Manual for the Doctor of Occupational Therapy Student

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06/15/20
TABLE OF CONTENTS

INTRODUCTION ..........................................................................................................................................................5

THE DEPARTMENT OF OCCUPATIONAL THERAPY ..................................................................................................6
  Our Mission ..............................................................................................................................6
  Our Vision .............................................................................................................................6
  Our History ..........................................................................................................................7
  Our Success ..........................................................................................................................7

DOCTOR OF OCCUPATIONAL THERAPY PROGRAM ..........................................................................................9
  Philosophy ...................................................................................................................................9
  Curriculum Design ................................................................................................................10
  OTD Curriculum ...................................................................................................................13
  Essential Skills / Technical Standards .................................................................................17
  Fieldwork Education and Experiential Preceptorship .........................................................21

REGULATIONS ...........................................................................................................................................................22
  Notice of Non Discrimination ............................................................................................22
  Academic Conduct and Integrity .......................................................................................22
  Ombudsperson ...................................................................................................................24
  Academic Advising .............................................................................................................24
  Plan of Studies ....................................................................................................................24
  Registration ..........................................................................................................................25
  Academic Standards ..........................................................................................................26
  Grades ......................................................................................................................................27
  Probation, Suspension, and Dismissal ...............................................................................27
  Class, Fieldwork, and Capstone Experience Attendance and Punctuality .........................28
  Course Assignments, Quizzes, and Examinations ............................................................29
  Professional Development ..................................................................................................30
  Academic and Professional References ............................................................................30
  Student Release Permitting the Use of Academic Products .............................................30
  Professional Behaviors ........................................................................................................31
  SHRS Social Media Policy ................................................................................................32
  Audio Recording, Video Recording and Photographic Imaging of Classroom/Laboratory 
    Activities and Course Materials ......................................................................................33
  Expectations for Appearance .............................................................................................33
  Portability and Accountability Act (HIPAA) Certification ..................................................35
  Bloodborne Pathogens Training .........................................................................................35
  Collaborative Institutional Training Institute (CITI) Modules .............................................36
  First Aid / CPR / AED Certification ...................................................................................36
  Health and Safety Issues .....................................................................................................36
  Professional Liability Insurance .........................................................................................37
  Health Screening ................................................................................................................37
  Influenza Vaccination ..........................................................................................................37
  Health Insurance .................................................................................................................38
Student Waiver for Faculty/Staff Reference

**APPENDIX E** .................................................................................................................. 67
OTD Professional Behavior Evaluation

**APPENDIX F** .................................................................................................................. 69
OTD Student Information Form

**APPENDIX G** .................................................................................................................. 70
Financial Resources

**APPENDIX H** .................................................................................................................. 73
OTD Student Required Documents

**Manual Acknowledgement Agreement** ........................................................................... 74

Developed by the Department of Occupational Therapy 05/10/17; Revised 05/25/18; 01/02/19; 05/07/19; 06/15/20
INTRODUCTION

WELCOME to . . .

PITT’s Doctor of Occupational Therapy (OTD) Program!

The University of Pittsburgh’s OT program is one of the TOP 10 OT programs in the USA! The *U.S. News & World Report* rates the University of Pittsburgh’s OT program as #3 in the Nation!

We specialize in facilitating your learning through interactive, student-friendly classes and broadening your horizons through study in an internationally renowned academic healthcare center. We are pleased that you have selected the University of Pittsburgh for your professional education.

The purpose of this Manual is to assist you in becoming acquainted with the policies, procedures, and expectations of the Department of Occupational Therapy of the School of Health and Rehabilitation (SHRS). We ask that you read the Manual carefully and seek clarification from your Academic Advisor about content that you do not understand. We will keep you informed about any changes in the content that occur during your enrollment. Although this Manual provides you with some of the more salient policies and procedures, the UNIVERSITY, the DIVISION OF HEALTH SCIENCES, and the SCHOOL OF HEALTH AND REHABILITATION SCIENCES also have policies and procedures that affect you. You are responsible for being cognizant of the University, Division, School, and Department regulations relevant to your program of study and should refer to the websites and sources listed in this Manual for handbooks and bulletins containing these policies.

After you have read this Manual and fully understand its content, sign the Manual Acknowledgment Agreement (last page of this Manual), indicating that you understand and agree to abide by all the policies, procedures, and expectations of the Department of Occupational Therapy, School of Health and Rehabilitation Sciences, University of Pittsburgh.
THE DEPARTMENT OF OCCUPATIONAL THERAPY

OUR MISSION

The Department of Occupational Therapy’s mission is to:

• Educate entry-level professional students to practice evidence-based occupational therapy in a variety of healthcare, community, and educational settings; manage occupational therapy service delivery; and contribute to the profession through service and participation in research;

• Provide customized courses of study for post-professional students (master’s and doctoral), designed to meet their individual learning needs and to enhance their ability to assume leadership roles in practice, education, research, program development, or program evaluation;

• Provide continuing education for practicing therapists to facilitate their continued competence;

• Plan and engage in research to advance occupational therapy (and rehabilitation) practice and education; and

• Serve the University and public and professional communities through participation in University and community service and professional associations.

OUR VISION

The University of Pittsburgh’s Department of Occupational Therapy will be nationally and internationally recognized as a leader in occupational therapy education, a pioneer in occupational therapy research, and a partner in regional practice and development.

OUR HISTORY

1982 The Department of Occupational Therapy and the program in occupational therapy (BS) were established in the School of Health Related Professions.

1985 The entry-level baccalaureate curriculum was accredited by the Council for Allied Health Education and Accreditation (CAHEA), American Medical Association. The program in occupational therapy graduated its first students with a BS degree.

1990 The entry-level baccalaureate curriculum was re-accredited by CAHEA.

1992 The post-professional master’s program (MS) with an emphasis in occupational therapy was established in the School of Health and Rehabilitation Sciences (formerly titled the School of Health Related Professions).

1993 The first students from the MS program with an emphasis in occupational therapy graduated.

1997 The entry-level baccalaureate curriculum was re-accredited by the Accreditation Council for Occupational Therapy Education (ACOTE), American Occupational Therapy Association (AOTA).

1999 The Department of Occupational Therapy began participating in the interdisciplinary doctoral program in rehabilitation science (PhD).

2000 The entry-level master’s program in occupational therapy (MOT) program was
established and accredited by the ACOTE. The Beta Tau Chapter of Pi Theta Epsilon was established at the University of Pittsburgh.

2002 The program in occupational therapy graduated its first students with a MOT degree.
2003 The first student from the Department of Occupational Therapy graduated with a PhD degree.
2005 The MOT program was re-accredited by ACOTE for a period of 10 years from academic year 2004/2005 to 2014/2015.
2014 The Doctor of Clinical Science (CScD) with an emphasis in occupational therapy was approved as a post-professional degree.
2015 The MOT program was re-accredited by ACOTE for a period of 10 years from academic year 2014/2015 to 2024/2025.
2016 The first students graduated from the CScD with an emphasis in occupational therapy program. The Doctor of Occupational Therapy program was approved and the OTD was established as a degree type at the University of Pittsburgh.
2018 The post-professional master’s program was revised and established as a Master of Science (MS) in occupational therapy. The Department of Occupational Therapy moved to Bridgeside Point I.
2019 The OTD program was accredited by ACOTE.
2020 The program in occupational therapy graduated its first students with an OTD degree.

OUR SUCCESS

Our Faculty:
Nationally Recognized Achievements:
• American Occupational Therapy Association – Award of Merit; Eleanor Clarke Slagle Lectureship (highest academic honor); Recognized Fellows; and Association Leadership: Board of Directors, Representative Assembly, Special Interest Sections, and Ad-hoc committees
• American Occupational Therapy Foundation – Research Academy honored members; and Leaders & Legacies Society
• Research Grants – National Institutes of Health; Centers for Disease Control and Prevention; Department of Defense; and Foundations
• Experts in the fields of Pediatrics; Gerontology; Neurorehabilitation; Disability Analysis; and Health Policy

Our Students:
• Recipients of research/scholarly and leadership awards by the American College of Rheumatology Research & Education Foundation, RESNA/Whitaker Foundation, Albert Schweitzer Fellowship, Jewish Healthcare Foundation (JHF) Patient Safety Fellowship, JHF Jonas Salk Health Fellowship, JHF Death and Dying Fellowship, JHF Health Innovations Fellowship, National Institute for Disability and Rehabilitation Research, and Pi Theta Epsilon (nationally recognized honor society for occupational therapy students and alumni)
• University (Alumni Association, UPMC Endowed Scholarship, Nationality Room Scholarships, Anne Pascascio Scholarship), Department (Joan C. Rogers Student Award, Caroline Robinson
Braley Student Enrichment Fund, Department of Occupational Therapy Award of Professional Excellence), and professional (American Occupational Therapy Foundation, American Occupational Therapy Association, Pennsylvania Occupational Therapy Association, National AMBUCS, Inc.) scholarship awardees

- Traditional and non-traditional students with diverse backgrounds and life experiences
- Application of education through participation in research and service activities
- Achieve the gold-level of AOTA Student Membership Circle (100% student membership).

Our Program and Curriculum:
- Educational program established in 1982
- OTD program was accredited by the Accreditation Council for Occupational Therapy Education in 2019 and MOT program reaccredited 2015-2025
- Ranked #3 in the nation by U.S. News and World Report
- Fieldwork opportunities across the country in a variety of practice areas (over 150 sites)
- Innovative learning opportunities, including clinical simulation experiences with practitioners, patient simulators, and standardized patients

Our Graduates:
- National certification examination scores exceed national average
- Hold advanced practice positions including: clinical specialists, administrators, managers, researchers, educators, and business owners

Our Facilities:
- Located within the School of Health and Rehabilitation Sciences, one of six schools (Dental Medicine, Medicine, Nursing, Pharmacy, Public Health) of the health sciences in a large academic medical center, the University of Pittsburgh Medical Center (UPMC)
- UPMC is ranked among "the best" in the nation by U.S. News and World Report
- The University has numerous federally funded Centers of Clinical Excellence
- Best library facilities in Western Pennsylvania, among the top in the nation for psychiatric holdings
- State-of-the-art teaching and laboratory facilities
- Interprofessional learning opportunities

Our University and Community:
- Founded in 1787 – one of the oldest institutions of higher education in the US
- Member of the Association of American Universities, an association of the leading research universities in North America
- In 2018, for the second consecutive year, the Wall Street Journal/Times Higher Education College Rankings named Pitt as the best public university in the Northeastern United States.
- Ranks 3rd among all US universities in terms of competitive grants awarded to members of its faculty by the National Institute of Health
- Ranks in the top 10 nationally in terms of total federal science and engineering research and development support, according to the National Science Foundation
- Strong university ties to the local medical community
- 132 acres (Yes, we have trees – in fact, over 500!)
- Access to ethnic diversity and cultural resources of a large city with a small-town atmosphere
DOCTOR OF OCCUPATIONAL THERAPY PROGRAM

The Doctor of Occupational Therapy (OTD) Program is accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA), located at 6116 Executive Boulevard, Suite 200, North Bethesda, MD 20852-4929. ACOTE’s telephone number c/o AOTA is 301-652-AOTA and its web address is www.acoteonline.org. Graduates of the OTD Program are eligible to sit for the national certification examination for the occupational therapist administered by the National Board for Certification in Occupational Therapy (NBCOT®). After successful completion of this exam, the graduate will be an Occupational Therapist, Registered (OTR). In addition, all states require licensure to practice; however, state licenses are usually based on the results of the NBCOT certification examination. A felony conviction may affect a graduate’s ability to sit for the NBCOT certification examination or attain state licensure. Note: to become licensed, many states inquire as to whether the applicant has been convicted of a misdemeanor, a felony, or a felony or illegal act associated with alcohol and/or substance abuse.

PHILOSOPHY

The beliefs of the faculty of the Department of Occupational Therapy, which comprise the program’s philosophy, are consistent with the current published philosophy of the profession.

Philosophically, faculty of the Department of Occupational Therapy share the following beliefs about humans (students, patients/clients/consumers):

• Each person is an open system composed of interrelated structures and functions organized into a coherent whole that interacts with the environment.
• Each person has the capability, right, and responsibility to make choices and has the right to dignity and respect.
• Each person is an active being who has the capability to maintain, grow, and adapt through occupation (purposeful activity).
• When a person’s ability to adapt creatively is impaired, dysfunction occurs.
• The occupational therapist uses occupation (purposeful activity) to enhance function through restoration, compensation, and education.
• The occupational therapist uses occupation (purposeful activity) as a primary method of assessment, intervention, and health promotion.

Similarly, the Department of Occupational Therapy faculty share common beliefs regarding how adult students learn:

• Students are active learners.
• Students develop cognitive (thinking) skills in a hierarchical manner, from a simple recall of knowledge (facts) to the complex evaluation of knowledge, and cognitive learning is enhanced when knowledge is organized from simple to complex.
• Students develop psychomotor skills primarily through practice, and skill learning is facilitated when practice is supervised.
• Students develop affective skills primarily through imitation and socialization, and affective learning is facilitated through self-reflection and exposure to competent role models.
• Students require assistance to integrate effectively their developing cognitive, psychomotor, and affective skills.
• Students learn in different ways, and hence a variety of teaching methods is needed to facilitate optimal learning.

Students enter the OTD program with a broad background in the liberal arts as well as specified prerequisites in the biological and behavioral sciences and statistics. To support active learning as well as individual learning styles, students are provided with multiple guided (e.g., student oral and poster presentations, case-based format) and interactive (e.g., Canvas discussion group, role modeling) learning opportunities in addition to lectures.

**CURRICULUM DESIGN**

The design for the OTD curriculum is based on the interaction of concepts from the International Classification of Functioning, Disability and Health (ICF) (World Health Organization (WHO), 2001, and three primary roles expected of entry-level occupational therapists as delineated in the ACOTE Standards – practitioner, manager, contributor. The matrix formed by ICF concepts and the primary roles serves as an organizer for the relationship between the courses in our curriculum and the content within courses. See Appendix A for accreditation standards for a Doctoral-Degree-Level Educational Program for the Occupational Therapist – Section B: Content Requirements and Section C: Fieldwork Education and Experiential Component.


The ICF is a required textbook for courses in the OTD curriculum.

The vertical axis of our curriculum matrix is formed by the following ICF concepts (WHO, 2001, pp. 8, 10):

- **Environmental factors** make up the physical, social and attitudinal environment in which people live and conduct their lives.
- **Participation** is involvement in a life situation.
- **Participation restrictions** are problems an individual may experience in involvement in life situations.
- **Activity** is the execution of a task or action by an individual.
- **Activity limitations** are difficulties an individual may have in executing activities.
- **Body functions** are the physiological functions of body systems (including psychological functions).
- **Body structures** are anatomical parts of the body such as organs, limbs and their components.
- **Impairments** are problems in body function or structure such as significant deviation or loss.
- **Functioning** indicates non-problematic aspects of health and health-related states.
- **Disability** indicates impairment, activity limitations or participation restrictions.

The horizontal axis of our curriculum matrix is formed by the three primary roles expected of an entry-level occupational therapist.
**Role of Practitioner:**
The occupational therapy practitioner, based on outcomes that are meaningful to clients, uses evaluation data to formulate and implement interventions to establish, restore, maintain, or enhance functional and structural integrity, activity, and participation in lifestyles that are optimally independent, productive, and satisfying to clients. Graduates will demonstrate the ability to:

- Establish therapeutic relationships with clients and caregivers, and professional relationships with colleagues consistent with the Occupational Therapy Code of Ethics (AOTA, 2015);
- Screen and evaluate client’s participation and participation restrictions, activity and activity limitations, functional and structural integrity and impairments, and occupational environment; document the findings and accurately interpret the results;
- Formulate, implement, and document occupation-based intervention, using current best evidence, to enhance functioning and reduce or prevent disability; and,
- Develop and implement a transition plan in collaboration with clients in preparation for the discontinuation of occupational therapy services when appropriate.

**Role of Manager:**
The occupational therapy manager plans, organizes, implements, staffs, directs, and evaluates occupational therapy services; coordinates these functions with other health, education, and work-related services; and promotes understanding of occupational therapy services. Graduates will demonstrate the ability to:

- Use data when making resource and program management decisions and apply management principles and strategies to direct occupational therapy services; and,
- Relate the roles and functions of occupational therapy to other health care services and describe the influence of external factors, such as demographic trends, public laws, health care policies, and reimbursement policies on health care services.

**Role of Contributor:**
The occupational therapy contributor has a professional responsibility to recognize and influence health care within the context of world, national, state, community, and work environments. Contributors participate in the development and application of a scholarly body of knowledge within occupational therapy practice. A graduate will demonstrate the ability to:

- Recognize, integrate, and discuss issues pertaining to public health and occupational therapy practices, and articulate methods to effect change; and,
- Find, analyze, and integrate scholarly works from both occupational therapy and other appropriate sources; design, implement, and disseminate beginning level research projects as well as articulate the basics of programmatic grant writing.

