilled in, "identifying and connecting with those people who think highly of both us and the work we do" (p.268). We aim to develop skills in transformational leadership that students may apply with clients, colleagues and to the profession as a whole.

"Thread courses" with concentrated focus on leadership are: OT 523 Communication Skills for Effective Practice and OT 540 Leadership Capstone. Acknowledging the relationship between scholarship and leadership in occupational therapy (Corcoran, 2005), our evidence-based practice courses also provide crucial knowledge and skills in support of leadership in occupational therapy, as do our courses geared toward self-reflection and critical thinking: OT 511 Therapeutic Use of Self and OT 521 Clinical Reasoning.

Innovation

Innovation and informed risk-taking are lasting core values of the University of Southern California, mentioned in both the USC 2004 Strategic Plan and the USC 2011 Strategic Vision. While it may seem unrealistic to expect all of our students to be innovators, according to Scott Anthony (2012), who has written several books on the topic, the potential for innovation lies within every individual. We concur with his perspective that the world is increasingly dynamic, and therefore innovation will be a requirement for success and sustainability for all.

At the Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy, we identify innovation as a core 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), a combination of creativity with action and implementation. In other words, it is not in thinking creatively that someone is innovative; it is in doing, in taking action on one's creative ideas. Making the leap from thinking to doing involves risk-taking, a characteristic also mentioned in Clark's (2010b) recent review of literature on power and confidence in relation to occupational therapy. Clark stressed the connection between practice, working hard, taking risks and developing confidence. Risk-taking is particularly relevant to knowing and expressing one's capacities.

Innovation is also central to our curriculum emphasis on leadership. Bennis (1989) described leaders as individuals possessing innovative and original thinking (p.45). Similar to Anthony (2012), Bennis purports that, rather than simply maintain or accept the status quo, leaders are able to create and develop. They challenge the way things are. According to Bennis, leadership skills are accelerated by a dynamic education that fosters understanding over memorizing. Our students become leaders through multiple opportunities to create and take risks in our learner-centered curriculum.

“Thread courses” with concentrated focus on innovation are: OT 406 Foundations: Creativity, Craft and Activity Analysis, OT 534 Health Promotion and Wellness, OT 537 Occupation-Centered Programs for the Community and OT 538 Current Issues in Practice: Adulthood and Aging. Additional opportunities to understand and practice innovation are also provided through activities in OT 540 Leadership Capstone.

Content and Sequence of the Curriculum

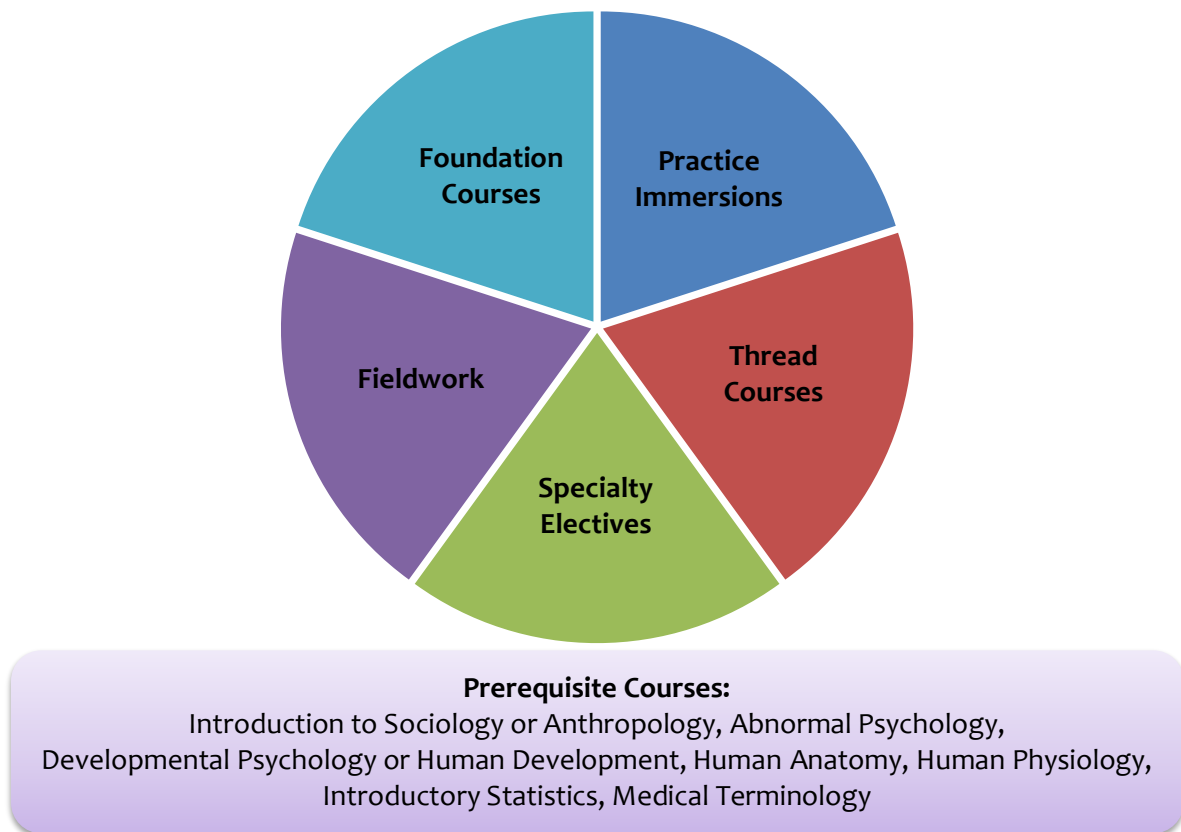


Figure 6. Components of the Chan Division Occupational Therapy Professional Program Curriculum

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 *occupation*, students must take courses in Introductory Sociology or Introductory Anthropology, Abnormal Psychology, (for which General Psychology is typically required), and Developmental Psychology or Human Development. Analysis of occupation, as well as the students' ability to interpret research findings for *evidence-based practice* in current practice settings, is informed by preparation in Human Anatomy and Physiology, as well as Introductory Statistics. 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 *leadership* 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 comprise the first semester of the master's-degree-level program and are: OT 405 Foundations: Occupation, OT 406 Foundations: Creativity, Craft and Activity Analysis, OT 440 Foundations: Kinesiology, and OT 441 Foundations: Neuroscience.

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 three cohorts. Over three semesters, each cohort takes one practice immersion course per semester in adult physical rehabilitation, mental health, and pediatrics. The cohorts rotate through all three practice immersions over the course of three semesters. Each of these 8-unit intensive courses combines 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: **occupation, evidence-based practice, critical thinking, leadership and innovation**. These thread courses are: OT 511 Therapeutic Use of Self, OT 515 Neuroscience of Behavior, OT 518 Quantitative Research for Evidence-Based Practice, OT 521 Clinical Reasoning, OT 523 Communication Skills for Effective Practice, OT 525 Qualitative Research for Evidence-Based Practice, OT 534 Health Promotion and Wellness, OT 537 Occupation-Centered Programs for the Community, OT 538 Current Issues in Practice: Adulthood and Aging, OT 540 Leadership Capstone and OT 545 Advanced Seminar in Occupational Science (see Figure 7 below for an outline of curriculum threads and thread courses).

Specialty Electives

In the final semester of the professional program, students take a minimum required 12 units of elective courses to expand their knowledge and skills. Students select from advanced clinical courses in topics including: Ergonomics, Lifestyle Redesign, Technology, Hand Rehabilitation, Advanced Practice in Physical Agent Modalities, Enhancing Motor Control, Sensory Integration and Dysphagia, among others. Students may also choose to take 4 of the required 12 elective units in graduate level courses outside the Division.