**Curriculum Matrix: ICF x Primary Roles.** Table 1 demonstrates how the roles of practitioner, manager, and contributor interact with the ICF concepts to create the framework used by the University of Pittsburgh Occupational Therapy Program to plan, implement, and evaluate the program...
Table 1. ICF concepts and professional roles

<table>
<thead>
<tr>
<th>ROLES</th>
<th>Practitioner</th>
<th>Manager</th>
<th>Contributor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environment Factors</td>
<td>Analyzes the influence of the environment on impairments, activities</td>
<td>Plans, establishes and manages organizational, educational and community</td>
<td>Uses research evidence to identify &amp; influence health within multiple environments. Advocates for the needs of consumers served by OT.</td>
</tr>
<tr>
<td></td>
<td>and participation and adapts environment and/or recommends changes.</td>
<td>community environments.</td>
<td></td>
</tr>
<tr>
<td>Participation /</td>
<td>Evaluates and intervenes for factors that enable or restrict full participation</td>
<td>Considers social, economic, political, legislative and policy issues to</td>
<td>Uses &amp; designs research to examine factors that enable full participation of individuals and populations and disseminates findings to consumer, professional, regulatory and health policy groups.</td>
</tr>
<tr>
<td>Participation</td>
<td>of consumers of OT services.</td>
<td>plan, establish and manage service delivery systems that promote</td>
<td></td>
</tr>
<tr>
<td>Restriction</td>
<td></td>
<td>participation of OT consumers and populations with disabilities.</td>
<td></td>
</tr>
<tr>
<td>ICF*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Activities / Activity</td>
<td>Analyzes everyday activities and occupations. Evaluates and intervenes for</td>
<td>Plans, establishes, and manages resources and service delivery systems</td>
<td>Uses and designs research to examine factors that enable activities and occupations of individuals and populations, and disseminates findings to consumer, professional, regulatory and health policy groups.</td>
</tr>
<tr>
<td>Limitations</td>
<td>factors that enable or limit expected, required, or desired activities/</td>
<td>that reduce activity limitations &amp; promote activities for OT consumers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>occupations of consumers of OT services.</td>
<td>and populations with disabilities.</td>
<td></td>
</tr>
<tr>
<td>Body Functions &amp;</td>
<td>EVALUATES and intervenes for factors that influence optimum health as well</td>
<td>Plans, establishes, and manages resources and service delivery systems</td>
<td>Uses and designs research to examine factors that prevent deviations &amp; loss of functions/structures to promote health of individuals and populations, and disseminates findings to consumer, professional, regulatory and health policy groups.</td>
</tr>
<tr>
<td>Structures / Impairment</td>
<td>as deviations and loss of functions/structures.</td>
<td>that reduce impairments and promote healthy function of body functions/</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>structures for OT consumers and populations with disabilities.</td>
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</tbody>
</table>

*International Classification of Functioning, Disability and Health*
## OTD CURRICULUM

Total Credits = 99 credits

### YEAR 1

<table>
<thead>
<tr>
<th>Term 1 • Fall Term • 15 credits</th>
<th>Term 2 • Spring Term • 15 credits</th>
<th>Term 3 • Summer Term • 11 Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundational Skills / Assessment &amp; Analysis</td>
<td>Intervention I</td>
<td>Intervention II</td>
</tr>
<tr>
<td>OT 2200 Foundations of Occupation</td>
<td>OT 2205 Neurobehavioral Science**</td>
<td>OT 2216 Clinical Seminar 3</td>
</tr>
<tr>
<td>OT 2201 Body Functions and Structures: Anatomy**</td>
<td>OT 2209 Clinical Seminar 2</td>
<td>OT 2217 Neurorehabilitation Theory and Practice**</td>
</tr>
<tr>
<td>OT 2202 Therapeutic Approaches 1**</td>
<td>OT 2210 Psychosocial / Cognitive Theory and Practice**</td>
<td>OT 2218 Biomechanical Theory and Practice**</td>
</tr>
<tr>
<td>OT 2203 Clinical Seminar 1</td>
<td>OT 2213 Occupational Therapy and the Health System</td>
<td>OT 2219 Fieldwork Education B (FW I)**</td>
</tr>
<tr>
<td>OT 2207 Principles of Assessment**</td>
<td>OT 2214 Therapeutic Approaches 2**</td>
<td>OT 2237 Clinical Conditions 2</td>
</tr>
<tr>
<td>OT 2208 Critical Appraisal of Evidence</td>
<td>OT 2215 Fieldwork Education A (FW I)**</td>
<td>OT 2238 Adaptation/Technology Theory and Practice**</td>
</tr>
<tr>
<td>OT 2234 Human Performance Analysis**</td>
<td>OT 2235 Clinical Conditions 1</td>
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<tr>
<td></td>
<td>OT 2236 Activity/Context Adaptation Theory and Practice**</td>
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</tbody>
</table>

### YEAR 2

<table>
<thead>
<tr>
<th>Term 4 • Fall Term • 13 credits</th>
<th>Term 5 • Spring Term • 13 credits</th>
<th>Term 6 • Summer Term • 7 Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interventions III</td>
<td>Clinical Synthesis I</td>
<td>Clinical Synthesis II</td>
</tr>
<tr>
<td>OT 2220 Clinical Seminar 4</td>
<td>OT 2228 Fieldwork Education D (FW II)**</td>
<td>OT 2229 Fieldwork Education E (FW II)**</td>
</tr>
<tr>
<td>OT 2221 Developmental Theory and Practice**</td>
<td>OT 2229 Fieldwork Education E (FW II)**</td>
<td></td>
</tr>
<tr>
<td>OT 2222 Productive Aging Theory and Practice**</td>
<td>OT 2228 Fieldwork Education D (FW II)**</td>
<td></td>
</tr>
<tr>
<td>OT 2224 Management of Occupational Therapy Practice</td>
<td>OT 2233 Clinical Conditions 1</td>
<td></td>
</tr>
<tr>
<td>OT 2226 Fieldwork Education C (FW I)**</td>
<td>OT 2235 Activity/Context Adaptation Theory and Practice**</td>
<td></td>
</tr>
<tr>
<td>OT 2239 Project Development 1</td>
<td>OT 2227 Clinical Conditions 3</td>
<td></td>
</tr>
<tr>
<td>OT 2244 Clinical Conditions 3</td>
<td></td>
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</tbody>
</table>

### YEAR 3

<table>
<thead>
<tr>
<th>Term 7 • Fall Term • 12 credits</th>
<th>Term 8 • Spring Term • 13 credits</th>
<th>Leadership I</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Synthesis II</td>
<td>Experiential Preceptorship **</td>
<td>OT 3212 Leadership Development</td>
</tr>
<tr>
<td>OT 3206 Advanced Theory and Practice**</td>
<td>OT 3208 Experiential Preceptorship **</td>
<td></td>
</tr>
<tr>
<td>OT 3207 Project Development 2</td>
<td>OT 3213 Professional Development Seminar</td>
<td></td>
</tr>
<tr>
<td>OT 3210 Advanced Concepts in Professional and Clinical Reasoning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OT 3211 Advanced Concepts in Health Policy and Advocacy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OT 3212 Leadership Development</td>
<td></td>
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</tr>
</tbody>
</table>

*Curriculum is subject to change.**Course includes laboratory, fieldwork or experiential component.

- Admission to the OTD program is only available on a full-time basis.
- Students must successfully complete all did Level II Fieldwork (OT 2227, OT 2228), and competency examination prior to commencement Experiential Preceptorship (OT 3208).
- Level II Fieldwork, the Experiential Preceptorship, and a Capstone Project must be completed within 24 months following completion of the related didactic portion of the program.
- A GPA of at least 3.00 is required in the OTD Program.
- A misdemeanor or felony charge or conviction may affect a student’s ability to complete courses with a fieldwork component.
OTD Course Descriptions:

Fall Term – Term 1

**OT 2200 Foundations of Occupation**
Examines the history, philosophy, and science of the profession of occupational therapy. The focus is on the meaning of occupation and its role in health, wellness, and participation. Occupational science and occupational performance theories of practice are introduced.

**OT 2201 Body Functions and Structures: Anatomy**
Emphasizes the understanding and application of knowledge of human anatomy in diagnostics of clinical conditions commonly encountered by an occupational therapist. The practical component includes the use of prosected cadavers, skeletal models, and palpation of surface anatomical features in live models.

**OT 2202 Therapeutic Approaches 1**
Examines how occupational therapists develop and manage their therapeutic relationships with clients using a model of intentional relationships, focusing on the use of narrative reasoning, emotional intelligence and empathy, and a client-centered collaborative approach. Formal interview techniques and casual conversation approaches used to obtain information are introduced and practiced.

**OT 2203 Clinical Seminar 1**
Addresses professional issues and the professional development of the occupational therapist. Focuses on diversity, inclusion, self-awareness, and self-understanding. Issues explored include the roles and functions of occupational therapy practitioners; participation in professional organizations; and professional sustainability.

**OT 2207 Principles of Assessment**
Examines the principles associated with the evaluation process, including the selection and administration of assessment tools, and the scoring and interpretation of assessment data. Psychometrics are explored and data collection and analysis is practiced using a range of assessment methods.

**OT 2208 Critical Appraisal of Evidence**
Occupational therapy and rehabilitation research and its application to practice, management, and education is explored. Scientific method, hierarchies of evidence, levels of measurement, and interpretation of findings are examined.

**OT 2234 Human Performance Analysis**
Examines human performance in-depth using the approaches of occupational analysis and activity analysis.

Spring Term – Term 2

**OT 2205 Neurobehavioral Science**
Examines neuroscientific concepts underlying normal somatosensory, special sensory, motor, cognition, and emotion functional systems, and explores the manifestation of dysfunction of major neural elements.

**OT 2209 Clinical Seminar 2**
Addresses professional issues and the professional development of the occupational therapist. Introduces a model for professional and clinical reasoning to plan, direct, perform, and reflect on occupational therapy services. Explores the various audiences and types of documentation used by occupational therapy practitioners.

**OT 2210 Psychosocial / Cognitive Theory and Practice**
The occupational therapy process for clients with psychosocial and/or cognitive dysfunction is studied in-depth. Theories, principles, assessments, and interventions focus on performance of activities and
routines of daily living and participation in society.

**OT 2213 Occupational Therapy and the Health System**
Examines health care trends, reimbursement regulations, legislative policies, and current issues affecting occupational therapy. Strategies for maintaining continued competence and supervisory roles are interpreted and applied to practice.

**OT 2214 Therapeutic Approaches 2**
Examines the dynamic process used by occupational therapists to facilitate a client’s or group of clients’ engagement in occupations to promote health and participation. Focuses on education and training, self-advocacy, and health literacy for clients, those involved in the care of the clients, and groups.

**OT 2215 Fieldwork Education A (FW I)**
Enriches didactic coursework through experiential learning. Through directed observation and participation, students apply knowledge to practice and develop an understanding of the needs of clients with psychosocial and/or cognitive dysfunction and the skills needed for the analysis and adaptation of occupational performance deficits.

**OT 2235 Clinical Conditions 1**
Defines and describes neuromuscular, orthopedic, psychiatric, and clinical medicine diagnoses that are leading causes of disability in children, adolescents, adults, and older adults. Etiology, signs and symptoms, clinical course, medical management, morbidity, and prognosis are reviewed, and the influence of pathology on occupational performance is examined.

**OT 2236 Activity / Context Adaptation Theory and Practice**
The interface between functional impairment, activity, and societal participation is studied in-depth. Emphasis is on adaptation to compensate for dysfunction in performance of occupations for life activities (self-care, home and community management, rest/sleep, education/work, and play/leisure, and social participation).

**Summer Term – Term 3**

**OT 2216 Clinical Seminar 3**
Addresses professional issues and the professional development of the occupational therapist. Focuses on applying the model for professional and clinical reasoning to practice. Issues explored include traditional and emerging practice settings, collaborative practice, ethics, and professional sustainability.

**OT 2217 Neurorehabilitation Theory and Practice**
The occupational therapy process for clients with neurological and neurobehavioral dysfunction is studied in-depth. Theories, principles, assessments, and interventions focus on performance of activities and routines of daily living and participation in society.

**OT 2218 Biomechanical Theory and Practice**
The occupational therapy process for clients with physical dysfunction involving biomechanical impairments is studied in-depth. Theories, principles, assessments, and interventions focus on performance of activities and routines of daily living and participation in society.

**OT 2219 Fieldwork Education B (FW I)**
Enriches didactic coursework through experiential learning. Through directed observation and participation, students apply knowledge to practice and develop an understanding of the needs of clients with neurological/neurobehavioral and biomechanical dysfunction.

**OT 2237 Clinical Conditions 2**
Defines and describes neuromuscular, orthopedic, psychiatric, and clinical medicine diagnoses that are leading causes of disability in children, adolescents, adults, and older adults. Etiology, signs and symptoms, clinical course, medical management, morbidity, and prognosis are reviewed, and the influence of pathology on occupational performance is examined. Builds on content in Clinical
Conditions 1.

**OT 2238 Adaptation/Technology Theory and Practice**
Addresses assistive technologies and devices used to enhance occupational performance and foster participation and well-being.

**Fall Term – Term 4**

**OT 2220 Clinical Seminar 4**
Addresses professional issues and the professional development of the occupational therapist. Issues explored include the application of professional and clinical reasoning in traditional and emerging practice settings, collaborative practice, ethics, licensure, certification, and professional sustainability.

**OT 2221 Developmental Theory and Practice**
The occupational therapy process for children and youth is studied in-depth. Theories, principles, assessments, and interventions focus on performance of activities and routines of daily living and participation in society.

**OT 2222 Productive Aging Theory and Practice**
The role of occupational therapy in productive aging and the promotion of successful aging in older adults is studied in-depth. Theories, principles, assessments, and interventions focus on performance of activities and routines of daily living and participation in society.

**OT 2224 Management of Occupational Therapy Practice**
Examines the role of the occupational therapist as a manager of occupational therapy services. Focuses on the application of principles and practices of administration and supervision in diverse practice environments.

**OT 2226 Fieldwork Education C (FW I)**
Enriches didactic coursework through experiential learning. Through directed observation and participation, students apply knowledge to practice and develop an understanding of the needs of children and youth, and older adults.

**OT 2239 Project Development 1**
Focuses on the development of the skills needed to plan, implement and evaluate a project that addresses an important question related to professional practice. In collaboration with and mentorship by faculty and content experts, designs and presents a synopsis of a proposal for a capstone project.

**OT 2244 Clinical Conditions 3**
Defines and describes neuromuscular, orthopedic, psychiatric, and clinical medicine diagnoses that are leading causes of disability in children, adolescents, adults, and older adults. Etiology, signs and symptoms, clinical course, medical management, morbidity, and prognosis are reviewed, and the influence of pathology on occupational performance is examined. Builds on content in Clinical Conditions 2.

**Spring & Summer Terms – Terms 5 & 6**

**OT 2228 Fieldwork Education D (FW II)**
Provides an in-depth learning experience in delivering occupational therapy services. The learning experience occurs at an approved clinical education site that offers the opportunity to develop competence in the professional responsibilities of an entry-level occupational therapist.

**OT 2229 Fieldwork Education E (FW II)**
Provides an in-depth learning experience in delivering occupational therapy services. The learning experience occurs at an approved clinical education site that offers the opportunity to develop competence in the professional responsibilities of an entry-level occupational therapist.

**Fall Term – Term 8**

**OT 3206 Advanced Theory and Practice**
Examines select theoretical perspectives, practice areas, evaluation procedures, intervention protocols, and/or professional issues in-depth.

**OT 3207 Project Development 2**
Focuses on the construction of the protocol of a capstone project, including collaboration with and mentorship by faculty and content experts in developing plans for implementation, evaluation and sustainability of the program.

**OT 3210 Advanced Concepts in Professional and Clinical Reasoning**
Uses case-based methods, evidence synthesis, and critical thinking to derive evidence-based and sustainable solutions to real-world complex clinical challenges in evaluation and intervention, and to develop clinical protocols and best practice guidelines for the implementation of the solutions.

**OT 3211 Advanced Concepts in Health Policy and Advocacy**
Focuses on the development and analysis of policy issues, and the engagement in advocacy to address issues affecting occupational therapy and that support health, well-being, and societal participation at the individual and/or systems levels. Addresses strategies for promoting occupational justice and empowering individuals to seek and obtain resources to fully participate in daily life occupations.

**OT 3212 Leadership Development**
Focuses on leadership skills for promoting the distinct value of occupational therapy, implementing evidence-based occupational therapy services, and advocating for occupational therapy services at the consumer, work environment, and policy levels.

**Spring Term – Term 9**

**OT 3208 Experiential Preceptorship **
Provides an in–depth learning experience in clinical practice, research, administration, leadership, program and/or policy development, advocacy, or education at an approved clinical education site that offers the opportunity to develop advanced skills that are beyond the professional responsibilities of an entry-level occupational therapist and collaboration and mentorship with faculty and site experts. Includes implementation of a capstone project.

**OT 3213 Professional Development Seminar**
Addresses professional issues and the professional development of the occupational therapist related to collaborative practice, ethics, professional entry requirements and responsibilities, and professional sustainability. Includes dissemination of capstone project.

**ESSENTIAL SKILLS / TECHNICAL STANDARDS**

Students in the OTD program at the University of Pittsburgh must possess essential skills (sensorimotor, process, social interaction) to perform all educational (classroom, laboratory and clinical) and fieldwork, and experiential preceptorship tasks in an accurate, safe and efficient manner, to the satisfaction of the faculty, with or without reasonable accommodation. These essential skills include, but are not limited to, the ability to:

**Sensorimotor Skills**

1. Complete comprehensive OT evaluations and conduct intervention sessions which may include measuring range of motion, strength, endurance, muscle tone, pain level, activities of daily living skills, instrumental activities of daily living skills, fine motor skills, transfer skills, functional mobility, balance, response to sensation, cognitive status, and home management skills.
2. Assume a variety of body postures (i.e., sitting, standing, walking, bending, squatting, kneeling, stair climbing, reaching forward, reaching overhead, twisting of the trunk and neck in all directions).

3. Execute appropriate psychomotor movements required for manual handling and manipulation of various object/person sizes and weights including lifting and transferring clients, guarding clients during functional ambulation on level surfaces/uneven surfaces/ramps/stairs, pushing and pulling to provide resistance and to assist in maneuvering and transitioning clients (i.e., dressing, toileting, bed mobility).

4. Demonstrate postural control, neuromuscular control, eye/hand coordination, strength and integrated function of the senses of vision, hearing, tactile sense, vestibular and proprioception to manipulate and use common occupational therapy equipment, devices, materials and supplies, and demonstrate competency in the use of these objects.

5. Demonstrate sufficient endurance to prepare the educational and clinical environment, effectively manage client care, and complete an episode of care within a reasonable time and adhering to best practice guidelines.

6. Demonstrate a high degree of coordination of motor skills and vigilance to respond to emergency situations quickly and appropriately to provide clients a safe environment, including performance of CPR.

7. Attend and actively participate in all lecture and application sessions.

8. Tolerate sitting for up to 2 hours at a time, over an 8-10 hour period.

9. Tolerate periods of physical activity for up to 8-10 hours per day.

10. Access transportation to didactic and clinical education sites.

**Process Skills**

1. Acquire, retain and apply knowledge through instructional methods (i.e., written material, oral delivery, visual demonstration, laboratory experience, clinical experience, and independent learning).

2. Comprehend, retain, assimilate, analyze, synthesize, integrate, and problem solve complex concepts.

3. Apply knowledge and judgment required to administer, interpret, modify, and prioritize evaluation, intervention, and outcome methods to meet the specific needs of the client.

4. Formulate written and verbal evaluations (reports) using sound therapeutic judgment to meet didactic, laboratory, and clinical demands in a reasonable time frame.

5. Apply knowledge and judgment required to demonstrate ethical reasoning.

6. Apply knowledge and judgment required to demonstrate safe performance.

**Social Interaction Skills**

1. Demonstrate positive interpersonal skills such as collaboration, cooperation, flexibility, tact, empathy, and confidence.

2. Demonstrate respect for individuals with disabilities and those from diverse cultural and linguistic backgrounds, races, religions, and/or sexual orientations.

3. Engage successfully in supervisory and instructor-student relationships, in particular, accepting feedback positively and adjusting performance in a timely manner.
4. Communicate in the English language effectively in oral and written forms with all stakeholders (i.e. instructors, clients, classmates, fieldwork educator) using proper grammar, spelling and punctuation.
5. Exhibit professional demeanor, that is, language, dress, level of assertiveness and respect appropriate to the situation
6. Demonstrate effective organization, prioritization, time management and stress management.
7. Demonstrate consistent professional behaviors such as initiative, preparedness, dependability and punctuality.

OTD students should review the essential skills for the OTD program carefully and identify if additional supports are needed for any portion (didactic and clinical) of the OTD program. Students are encouraged to contact the University’s Disability Resources and Services Office (412-648-7890) to arrange an individualized consultation to discuss any support services or accommodations they may need.
FIELDWORK EDUCATION AND EXPERIENTIAL PRECEPTORSHIP

Fieldwork education and the Experiential Preceptorship are a crucial part of professional doctoral preparation and are integrated as a component of the curriculum design. They are an extension of the OTD program within the clinical/community setting. The fieldwork experience provides you with the opportunity to learn professional responsibilities through modeling by qualified and experienced personnel and to practice these responsibilities in a supervised setting. The Experiential Preceptorship provides an in-depth professional experience and the completion of a culminating (capstone) project. Fieldwork education and Experiential Preceptorships are only conducted in sites that have a signed agreement (Memorandum of Understanding) with SHRS. This agreement formally identifies the responsibilities of the University and the site.

Fieldwork education includes Level I and Level II experiences. Level I fieldwork is integrated with coursework during Term 2 (OT 2216 Fieldwork Education A), Term 3 (OT 2220 Fieldwork Education B), and Term 4 (OT 2226 Fieldwork Education C). Level I fieldwork is designed to enrich didactic coursework through direct observation and participation. The goal of Level I fieldwork is to introduce you to the fieldwork experience, apply knowledge to practice, and develop understanding of the needs of clients. Level I fieldwork is supervised by qualified personnel (e.g., currently licensed or otherwise regulated occupational therapy practitioners, psychologists, physician assistants, teachers, social workers, nurses, and other health or education professionals). You are assigned to Level I fieldwork sites in the Greater Pittsburgh Area by our Academic Fieldwork Coordinator in collaboration with the course instructors. The qualifications of individuals supervising students during Level I fieldwork are reviewed by the Academic Fieldwork Coordinator to ensure that a meaningful learning experience can be provided. Level II fieldwork is completed in Terms 5 and 6 (OT 2228 Fieldwork Education D; OT 2229 Fieldwork Education E). Level II fieldwork is distinct from Level I fieldwork. You must successfully complete Level I fieldwork experiences prior to enrolling in Level II fieldwork. Level II fieldwork is an in-depth experience in delivering occupational therapy services to clients in traditional and/or emerging settings consistent with our OTD program’s curriculum design. The goal of Level II fieldwork is to develop competent, entry-level, generalist occupational therapists. You are assigned to specific Level II fieldwork sites to ensure exposure to a variety of clients across the life span and to a variety of settings. Students can complete Level II fieldwork in a minimum of one setting if it is reflective of more than one practice area, or in a maximum of four different settings. The OTD program only uses sites within the United States that allow for supervision by an occupational therapist who meets state regulations and has a minimum of one year of practice experience following initial certification. Level II fieldwork is a minimum of the equivalent of 24 full-time work weeks. Level II fieldwork may be completed on a part-time basis providing it is at least 50% of a full-time equivalent at the site. You are assigned to Level II fieldwork sites by the Academic Fieldwork Coordinator and sign the Level II Fieldwork Acknowledgement Agreement (see Appendix B). The performance of a student who does not successfully complete Level II fieldwork is critically reviewed by the Academic Fieldwork Coordinator and occupational therapy faculty. Satisfactory completion of targeted interventions by the student may be required prior to enrolling in a subsequent Level II fieldwork.
The faculty reserves the right to place a student at a site in the Greater Pittsburgh Area based on the student’s academic performance and/or professional behavior.

After successful completion of Level II fieldwork (OT 2228; OT 2229), you engage in didactic coursework and training of advanced skills beyond the generalist level of an occupational therapist. You enroll in OT 3208 Experiential Preceptorship (doctoral experiential component) (Term 8) after you have successfully completed all didactic coursework, Level I and Level II fieldworks, and a competency requirement. The Experiential Preceptorship (OT 3208) is a 14 week (560 hours) in-depth experience in clinical practice skills, research skills, administration, leadership, program and policy development, advocacy, and/or education and includes the completion of a culminating (capstone) project. The focus of the Experiential Preceptorship is on development of skills for increased autonomy as a contributor to advancing occupational therapy practice. Preceptorships are completed in a novel practice setting or a traditional setting with a novel program and have a connection with community issues or problems. Your Experiential Preceptorship site is confirmed by the Doctoral Capstone Coordinator. You are assigned a faculty mentor who oversees their Experiential Preceptorship, including the development of learning objectives and plans for supervision. The Experiential Preceptorship is distinct from Level I and Level II fieldwork and is the final step in the preparation of the OTD student for entry-level practice. These learning experiences (Fieldwork and Experiential Preceptorship) prepare you to assume the roles of practitioner, manager, and contributor upon graduation from the OTD program. Prior fieldwork, volunteer, and/or work experience hours cannot be applied towards the Experiential Preceptorship hours, and a student’s current work setting cannot serve as a site for his/her Experiential Preceptorship. The Experiential Preceptorship may be completed on a part-time basis.

The culminating (capstone) project is a multi-faceted investigative assignment that students begin associated coursework in during Term 2. It is designed to encourage you to think critically, solve challenging problems, collaborate with other professionals, and to develop advanced skills in communication, research, teamwork, planning, leadership, self-reliance, professionalism, and advocacy — skills that will prepare you to respond positively and confidently to the many opportunities and challenges in today’s evolving and increasing complex practice settings. Although, the learning objectives for the Experiential Preceptorship and capstone project address all three roles of the occupational therapist — practitioner, manager, and contributor — the focus is on the development of skills for increased autonomy as a contributor to advancing occupational therapy practice. Capstone projects address community issues or problems and are implemented in novel practice settings or traditional settings with novel programs.

Level II fieldwork (OT 2228; OT 2229) and the Experiential Preceptorship (OT 3208) must be completed within 24 months following completion of the didactic portion of the OTD Program (Term 4). You are responsible for securing any and all required resources in preparation for and during Level I and Level II fieldwork and the Experiential Preceptorship including but not limited to transportation, physical examinations and associated testing (e.g., drug screen), health insurance, liability insurance, background checks and clearances, parking, housing, food, and clothing. To participate in fieldwork and other clinical education activities, students sign the Student Agreement to Participate in Clinical Education Release of Information Form (see Appendix C).
REGULATIONS

The UNIVERSITY, the DIVISION OF HEALTH SCIENCES, the SCHOOL OF HEALTH AND REHABILITATION SCIENCES, and the DEPARTMENT OF OCCUPATIONAL THERAPY have policies affecting students. Students are responsible for being cognizant of the University, Division, School, and Department regulations relevant to their program of study and should refer to the websites and sources listed below for handbooks, bulletins and manuals containing these policies. The information in this Manual is limited to key policies affecting OTD students.

<table>
<thead>
<tr>
<th>University</th>
<th>Graduate &amp; Professional Studies Catalog (use dropdown menu)</th>
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<td><a href="https://catalog.upp.pitt.edu/index.php">https://catalog.upp.pitt.edu/index.php</a></td>
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<tr>
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<td>SHRS</td>
<td>SHRS Graduate Student Handbook</td>
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<tr>
<td>OT</td>
<td>Manual for the Doctor of Occupational Therapy Student</td>
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NOTICE OF NON DISCRIMINATION

The University Notice of Non Discrimination (https://www.diversity.pitt.edu/about/notice-non-discrimination).

The University of Pittsburgh, as an educational institution and as an employer, does not discriminate on the basis of disability, race, color, religion, national origin, ancestry, genetic information, marital status, familial status, sex, age, sexual orientation, veteran status or gender identity and expression in its programs and activities.

The University does not tolerate discrimination, harassment, or retaliation on these bases and takes steps to ensure that students, employees, and third parties are not subject to a hostile environment in University programs or activities.

The University responds promptly and equitably to allegations of discrimination, harassment, and retaliation. It promptly conducts investigations and takes appropriate action, including disciplinary action, against individuals found to have violated its policies, as well as provides appropriate remedies to complainants and the campus community. The University is committed to taking prompt action to end a hostile environment if one has been created, prevent its recurrence, and remedy the effects of any hostile environment on affected members of the campus community.

For complete details on the University’s Nondiscrimination, Equal Opportunity, and Affirmative Action Policy (07-01-03) and Sexual Misconduct Policy (06-05-01), visit https://www.diversity.pitt.edu/policies-procedures-and-practices

ACADEMIC CONDUCT AND INTEGRITY

Students are expected to comply with the University of Pittsburgh’s Academic Integrity Code, SHRS Academic Integrity Policy, and the canons of ethics of the student’s discipline
The American Occupational Therapy Association (AOTA) has developed its own code of ethics to assist OTD students, OT faculty, and occupational therapists in making ethical decisions. It is the expectation of the Department that all University of Pittsburgh OTD students will understand and abide by these principles throughout the curriculum including during fieldwork education.


**Grievances and Complaints Regarding Faculty Obligations and Student Rights:** The Department of Occupational Therapy adheres to the University and SHRS policies and procedures regarding grievances and complaints. Visit [https://www.studentaffairs.pitt.edu/drs/policies/grievance-procedure/](https://www.studentaffairs.pitt.edu/drs/policies/grievance-procedure/) for the University’s Guidelines on Academic Integrity, and Student and Faculty Obligations and Hearing Procedures; and [http://www.provost.pitt.edu/information-on/guidelines.html](http://www.provost.pitt.edu/information-on/guidelines.html) (see Grad Students, Post Docs, & Research Associates; Academic Integrity; Faculty Obligations and Students Rights – page 11).

**Grievances and Complaints Regarding the Program:** The Department of Occupational Therapy strives to maintain good working relationships and a supportive learning environment, and encourages open and honest dialogue about concerns. Pending the nature of the concern, students may discuss the matter with their Class Liaison, Academic Advisor or another appropriate faculty member. The Class Liaison serves as the communication link between students and faculty in representing issues common to the OTD student body. The Academic Advisor’s and/or faculty member’s responsibility is to meet in a timely and professional manner with the student to discuss the concern and consider reasonable solutions that would remedy the situation consistent with Department, School, and University policies. Students who feel they are not able to direct the particular concern to their Academic Advisor or to a faculty member, may discuss the matter with the Program Director and/or Department Chair. If such discussion does not prevent or solve a problem, additional actions may be taken, and the concern can be expressed in writing to the SHRS Associate Dean of Graduate Studies or the SHRS Dean.

Students who wish to bring a complaint regarding the OTD Program’s compliance with the AOTA’s Accreditation Council for Occupational Therapy Education (ACOTE) standards should submit a complaint in writing to the Department Chair (see Appendix A for the standards related to the content requirements, fieldwork education, and experiential component for an OT doctoral-degree-level program and/or visit [www.acoteonline.org](http://www.acoteonline.org) for a complete list of the standards for an OT doctoral-degree-level program). The written complaint must be signed by the student(s). The Department Chair will acknowledge receipt of the complaint within 3 business days and will meet with the student or respond to the complaint in writing within 3 weeks of receipt of the complaint. The student will be informed of the Chair’s response to the complaint, the steps being taken to address the complaint, or the steps being taken to
investigate it. Any investigation will be time limited.

If the student is dissatisfied with the response to the complaint, a written appeal may be made to the SHRS Associate Dean of Graduate Studies or the SHRS Dean; the appeal must be made within 3 weeks of receipt of the Chair’s response. The Associate Dean’s/Dean’s response to the complaint will be communicated to the student within 3 weeks of the appeal. The Associate Dean/Dean’s decision is final.

The Chair/Dean will maintain a written record of a complaint, including the nature of the complaint, the steps taken to resolve the complaint, the final decision, and any external actions initiated by the student. This record will be confidential and will be held for 8 years.

**OMBUDSPERSON**

**Policy:** OTD students have access to the Ombudsperson for the School of Health and Rehabilitation Sciences (SHRS).

**Purpose:** The Ombudsperson is a person who handles complaints, serves as a mediator, and a spokesperson for the rights of a particular individual or group. The Ombudsperson in SHRS will be a neutral person (Non-faculty) for students whom they can engage in informal discussions to express concerns about conflicts and other issues that may arise during the course of their education that they believe are difficult to address with the academic department.

**Procedure:** The Ombudsperson for SHRS is Kellie Beach, Director of Student Services, and Registrar. To find out more information on the role of the Ombudsperson for SHRS and for her contact information, visit [https://www.shrs.pitt.edu/current-students/contact-us](https://www.shrs.pitt.edu/current-students/contact-us).

**ACADEMIC ADVISING**

**Policy:** OTD students will be assigned an Academic Advisor.

**Purpose:** Good academic advising supports quality education. Academic advising provides students with the opportunity to discuss their: academic performance and progress, professional behaviors, Professional Portfolio, and satisfaction with the program.

Because the OTD curriculum is standardized, the need for advisement regarding courses or course sequencing for students is minimal. However, students who: (a) are seeking to obtain course credit through examination; (b) want to take an overload to enhance their education; or (c) because of personal or academic reasons need to vary the standardized course sequence, benefit from additional advisement.