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 (OT 501 Adult Physical Rehabilitation, OT 502 Mental Health, and OT 503 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 fourth week of each immersion course, and participate at the site one day a week for ten weeks, as well as one full-time week. In addition to these three Level I experiences, students typically complete the required minimum 24 weeks of Level II fieldwork in two distinct practice areas. Level II fieldwork typically occurs as one 12-week full-time experience in the summer between year one and year two of the curriculum, and a second 12-week full-time experience in the summer following year two of the curriculum. Because the first Level II fieldwork experience occurs prior to the final year of the program, it must be completed in a practice setting related to one of the two practice immersion courses the students have already completed in year one. Figure 8 below displays the timing and integration of Level I and Level II fieldwork experiences throughout the curriculum for each cohort. Figure 9 provides an example of a weekly schedule, for a student from Cohort A, to illustrate the integration of Level I fieldwork with course work.

Comprehensive Exam

As one of the final requirements for the Master of Arts degree, following successful completion of all required courses in the program, students must pass a comprehensive exam. The exam is offered only in May and December of each year and includes content from core courses within the program.

According to the USC Graduate School policies, a student who fails the comprehensive exam the first time may be permitted to take the comprehensive exam a second time at the discretion of the faculty. A student who is taking the comprehensive exam a second time must take the exam in its entirety. A student who fails the comprehensive examination a second time may not continue in the degree program. No exceptions are allowed (See USC online catalog: <https://catalogue.usc.edu/uscgraduate/policies/>).

Figure 7. Curriculum Threads with Corresponding Courses

	Occupation	Evidence-Based Practice	Critical Thinking	Leadership	Innovation
Thread Courses that primarily address designated curriculum thread	OT 405* Foundations: Occupation	OT 518 Quantitative Research for Evidence-Based Practice	OT 511 Therapeutic Use of Self	OT 523 Communication Skills for Effective Practice	OT 406* Foundations: Creativity, Craft and Activity Analysis
	OT 406* Foundations: Creativity, Craft and Activity Analysis	OT 525 Qualitative Research for Evidence-Based Practice	OT 521 Clinical Reasoning	OT 540 Leadership Capstone	OT 534 Health Promotion and Wellness
	OT 440* Foundations: Kinesiology				OT 538 Current Issues in Practice: Adulthood and Aging
	OT 441* Foundations: Neuroscience				OT 537 Occupation-Centered Programs for the Community
	OT 515 Neuroscience of Behavior				
	OT 534 Health Promotion and Wellness				
	OT 545 Advanced Seminar in Occupational Science				
Other Courses that are linked to designated curriculum thread	OT 501 Practice Immersion: Adult Physical Rehabilitation	OT 501 Practice Immersion: Adult Physical Rehabilitation	OT 501 Practice Immersion: Adult Physical Rehabilitation		OT 540 Leadership Capstone
	OT 502 Practice Immersion: Mental Health	OT 502 Practice Immersion: Mental Health	OT 502 Practice Immersion: Mental Health		
	OT 503 Practice Immersion: Pediatrics	OT 503 Practice Immersion: Pediatrics	OT 503 Practice Immersion: Pediatrics		
	OT 534 Health Promotion and Wellness				
	OT 538 Current Issues in Practice: Adulthood and Aging				

*Courses that are foundations to practice immersion courses, thread courses, and specialty elective courses. These foundation courses also prepare students with a complex understanding of the nature and dimensions of occupation.

Figure 8. Cohorts Rotations: Practice Immersions plus Thread Courses plus Fieldwork

Cohort Rotations: Practice Immersions + Thread Courses + Fieldwork							
	Semester 1	Semester 2	Semester 3	Summer	Semester 4	Semester 5	Summer
Cohort A	Foundations: Occupation Creativity Kinesiology Neuroscience	OT 501 *** Adult Physical Rehabilitation OT 511 Therapeutic Use of Self OT 515 Neuroscience of Behavior OT 518 Quantitative Research for EBP	OT 502 *** Mental Health OT 521 Clinical Reasoning OT 523 Communications Skills for Effective Practice OT 525 Qualitative Research for EBP	Level II Fieldwork in Adult Rehabilitation or Mental Health	OT 503*** Pediatrics OT 534 Health Promotion and Wellness OT 537 Occupation- Centered Programs for the Community OT 538 Current Issues in Practice: Adulthood and Aging	Rotations end OT 540 Leadership Capstone OT 545 Advanced Seminar in OS OT Specialty Electives	Level II Fieldwork in another practice area
		OT 502 *** Mental Health OT 511 Therapeutic Use of Self OT 515 Neuroscience of Behavior OT 518 Quantitative Research for EBP	OT 503*** Pediatrics OT 521 Clinical Reasoning OT 523 Communications Skills for Effective Practice OT 525 Qualitative Research for EBP		OT 501*** Adult Physical Rehabilitation OT 534 Health Promotion and Wellness OT 537 Occupation- Centered Programs for the Community OT 538 Current Issues in Practice: Adulthood and Aging	Rotations end OT 540 Leadership Capstone OT 545 Advanced Seminar in OS OT Specialty Electives	
		OT 503*** Pediatrics OT 511 Therapeutic Use of Self OT 515 Neuroscience of Behavior OT 518 Quantitative Research for EBP	OT 501*** Adult Physical Rehabilitation OT 521 Clinical Reasoning OT 523 Communications Skills for Effective Practice OT 525 Qualitative Research for EBP		OT 502*** Mental Health OT 534 Health Promotion and Wellness OT 537 Occupation- Centered Programs for the Community OT 538 Current Issues in Practice: Adulthood and Aging	Rotations end OT 540 Leadership Capstone OT 545 Advanced Seminar in OS OT Specialty Electives	
Cohort B	Foundations: Occupation Creativity Kinesiology Neuroscience	OT 502 *** Mental Health OT 511 Therapeutic Use of Self OT 515 Neuroscience of Behavior OT 518 Quantitative Research for EBP	OT 503*** Pediatrics OT 521 Clinical Reasoning OT 523 Communications Skills for Effective Practice OT 525 Qualitative Research for EBP	Level II Fieldwork in Mental Health or Pediatrics	OT 501*** Adult Physical Rehabilitation OT 534 Health Promotion and Wellness OT 537 Occupation- Centered Programs for the Community OT 538 Current Issues in Practice: Adulthood and Aging	Rotations end OT 540 Leadership Capstone OT 545 Advanced Seminar in OS OT Specialty Electives	Level II Fieldwork in another practice area
		OT 503*** Pediatrics OT 511 Therapeutic Use of Self OT 515 Neuroscience of Behavior OT 518 Quantitative Research for EBP	OT 501*** Adult Physical Rehabilitation OT 521 Clinical Reasoning OT 523 Communications Skills for Effective Practice OT 525 Qualitative Research for EBP		OT 502*** Mental Health OT 534 Health Promotion and Wellness OT 537 Occupation- Centered Programs for the Community OT 538 Current Issues in Practice: Adulthood and Aging	Rotations end OT 540 Leadership Capstone OT 545 Advanced Seminar in OS OT Specialty Electives	
Cohort C	Foundations: Occupation Creativity Kinesiology Neuroscience	OT 503*** Pediatrics OT 511 Therapeutic Use of Self OT 515 Neuroscience of Behavior OT 518 Quantitative Research for EBP	OT 501*** Adult Physical Rehabilitation OT 521 Clinical Reasoning OT 523 Communications Skills for Effective Practice OT 525 Qualitative Research for EBP	Level II Fieldwork in Pediatrics or Adult Rehabilitation	OT 502*** Mental Health OT 534 Health Promotion and Wellness OT 537 Occupation- Centered Programs for the Community OT 538 Current Issues in Practice: Adulthood and Aging	Rotations end OT 540 Leadership Capstone OT 545 Advanced Seminar in OS OT Specialty Electives	Level II Fieldwork in another practice area
		OT 503*** Pediatrics OT 511 Therapeutic Use of Self OT 515 Neuroscience of Behavior OT 518 Quantitative Research for EBP	OT 501*** Adult Physical Rehabilitation OT 521 Clinical Reasoning OT 523 Communications Skills for Effective Practice OT 525 Qualitative Research for EBP		OT 502*** Mental Health OT 534 Health Promotion and Wellness OT 537 Occupation- Centered Programs for the Community OT 538 Current Issues in Practice: Adulthood and Aging	Rotations end OT 540 Leadership Capstone OT 545 Advanced Seminar in OS OT Specialty Electives	
***Includes Level I Fieldwork in a Corresponding Practice Setting							