**Procedure:** OTD students will be assigned an Academic Advisor upon admission to the OTD program and will be in contact with their Academic Advisor at least once per term for advisement. Additional advisement sessions are scheduled when recommended by the Academic Advisor and/or other faculty, or as requested by the student.

**PLAN OF STUDIES**

**Policy:** OTD students must submit a Plan of Studies.
Purpose: The Plan of Studies documents the courses that the OTD student will, or has, enrolled in to meet their educational goal of a Doctor of Occupational Therapy (OTD) degree. An accurate, updated Plan of Studies must be submitted and approved by the SHRS Registrar before the OTD student can be certified for graduation.

Procedure: The OTD student will complete the Plan of Studies in consultation with his/her Academic Advisor. The Plan of Studies will be completed during the first term of enrollment and will be updated, in consultation with the Academic Advisor, when course changes are made.

See SHRS Graduate Student Handbook at [http://www.shrs.pitt.edu/current-students/student-handbooks](http://www.shrs.pitt.edu/current-students/student-handbooks) and Plan of Studies form at [http://www.shrs.pitt.edu/current-students/forms](http://www.shrs.pitt.edu/current-students/forms).

REGISTRATION

The University Academic Regulations and Registration information can be found in the Graduate & Professional Studies Catalog at [https://catalog.upp.pitt.edu/index.php](https://catalog.upp.pitt.edu/index.php).

Registering for Classes:
OTD students are “block” registered each term by the SHRS Registrar with the approval of their Academic Advisor. OTD students meet with their Academic Advisor each term to address registration for the subsequent term. Students receive written notification of the classes their Academic Advisor has approved for registration. Registration follows the OTD curriculum (see page 13). Note: Term 5 registration is OT 2228, 10 credits and OT 2229, 3 credits (total credits = 13); Term 6 registration is OT 2229, 7 credits (total credits = 7).

Once students are registered, they may view their course schedule at [http://my.pitt.edu](http://my.pitt.edu). Students receive a print copy of their class schedule each term from the Department of Occupational Therapy. Students should follow the print copy versus the online version as the print copy will be the most up-to-date schedule.

Students must be officially admitted to the University to be eligible to register for classes. Graduate students who are registered for 9 to 15 credits in the fall or spring term are full-time students and are assessed the SHRS full-time tuition rate. Students who register for fewer than 9 credits are part-time students and are billed on a per-credit basis. During the summer sessions, OTD students are billed the SHRS per-credit rate. Visit [http://www.ir.pitt.edu/tuition/index.php](http://www.ir.pitt.edu/tuition/index.php) for the University’s current tuition and mandatory fee rates. OTD students are assessed a major fee of $150 per term (amount subject to change).

Statute of Limitations / Leaves of Absence: The purpose of the statute of limitations is to ensure that a graduate degree from the University of Pittsburgh represents mastery of current knowledge in the field of study. All requirements for the OTD degree must be completed within a period of five consecutive calendar years from the student's initial registration for graduate study. Under special conditions, graduate students may be granted one leave of absence. A maximum leave of two years may be granted to doctoral students. The length and rationale for the leave of absence must be stated in advance, recommended to the Associate Dean for Graduate Studies by the department (Program Director), and approved by the Associate Dean for Graduate Studies. If approved, the time of the leave shall not count against the total time allowed for the degree being sought by the student. Readmission following an approved leave of absence is a formality.
Service Restrictions: Restrictions can be placed by a variety of University offices. If a student has a restriction, he or she will be referred to the appropriate office to resolve the matter before registration can be completed. Types of restrictions include academic, missing data, disciplinary, and financial.

ACADEMIC STANDARDS

Quality Point Average (GPA) is a numerical indication of a student’s academic achievement. GPA is the average of letter grades earned toward a degree. To maintain full graduate status, the OTD student must achieve a minimum cumulative GPA of 3.00 (based on a 4.00 scale) in the courses that make up the OTD program.

Courses that make up the OTD program have a grade option of Letter Grade (LG) with the exception of the “seminar” courses (OT 2203, OT 2209, OT 2216, OT 2220, and OT 3213), Fieldwork Education courses (OT 2215, OT 2219, OT 2226, OT 2228, and OT 2229), and Experiential Preceptorship course (OT 3209) which have a grade option of Honors/Satisfactory/Unsatisfactory (HSU). The grades H and S are counted toward graduation but not the student’s GPA. OTD students must achieve a minimum cumulative GPA of 3.00 in all didactic coursework in the OTD curriculum and acceptable competency skills prior to enrolling in Level II fieldwork courses (OT 2228 and OT 2229) and the Experiential Preceptorship course (OT 3209) to maintain full graduate status. OTD students must successfully complete all required coursework and achieve a minimum cumulative GPA of 3.00 to be eligible for graduation.

OTD students must achieve a grade of C or better in the courses that make up the OTD program with a grade option of Letter Grade. For the courses with a grade option of HSU, OTD students must achieve an S. Students who receive a grade of C- or below (or U) in a course must repeat that course and attain a grade of C or better (or S). The grade earned by repeating a course is used in lieu of the grade originally earned, although the original grade is not erased from the transcript. Failure to receive at least a grade of C (or S) after the second opportunity to complete the course may result in the OTD student being dismissed from the OTD program. OTD students will not be permitted to register for advanced courses if the student received a grade of C- or below for a prerequisite to the more advanced course(s). This will require the OTD student to extend his or her program beyond the scheduled date for degree completion.

The OTD student who fails to make satisfactory progress may be subject to academic probation and/or dismissal. When the cumulative GPA of an OTD student falls below 3.00 in any one term or period of 9 credits, the student is automatically placed on academic probation. Visit https://www.shrs.pitt.edu/current-students/student-handbooks for the Academic Policy in the SHRS Graduate Student Handbook.

Conditions for loan eligibility and many scholarships usually require students to complete a specified number of credits each year and maintain a specified quality point average. Questions about the effect of unsatisfactory academic standing on loans should be directed to the Office of Admissions and Financial Aid, Alumni Hall, 412-624-7488. Questions about the effect of
unsatisfactory academic standing on scholarships should be directed to the particular department or organization awarding the scholarship.

**GRADES**

Grades are available shortly after the term ends or after a grade change has been made. Students can access their grades online via the University Portal at [www.my.pitt.edu](http://www.my.pitt.edu). Visit [http://www.registrar.pitt.edu/grades.html](http://www.registrar.pitt.edu/grades.html) and the SHRS Graduate Student Handbook at [https://www.shrs.pitt.edu/current-students/student-handbooks](https://www.shrs.pitt.edu/current-students/student-handbooks) for more information on grades.

The University of Pittsburgh Grading System follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Quality Points</th>
<th>Percentile Score</th>
<th>First Professional</th>
</tr>
</thead>
<tbody>
<tr>
<td>A+</td>
<td>4.00</td>
<td>97–100</td>
<td>Superior</td>
</tr>
<tr>
<td>A</td>
<td>4.00</td>
<td>94–96</td>
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</tr>
<tr>
<td>A-</td>
<td>3.75</td>
<td>90–92</td>
<td></td>
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<tr>
<td>B+</td>
<td>3.25</td>
<td>87–89</td>
<td>Adequate</td>
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<tr>
<td>B</td>
<td>3.00</td>
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<td>B-</td>
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<td>80–82</td>
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<tr>
<td>C+</td>
<td>2.25</td>
<td>77–79</td>
<td>Minimal</td>
</tr>
<tr>
<td>C</td>
<td>2.00</td>
<td>73–76</td>
<td></td>
</tr>
<tr>
<td>C-</td>
<td>1.75</td>
<td>70–72</td>
<td></td>
</tr>
<tr>
<td>D+</td>
<td>1.25</td>
<td>67–69</td>
<td></td>
</tr>
<tr>
<td>D</td>
<td>1.00</td>
<td>63–66</td>
<td></td>
</tr>
<tr>
<td>D-</td>
<td>0.75</td>
<td>60–62</td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>0.00</td>
<td>&lt; 60</td>
<td></td>
</tr>
</tbody>
</table>

The following grades carry no quality points:

- **G** Coursework unfinished because of extenuating personal circumstances
- **H** Exceptional (honors) completion of course requirements
- **I** Incomplete coursework due to the nature of the course, clinical work, or incomplete research work in individual guidance courses or seminars
- **N** Non-credit audit
- **NC** No Credit
- **R** Student resigned from the University
- **S** Satisfactory (successful) completion of course requirements
- **U** Unsatisfactory (failing) completion of course requirements
- **W** Withdrawal
- **Z** Invalid grade reported
- **** No grade reported

**PROBATION, SUSPENSION, AND DISMISSAL**

The Department of Occupational Therapy adheres to the University and SHRS policies and procedures regarding probation, suspension, and dismissal.

**Graduate students must have a 3.000 cumulative GPA to be eligible to graduate.**

Visit [https://catalog.upp.pitt.edu/content.php?catoid=6&navoid=580](https://catalog.upp.pitt.edu/content.php?catoid=6&navoid=580) (Graduate & Professional Studies Catalog) for the University policy and procedure regarding probation, suspension, and dismissal.

Visit [http://www.studentaffairs.pitt.edu/studentconduct](http://www.studentaffairs.pitt.edu/studentconduct) for the University of Pittsburgh’s Student Code of Conduct and Judicial Procedures which outlines nonacademic standards of conduct appropriate to the University in consonance with the educational goals of the University.

## CLASS, FIELDWORK, AND CAPSTONE EXPERIENCE ATTENDANCE AND PUNCTUALITY

**Policy:** OTD students are to attend ALL classes (including assigned fieldwork and preceptorship experiences), to arrive at class/fieldwork/preceptorship prior to the scheduled start time, and to be prepared to begin class/fieldwork/preceptorship on time.

**Purpose:** Regular attendance and promptness are professional behaviors that facilitate learning and teaching and show respect for one’s instructors, fieldwork and capstone site staff and clients, and peers.

**Procedure:** **Class:** Attendance will be taken at each class session. Attendance and punctuality (unexcused absences, excused absences, lateness) are taken into account in the final course grade. For example, points may be deducted from the professional behavior component of the final course grade or from other components as specified by the instructor. If you are unable to attend a class, you must notify the course instructor (and if applicable, course liaison) of your pending absence and the reason for your absence, as early as possible but no later than prior to the start of class on the day of your absence. The preferred method of notification is email. When an absence involves more than one class/course it is beneficial to send a single email to all instructors of the courses affected and to copy your Academic Advisor and the Program Director. Proactive communication is strongly encouraged for any anticipated personal events that may or will result in a possible absence. Absences may result in a reduction of points unless the reason relates to an extreme circumstance (e.g., illness, funeral, etc.). Acceptance of the extreme circumstance will be determined on a case-by-case basis by the instructor in consultation with the Program Director.

**Fieldwork and Capstone Experience:** Attendance during Level I and II fieldwork is monitored by the Fieldwork Educator and the Academic Fieldwork Coordinator. The student’s Level I fieldwork hours are determined by the Academic Fieldwork Coordinator in collaboration with the Fieldwork Educator. The student’s Level II fieldwork hours are determined by the Fieldwork Educator and may include daylight, evening and/or weekend work hours. The student’s Experiential Preceptorship hours are determined by the designated Faculty Mentor and Site Mentor for the experience and approved by the Doctoral Capstone Coordinator. There are no designated holidays, vacation days, or sick days/leave during Level II fieldwork and the Experiential Preceptorship. Any anticipated absences due to an extreme circumstance (e.g., illness, funeral, etc.) must be approved – absences during Level I or Level II fieldwork must be approved by the Academic Fieldwork Coordinator and Fieldwork Educator; absences during the Experiential Preceptorship must be approved by the Faculty Mentor, Site Mentor, and Doctoral Capstone Coordinator.

**University Holidays:** University offices are closed in observance of the following holidays: New Year’s Day, Martin Luther King’s Birthday, Spring Holiday, Memorial Day, Independence Day, Labor Day, Thanksgiving, the day after Thanksgiving, the day before Christmas, and Christmas Day. The University has a tradition of recognizing religious observances of members of the
University community in instances where those observances may conflict with University activities. Examples of such occasions are Rosh Hashanah, Yom Kippur, and Good Friday. On such dates, course instructors, in consultation with the OTD Program Director, will work with students to allow for missed class for reasons of religious observations. It is the student’s responsibility to notify the Program Director and course instructor of an absence due to a religious observance well in advance of the known religious observance.

**Extreme Weather Conditions:** Only by authorization of the Chancellor shall the University be officially closed. Students are urged to use their own discretion in deciding whether they can safely commute to class. If personal health or safety is at issue in that decision, responsible judgment should be used.

**Disaster Preparedness:** In the event of a disaster, such as flooding, fire, or health pandemic, the University of Pittsburgh will post information for faculty, staff and students on the University’s website home page (http://www.pitt.edu). The Department of Occupational Therapy will distribute information and instructions for occupational therapy students through recorded messages on the Department voicemail (412-383-6620) and through email (University of Pittsburgh accounts only). Students will be responsible for maintaining open lines of communication with course instructors/liaisons, and completing all required work as instructed.

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**COURSE ASSIGNMENTS, QUizzes AND EXAMINATIONS**

**Policy:** OTD students are to turn in assignments on their due dates and are to take examinations/quizzes at the scheduled time.

**Purpose:** Completion of assignments in a timely manner facilitates learning and instruction. Completing quizzes and examinations at the schedule time removes students, who have taken a quiz/examination, from the temptation to share this information with students who have not taken the examination and removes students who have not taken the quiz/examination from the temptation to ask for information from students who have taken the quiz/examination. It also prevents the instructor from having to do extra work to develop a second test or monitor another test. In other word, it is fair to students and instructors.

**Procedure:**

- **Assignments.** The due dates for assignments are listed in the syllabus and/or identified by the course instructor. Turning in assignments late, that is, after their due dates, is taken into account in the final course grade. For example, points may be deducted from the professional behavior component of the final course grade and/or from other components as specified by the instructor. All assignments, whether they are to be graded or not, must be submitted. It is the responsibility of the student to obtain and complete any missed in-class assignments prior to the next class.

- **Examinations/Quizzes.** Dates of examinations/quizzes are listed in the syllabus. Students are expected to take all examinations/quizzes on the dates listed, so plan accordingly. Make up examinations/quizzes will only be scheduled under extreme circumstances. If an extreme circumstance prevents the student from taking the examination/quiz on the scheduled day at the scheduled time, the student may request an alternate examination/quiz date by submitting, in writing, a description of the reason why the examination/quiz must be missed.
to the course instructor/course liaison and OTD Program Director. The student will be notified in writing IF an exception is to be made and IF SO under what conditions/penalties an alternate examination/quiz will be given. Students are encouraged to submit requests as soon as they are aware there may be an extreme circumstance.

PROFESSIONAL DEVELOPMENT

Policy: OTD students are required to document professional development in a Portfolio.

Purpose: A Portfolio facilitates the process of assessing individual learning needs and interests, establishing a professional development plan, and documenting professional development activities. OTD students begin this life-long learning endeavor during their academic education with the hope that they will continue the process throughout their career as an occupational therapist.

Procedure: The OTD student is introduced to the components of the Portfolio in Term 1 (OT 2203 – Clinical Seminar 1) and at least annually presents his/her Portfolio for peer and/or faculty for review and feedback. The Portfolio includes the OTD student’s career goals, strengths, plan for professional development, resume, reference contact information, and exemplars of academic accomplishment that individualizes the student’s professional development.

ACADEMIC AND PROFESSIONAL REFERENCES

Policy: OTD students must submit a signed waiver to each faculty/staff member who is requested to provide a written or oral reference for application for scholarships or fellowships or admission to academic programs or professional employment.

Purpose: Under the Buckley Amendment, records or information pertaining to students’ academic performance are confidential. By submitting a signed waiver, OTD students will notify the faculty member that they are requesting a written or oral reference, and permit the faculty member to share information with the academic or professional entity identified by the student.

Procedure: The OTD student requesting written or oral references will complete and submit a signed waiver to each faculty/staff member he/she wishes to provide a reference. A waiver form is provided in the Manual for the Doctor of Occupational Therapy Student (see Appendix D). The waiver is necessary for all written and oral references requested from faculty/staff. Additionally, students are to provide the faculty/staff member with the following as applicable to the request: a copy of their resume; list of other experiences and skills that may not be on their resume but are directly related to the scholarship/fellowship/employment; a link to the scholarship requirements or a print copy of the scholarship details, including the timeline for submission of the letter and application; a drafted letter of recommendation written by the student in letter format in a Word document written as if the student was writing it as the faculty/staff member; and a copy of the essay if required for a scholarship/fellowship.

STUDENT RELEASE PERMITTING THE USE OF ACADEMIC PRODUCTS

Policy: Department of Occupational Therapy faculty must ask an OTD student to sign a release permitting faculty members to use examples of the student’s academic work for educational
purposes beyond the student’s own learning (e.g., models for future students, curriculum review).