Figure 9. **Sample** Student Weekly Schedule Showing Integration of Level I Fieldwork
 All schedules subject to change

FALL							
	Monday	Tuesday	Wednesday		Thursday	Friday	
8:00							
8:30							
9:00	OT 515 Neuroscience of Behavior Aziz Zadeh Auditorium	Level I Fieldwork: Off-Site Clinical Experience (hours vary) Tue. Or Friday	OT 503 Practice Immersion: Pediatrics Gunter/Diaz CHP 113		OT 518 Quantitative Research (1/2 Cohort) TBA CHP 225	Level I Fieldwork: Off-Site Clinical Experience (hours vary) Tue. Or Friday	
9:30							
10:00							
10:30							
11:00							
11:30							
12:00							
12:30							
1:00	OT 511 Therap. Use of Self Chu A. 113	Level I Fieldwork: Off-Site Clinical Experience (hours vary) Tue. Or Friday	OT 503 Lab Practice Immersion: Pediatrics (1/2 Cohort) CHP 113	OT 518 Quantitative Research (1/2 Cohort) TBA CHP 225	OT 503 Practice Immersion: Pediatrics Gunter/Diaz CHP 109		Level I Fieldwork: Off-Site Clinical Experience (hours vary) Tue. Or Friday
1:30							
2:00							
2:30							
3:00							
3:30							
4:00							
4:30							
5:00							
5:30							

Educational Goals: Student Learning Outcomes

Program Outcomes:	Student Learning Outcomes and Objectives:	Sequence of Assessment Measures:
<p>Leader</p>	<p>1. Graduates are articulate, well-spoken advocates who convey the unique value of occupational therapy. Graduates will:</p> <ul style="list-style-type: none"> a. Demonstrate effective and professional written, verbal and non-verbal communication, from a personal and interpersonal perspective, in the delivery of occupational therapy services within an organizational environment. b. Analyze and discuss the impact of current social, economic, political, geographic, and demographic factors on policy development, the provision of occupational therapy services, and how to promote access to occupational therapy services. c. Effectively document the scope, content and medical necessity of occupational therapy services to all stakeholders. d. Analyze and convey the value of and need for occupational therapy services in emergent areas in the community. e. Demonstrate leadership and advocacy skills by participating in external organization and agencies while promoting the profession. 	<p>Semester 2: Journal Club (OT 518 Quantitative Research for Evidence-Based Practice) Semester 2, 3 or 4: In-Service Training on Occupation-Based Assessments (OT 502 Practice Immersion: Mental Health) Semester 3: Therapeutic Group Protocol and Implementation (OT 523 Communication Skills for Effective Practice) Semester 3: Group Facilitation Experience: Assessment of Leadership Skills and Communication (OT 521 Clinical Reasoning) Semester 4: Professional Poster Presentation of Occupation-Centered Community Program (OT 537 Occupation-Centered Programs for the Community) ***Note: Students are responsible for and evaluated on in-class presentations in every course in the professional program</p> <p>Semester 5: Public Policy Written Analysis and Public Policy Forums (OT 540 Leadership Capstone)</p> <p>Semesters 2, 3, 4: Multiple Documentation Practica throughout Practice Immersion Courses (OT 501 Practice Immersion: Adult Physical Rehabilitation, OT 502 Practice Immersion: Mental Health, OT 503 Practice Immersion: Pediatrics) Semester 3: Documentation Assignment (OT 521 Clinical Reasoning)</p> <p>Semester 4: Proposal of Occupation-Centered Community Program (OT 537 Occupation-Centered Programs for the Community)</p> <p>Semester 5: Leadership Externship Experience (OT 540 Leadership Capstone)</p>

Program Outcomes:	Student Learning Outcomes and Objectives:	Sequence of Assessment Measures:
<p>Leader</p>	<p>2. Graduates are leaders on multidisciplinary teams. Graduates will:</p> <ul style="list-style-type: none"> a. Critically reflect on personal leadership qualities and create a professional development plan to optimize readiness for assuming leadership roles in organizations and the profession. b. Demonstrate the ability to design ongoing processes for quality improvement and develop program changes as needed to ensure quality of services and to direct administrative changes. c. Critically analyze current professional trends and articulate the role and responsibility of the practitioner to effect changes in service delivery and policies, and to identify opportunities in emerging practice areas. 	<p>Semester 3: IPE Day Critical Thinking Assignment (OT 521 Clinical Reasoning) Semester 5: Leadership Self-Assessment (OT 540 Leadership Capstone)</p> <p>Semester 4: Proposal of Occupation-Centered Community Program – <i>includes needs assessment and plan for program evaluation</i> (OT 537 Occupation-Centered Programs for the Community)</p> <p>Semester 5: Public Policy Written Analysis and Public Policy Forums (OT 540 Leadership Capstone)</p>
<p>Innovator</p>	<p>1. Graduates are creative problem solvers. Graduates will:</p> <ul style="list-style-type: none"> a. Demonstrate a general familiarity with the craft heritage shared by occupational therapists, the healing power of craft, and a basic functional knowledge of a variety of arts, crafts and activities. b. Demonstrate an ability to access their imagination and creativity. c. Navigate obstacles and challenges while successfully implementing an independent and innovative experience to enhance personal leadership skills. 	<p>Semester 1: Activity Analysis Assignments (OT 406 Foundations: Creativity, Craft and Activity Analysis) Semester 1: Progressive Era Influences Quiz and Discussion Leader Assignment (OT 405 Foundations: Occupation)</p> <p>Semester 1: Activity Analysis Assignments (OT 406 Foundations: Creativity, Craft and Activity Analysis)</p> <p>Semester 5: Leadership Externship Experience (OT 540 Leadership Capstone)</p>

Program Outcomes:	Student Learning Outcomes and Objectives:	Sequence of Assessment Measures:
<p>Innovator</p>	<p>2. Graduates will creatively implement occupation-centered practice in current and emergent practice areas. Graduates will:</p> <ul style="list-style-type: none"> a. Appreciate occupation and its relation to health and wellness in their own lives. b. Develop proficiency in the analysis of activity as a core skill in the practice of occupational therapy. c. Explain the dynamic and complex nature of occupation using occupational science concepts and research. d. Develop occupation-centered intervention plans for clients in current practice settings: adult physical rehabilitation, mental health and pediatric settings. e. Complete all steps of the needs assessment process and create innovative occupation-centered community programs to meet occupational needs. 	<p>Semester 1: Occupational Questionnaire and Self-Analysis (OT 405 Foundations: Occupation) Semester 4: Occupational Self-Analysis: Health Promotion and Wellness (OT 534 Health Promotion and Wellness)</p> <p>Semester 1: Activity Analysis Portfolio (OT 406 Foundations: Creativity, Craft and Activity Analysis)</p> <p>Semester 5: Group Seminar Leadership on Occupational Science Key Concepts (OT 545 Advanced Seminar in Occupational Science)</p> <p>Semesters 2, 3, 4: Case Study Assignments and Intervention Practicum (OT 501 Practice Immersion: Adult Physical Rehabilitation, OT 502 Practice Immersion: Mental Health and OT 503 Practice Immersion: Pediatrics)</p> <p>Semester 4: Proposal of Occupation-Centered Community Program (OT 537 Occupation-Centered Programs for the Community) **Note: Several of these programs are further developed in Semester 5 for OT 540 Leadership Capstone Externship Experience</p>

Program Outcomes:	Student Learning Outcomes and Objectives:	Sequence of Assessment Measures:
<p>Evidence-Based Practitioner</p>	<p>1. Graduates use evidence that supports their practice. Graduates will:</p> <ul style="list-style-type: none"> a. Locate and use national and international resources, including appropriate literature within and outside of occupational therapy. b. Explain concepts and standards ensuring the protection of human subjects in the course of scholarly inquiry. c. Critique the validity of research studies, and synthesize research literature to make evidence-based decisions. d. Explain findings from the literature to professional colleagues. e. Develop occupation-based and evidence-based intervention plans for current practice settings f. Demonstrate the skills necessary to write a scholarly report in a format for publication and/or oral presentation of research findings. 	<p>Semesters 2 and 3: Participation in Library Workshops and Literature Searches (OT 518 Quantitative Research for Evidence-Based Practice and OT 525 Qualitative Research for Evidence-Based Practice)</p> <p>Semester 3: Collaborative Institutional Training Initiative (CITI) Human Subject Training (OT 525 Qualitative Research for Evidence-Based Practice)</p> <p>Semester 2: Critically Appraised Paper (CAP) (OT 518 Quantitative Research for Evidence-Based Practice)</p> <p>Semester 3: Critical Appraisal (OT 525 Qualitative Research for Evidence-Based Practice)</p> <p>Semester 2: Journal Club and Article Presentation (OT 518 Quantitative Research for Evidence-Based Practice)</p> <p>Semester 2: PICO Question Assignment (OT 518 Quantitative Research for Evidence-Based Practice)</p> <p>Semester 2: Critically Appraised Paper and Critically Appraised Topic (OT 518 Quantitative Research for Evidence-Based Practice)</p> <p>Semester 3: Team Oral and Written Defense: Appraising, Synthesizing, and Applying Multiple Types of Evidence to Promote EBP (OT 525 Qualitative Research for Evidence-Based Practice)</p> <p>Semesters 2, 3, 4: Intervention Plans for Cases in Current Settings (OT 501 Practice Immersion: Adult Physical Rehabilitation, OT 502 Practice Immersion: Mental Health, OT 503 Practice Immersion: Pediatrics)</p> <p>Semester 2: Critically Appraised Topic (CAT) (OT 518 Quantitative Research for Evidence-Based Practice)</p> <p>Semester 3: Team Oral and Written Defense: Appraising, Synthesizing, and Applying Multiple Types of Evidence to Promote EBP (OT 525 Qualitative Research for Evidence-Based Practice)</p> <p>Semester 4: Small Group Case Application Activities: Application of Health Promotion and Wellness to Current and Emerging Practice (OT 534)</p>

Program Outcomes:	Student Learning Outcomes and Objectives:	Sequence of Assessment Measures:
	<p>g. Demonstrate and apply knowledge of current research to support occupational therapy interventions for emerging areas or practice in health promotion and disease prevention.</p>	<p>Health Promotion and Wellness) Semester 4: Occupational Therapy Home Assessment for Fall Prevention and Aging in Place (OT 538 Current Issues in Practice: Adulthood and Aging) Following all Courses: Comprehensive Exam</p>
<p>Life-Long Learner</p>	<p>1. Graduates are self-reflective practitioners who are empowered and committed to their own learning and professional development. Graduates will:</p> <p>a. Develop a therapeutic <i>self</i> and recognize that the clinician has a responsibility to model positive and mindful communication for the client/patient</p> <p>b. Develop an introductory career agenda</p> <p>c. Critically reflect on practice</p> <p>d. Engage in strategies for on-going professional development to maintain and expand skills in alignment with current practice standards</p>	<p>Semester 2: Self-analysis through The Intentional Relationship exercises along with Reflective Fieldwork Journal and Final Reflective Summary (OT 511 Therapeutic Use of Self)</p> <p>Semester 3: Completion of Career Agenda Portfolio: resume, cover letter, one-year and five-year career goals (OT 523 Communication Skills for Effective Practice)</p> <p>Semester 3: Dilemma Paper: Process and Conceptual Analysis of Clinical Reasoning Scenario (OT 521 Clinical Reasoning) Semester 3: Dimensional Analysis Paper (OT 525 Qualitative Research for Evidence-Based Practice) Semesters 2, 3, 4: Linking Theory to Practice Assignment (OT 501 Practice Immersion: Adult Physical Rehabilitation)</p> <p>All Semesters: Engagement in professional associations – Occupational Therapy Association of California (OTAC) and American Occupational Therapy Association (AOTA) Student Membership Semesters 2, 3, 4: Mid-Semester and End-of-Semester Professional Self-Assessments (OT 501 Practice Immersion: Adult Physical Rehabilitation, OT 502 Practice Immersion: Mental Health, OT 503 Practice Immersion: Pediatrics) Semester 2: Journal Club (OT 518 Quantitative Research for Evidence-Based Practice)</p>

References

- Accreditation Council for Occupational Therapy Education. (2012). 2011 Accreditation Council for Occupational Therapy Education (ACOTE) standards and interpretive guide: December 2012 interpretive guide version. Retrieved from <http://www.aota.org/Educate/Accredit/Draft-Standards/50146.aspx?FT=.PDF>
- Ambrose, S. A., Bridges, M. W., DiPietro, M., Lovett, M. C., & Norman, M. K. (2010). *How learning works: Seven researched-based principles for smart teaching*. San Francisco, CA: Jossey-Bass.
- American Occupational Therapy Association. (2007). AOTA's centennial vision and executive summary. *American Journal of Occupational Therapy*, 61, 613-614. doi: 10.5014/ajot.61.6.613
- American Occupational Therapy Association. (2007). Philosophy of occupational therapy education. *American Journal of Occupational Therapy*, 61, 678. doi: 10.5014/ajot.61.6.678
- American Occupational Therapy Association. (2011). The philosophical base of occupational therapy. *American Journal of Occupational Therapy*, 65 (Suppl.), S65. doi: 10.5014/ajot.2011.65S65
- Anthony, S. D. (2012). *The little black book of innovation: How it works, how to do it*. Boston, MA: Harvard Business School Publishing.
- Bennis, W. (1989). *On becoming a leader*. Cambridge, MA: Perseus Book.
- Bonwell, C. C., & Eison, J. A. (1991). Active learning: Creating excitement in the classroom. ASHE-ERIC Higher Education Report No. 1. Washington, DC: ERIC Clearinghouse on Higher Education, The George Washington University.
- Brookfield, S. D. (1995). *Becoming a critically reflective teacher*. San Francisco, CA: Jossey-Bass.
- Brookfield, S. D. (2006). *The skillful teacher: On technique, trust, and responsiveness in the classroom* (2nd ed.). San Francisco, CA: Jossey-Bass.
- Brookfield, S. D. (2011). *Teaching for critical thinking: Tools and techniques to help students question their assumptions*. San Francisco, CA: Jossey-Bass.
- Burns, J. M. (1987). *Leadership*. New York, NY: Harper & Row.
- Clark, F., Parham, D., Carlson, M., Frank, G., Jackson, J., Pierce, D., Zemke, R. (1991). Occupational science: Academic innovation in the service of occupational therapy's future. *American Journal of Occupational Therapy*, 45, 300-310. doi: 10.5014/ajot.45.4.300
- Clark, F. (2010a). High-definition occupational therapy: HD OT (Inaugural Presidential Address). *American Journal of Occupational Therapy*, 64, 848-854. doi:10.5014/ajot.2010.64602
- Clark, F. (2010b). Power and confidence in professions: Lessons for occupational therapy. *Canadian Journal of Occupational Therapy*, 77, 264-269. doi:10.2182/cjot.2010.01.77.5.2
- Committee on Academic Programs and Teaching (CAPT). (2005). *Learner-centered teaching and education at USC: A resource for faculty*. Retrieved from http://cet.usc.edu/resources/teaching_learning/docs/LearnerCentered_Resource_final.PDF
- Corcoran, M. (2005). Leadership through scholarship in occupational therapy. *American Journal of Occupational Therapy*, 59, 607-608. doi: 10.5014/ajot.59.6.607
- Del Bueno, D. (2005). A crisis in critical thinking. *Nursing Education Perspectives*, 26(5), 278-282.
- Dyess, S. M., & Sherman, R. O. (2009). The first year of practice: New graduate nurses' transition and learning needs. *Journal of Continuing Education in Nursing*, 40, 503-511. doi: 10.3928/00220124-20090824-03
- Facione, N. C., & Facione, P. A. (2008). *Critical thinking and clinical reasoning in the health sciences: An international multidisciplinary teaching anthology*. Millbrae, CA: The California Academic Press.