**Purpose:** Under the Buckley Amendment, records or information pertaining to students’ academic performance are confidential. By signing a release, the OTD student gives permission for faculty to use examples of the student’s academic work for future educational purposes.

**Procedure:** OTD students agreeing to permit faculty to use examples of the student’s academic work for additional educational purposes will complete and submit a signed release. The release is included in the Manual Acknowledgement Agreement (see last page of Manual).

**PROFESSIONAL BEHAVIORS**

**Policy:** The OTD student is expected to demonstrate professional behaviors in his/her interactions with faculty members, practitioners, and fellow students during didactic, fieldwork, and preceptorship education to promote a shared supportive learning environment.

**Purpose:** In addition to knowledge and skills, professional education socializes the OTD student to the personal, interpersonal, and interprofessional behaviors that he/she is expected to have as an occupational therapy practitioner, manager, and contributor.

**Procedure:** The OTD student should familiarize himself/herself with the OTD Professional Behavior Evaluation. The Professional Behavior Evaluation is completed on every OTD student by each instructor who is teaching a course during the term. Problems are typically addressed by the individual instructor, but concerns are brought to the attention of the OTD student’s Academic Advisor and further intervention may be deemed necessary. Intervention is determined on a case-by-case basis based on the severity of the behavior. See Appendix E for OTD Professional Behavior Evaluation.

Students are expected to refrain from “distracting behaviors” when class is in session to maintain a supportive shared learning environment. Examples include but are not limited to:

- Using a cell phone (including text messaging)
- Using a laptop for tasks unrelated to class notation
- Conversing during lectures
- Not being ready to begin class on time
- Arriving late and/or leaving early
- Sleeping / putting head down on table
- Eating, drinking or chewing gum in an audible manner

The use of social media sites is increasingly common. Examples include, but are not limited to, Facebook, YouTube, Twitter, Snapchat, blogs, LinkedIn, Wikipedia, Second Life, Flickr, podcasts, and MySpace. Social media often crosses traditional boundaries between professional and personal relationships. Therefore, it takes extra vigilance to assure that personal, professional and university reputations are protected. The OTD student who publishes information on social media sites is expected to demonstrate professional behavior when doing so. Professional behavior when using social media includes being honest about who you are, being thoughtful before you post, and respecting the purpose of the community where you are posting. When publishing information on social media sites the OTD student needs to be aware that
information may be public – that is, anyone can see, it can be traced back to you as an individual, and once posted, it can be difficult or impossible to erase. Since social media typically allows two-way communication, there is less control over how information posted will be used by others. As one person remarked, “If you wouldn’t put it on a flier, carve it into cement, or want it published on the cover of a magazine or newspaper, don’t broadcast it via social media channels.” The following are social media guidelines:

- Be respectful to yourself and others, and the Department and University
- Think before you post – there is no such thing as a “private” social media site
- Be accurate – make sure you have all your facts before you post
- Consider your audience and the overlap between personal and professional in social media
- Maintain confidentiality – do not post confidential or proprietary information about the University, its students, faculty, or alumni; or a fieldwork facility, supervisor, or its staff; or any clients
- Be aware of liability – you are legally liable for what you post on your own site and the sites of others. Individuals have been held liable for postings deemed to be proprietary, copyrighted, defamatory, libelous or obscene (as defined by the courts). Employers are increasingly conducting Web searches on job candidates before extending offers. Be sure that what you post today will not come back to haunt you.


**SHRS SOCIAL MEDIA POLICY**

Social media is rapidly expanding and new outlets are created every day. Professional organizations and ethical codes are often outdated given the rapid expansion of social media. It is essential that student and faculty remain aware and vigilant regarding the social media ethical challenges facing health professionals, clients, patients, and students.

Students are responsible for maintaining a professional social media presence related to any SHRS education activities. Some students may find it helpful to create separate professional and personal social media accounts.

We recommend that students consider the following prior to posting or transmitting on social media:

- Consider the audience and potential impact of your post prior to transmission.
- Assume anything that you post or transmit on social media can be made or viewed by the public.
- An electronic post or transmission is often traceable, without an opportunity for removal.
- Employers often search social media to learn more about you prior to interviews or offered employment.
- Clients often search social media to learn more about you. Proximity based apps and social media post new challenges to maintaining professional boundaries between health professionals and clients or patients.

SHRS students must:

- Respect the ethical standards of the profession in carrying out his or her academic assignments.
- Comply with HIPPA’s social media rules.
- Read, review, and follow the social media policy of your practicum or internship placement.
• Comply with School and University academic integrity guidelines.
• Do not post or transmit any information or reference about your work with clients.
• Do not post clinical encounters, clinical experiences or information that pertains to working with clients.

Please note that boundaries on social media are no longer as simple as not ‘friending’ a client, professor, or colleague on Facebook. For example, all contacts in your phone book can read your posts on Venmo without being friends on the app. It is difficult to predict the latest ethical problem or boundary that will arise with social media. Therefore, please remain aware and consult with faculty or supervisors on these important issues. Faculty may have to act upon on any material that does not comply with current academic integrity guidelines, professional ethical standards, or HIPPA policies.

AUDIO RECORDING, VIDEO RECORDING AND PHOTOGRAPHIC IMAGING OF CLASSROOM/LABORATORY ACTIVITIES AND COURSE MATERIALS

Policy: OTD students may not audio or video record or take a photographic image of classroom/laboratory lectures, discussion, and/or activities and course materials without the advance written permission of the instructor. Any such recordings or images properly approved in advance can be used solely for the student’s own private use.

Purpose: Adherence to the classroom/laboratory recording and imaging policy is necessary to ensure the free and open discussion of ideas.

Procedure: The OTD students requesting permission to record or take an image of a class/laboratory lecture, discussion, activity, and/or course materials must submit the request in writing to the instructor prior to the start of class on the day of the lecture, discussion, and/or activity. Acceptance of the request (i.e., permission to record or image) will be determined by the instructor.

EXPECTATIONS FOR APPEARANCE

Policy: The OTD student is expected to display a clean and groomed appearance, and wear appropriate attire in the classroom, laboratory, and clinical settings at all times.

Purpose: Adherence to dress code criteria is necessary to maintain safety, health, professionalism, and a shared supportive learning environment.

Procedure: Appropriate attire is dependent on the setting and the activities required. Casual dress is appropriate attire for classroom and laboratory settings, however when community members (e.g., clients, guest speakers) are present OTD students are expected to present with a professional appearance (i.e., business casual clothing) – see below. OTD students will adhere to the dress code of the assigned fieldwork/preceptorship site (course instructors will direct OTD students where to obtain this information). Unless otherwise instructed, Department of Occupational Therapy student name pins/badges are worn at the fieldwork sites at all times. Name pins/badges are provided by the Department of Occupational Therapy. Replacement name pins and name badges cost $10 (amount subject to change). OTD students are responsible for any and all expenses incurred for clothing required by an assigned fieldwork/preceptorship site. Failure to comply with this dress code will be viewed as a professional behavior issue. Problems are typically addressed by the course instructor, but
concerns may warrant the attention of the OTD student’s Academic Advisor and the OTD Program Director, and further intervention may be deemed necessary. Intervention is determined on a case-by-case basis and remediation is based on the type and severity of the behavior.

Fieldwork/Preceptorship:

- Clothing in fieldwork/preceptorship settings is determined by the facility. Students are expected to learn the facility dress code prior to the start of fieldwork/preceptorship and abide by it. Some clinical sites have specific uniform requirements, and some require business casual attire. Business casual is slacks/pants; skirts of modest length; collared shirt; blouse/shirt/top/sweater with at least short sleeves; blazer/jacket/sports coat; foot coverings; hard soled shoes. Clothing worn during fieldwork should be of correct size and fit. Pants and blouses should be worn in such a way as to prevent undergarments from showing.
- A University of Pittsburgh (or facility) photo identification badge (or name pin if approved by fieldwork/preceptorship facility) must be worn at all times.
- In general, fieldwork/preceptorship sites require staff and students to abide by the following in order to maintain infection control and safety:
  1. Hair should be neat, clean, and pulled back with small simple hair accessories, so hair does not come in contact with the client. Hair color of an unnatural tone is not appropriate (e.g., green, blue, pink, purple, etc.)
  2. Beards and mustaches should be short, clean, and well groomed.
  3. Wearing rings and other jewelry during direct patient contact is discouraged. Wearing excessive jewelry, pins, buttons, and other adornments is not appropriate. Dangling earrings or hoops larger than one inch; more than two earrings per lobe; and facial/oral jewelry are not appropriate.
  4. Makeup should be kept at a minimum. Cologne and perfume are not recommended as many clients are sensitive to them (this includes scented hair sprays, lotions, etc.). Presenting smelling of smoke is not permitted.
  5. Nails should be well groomed and kept to a length that is not detrimental to client safety or infection control. When having direct contact with clients, natural nail tips should be less than one quarter (1/4) inch past the tip of the finger and artificial fingernails or extenders should not be worn. The definition of artificial fingernails includes, but is not limited to, acrylic nails, all overlaps, tips, bondings, extensions, tapes, inlays, and wraps.
  6. Footwear must be: clean; closed heel and closed toe; leather or vinyl; in good condition; and worn with foot coverings (hosiery or socks). IF athletic shoes are worn, they must be primarily white, in good condition, and ONLY used for work purposes.

Classroom:

- Clothing worn in the classroom should be of correct size and fit. Examples of inappropriate dress are clothing with offensive messages; excessive skin exposure; and exposed undergarments (upper or lower).
- Individual instructors may request alternate clothing in certain instances to fully participate in class and lab sessions.
• Hygiene that is supportive of a shared learning environment is required.

PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) CERTIFICATION

Policy: OTD students must be certified by the University of Pittsburgh in the Health Insurance Portability and Accountability Act (HIPAA).

Purpose: HIPAA certification documents training in the guidelines for the conduct of ethical and regulation-compliant clinical practice and research. Confidentiality of patient/client information is a critical component of HIPAA. Confidentiality is the guaranteed trust that all patient/client information will remain private. This includes both information shared and not shared in written reports and the confidentiality of professional consultation. Patients/clients should not be identified by name, other Personal Health Information (PHI) or image in public areas such as the hallways, elevators, lounges, cafeterias, or waiting rooms, or in any form of social media. Confidentiality extends to patient/client records which should NOT be photocopied or printed without the approval of the Fieldwork Educator.

Procedures: The OTD student will complete the web-based HIPAA training modules for clinical practice (Information Privacy and Security Awareness Training for Physicians, Mid-level Providers, Dentists, Staff and Students Who Are NOT employed by UPMC but Who Encounter Protected Health Information in UPMC Facilities) and for research (Privacy and Information Security; Biomedical Course; Responsible Conduct of Research; Conflicts of Interest; GCP - Social and Behavioral Research Best Practices for Clinical Research). A copy of the certificates earned upon completion of each module is filed with the Department of Occupational Therapy. The OTD student should also place a copy of the certificates in his/her Portfolio. Students receive detailed instructions, including the due dates, for required documents. All required documents must be filed with the Department of Occupational Therapy (see Appendix H).

BLOODBORNE PATHOGEN TRAINING

Policy: OTD students must be certified in the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogen Standard.

Purpose: Bloodborne Pathogens Training is intended for all users of human blood, blood products, biohazardous agents, and other potentially infectious materials. The intent of these regulations is to teach healthcare professionals how to control infectious diseases so that they can protect themselves and their patients/clients. The OSHA Bloodborne Pathogen Standard and the University of Pittsburgh’s Exposure Control Plan require annual training for individuals with potential occupational exposure to bloodborne pathogens.

Procedure: The OTD student will complete the web-based Bloodborne Pathogen Training module. Students complete the module annually. A copy of the certificate earned upon completion of the module is filed with the Department of Occupational Therapy. The OTD student should also place a copy of the certificates in his/her Portfolio. Students receive detailed instructions, including the due dates, for required documents. All required documents must be filed with the Department of Occupational Therapy (see Appendix H).
COLLABORATIVE INSTITUTIONAL TRAINING INSTITUTE (CITI) MODULES

Policy: OTD students must complete training modules addressing research conduct and compliance provided by the Collaborative Institutional Training Institute (CITI).

Purpose: The purpose of the training is not only to satisfy government and University of Pittsburgh policy requirements, but to enhance research activities at all stages.

Procedure: The OTD student will complete the web-based CITI modules (Biomedical Course; Responsible Conduct of Research; Conflicts of Interest; GCP – Social and Behavioral Research Best Practice for Clinical Research; Privacy and Information Security). A copy of the certificates earned upon completion of the modules is filed with the Department of Occupational Therapy. The OTD student should also place a copy of the certificates in his/her Portfolio. Students receive detailed instructions, including the due dates, for required documents. All required documents must be filed with the Department of Occupational Therapy (see Appendix H).

FIRST AID, CPR, AND AED CERTIFICATION

Policy: OTD students must be certified and maintain certification in adult and pediatric First Aid, Cardiopulmonary Resuscitation (CPR), and Automated External Defibrillator (AED).

Purpose: First Aid/CPR/AED certification gives students the fundamental knowledge and skills for responding to breathing and cardiac emergencies to help individuals of any age (adults and children) and to recognize and care for a variety of first aid emergencies.

Procedure: The OTD student will complete the training as scheduled by the Department of Occupational Therapy during Year 1 and Year 3. A copy of the certificate is filed with the Department of Occupational Therapy. The OTD student should also place a copy of the certificates in his/her Portfolio. Students receive detailed instructions, including the due dates, for required documents. All required documents must be filed with the Department of Occupational Therapy (see Appendix H).

HEALTH AND SAFETY ISSUES

Policy: OTD students must be familiar with the contents of the Department of Occupational Therapy Safety Binder.

Purpose: Knowledge of health and safety issues is necessary to maintain the health and safety of students, faculty, and clients during all educational activities. Some course activities and assignments may require the OTD student to use potentially hazardous equipment and/or chemicals.

Procedure: While course instructors review safety information prior to using hazardous equipment and chemicals, it is the OTD student’s responsibility to be familiar with safety precautions. Information pertaining to the safe handling of equipment, and, as per the Occupational Safety and Health Administration (OSHA) regulations, Material Safety Data Sheets (MSDS) for all chemicals, and infection control, medical emergency, and evacuation procedures are available in the Safety Binders located in classrooms/laboratories and the student lounge of the Department of Occupational Therapy.
PROFESSIONAL LIABILITY INSURANCE

Policy: Students must carry professional liability insurance throughout enrollment in the OTD Program.

Purpose: Professional liability insurance protects OTD students against claims of healthcare malpractice by patients (clients) or their legal representatives.

Procedure: SHRS has a group policy covering all enrolled students. The SHRS Office of Student Services will provide verification of coverage to the Department and student upon request.

HEALTH SCREENING

Policy: OTD students must complete an initial and annual health appraisal forms (including health history, physical examination, immunization record, laboratory tests, and drug screens).

Purpose: To protect the student and patients/clients from infectious diseases, fieldwork and preceptorship sites require physical examinations prior.

Procedure: The OTD student will receive information from the Department regarding the health screening requirements. The initial health appraisal form and the annual health appraisal form must be completed by the physician/examiner.

Completion of the health appraisal forms provides evidence that the student is cleared to begin fieldwork in a clinical setting and interact with clients. The student is responsible for assuring that all areas of the forms are completed, including physician/examiner signatures. Incomplete forms may result in the student being delayed in starting fieldwork or preceptorship and placement of a hold on registration for the following term. The OTD student should retain a copy of the health appraisal forms (including copies of laboratory results) in the event that the OTD student is required to present them to the fieldwork or preceptorship site. The initial and annual health appraisal forms must be submitted to the Department of Occupational Therapy.

Students must notify the Academic Fieldwork Coordinator of any change in health status to determine if another physical examination and/or additional testing/documentation are required.

The OTD student is responsible for any and all costs incurred to complete health appraisals and associated testing and documentation. The OTD student may be required to fulfill additional health-related requirements specified by the fieldwork or preceptorship site.

Students receive detailed instructions, including the due dates, for required documents. All required documents must be filed with the Department of Occupational Therapy (see Appendix H).

INFLUENZA VACCINATION

Policy: OTD students are required to receive an annual flu vaccine.

Purpose: To protect the student and patients/clients from infectious diseases, fieldwork and preceptorship sites require a flu vaccine prior.
**Procedure:** The OTD student will receive information from the Department regarding the influenza vaccination requirement. Students can receive free seasonal flu vaccine shots at University Student Health Flu Clinics or through Student Health Service. Students receive detailed instructions, including the due dates, for required documents. All required documents must be filed with the Department of Occupational Therapy (see Appendix H).

**HEALTH INSURANCE**

**Policy:** OTD students are required to carry personal health insurance Level I and Level II fieldwork, and the Experiential Preceptorship.