- Forrest, J. L., & Miller, S. A. (2001). Integrating evidence-based decision making into allied health curricula. *Journal of Allied Health, 30*, 215-222.
- Gabbay, J., & Le May, A. (2011). *Practice-based evidence for healthcare: Clinical mindlines*. New York, NY: Routledge.
- Gadamer, H. (1982). *Truth and method*. (G. Barden & J. Cumming, Trans.). New York, NY: Crossroad. (Original work published 1965)
- Haffer, A., & Raingruber, B. (2001). *Using your head to land on your feet: A beginning nurse's guide to critical thinking*. Philadelphia, PA: F. A. Davis Company.
- Hoffmann, T., Bennett, S., & Del Mar, C. (2010). Introduction to evidence-based practice. In T. Hoffmann, S. Bennett, & C. Del Mar (Eds.), *Evidence-based practice across the health professions* (pp. 1-15). Chatswood, Australia: Elsevier Australia.
- Law, M., & MacDermid, J. (2008). Introduction to evidence-based practice. In M. Law, & J. MacDermid (Eds.), *Evidence-based rehabilitation: A guide to practice* (2nd ed., pp. 3-14). Thorofare, NJ: SLACK Inc.
- Melnyk, B. M., & Fineout-Overholt, E. (Eds.). (2011). *Evidence-based practice in nursing & healthcare: A guide to best practice* (2nd ed.). Philadelphia, PA: Lippincott Williams & Wilkins.
- Northouse, P.G. (2013). *Leadership: Theory and practice* (6th ed.). Thousand Oaks, CA: SAGE Publications, Inc.
- Paul, R. W., & Elder, L. (2002). *Critical thinking: Tools for taking charge of your professional and personal life*. Upper Saddle River, NJ: Prentice Hall.
- Pollock, N., & Rochon, S. (2002). Becoming an evidence-based practitioner. In M. Law (Ed.), *Evidence-based rehabilitation: A guide to practice* (pp. 31-46). Thorofare, NJ: SLACK Incorporated.
- The role and mission of the University of Southern California*. (1993, February). Retrieved from USC Policies and Core Documents website, https://about.usc.edu/files/2011/07/USCRole_and_Mission_Statement_1993.PDF
- Sackett, D. L., Rosenberg, W. M., Gray, J. A., Haynes, R. B., & Richardson, W. S. (1996). Evidence based medicine: What it is and what it isn't: It's about integrating individual clinical expertise and the best external evidence. *BMJ, 312*, 71-72. doi: 10.1136/bmj.312.7023.71
- Sackett, D. L., Straus, S. E., Richardson, W. S., Rosenberg, W. M. C., & Haynes, R. (2000). *Evidence-based medicine: How to practice and teach EBM* (2nd ed.). New York. NY: Churchill Livingstone.
- Tittle, P. (2011). *Critical thinking: An appeal to reason*. New York, NY: Routledge.
- USC strategic vision: Matching deeds to ambitions*. (2011, December). Retrieved from USC Strategic Planning website, http://strategic.usc.edu/files/2013/01/Strategic-Vision_one-page-summary.PDF
- USC's plan for increasing academic excellence: Building strategic capabilities for the University of the 21st century*. (2004, October). Retrieved from USC Policies and Core Documents website, https://about.usc.edu/files/2011/07/StrategicPln_12_10_04.PDF
- Weimer, M. (2002). *Learner-centered teaching: Five key changes to practice*. San Francisco, CA: Jossey-Bass.
- Wilcock, A. A. (1998). *An occupational perspective of health*. Thorofare, NJ: SLACK Inc.
- Yerxa, E. J., Clark F., Frank, G., Jackson, J., Parham, D., Pierce, D., ... Zemke, R. (1989). An introduction to occupational science, a foundation for occupational therapy in the 21st century. In J. A. Johnson, & E. J. Yerxa (Eds.), *Occupational science: The foundation for new models of practice*. New York, NY: Haworth Press, Inc.
- Zemke, R., & Clark, F. (Eds.). (1996). *Occupational science: The evolving discipline*. Philadelphia, PA: F. A. Davis.

OT PROFESSIONAL PROGRAM CURRICULUM (MA2 Program)
 (Field Experiences highlighted in **Yellow**)

SUMMER YEAR 1 [8 units]		FALL YEAR 1 [18 units]	SPRING YEAR 1 [18 units]
OT 405 Foundations: Occupation [2]	Practice Immersion Courses [8] Three simultaneous cohorts cycle through coursework and level I fieldwork, related to one of three areas, across three semesters: OT 501 Adult Physical Rehabilitation OT 502 Mental Health OT 503 Pediatrics Fieldwork: One day per week and one full week in related setting.	OT 511 Therapeutic Use of Self [2]	Practice Immersion Courses [8] Three simultaneous cohorts cycle through coursework and level I fieldwork, related to one of three areas, across three semesters: OT 501 Adult Physical Rehabilitation OT 502 Mental Health OT 503 Pediatrics Fieldwork: One day per week and one full week in related setting.
OT 406 Foundations: Creativity, Craft and Activity Analysis [2]			OT 521 Clinical Reasoning [3]
OT 440 Foundations: Kinesiology [2]		OT 515 Neuroscience of Behavior [4]	OT 523 Communication Skills for Effective Practice [3]
OT 441 Foundations: Neuroscience [2]		OT 518 Quantitative Research for Evidence-Based Practice [4]	OT 525 Qualitative Research for Evidence-Based Practice [4]
SUMMER YEAR 2 [2 units]		FALL YEAR 2 [16 units]	SPRING YEAR 2 [16 units]
OT 586 Level II Fieldwork [2]	Practice Immersion Courses [8] Three simultaneous cohorts cycle through coursework and level I fieldwork, related to one of three areas, across three semesters: OT 501 Adult Physical Rehabilitation OT 502 Mental Health OT 503 Pediatrics Fieldwork: One day per week and one full week in related setting.	OT 534 Health Promotion & Wellness [2]	OT 540 Leadership Capstone[2] <i>Two full-time weeks externship – arranged by student as part of course requirements. May include international experience as one option.</i>
		OT 537 Occupation-Centered Programs for the Community [4]	OT 545 Advanced Seminar in Occupational Science [2]
		OT 538 Current Issues in Practice: Adulthood and Aging [2]	OT 5## Electives [2-4 units; 12 units required to graduate]
			OT 5## Electives [2-4 units]
			OT 5## Electives [2-4 units]
			OT 5## Electives [2-4 units]
SUMMER YEAR 3 [2 units]			
OT 586 Level II Fieldwork [2]			

OT POST-PROFESSIONAL MASTER'S PROGRAM CURRICULUM
(Field Experiences highlighted in **Yellow**)

All schedules subject to change

FALL [14-16 units]	SPRING [16-18 units]
OT 515 Neuroscience of Behavior [4]	OT 525 Qualitative Research for Evidence-Based Practice [4]
OT 534 Health Promotion & Wellness [2]	OT 540 Leadership Capstone [2] <i>Two full-time weeks externship – arranged by student as part of course requirements. May include international experience.</i>
OT 538 Current Issues in Practice: Adulthood and Aging [2]	OT 5## Electives [8-12 units]
OT 518 Quantitative Research for Evidence-Based Practice [4]	
OT 545 Advanced Seminar in Occupational Science [2]	
OT 5## Electives [0-4 units]	

5. LENGTH AND REQUIREMENTS OF THE CHAN DIVISION EDUCATIONAL PROGRAMS

Undergraduate students take four occupational therapy courses during their junior year of study: OT 405, OT 406, OT 440, and OT 441. Upon completing all prerequisites by August of the junior year (prior to the start of the senior year), the undergraduate students join the master's students in professional courses during the fall of their senior year. Students in the five-year BS to MA program apply for admission to the MA program by February 15 of their senior year. Following completion of the Bachelor's degree in occupational therapy, students who qualify will continue into the Master's program with Advanced Standing.

A. SEQUENCE OF PROFESSIONAL COURSES FOR OCCUPATIONAL THERAPY UNDERGRADUATES PURSUING THE BACCALAUREATE DEGREE ENROUTE TO THE MASTER OF ARTS DEGREE:

<u>Semester</u>	<u>Course #</u>	<u>Units</u>	<u>Title</u>
Fall of Junior Year	OT 405	2	Foundations: Occupation
	OT 440	2	Foundations: Kinesiology
Spring of Junior Year	OT 406	2	Foundations: Creativity, Craft and Activity Analysis
	OT 441	2	Foundations: Neuroscience
Fall Senior Year (1 st professional year)	OT 501 or 502 or 503	8	Practice Immersion*
	OT 511	2	Therapeutic Use of Self
	OT 515	4	Neuroscience of Behavior
	OT 525	4	Quantitative Research for Evidence-Based Practice
Spring of Senior Year (1 st professional year)	OT 501 or 502 or 503	8	Practice Immersion*
	OT 521	3	Clinical Reasoning
	OT 523	3	Communication Skills for Effective Practice
	OT 518	4	Qualitative Research for Evidence-Based Practice
Summer of Senior Year (2 nd professional year)	OT 586	1-2	Clinical Internship with Seminar**

* Students take ONE of the following each semester - OT 501 Practice Immersion: Adult Physical Rehabilitation, OT 502 Practice Immersion: Mental Health, or OT 503 Practice Immersion: Pediatrics

** assuming students are admissible to the MA program

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

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

<u>Semester</u>	<u>Course #</u>	<u>Units</u>	<u>Title</u>
Fall	OT 501 or 502 or 503	8	Practice Immersion*
	OT 534	2	Health Promotion and Wellness
	OT 537	4	Occupation-Centered Programs for the Community
	OT 538	2	Current Issues in Practice: Adulthood and Aging
Spring	OT 540	2	Leadership Capstone
	OT 545	2	Advanced Seminar in Occupational Science
	OT 500 level	12	Electives**
Summer	OT 586	1-2	Clinical Internship with Seminar

B. SEQUENCE OF COURSES FOR OCCUPATIONAL THERAPY ENTRY-MASTER'S STUDENTS

Students in the entry-level MA program have the option of taking the comprehensive examination **or** completing a thesis. All students are required to take 4 units of electives in addition to the 20 units of 500-level core courses. The 4 units may be taken within the Division at the 500-level or above, or outside the Division at the 500-level or above. Students taking the comprehensive examination must take an additional 8 units of OT electives at the 500-level or above. Students completing a thesis take two additional semesters of OT 594 (a and b) after completing the core courses. Completing a thesis may require one or more semesters beyond the summer of year 2. Graduate students may **not** elect to take courses P/NP (PASS/FAIL).

YEAR I

<u>Semester</u>	<u>Course #</u>	<u>Units</u>	<u>Title</u>
Summer (1 st professional year)	OT 405	2	Foundations: Occupation
	OT 406	2	Foundations: Creativity, Craft and Activity Analysis
	OT 440	2	Foundations: Kinesiology
	OT 441	2	Foundations: Neuroscience
Fall (1 st professional year)	OT 501 or 502 or 503	8	Practice Immersion*
	OT 511	2	Therapeutic Use of Self
	OT 515	4	Neuroscience of Behavior
	OT 525	4	Quantitative Research for Evidence-Based Practice
Spring (1 st professional year)	OT 501 or 502 or 503	8	Practice Immersion*
	OT 518	4	Qualitative Research for Evidence-Based Practice
	OT 521	3	Clinical Reasoning
	OT 523	3	Communication Skills for Effective Practice
Summer (2 nd professional year)	OT 586	1-2	Clinical Internship with Seminar

YEAR II

<u>Semester</u>	<u>Course #</u>	<u>Units</u>	<u>Title</u>
Fall (2 nd professional year)	OT 501 or 502 or 503	8	Practice Immersion*
	OT 534	2	Health Promotion and Wellness
	OT 537	4	Occupation-Centered Programs for the Community
	OT 538	2	Current Issues in Practice: Adulthood and Aging
Spring (2 nd professional year)	OT 540	2	Leadership Capstone
	OT 545	2	Advanced Seminar in Occupational Science
	OT 500 level	12	Electives**
Summer (3 rd professional year)	OT 586	1-2	Clinical Internship with Seminar

* Students take ONE of the following each semester - OT 501 Practice Immersion: Adult Physical Rehabilitation, OT 502 Practice Immersion: Mental Health, or OT 503 Practice Immersion: Pediatrics

** See descriptions of potential elective courses below.

C. SEQUENCE OF COURSES FOR OCCUPATIONAL THERAPY POST-PROFESSIONAL MASTER'S STUDENT

MASTER'S DEGREE: ADVANCED STANDING FOR POST-PROFESSIONAL MASTER'S STUDENTS

Semester	Course #	Units	Title
Fall	OT 515	4	Neuroscience of Behavior
	OT 518	4	Quantitative Research for the Practicing Clinician
	OT 534	2	Health Promotion and Wellness
	OT 538	2	Current Issues in Practice: Adulthood and Aging
	OT 545	2	Advanced Seminar in Occupational Science
	OT 500 level	0-4	Electives**
Spring	OT 525	4	Qualitative Research for Evidence-Based Practice
	OT 540	2	Leadership Capstone
	OT 500 level	8-12	Electives**

** See descriptions of potential elective courses below.

D. 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 in the fall semester of the final year in the program (or in fall semester for the post-professional Master's students). 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 590)** include participation in research projects with USC community partners. May be taken for 2 to 6 units.
- **Independent Study (OT 590)** enables students to research a topic of their choice, supervised by a USC faculty member. May be taken for 2 to 6 units
- **Other Options:** Students may take 4 units outside of the Division at the 500-level or higher.
- **OT Specialty Elective Courses** (list subject to change):

OT 560 (4 Units) Contemporary Issues in School-Based Practice
 OT 561 (4 Units) Occupational Therapy in Acute Care
 OT 562 (4 Units) Advanced Practice in Hand Therapy and Physical Agent Modalities
 OT 563 (2 Units) Occupational Therapy in Primary Health Care Environments
 OT 564 (4 Units) Sensory Processing and Sensory Integration
 OT 565 (4 units) Sensory Integration Interventions
 OT 566 (2 units) Healthcare Communication with Spanish-Speaking Clients
 OT 567 (4 Units) Contemporary Issues: Occupational Therapy in Early Intervention
 OT 568 (4 Units) Sensory Processing and Sensory Integration: Special Topics
 OT 571 (4 Units) Assistive Technology
 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
 OT 578 (4 Units) Therapeutic Communication for the Healthcare Practitioner

OT 579 (4 Units) Occupational Therapy in Adult Neurorehabilitation
OT 583 (4 Units) Current Applications of Lifestyle Redesign
OT 599 (4 Units) Special Topics

E. MASTER OF ARTS DEGREE GRADUATION REQUIREMENTS

COMPREHENSIVE EXAMINATION OPTION

24 units as above in year 2 plus 8 units of OT electives (see courses listed above – subject to change) = 32 units, plus passing the comprehensive exam.