**Purpose:** Fieldwork and preceptorship sites do not provide health services to the OTD student in the event of injury or illness. The OTD student is required to carry personal health insurance to provide for any needed health services.

**Procedure:** A copy of the OTD student’s personal health insurance must be filed with the Department of Occupational Therapy (see Appendix H). Students verify that they are aware, that for the entire duration of the program, that they are responsible to cover payment for treatment and follow-up procedures related to bloodborne pathogens, other potentially infectious materials, and any illness or injury that could occur during class or clinical training. Visit [http://www.studentaffairs.pitt.edu/shs/](http://www.studentaffairs.pitt.edu/shs/) and [http://gradcare.hr.pitt.edu/](http://gradcare.hr.pitt.edu/) for health care insurance plans offered through the University. Students receive detailed instructions, including the due dates, for required documents. All required documents must be filed with the Department of Occupational Therapy (see Appendix H).

**RECOGNIZING AND REPORTING CHILD ABUSE: MANDATED AND PERMISSIVE REPORTING**

**Policy:** OTD students must complete training in Recognizing and Reporting Child Abuse: Mandated and Permissive Reporting in Pennsylvania.

**Purpose:** Protecting children from abuse and neglect is a shared responsibility. It requires collaboration from the formal child protective services system, community partners and citizens to provide local safety nets for children and families that are facing challenges within their communities and neighborhoods. In Pennsylvania there is legislation that impacts the reporting, investigation, assessment, prosecution and judicial handling of child abuse and neglect cases. The website, KeepKids.Safe.pa.gov, is designed to serve as the hub for information related to critical components impacting child protection including a link for mandated reporters to make reports of suspected child abuse electronically, training on child abuse recognition and reporting, information related to clearances and general information related to child protection.

**Procedure:** A copy of the OTD student’s certificate of completion for the Recognizing and Reporting Child Abuse: Mandated and Permissive Reporting in Pennsylvania online training module must be filed with the Department of Occupational Therapy. The OTD student should also place a copy of the certificates in his/her Portfolio. Students receive detailed instructions, including the due dates, for required documents. All required documents must be filed with the Department of Occupational Therapy (see Appendix H).

CRIMINAL RECORD CHECK, CHILD ABUSE HISTORY CLEARANCE, AND FINGERPRINT-BASED BACKGROUND CHECKS

**Policy:** OTD students must request a criminal record check, child abuse history clearance, and fingerprint-based background checks from the Commonwealth of Pennsylvania (Department of Human Services and Department of Education). The criminal record check, child abuse history clearance and fingerprint-based background checks are completed annually in the program.

**Purpose:** Fieldwork and preceptorship sites, particularly those sites that serve pediatric clients, may require proof that OTD students do not have a previous criminal record or history of child abuse to protect their clients from potential harm and to ensure their safety.

**Procedure:** The OTD student will complete the Criminal Record Check, Child Abuse History Clearance, and Fingerprint-Based Background Checks (Department of Human Services and Department of Education). Students receive detailed instructions, including the due dates, for required documents. All required documents must be filed with the Department of Occupational Therapy (see Appendix H).
STUDENT RESOURCES

TYPHON GROUP SYSTEM

The Department of Occupational Therapy uses the Typhon Group System to provide a centralized method for students and faculty to support, track, and disseminate students’ learning experiences while at the University of Pittsburgh. The Typhon Group System has multiple uses for students including but not limited to tracking fieldwork experiences from site selection to onsite case management, development of an electronic professional portfolio, scheduling, and accessing surveys, questionnaires, and program documents. OTD students are required to use the Typhon Group System while enrolled in the OTD program and have access to select aspects of the System for 5 years after graduation. Students receive information from the Department regarding the Typhon Group System to establish an account.

DISABILITY RESOURCES AND SERVICES (DRS)

The University is committed to providing equal opportunities in higher education to academically qualified students with disabilities. Students with disabilities will be integrated as completely as possible into the University experience. Visit http://www.drs.pitt.edu for more information.

OTD students with a disability who are or may be requesting an accommodation should contact both the instructor and DRS, 140 William Pitt Union, 412-648-7890 or 412-383-7355 (TTY) as early as possible in the term. DRS will verify the disability and determine reasonable accommodations for the course.

Students with special needs or a disability that require accommodations in the event of a building evacuation should e-mail the Office of Environmental Health and Safety (EHS) at safety@ehs.pitt.edu to request the development of an individualized evacuation plan. A representative of this office will contact you for specific information. You should also inform your course instructor that you are requesting accommodations for an evacuation.

INFORMATION TECHNOLOGY AND COMPUTING LABS

All correspondence between faculty and students must be conducted using University of Pittsburgh e-mail accounts. No personal e-mail accounts will be used. Therefore, students should ensure accessibility to their University e-mail account. Students are advised to check their e-mail at least daily throughout the curriculum for distribution of information, including terms when students are on Level II fieldwork and their Experiential Preceptorship. Students should contact the SHRS Information Technology Department at 412-383-6657 and/or the University Information Technology Department at 412-624-HELP (4357) for all questions and access issues related to their e-mail account.

OTD students have access to a Pitt Print Station, PC Station and TV monitor, and Mobile Charging Station in the Student Lounge at Bridgeside Point I.

The SHRS maintains 2 computer labs in Forbes Tower that are only for use by the students of the school. The main Computer Lab is located in Room 6048, Forbes Tower and includes...
workstations that are available to SHRS students for general use when class is not in session in the Lab. The Anthony and Filomena Pascasio Learning Resource Center (LRC) includes computer workstations, a copier, scanners, treatment tables, a quiet study area, anatomy models, and a self service printing station. Visit http://www.shrs.pitt.edu/support/ for Lab hours and availability.

In addition to the SHRS Computer Lab, the University of Pittsburgh maintains 6 computing labs spread throughout the campus. Visit http://technology.pitt.edu/about-us/lab-locations-hours-and-equipment for more information on campus computing labs.

SHRS uses Pitt Self Service Student Printing. SHRS students can take advantage of their per term printing quota (equivalent to 900 sheets printed in black and white or 128 sheets printed in color) and can submit their print jobs and retrieve them from various locations on campus. The student print quota amounts are subject to change.

Wireless Internet access is available in the Department of Occupational Therapy at Bridgeside Point I and in Forbes Tower on the 4th, 5th, and 6th floors. The access is restricted to faculty, staff, and Pitt students.

Visit http://www.shrs.pitt.edu/support/ to obtain a complete list of SHRS Information Services including links to University resources.

**EMERGENCY PREPAREDNESS**

Students are members of the University community, and their safety is one of the University’s prime concerns. Please keep in mind that safety and crime prevention are shared responsibilities. Use common sense and good judgment and be watchful and alert. Never hesitate to ask for help. Become familiar with campus resources and use them to help ensure personal safety and contribute to the overall safety of every member of the University community.

The University’s Emergency Notification Service will be used to communicate through voice and text messages as deemed appropriate in the event of an emergency. All students are eligible to subscribe. The University does not charge a fee to subscribe to this service; however, subscribers are responsible for any per message fees from their mobile phone/device provider. Additionally, the University is able to send emergency e-mail simultaneously to all faculty, staff, and students and can make announcements over the public address systems in campus buildings. The Rave Guardian App is an optional companion safety feature of the Emergency Notification Service. The app leverages mobile technology to provide new options for contacting the Pitt Police. The app is available through the Pitt App Center, the Apple App Store, or Google Play.

Visit http://www.pitt.edu/prepare.html for more information on emergency preparedness.

For emergency situations in Bridgeside Point I . . .

1. Call 911. Give location: Bridgeside Point I, 100 Technology Drive, Suite 350. Describe the incident.
2. Notify a Department of Occupational Therapy staff or faculty member. If emergency occurs during non-business hours, call 412-383-6716 and leave a message with your
name, contact telephone number, and description of the incident.
3. Department will notify Building Engineer and Property Management.
4. If you smell smoke or see flames, please pull the fire alarm, dial 911 and follow the above steps.

For emergency situations in Forbes Tower . . .
1. Call 9-911 (building telephone) or 911 (cell phone) – give the building name “Forbes Tower” at Meyran and Sennott – describe the incident.
2. Call UPMC Security at 412-647-7440 – tell them emergency services have been notified, give the room number (location) and the person involved in the emergency situation.
3. Call Pitt Police at 42121 (building telephone) or 412-624-2121 (cell phone) – tell them emergency services have been notified, give the room number (location) and the person involved in the emergency situation.
4. Report the incident to the Department of Occupational Therapy.
5. Report the incident to the Dean’s Office.

EVACUATION

For evaluation of Bridgeside Point I . . .
- The building is equipped with a fire alarm system which when triggered, either by a pull station being manually pulled or by a smoke detector detecting smoke, the entire building a loud audio alarm will sound and visual strobe lights will flash.
- Should the fire alarm be triggered, please calmly proceed to the nearest stairwell and exit the building. The meeting place for each floor of BSP I is the parking area in front of the building. Once your Department Administrator gets an “all clear” from either the City of Pittsburgh’s Fire Department or building management, you may re-enter the building.
- Please do not try to use the elevators in the event of a fire. When an alarm is triggered the elevators automatically return to the first floor and remain there until they are reset.
- Learn the location of the fire alarm pull stations and the posted EXIT routes for your location in BSP-I. The fire alarm pull stations are located in the building corridors.

If you hear the fire alarm signal:
1. Verify that the strobe on your floor is going off.
2. Close the door behind you and evacuate the building by following the EXIT signs to the nearest stairwell or exit.

Note:
- Only use a fire extinguisher if the fire is small and you have been trained in the proper use of an extinguisher.
- Do not reenter the building until the “all clear” signal is given by the Police, Fire Department or Building Management.

LOST AND FOUND

The Lost and Found for Occupational Therapy is in Suite 350, Bridgeside Point I. Please notify the Department of Occupational Therapy Administrative Assistant of missing and found items.
INFORMATION AND UPDATES

It is important to notify all appropriate departments of information changes immediately. Failure to do so may result in the student not receiving important mailings.

Students must notify the Office of the University Registrar (220 Thackeray Hall), the SHRS Office of Student Services (Forbes Tower, Room 4024), and the Department of Occupational Therapy of name, mailing address, permanent address, and telephone number changes. Any name change requires documentation (i.e., marriage license, birth certificate, court order, or divorce decree).

Upon enrollment in the program, students establish an account with Typhon Group System and submit information related to their permanent and current addresses, telephone numbers, and e-mail addresses. Students must maintain current information in the Typhon account and make updates as needed. Additionally, students complete a Student Information Form (see Appendix F) which provides information for use in an emergency situation. Students must notify the Department of Occupational Therapy Administrative Assistant of any emergency information changes/updates. The OTD Student Information Form is maintained in a secure location in the Department.

STUDENT USE OF SPACE

The Student Lounge in the Department of Occupational Therapy is a comfortable area open to OT students for gathering, studying, and relaxing between classes. The lounge is equipped with:

- Furniture (furniture is not to be removed from the student lounge)
- Appliances – refrigerator, microwaves, Keurig (do not use appliances in laboratories, apartments or faculty/staff lounge)
- Pitt Print Station
- PC Station and TV monitor (see instructions for use; do not remove remote, keyboard, or mouse from student lounge)
- Mobile Charging Station
- Whiteboard
- Bulletin Board (do not post any items on walls)
- Staplers, three hold punch, tape, and pencil sharpeners (when refills are needed please see Joyce Broadwick, Administrative Assistant)
- Recycling bins. The recycling bin next to the printer is only for paper that is clean (white or colored printer paper, manilla folders and construction paper; do not place envelopes, notebooks, magazines, newspapers, treated or coated paper, cardboard, or anything with glue or binding). The mixed recycling bin near the bulletin board is for all other recycling.

Students are to use the student lounge area for storage of food, meal preparation, obtaining water, or other needs. Supplies in the Employee Kitchenette are not for student use. Students are responsible for their own personal items. Shelves and coat hooks located in the hallway adjacent to the Student Lounge are for student use. The Lost and Found for Occupational Therapy is in Suite 350 – see Joyce Broadwick, Administrative Assistant.
General Rules:

- Be respectful of others and lounge area, furniture, and items.
- Be courteous and refrain from any activity that is disruptive (e.g., loud conversations, loud audio on electronic devices, etc.)
- Clean up after yourself, including the area and appliances (i.e., sink, counters, tables, microwaves, refrigerator, etc.)
- The classrooms (Riverside and City View) are available for use, including to eat lunch, when not reserved for class sessions or meetings.
- All appliances, except for those located in the student lounge, are for teaching purposes during class or laboratory sessions – use of ranges, refrigerators, microwaves, and washer/dryer in laboratories, apartments, and/or faculty/staff lounge is not permitted.
- Students are not to prop any suite doors open.
- Students are not permitted to provide access to Department of Occupational Therapy space to people not affiliated with the Department.
- Any and all equipment, supplies, and/or materials borrowed from classrooms, laboratories, apartments, and/or storage areas must be signed out. See the Materials Sign-Out/Return Procedure for Students on page 41.
- For special requests for use of space, please see Christie Jackson, Executive Administrator, or Denise Chisholm, Program Director.

The Department of Occupational Therapy has a private room (Room 388) that students can use for prayer/meditation, to change clothes, and/or for lactation. The room should not be used as a study room or meeting room or for other purposes without prior approval. If you need to use the room and it is not available, please see Joyce Broadwick, Administrative Assistant.

Other available space dedicated for graduate and professional students:

- Graduate and Professional Student Lounge at William Pitt Union (5th floor)
- Dissertation Writing and Graduate Study Rooms (Hillman Library 401, 402, and 403) – visit [https://www.library.pitt.edu/graduate-study-room](https://www.library.pitt.edu/graduate-study-room) for more information.

BORROWING DEPARTMENT OF OCCUPATIONAL THERAPY MATERIALS

The Department of Occupational Therapy maintains materials to serve the mission of education, research, and service. Materials may be borrowed by OTD students.

Materials Sign-Out/Return Procedure for Students

- Complete OT Material Request Form. An electronic version is available on course sites in Canvas and paper copies are available in the Student Lounge. See OT Materials file for the list of materials that can be borrowed or accessed from a course site in Canvas.
- Submit printed/written copy of OT Material Request Form through the OT Material Request box in the Student Lounge.
- Forms are processed on Mondays, Wednesdays, and Fridays.
  - Submit form by Noon.
  - Requested material(s) will be available for pick-up in Student Lounge after 1 pm.
  - A copy of the form will be attached to the borrowed material(s).
• Return material(s) back to the Student Lounge no later than Noon on due date on form (typically one week from day processed). Include copy of form with returned material(s).
• The individual requesting/signing-out the material(s) is responsible for returning all items listed on the form. Materials are to be returned in the condition received. Take note of how the materials are packed/organized, and return them in the same way.
• If materials are needed beyond the due date, email Erin Mathia at elm194@pitt.edu to request an extension.

Questions or problems with any OT materials should be directed to Erin Mathia elm194@pitt.edu.

MAILBOXES

OTD student mailboxes are located in the Student Lounge. Faculty mailboxes for student use are located in the Student Lounge.

ACCESS BADGE

OTD Students receive an access badge which permits access to Bridgeside Point I and the Department of Occupational Therapy suite (3rd Floor). Access badges are distributed to students during Orientation. Students must turn in their badge upon graduation. Notify the Department of Occupational Therapy Administrative Assistant if an access badge is lost. Note: There is a $25 fee to replace an access badge (amount subject to change).

BUILDING INFORMATION

Bridgeside Point I. OTD students have 24/7 keycard access to the Student Lounge and academic spaces (classrooms/laboratories) in the Department of Occupational Therapy at Bridgeside Point I. Security is available at Bridgeside Point on weekdays from 7 am to 7 pm and Saturdays from 8 am to 1 pm. In the case of a forgotten badge during Security hours, the OTD student will need to show ID and sign in with the security guard at the main entrance. A 24 hour hotline (412-372-8570) is available and can be used during the times when no security guard is on duty. Smoking is not permitted anywhere inside the building or within 35 feet outside of any entrance. Report any issues with facilities to Joyce Broadwick, Administrative Assistant. For off-hours non-emergencies (lighting, heating, housekeeping), report facilities issues by emailing Joyce Broadwick at jrb164@pitt.edu or calling 412-383-6620. For non-business hours emergencies (fire alarm sounding, major leak, no electrical service), report to Property Management at 412-372-8570. Also report issue to Christie Jackson, Executive Administrator at 412-383-6716.

TRANSPORTATION AND PARKING

Bridgeside Point I is accessible by bus and shuttle services.

Bus: Port Authority of Allegheny County bus routes 56, 57, and 58 stop at Technology Drive. Visit https://www.portauthority.org/ for more information.
Shuttle: Pitt shuttle transports to/from Oakland and Bridgeside Point. There are two shuttle routes – 40A Biotech Center (to/from Bridgeside Point I) and Bridgeside (to/from Bridgeside Point II (3 buildings from Bridgeside Point I). Visit https://www.pc.pitt.edu/buses-shuttles for more information and http://www.pittshuttle.com/ for routes and the shuttle tracker.