Students may take the written comprehensive examination in fall or spring after successful completion of all required courses. This exam is only offered at the end of the spring and fall semesters. Graduate students must be registered for every fall and spring semester until graduation. If not registering for other courses, a student must register for GRSC 810 to maintain full time status or OT 590 for part time status.

THESIS OPTION

24 units as above in year 2 plus 4 units OT 594 Thesis = 28 units.

After completing all coursework, register for OT 594a for the first semester of thesis work and 594b for the second semester of thesis work, and then OT 594z every fall and spring as needed until completion.

6. ACADEMIC CALENDARS AND SCHEDULES: 2022 - 2023

Fall Semester 2022
68 Instructional Days

Open Registration	Mon-Fri	August 15-19
Move-In Day	Wednesday	August 17
Classes Begin	Mon	August 22
Labor Day	Mon	September 5
Fall Recess	Thu-Fri	October 13-14
Veteran's Day	Friday	November 11
Thanksgiving Holiday	Wed-Sun	November 23 – November 27
Classes End	Fri	December 2
Study Days	Sat-Tue	December 3-6
Exams	Wed-Wed	December 7-14
Winter Recess	Thu-Sun	December 15 – January 8, 2023

Spring Semester 2023
69 Instructional Days

Open Registration	Thu-Fri	January 5-6
Classes Begin	Mon	January 9
Martin Luther King's Birthday	Mon	January 16
President's Day	Mon	February 20
Spring Recess	Sun-Sun	March 12-19
Classes End	Fri	April 28
Study Days	Sat-Tue	April 29-May 2
Exams	Wed-Wed	May 3-10
Commencement	Fri	May 12

Please see the USC Schedule of Classes at: <http://classes.usc.edu/>

Professional Program: Second Year
Fall 2022
Cohort A (subject to change)

USC Chan Division of Occupational Science and Occupational Therapy - Professional Program							
Second Year Students (GOLD)							
COHORT A							
FALL 2022							
	Monday	Tuesday		Wednesday	Thursday	Friday	
8:30							
9:00		OT 503 Lab Practice Immersion: Pediatrics (1/2 Cohort)	OT 537 Occupation- Ctrd Program (1/2 Cohort)	Level I Fieldwork: Off-Site	OT 503 Practice Immersion: Pediatrics	Level I Fieldwork: Off-Site	
9:30							
10:00							
10:30							
11:00							
11:30							
12:00	Level I Fieldwork: Off-Site					Level I Fieldwork: Off-Site	
12:30	Level I Fieldwork: Off-Site					Level I Fieldwork: Off-Site	
1:00	Level I Fieldwork: Off-Site					Level I Fieldwork: Off-Site	
1:30	OT 538 Current Issues: Adulthood & Aging	OT 503 Practice Immersion: Pediatrics		Clinical Experience (hours vary) Wed. or Friday	OT 503 Lab Practice Immersion: Pediatrics (1/2 Cohort)	OT 537 Occupation- Ctrd Program (1/2 Cohort)	Clinical Experience (hours vary) Wed. or Friday
2:00							
2:30							
3:00	OT 534 Health Promotion and Wellness						
3:30							
4:00							
4:30							
5:00							
5:30							
6:00							

Professional Program: Second Year
 Fall 2022
 Cohort B (subject to change)

USC Chan Division of Occupational Science and Occupational Therapy - Professional Program							
Second Year Students(GOLD) COHORT B FALL 2022							
	Monday	Tuesday		Wednesday		Thursday	Friday
8:30							
9:00		OT 501 Lab Practice Immersion: Adult Rehab (1/2 Cohort)	OT 537 Occupation- Ctrd Programs (1/2 Cohort)	OT 537 Occupation- Ctrd Programs (1/2 Cohort)	OT 501 Lab Practice Immersion: Adult Rehab (1/2 Cohort)		
9:30							
10:00							
10:30							
11:00							
11:30							
12:00						Level I Fieldwork: Off-Site	Level I Fieldwork: Off-Site
12:30							
1:00							
1:30	OT 538 Current Issues: Adulthood & Aging	OT 501 Practice Immersion: Adult Rehabilitation	OT 501 Practice Immersion: Adult Rehabilitation			Clinical Experience (hours vary) Thursday or Friday	Clinical Experience (hours vary) Thursday or Friday
2:00							
2:30							
3:00							
3:30	OT 534 Health Promotion and Wellness						
4:00							
4:30							
5:00							
5:30							
6:00							

Professional Program: Second Year
Fall 2022
Cohort C (subject to change)

USC Chan Division of Occupational Science and Occupational Therapy - Professional Program						
<p style="text-align: center;">Second Year Students (GOLD) COHORT C FALL 2022</p>						
	Monday	Tuesday	Wednesday	Thursday	Friday	
8:30						
9:00		Level I Fieldwork: Off-Site	OT 502 Lab Practice Immersion: Mental Health (1/2 Cohort)	OT 537 Occupation- Ctrd Programs (1/2 Cohort)	OT 502 Practice Immersion: Mental Health	Level I Fieldwork: Off-Site
9:30						
10:00						
10:30						
11:00						
11:30						
12:00		Clinical Experience (hours vary) Tuesday or Friday	OT 502 Practice Immersion: Mental Health	OT 502 Lab Practice Immersion: Mental Health (1/2 Cohort)	OT 537 Occupation- Ctrd Program (1/2 Cohort)	Clinical Experience (hours vary) Tuesday or Friday
12:30						
1:00						
1:30	OT 538					
2:00	Current Issues: Adulthood & Aging					
2:30						
3:00						
3:30	OT 534					
4:00	Health Promotion and Wellness					
4:30						
5:00						
5:30						
6:00						

**Post-Professional Master's Program
Fall 2022 (subject to change)**

USC Mrs. T.H. Chan Division of Occupational Science and Occupational Therapy					
Post-Professional Master's Program (MA1) FALL 2022					
	Monday	Tuesday	Wednesday	Thursday	Friday
8:30					
9:00		OT 518 - Quant. Research for EBP Cermak HSC - CHP 225 (1/2 Cohort)	OT 518 - Quant. Research for EBP Cermak HSC - CHP 225 (1/2 Cohort)	OT 515 - 47977 Neuroscience of Behavior Aziz-Zadeh UPC	
9:30					
10:00	OT 534				
10:30	Health Promotion				
11:00	Payne				
11:30	HSC - CHP G37				
12:00					
12:30					
1:00					
1:30		OT 500A - 47786 Clinical Problems in OT - Ochi HSC - CHP 225	OT 538 -47996 Adulthood & Aging Schepens Niemiec HSC - CHP 111		
2:00	OT 545 - 47910				
2:30	Adv Sem in OS				
3:00	Park, D.				
3:30	HSC - CHP 225				
4:00					
4:30					
5:00					
5:30					
6:00					

Professional Program: Second Year (ALL COHORTS) and
Post-Professional Program
Spring 2023

To be Added When Available

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

Appendix B. 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. *Justice* 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.

6913410030p2 November/December 2015, Volume 69(Supplement 3)

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 provide 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.

The American Journal of Occupational Therapy 6913410030p3

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 promote 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 determined 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).

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 without 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.