Parking. OT students are not permitted to park in the front or side parking lots at Bridgeside Point I. The front parking lot is for visitors only and unauthorized vehicles may be towed. There is an indoor parking garage further down Technology Drive across from Bridgeside Point II. Students can either pay the daily rate in the parking garage OR may purchase a monthly parking lease ($65 per month; amount subject to change). See the Department of Occupational Therapy Administrative Assistant for the form and instructions to obtain a monthly lease for the parking garage.

FINANCIAL RESOURCES

See Appendix G for a list of financial resources identified by the Department of Occupational Therapy.

DEPARTMENT OF OCCUPATIONAL THERAPY AWARDS

Joan C. Rogers Occupational Therapy Award. The award was established by the faculty of the Department of Occupational Therapy in 2012 in honor of Dr. Joan Rogers, Chair of the Department of Occupational Therapy, 1998-2015. The award recognizes a third year OTD student who has demonstrated high-level scholastics, exemplary professionalism, and commitment to advancing the profession.

Award of Professional Excellence. The award was established by the faculty of the Department of Occupational Therapy in 2002. The award recognizes a third year OTD student who has demonstrated exceptional ability to promote occupational therapy through his/her professional activities.

Caroline Robinson Brayley Student Enrichment Award in Occupational Therapy. The award was established by Dr. Caroline Robinson Brayley, founding Chair of the Department of Occupational Therapy in 2015. The award enriches the educational experiences of OTD students inside and outside the classroom and promotes their success in the program and in the profession.

COMMENCEMENT / GRADUATION

As candidates of a professional doctoral degree, OTD students are invited to participate in both the University and the School (SHRS) ceremonies. These are academic ceremonies, and as such, academic regalia is required to participate in the procession. Per the University of Pittsburgh regalia colors, OTD students wear teal hoods signifying rehabilitation.

USEFUL TELEPHONE NUMBERS AND WEB ADDRESSES

The Book Center
http://www.pittuniversitystore.com/
412-648-1455
<table>
<thead>
<tr>
<th>Service</th>
<th>URL</th>
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<tr>
<td>Career Development</td>
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<tr>
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<td>Cool Pittsburgh</td>
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<tr>
<td>Information for Graduate Students</td>
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<td>Information Technology</td>
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<td>Office of Admissions and Financial Aid</td>
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<td>Office of International Services</td>
<td><a href="http://www.ois.pitt.edu/">http://www.ois.pitt.edu/</a></td>
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<td>Office of Veterans Services</td>
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<td>Parking, Transportation, and Services</td>
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<td>Police Department</td>
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<td>Campus Emergency</td>
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<td>Public Safety</td>
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<td><a href="http://www.studentaffairs.pitt.edu/shs/">http://www.studentaffairs.pitt.edu/shs/</a></td>
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412-383-1800

Graduate Studies – Student Services   http://www.pitt.edu/~graduate/services.html
STUDENT AND PROFESSIONAL ORGANIZATIONS

Graduate and Professional Student Association (GPSA)
The GPSA is the student government that represents the interests of all graduate and professional students at the University of Pittsburgh and serves as the umbrella organization for all of the graduate/professional school student governments. Our mission is to act as the voice of our constituents and to actively ensure that the concerns of these students are heard. Program and services offered by GPSA include annual funding for graduate and professional student organizations, travel grants to students presenting and/or attending conferences, free legal services, and sponsorship of additional activities.


University of Pittsburgh Student Occupational Therapy Association (UPSOTA)
The UPSOTA is a group of students who are interested in or are pursuing a degree in the field of occupational therapy. Members function to promote occupational therapy as a profession within Pittsburgh and the surrounding areas. UPSOTA members raise funds for activities such as attendance at state and national occupational therapy conferences, social events that enhance the students' educational experience, and community service events.

Visit [https://www.shrs.pitt.edu/current-students/student-groups](https://www.shrs.pitt.edu/current-students/student-groups) for more information and [http://www.shrs.pitt.edu/ot/students](http://www.shrs.pitt.edu/ot/students) to learn more about our students.

Pi Theta Epsilon (PTE)
PTE is a specialized honor society for occupational therapy students and alumni. This society recognizes and encourages superior scholarship among students enrolled in professional entry-level programs at accredited schools across the United States. Initiation of new members includes those OTD students who have demonstrated superior scholarship: those who are eligible shall rank not lower than the highest 35% of their class in scholarship and have a GPA of at least 3.5 on a scale of 4.0 since entering the occupational therapy program; and shall have completed the equivalent of nine semester hours in a professional graduate program in occupational therapy.

Visit [https://www.shrs.pitt.edu/ot/students/pi-theta-epsilon](https://www.shrs.pitt.edu/ot/students/pi-theta-epsilon), and [http://www.aotf.org/pithetaepsilon.aspx](http://www.aotf.org/pithetaepsilon.aspx) for more information.

American Occupational Therapy Association (AOTA)
The American Occupational Therapy Association (AOTA) is the nationally recognized professional association of occupational therapists, occupational therapy assistants, and students of occupational therapy. The AOTA advances the quality, availability, use, and support of occupational therapy through standard-setting, advocacy, education, and research on behalf of its members and the public. As a student member you ARE eligible to receive professional OT publications, reduced fees to the annual AOTA conference, and the opportunity to apply for scholarships offered by the American Occupational Therapy Foundation (AOTF).

Visit [http://www.aota.org](http://www.aota.org) for more information.

Pennsylvania Occupational Therapy Association (POTA)
The POTA is the predominant organization within the Commonwealth that advocates for, serves,
and represents the membership of Pennsylvania occupational therapy practitioners for the purpose of: preserving and advancing the scope of practice, insuring access to occupational therapy services, and providing a forum for lifelong professional learning. As a student member you receive POTA’s newsletter PennPoint, reduced fees to the annual POTA conference, and the opportunity to apply for the POTA scholarship.

Visit [http://www.pota.org](http://www.pota.org) for more information.

**World Federation of Occupational Therapists (WFOT)**
The WFOT is the official international organization for the promotion of occupational therapy. WFOT supports the development, use and practice of occupational therapy worldwide, demonstrating its relevance and contribution to society. WFOT membership can be obtained through AOTA.

Visit [http://www.wfot.org](http://www.wfot.org) for more information.
CERTIFICATION AND LICENSURE

CERTIFICATION EXAMINATION

OTD program graduates are eligible to sit for the national certification examination for the occupational therapist administered by the National Board for Certification in Occupational Therapy (NBCOT®). After successful completion of this examination, the individual will be an occupational therapist, registered (OTR). Candidates applying for the NBCOT® Certification Examination must answer questions regarding good moral character (e.g., whether he/she has ever been charged or convicted of a felony; had any professional license, registration, or certification revoked, suspended, or subject to probationary conditions; been found to have committed negligence, malpractice, reckless, or willful misconduct; been suspended and/or expelled from a college/university). A candidate may be barred from becoming certified by NBCOT® if an incident has a direct relationship to a potential violation of the Candidate/Certificant Code of Conduct (i.e., a felony conviction may prevent a graduate from taking this examination). Visit http://www.nbcot.org for more information.

LICENSURE AND STATE REGULATIONS

Occupational therapy is regulated in all 50 states, the District of Columbia, Puerto Rico and Guam. Different states have various types of regulation, including but not limited to licensure. The major purpose of regulation is to protect consumers in a state or jurisdiction from unqualified or unscrupulous practitioners.

The OTD student should contact the relevant state licensing agency to obtain the necessary information and/or an application. Each state differs in its procedures; however state licenses are usually based on the results of the NBCOT® Certification Examination (or pending results). Many states offer a Limited Permit or Temporary License to practice prior to successful completion of the certification examination or while a licensure application is being processed. Many states also inquire as to whether the applicant has been convicted of or pled guilty or nolo contendere to a crime (e.g., misdemeanor, felony, or illegal act associated with alcohol/substance abuse), or have charges pending and unresolved. A felony conviction may prevent a graduate from obtaining state licensure.

Students planning to apply for a license in the Pennsylvania should obtain information from the Pennsylvania State Board of Occupational Therapy Education and License. Visit http://www.dos.pa.gov/professionallicensing/boardscommissions/occupationaltherapy/Pages/default.aspx for more information.

Note: OTD program students/graduates requesting completion of forms verifying education status, graduation, fieldwork, etc. must make the request in writing and include all relevant information (e.g., full name, including maiden name if applicable; year of graduation; fieldwork sites and dates of affiliation; etc.). If the form requires the University seal there is no charge for completion, however, if the form requires notarization there is a fee of $10 for completion of the form (amount subject to change). Check or money order made payable to the University of Pittsburgh must be submitted with the request. If the student/graduate requests expedited mail service, the student/graduate is responsible for the associated costs.
APPENDIX A

2018 ACCREDITATION STANDARDS FOR A DOCTORAL-DEGREE-LEVEL EDUCATIONAL PROGRAM FOR THE OCCUPATIONAL THERAPIST
Accreditation Council for Occupational Therapy Education (ACOTE®) of the American Occupational Therapy Association, Inc.

Section B: Content Requirements

1.0  FOUNDATIONAL CONTENT REQUIREMENTS
Program content must be based on a broad foundation in the liberal arts and sciences. A strong foundation in the biological, physical, social, and behavioral sciences supports an understanding of occupation across the lifespan. If the content of the Standard is met through prerequisite coursework, the application of foundational content in the sciences must also be evident in professional coursework. The student will be able to:

1.1 Demonstrate knowledge of:
   • The structure and function of the human body to include the biological and physical sciences, neurosciences, kinesiology, and biomechanics.
   • Human development throughout the lifespan (infants, children, adolescents, adults, and older adults). Course content must include, but is not limited to, developmental psychology.
   • Concepts of human behavior to include the behavioral sciences, social sciences, and science of occupation.

1.2 Apply, analyze, and evaluate the role of sociocultural, socioeconomic, and diversity factors, as well as lifestyle choices in contemporary society to meet the needs of persons, groups, and populations. Course content must include, but is not limited to, introductory psychology, abnormal psychology, and introductory sociology or introductory anthropology.

1.3 Demonstrate knowledge of the social determinants of health for persons, groups, and populations with or at risk for disabilities and chronic health conditions. This must include an analysis of the epidemiological factors that impact the public health and welfare of populations.

1.4 Demonstrate the ability to use quantitative statistics and qualitative analysis to interpret tests and measurements for the purpose of establishing and delivering evidence-based practice.

2.0  OCCUPATIONAL THERAPY THEORETICAL PERSPECTIVES
Current and relevant interprofessional perspectives including rehabilitation, disability, and developmental as well as person/population-environment-occupation models, theories and frameworks of practice. The program must facilitate the development of the performance criteria listed below. The student will be able to:

2.1 Apply, analyze, and evaluate scientific evidence, theories, models of practice, and frames of reference that underlie the practice of occupational therapy to guide and inform interventions for persons, groups, and populations in a variety of practice
contexts and environments.

2.2 Explain the process of theory development in occupational therapy and its desired impact and influence on society.

3.0 BASIC TENETS OF OCCUPATIONAL THERAPY
Coursework must facilitate development of the performance criteria listed below. The student will be able to:

3.1 Analyze and evaluate occupational therapy history, philosophical base, theory, and sociopolitical climate and their importance in meeting society’s current and future occupational needs as well as how these factors influence and are influenced by practice.

3.2 Apply, analyze, and evaluate the interaction of occupation and activity, including areas of occupation, performance skills, performance patterns, context(s) and environments, and client factors.

3.3 Explain to consumers, potential employers, colleagues, third-party payers, regulatory boards, policymakers, and the general public the distinct nature of occupation and the evidence that occupation supports performance, participation, health, and well-being.

3.4 Apply, analyze, and evaluate scientific evidence to explain the importance of balancing areas of occupation; the role of occupation in the promotion of health; and the prevention of disease, illness, and dysfunction for persons, groups, and populations.

3.5 Analyze and evaluate the effects of disease processes including heritable diseases, genetic conditions, mental illness, disability, trauma, and injury on occupational performance.

3.6 Demonstrate activity analysis in areas of occupation, performance skills, performance patterns, context(s) and environments, and client factors to formulate the intervention plan.

3.7 Demonstrate sound judgment in regard to safety of self and others and adhere to safety regulations throughout the occupational therapy process as appropriate to the setting and scope of practice. This must include the ability to assess and monitor vital signs (e.g., blood pressure, heart rate, respiratory status, and temperature) to ensure that the client is stable for intervention.

4.0 REFERRAL, SCREENING, EVALUATION, AND INTERVENTION PLAN
The process of referral, screening, evaluation, and diagnosis as related to occupational performance and participation must be client centered; culturally relevant; and based on theoretical perspectives, models of practice, frames of reference, and available evidence.

INTERVENTION PLAN: FORMULATION AND IMPLEMENTATION

4.1 Demonstrate therapeutic use of self, including one’s personality, insights, perceptions, and judgments, as part of the therapeutic process in both individual and group interaction.

4.2 Demonstrate clinical reasoning to evaluate, analyze, diagnose, and provide occupation-based interventions to address client factors, performance patterns, and performance skills.

4.3 Utilize clinical reasoning to facilitate occupation-based interventions that address
client factors. This must include interventions focused on promotion, compensation, adaptation, and prevention.

4.4 Evaluate client(s)’ occupational performance, including occupational profile, by analyzing and selecting standardized and non-standardized screenings and assessment tools to determine the need for occupational therapy intervention(s). Assessment methods must take into consideration cultural and contextual factors of the client.

Interpret evaluation findings of occupational performance and participation deficits to develop occupation-based intervention plans and strategies.

Intervention plans and strategies must be client centered, culturally relevant, reflective of current occupational therapy practice, and based on available evidence.

4.5 Select and apply assessment tools, considering client needs, and cultural and contextual factors.

Administer selected standardized and nonstandardized assessments using appropriate procedures and protocols.

Interpret the results based on psychometric properties of tests considering factors that might bias assessment results (e.g., culture and disability status related to the person and context).

4.6 Collect, analyze, and report data in a systematic manner for evaluation of client and practice outcomes. Report evaluation results and modify practice as needed.

4.7 Interpret criterion-referenced and norm-referenced standardized test scores on the basis of an understanding of sampling, normative data, standard and criterion scores, reliability, and validity.

4.8 Interpret the evaluation data in relation to accepted terminology of the profession and explain the findings to the interprofessional team.

4.9 Design and implement intervention strategies to remediate and/or compensate for functional cognitive deficits, visual deficits, and psychosocial and behavioral health deficits that affect occupational performance.

4.10 Recommend and provide direct interventions and procedures to persons, groups, and populations to enhance safety, health and wellness, and performance in occupations. This must include the ability to select and deliver occupations and activities, preparatory methods and tasks (including therapeutic exercise), education and training, and advocacy.

4.11 Assess the need for and demonstrate the ability to design, fabricate, apply, fit, and train in assistive technologies and devices (e.g., electronic aids to daily living, seating and positioning systems) used to enhance occupational performance and foster participation and well-being.

4.12 Assess the need for orthotics, and design, fabricate, apply, fit, and train in orthoses and devices used to enhance occupational performance and participation. Train in the safe and effective use of prosthetic devices.

4.13 Provide recommendations and training in techniques to enhance functional mobility, including physical transfers, wheelchair management, and mobility devices.

4.14 Evaluate the needs of persons, groups, and populations to design programs that
enhance community mobility, and implement transportation transitions, including
driver rehabilitation and community access.

4.15 Demonstrate knowledge of the use of technology in practice, which must include:
   • Electronic documentation systems
   • Virtual environments
   • Telehealth technology

4.16 Evaluate and provide interventions for dysphagia and disorders of feeding and
eating to enable performance, and train others in precautions and techniques while
considering client and contextual factors.

4.17 Demonstrate knowledge and use of the safe and effective application of superficial
thermal agents, deep thermal agents, electrotherapeutic agents, and mechanical
devices as a preparatory measure to improve occupational performance. This must
include indications, contraindications, and precautions.

4.18 Assess, grade, and modify the way persons, groups, and populations perform
occupations and activities by adapting processes, modifying environments, and
applying ergonomic principles to reflect the changing needs of the client,
sociocultural context, and technological advances.

4.19 Demonstrate, evaluate, and plan the consultative process with persons, groups,
programs, organizations, or communities in collaboration with inter- and
intraprofessional colleagues.

4.20 Demonstrate, evaluate, and plan care coordination, case management, and
transition services in traditional and emerging practice environments.

4.21 Demonstrate, evaluate, and utilize the principles of the teaching–learning process
using educational methods and health literacy education approaches:
   • To design activities and clinical training for persons, groups, and populations.
   • To instruct and train the client, caregiver, family, significant others, and
   communities at the level of the audience.