Appendix C: 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 RESPONSIBILITIES 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

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

- 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

- 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, its 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

- 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, (<http://college.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

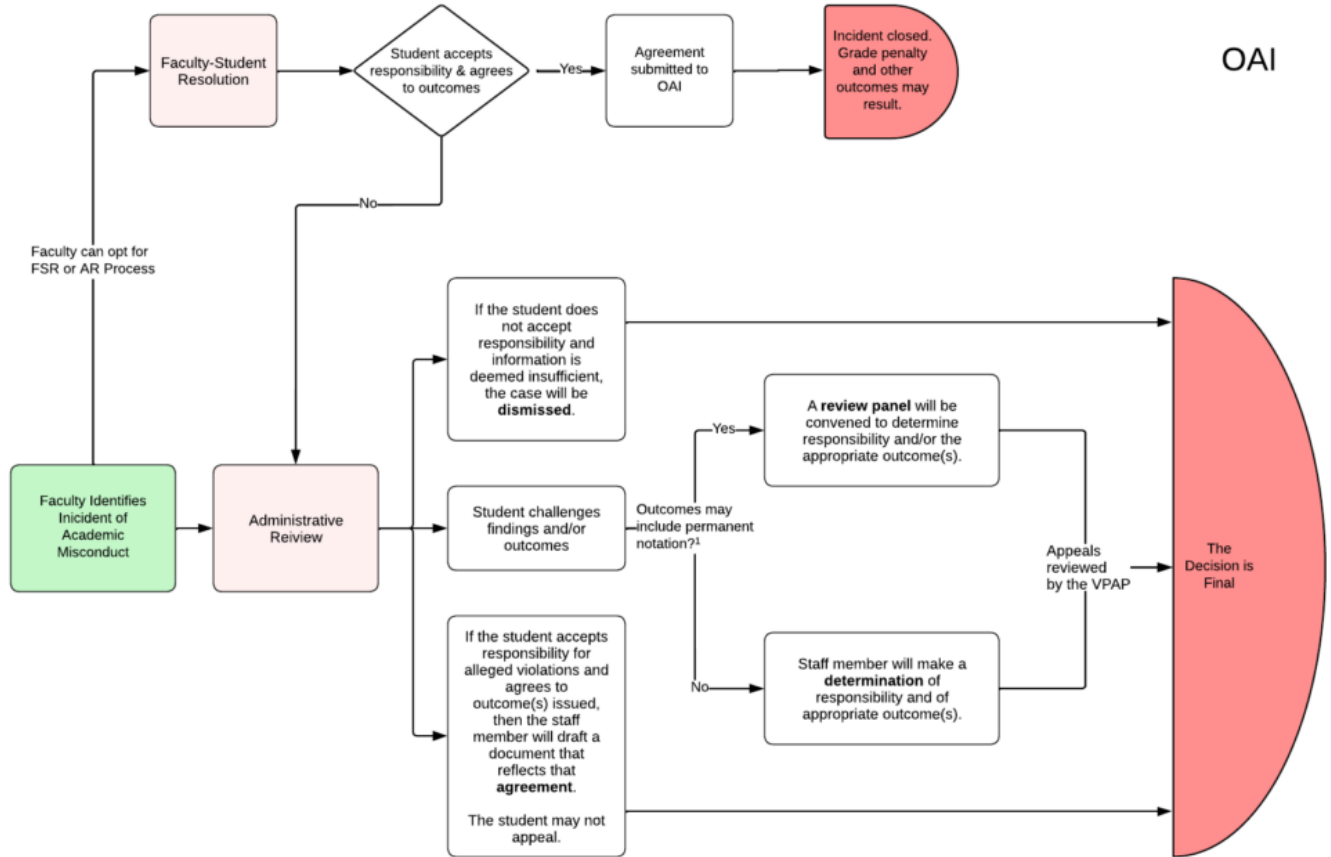
Appeals are documentary reviews determined solely on the merits of the student's submission. Appeals do not include an in-person or virtual presentation. Therefore, written submissions should be as complete as possible and no longer than five single-spaced typed pages with a font no smaller than a size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



OAI

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: <http://college.usc.edu/writingcenter/> and at www.apastyle.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.

Blackboard Connect

Blackboard Connect 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 Blackboard Connect.

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 <http://emergencyprep.usc.edu> to familiarize yourself with university procedures. All students are urged to register with TrojansAlert (<https://trojansalert.usc.edu>).

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 (DSP) 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 from 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 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

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

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 9089

213.740.0411

uscsupport@usc.edu

4. Student Basic Needs

<https://studentbasicneeds.usc.edu/>

basicneeds@usc.edu

5. Trojan Food Pantry

pantry@usc.edu

6. Ask Ari

Interactive online resource to help connect students to helpful well-being and self-care campus resources, videos, guided information, and more.

askari.usc.edu/#/intro

7. Relationship and Sexual Violence Prevention Services (RSVP)

<https://studenthealth.usc.edu/sexual-assault/>

Relationship and Sexual Violence Prevention and Services provides immediate therapy services for situations related to gender- and power-based harm (e.g., sexual assault, domestic violence, stalking)

1031 West 34th St., Suite 356

LA, CA 90089 (3rd floor of Engemann Student Health Center)

24-hour crisis counseling: 213.740.9355 and press “0”, to speak with an on-call counselor.

8. Office of Religious Life

<https://orl.usc.edu/>

UPC Office: University Religious Center, Rm 106

HSC Office: McKibben Hall, Rm 160

213.740.6110

9. Chan Division’s Occupational Therapy Faculty Practice (OTFP)

<http://chan.usc.edu/patient-care/faculty-practice/contact-us>

323.442.3340

10. 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

11. 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

12. Asian Pacific American Student Services (APASS)

STU 410

<https://apass.usc.edu/>

apass@usc.edu

213.740.4999

13. Center for Black Cultural and Student Affairs (CBCSA)

STU 415

<https://seip.usc.edu/centers/cbcsa/>

cbcsa@usc.edu

213.740.8257

14. La CASA Latinx Chicanx Center

STU 402

<https://lacasa.usc.edu/>

lacasa@usc.edu

213.740.1480

15. Lesbian, Gay, Bisexual and Transgender Resource Center (LGBTRC)

STU 202B

<https://lgbtrc.usc.edu/>

lgbt@usc.edu

213.740.7619

16. Veterans Resource Center

TCC 330

vrcc@usc.edu

213.821.6028

17. USC Safety and Emergency Response

<https://dps.usc.edu/>

UPC: 213.740.4321

HSC: 323.442.1000

Non-Emergency Phone Numbers:

UPC: 213.740.6000

HSC: 323.442.1200

18. We are SC: COVID-19 Hotline

<https://we-are.usc.edu/>

covid19@usc.edu

213.740.6291

19. USC Help & Hotline for Reporting

[213-740-2500](tel:213-740-2500) or [800-348-7454](tel:800-348-7454) (24 hours a day, 7 days a week)

You may also report via this [online form](#)

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 and driving directions, go to: <https://visit.usc.edu/maps-directions/health-sciences-campus/>

Parking at USC: <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/>

The Biggy Parking Structure, the San Pablo Structure, and Lots 70 and 71 are the most convenient to the Division. Parking on campus is currently \$14/day. You may also decide to purchase a parking permit. 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 and driving directions go to <https://visit.usc.edu/maps-directions/university-park-campus/>

Parking

For information on parking at UPC go to <http://visit.usc.edu/maps-directions/university-park-campus/public-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: Student Agreement Form

STUDENT AGREEMENT FORM
Academic Year 2021-2022

**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:**

Signature: _____

Name (Printed Legibly): _____

Student I.D. Number: _____

OTAC Membership Number: (if available) _____

AOTA Membership Number: (if available) _____

Date: _____

(Please print, sign, and electronically upload to EXXAT by Friday, July 23, 2021)