4.22 Monitor and reassess, in collaboration with the client, caregiver, family, and
significant others, the effect of occupational therapy intervention and the need for
continued or modified intervention.

4.23 Identify occupational needs through effective communication with patients,
families, communities, and members of the interprofessional team in a responsive
and responsible manner that supports a team approach to the promotion of health
and wellness.

4.24 Demonstrate effective intraprofessional OT/OTA collaboration to:
   • Identify the role of the occupational therapist and occupational therapy
   assistant in the screening and evaluation process.
   • Demonstrate and identify techniques in skills of supervision and
   collaboration with occupational therapy assistants.

4.25 Demonstrate knowledge of the principles of interprofessional team dynamics to
perform effectively in different team roles to plan, deliver, and evaluate patient- and
population-centered care as well as population health programs and policies that
are safe, timely, efficient, effective, and equitable.

4.26 Evaluate and discuss mechanisms for referring clients to specialists both internal and
external to the profession, including community agencies.

4.27 Evaluate access to community resources, and design community or primary care programs to support occupational performance for persons, groups, and populations.

4.28 Develop a plan for discharge from occupational therapy services in collaboration with the client and members of the interprofessional team by reviewing the needs of the client, caregiver, family, and significant others; available resources; and discharge environment.

4.29 Demonstrate knowledge of various reimbursement systems and funding mechanisms (e.g., federal, state, third party, private payer), appeals mechanisms, treatment/diagnosis codes (e.g., CPT®, ICD, DSM® codes), and coding and documentation requirements that affect consumers and the practice of occupational therapy.

Documentation must effectively communicate the need and rationale for occupational therapy services.
5.0 CONTEXT OF SERVICE DELIVERY, LEADERSHIP, AND MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES

Context of service delivery includes knowledge and understanding of the various contexts, such as professional, social, cultural, political, economic, and ecological, in which occupational therapy services are provided.

Management and leadership skills of occupational therapy services include the application of principles of management and systems in the provision of occupational therapy services to persons, groups, populations, and organizations.

The program must facilitate development of the performance criteria listed below. The student will:

5.1 Identify, analyze, and evaluate the contextual factors; current policy issues; and socioeconomic, political, geographic, and demographic factors on the delivery of occupational therapy services for persons, groups, and populations to promote policy development and social systems as they relate to the practice of occupational therapy.

5.2 Identify, analyze, and advocate for existing and future service delivery models and policies, and their potential effect on the practice of occupational therapy and opportunities to address societal needs.

5.3 Demonstrate knowledge of and evaluate the business aspects of practice including, but not limited to, the development of business plans, financial management, program evaluation models, and strategic planning.

5.4 Identify and evaluate the systems and structures that create federal and state legislation and regulations and their implications and effects on persons, groups, and populations, as well as practice and policy.

5.5 Provide care and programs that demonstrate knowledge of applicable national requirements for credentialing and requirements for licensure, certification, or registration consistent with federal and state laws.

5.6 Demonstrate leadership skills in the ability to plan, develop, organize, and market the delivery of services to include the determination of programmatic needs and service delivery options, and formulation and management of staffing for effective service provision.

5.7 Demonstrate leadership skills in the ability to design ongoing processes for quality management and improvement (e.g., outcome studies analysis and client engagement surveys) and develop program changes as needed to demonstrate quality of services and direct administrative changes.

5.8 Develop strategies for effective, competency-based legal and ethical supervision of occupational therapy and non–occupational therapy personnel. Analyze staff development and professional abilities and competencies of supervised staff as they relate to job responsibilities.

6.0 SCHOLARSHIP

Promotion of science and scholarly endeavors will serve to describe and interpret the scope of the profession, build research capacity, establish new knowledge, and interpret and apply this knowledge to practice. The program must facilitate development of the performance criteria listed below. The student will be able to:
6.1 Critique quantitative and qualitative research in order to analyze and evaluate scholarly activities, which contribute to the development of a body of knowledge. This includes the:

• Level of evidence
• Validity of research studies
• Strength of the methodology
• Relevance to the profession of occupational therapy

Locate, select, analyze, and evaluate scholarly literature to make evidence-based decisions.

Design and implement a scholarly study that aligns with current research priorities and advances knowledge translation, professional practice, service delivery, or professional issues (e.g., Scholarship of Integration, Scholarship of Application, Scholarship of Teaching and Learning).

This may include a literature review that requires analysis and synthesis of data.

Systematic reviews that require analysis and synthesis of data meet the requirement for this Standard.

6.2 Select, apply, and interpret quantitative and qualitative methods for data analysis to include:

• Basic descriptive, correlational, and inferential quantitative statistics.
• Analysis and synthesis of qualitative data.

6.3 Create scholarly reports appropriate for presentation or for publication in a peer-reviewed journal that support skills of clinical practice. The reports must be made available to professional or public audiences.

6.4 Demonstrate an understanding of the process of locating and securing grants and how grants can serve as a fiscal resource for scholarly activities and program development. Create grant proposals to support scholarly activities and program development.

6.5 Demonstrate an understanding of how to design a scholarly proposal in regards to ethical policies and procedures necessary to conduct human-subject research, educational research, or research related to population health.

6.6 Demonstrate an understanding and apply the principles of instructional design and teaching and learning in preparation for work in an academic setting.

7.0 PROFESSIONAL ETHICS, VALUES, AND RESPONSIBILITIES

Professional ethics, values, and responsibilities include an understanding and appreciation of ethics and values of the profession of occupational therapy. Professional behaviors include the ability to advocate for social responsibility and equitable services to support health equity and address social determinants of health; commit to engaging in lifelong learning; and evaluate the outcome of services, which include client engagement, judicious health care utilization, and population health. The program must facilitate development of the performance criteria listed below. The student will be able to: B
7.1 Demonstrate knowledge of the American Occupational Therapy Association (AOTA) Occupational Therapy Code of Ethics and AOTA Standards of Practice and use them as a guide for ethical decision making in professional interactions, client interventions, employment settings, and when confronted with personal and organizational ethical conflicts.

7.2 Demonstrate knowledge of how the role of a professional is enhanced by participating and engaging in local, national, and international leadership positions in organizations or agencies.

7.3 Promote occupational therapy by educating other professionals, service providers, consumers, third-party payers, regulatory bodies, and the public.

7.4 Identify and develop strategies for ongoing professional development to ensure that practice is consistent with current and accepted standards.

7.5 Demonstrate knowledge of personal and professional responsibilities related to:
   - Liability issues under current models of service provision.
   - Varied roles of the occupational therapist providing service on a contractual basis.

Section C: Fieldwork Education

1.0 FIELDWORK EDUCATION

Fieldwork education is a crucial part of professional preparation and is best integrated as a component of the curriculum design. The fieldwork experience is designed to promote clinical reasoning and reflective practice, transmit the values and beliefs that enable ethical practice, and develop professionalism and competence in career responsibilities. Fieldwork experiences should be implemented and evaluated for their effectiveness by the educational institution. The experience should provide the student with the opportunity to carry out professional responsibilities under the supervision of qualified personnel serving as a role model. The academic fieldwork coordinator is responsible for the program’s compliance with fieldwork education requirements. The academic fieldwork coordinator will:

1.1 Ensure that the fieldwork program reflects the sequence and scope of content in the curriculum design, in collaboration with faculty, so that fieldwork experiences in traditional, nontraditional, and emerging settings strengthen the ties between didactic and fieldwork education.

1.2 Document the criteria and process for selecting fieldwork sites, to include maintaining memoranda of understanding, complying with all site requirements, maintaining site objectives and site data, and communicating this information to students prior to the start of the fieldwork experience.

1.3 Document that academic and fieldwork educators agree on established fieldwork objectives prior to the start of the fieldwork experience, and communicate with the student and fieldwork educator about progress and performance throughout the fieldwork experience.

1.4 Ensure that fieldwork objectives for all experiences include a psychosocial objective.
of occupational therapy practice, and the ability to provide frequent assessment of student progress in achieving stated fieldwork objectives.

1.5 Ensure that fieldwork agreements are sufficient in scope and number to allow completion of graduation requirements in a timely manner, in accordance with the policy adopted by the program as required by Standard A.4.7.

1.6 The program must have evidence of valid memoranda of understanding in effect and signed by both parties from the onset to conclusion of the Level I fieldwork and the Level II fieldwork if it involves an entity outside of the academic program. (Electronic memoranda of understanding and signatures are acceptable.) Responsibilities of the sponsoring institution(s) and each fieldwork site must be clearly documented in the memorandum of understanding.

1.7 At least one fieldwork experience (either Level I or Level II) must address practice in behavioral health, or psychological and social factors influencing engagement in occupation.

The goal of Level I fieldwork is to introduce students to fieldwork, apply knowledge to practice, and develop understanding of the needs of clients. The program will:

1.8 Ensure that personnel who supervise Level I fieldwork are informed of the curriculum and fieldwork program design and affirm their ability to support the fieldwork experience. This must occur prior to the onset of the Level I fieldwork. Examples include, but are not limited to, currently licensed or otherwise regulated occupational therapists and occupational therapy assistants, psychologists, physician assistants, teachers, social workers, physicians, speech language pathologists, nurses, and physical therapists.

1.9 Document that Level I fieldwork is provided to students and is not substituted for any part of the Level II fieldwork. Ensure that Level I fieldwork enriches didactic coursework through directed observation and participation in selected aspects of the occupational therapy process, and includes mechanisms for formal evaluation of student performance.

The program must have clearly documented student learning objectives expected of the Level I fieldwork. Level I fieldwork may be met through one or more of the following instructional methods:

- Simulated environments
- Standardized patients
- Faculty practice
- Faculty-led site visits
- Supervision by a fieldwork educator in a practice environment

All Level I fieldwork must be comparable in rigor.

The goal of Level II fieldwork is to develop competent, entry-level, generalist occupational therapists. Level II fieldwork must be integral to the program’s curriculum design and must include an in-depth experience in delivering occupational therapy services to clients, focusing on the application of purposeful and meaningful occupation and research, administration, and management of occupational therapy services. It is recommended that the student be exposed to a variety of clients across the lifespan and to a variety of
settings. The program will:

1.10 Require a minimum of 24 weeks’ full-time Level II fieldwork. This may be completed on a part-time basis, as defined by the fieldwork placement in accordance with the fieldwork placement’s usual and customary personnel policies, as long as it is at least 50% of an FTE at that site. The student can complete Level II fieldwork in a minimum of one setting if it is reflective of more than one practice area, or in a maximum of four different settings.

1.11 Document and verify that the student is supervised by a currently licensed or otherwise regulated occupational therapist who has a minimum of 1 year full-time (or its equivalent) of practice experience as a licensed or otherwise regulated occupational therapist prior to the onset of the Level II fieldwork. Ensure that the student supervisor is adequately prepared to serve as a fieldwork educator prior to the Level II fieldwork. The supervising therapist may be engaged by the fieldwork site or by the educational program.

1.12 Document a mechanism for evaluating the effectiveness of supervision (e.g., student evaluation of fieldwork) and for providing resources for enhancing supervision (e.g., materials on supervisory skills, continuing education opportunities, articles on theory and practice).

1.13 Ensure that Level II fieldwork supervision is direct and then decreases to less direct supervision as appropriate for the setting, the severity of the client’s condition, and the ability of the student to support progression toward entry-level competence.

1.14 Document and verify that supervision provided in a setting where no occupational therapy services exist includes a documented plan for provision of occupational therapy services and supervision by a currently licensed or otherwise regulated occupational therapist with at least 3 years’ full-time or its equivalent of professional experience prior to the Level II fieldwork. Supervision must include a minimum of 8 hours of direct supervision each week of the fieldwork experience. An occupational therapy supervisor must be available, via a variety of contact measures, to the student during all working hours. An on-site supervisor designee of another profession must be assigned while the occupational therapy supervisor is off site.

1.15 Document mechanisms for requiring formal evaluation of student performance on Level II fieldwork (e.g., the AOTA Fieldwork Performance Evaluation for the Occupational Therapy Student or equivalent).

1.16 Document and verify that students attending Level II fieldwork outside the United States are supervised by an occupational therapist who graduated from a program approved by the World Federation of Occupational Therapists and has at least 1 year of experience in practice prior to the onset of Level II fieldwork.

Section D – Doctoral Capstone
The doctoral capstone shall be an integral part of the program’s curriculum design. The goal of the doctoral capstone is to provide an in-depth exposure to one or more of the following: clinical practice skills, research skills, administration, leadership, program and policy development, advocacy, education, and theory development. The doctoral capstone consists of two parts:
• Capstone project
• Capstone experience

The student will complete an individual capstone project to demonstrate synthesis and application of knowledge gained.

The student will complete an individual 14-week capstone experience that must be started after completion of all coursework and Level II fieldwork, and completion of preparatory activities defined in D.1.3.

The doctoral capstone coordinator will:

1.1 Ensure that the doctoral capstone reflects the sequence and scope of content in the curriculum design so the doctoral capstone can allow for development of indepth knowledge in the designated area of interest.

1.2 Ensure that the doctoral capstone is designed through collaboration of the faculty and student, and provided in setting(s) consistent with the program's curriculum design, including individualized specific objectives and plans for supervision.

1.3 Ensure that preparation for the capstone project includes a literature review, needs assessment, goals/objectives, and an evaluation plan. Preparation should align with the curriculum design and sequence and is completed prior to the commencement of the 14-week doctoral capstone experience.

1.4 Ensure that there is a valid memorandum of understanding for the doctoral capstone experience, that, at a minimum, includes individualized specific objectives, plans for supervision or mentoring, and responsibilities of all parties. The memorandum of understanding must be signed by both parties.

1.5 Require that the length of the doctoral capstone experience be a minimum of 14 weeks (560 hours). This may be completed on a part-time basis and must be consistent with the individualized specific objectives and capstone project. No more than 20% of the 560 hours can be completed off site from the mentored practice setting(s), to ensure a concentrated experience in the designated area of interest. Time spent off site may include independent study activities such as research and writing. Prior fieldwork or work experience may not be substituted for this doctoral capstone experience.

1.6 Document and verify that the student is mentored by an individual with expertise consistent with the student’s area of focus prior to the onset of the doctoral capstone experience. The mentor does not have to be an occupational therapist.

1.7 Document a formal evaluation mechanism for objective assessment of the student’s performance during and at the completion of the doctoral capstone experience.

1.8 Ensure completion and dissemination of an individual doctoral capstone project that relates to the doctoral capstone experience and demonstrates synthesis of in-depth knowledge in the focused area of study.
APPENDIX B

LEVEL II FIELDWORK ACKNOWLEDGMENT AGREEMENT

Student Name: __________________________________________________

Fieldwork Site: __________________________________________________

Placement Date: ________________________________________________

Fieldwork Site: __________________________________________________

Placement Date: ________________________________________________

Fieldwork Site: __________________________________________________

Placement Date: ________________________________________________

I have reviewed and acknowledge my Level II fieldwork assignments. I verify that I am aware that I am responsible to provide my assigned fieldwork sites with a copy of my personal and medical documents including, but not limited to, Fieldwork Personal Data Sheet, Initial and Annual Health Appraisal Forms, drug screen, HIPAA certifications, Blood Borne Pathogen Training certification, First Aid/CPR/AED certification, proof of health insurance, and clearances (criminal record check, child abuse history, and fingerprint-based background checks). I also understand that my fieldwork site may have additional pre-placement requirements and it is my responsibility to complete any and all requirements prior to beginning fieldwork.

I understand that should the fieldwork site cancel my assignment for any reason, every effort will be made by the University to secure an alternate fieldwork site that considers the student’s interests and is similar to the original placement dates.

I also understand that I am not to request a change in my assigned Level II fieldwork site. If I choose to request a change for any reason, my request will be addressed only after other students have been assigned. There is no guarantee that a similar site can be secured. There is also no guarantee that any alternate site can be located in a timely manner. Hence, I may need to delay beginning my fieldwork and this delay could extend to 6 months or beyond and would delay my graduation.

I understand the above policies and agree to abide by them.

If I have questions regarding fieldwork, I will make an appointment with the Academic Fieldwork Coordinator for clarification.

________________________________________
Signature of Student

______________________________________
Date
APPENDIX C

Student Agreement to Participate in Clinical Education
Release of Information Form

I, ________________________________ am a student in the Department of Occupational Therapy, School of Health & Rehabilitation Sciences, the University of Pittsburgh. I understand and agree in accordance with the curriculum requirements outlined in the department student handbook that in order to complete the program in which I am enrolled, I will be required to compete clinical education placements within facilities external to the University, and such facilities will require criminal background checks and drug screens prior to the start of the experience. Additionally, in order to become licensed, many states will inquire as to whether the applicant has been convicted of a misdemeanor, a felony, or a felonious or illegal act associated with alcohol and/or substance abuse. Should I fail a check, clearance and/or drug screen, I understand that the Department cannot guarantee that it will be able to place me in a facility in order to meet my clinical education requirements for graduation. Nor can the Department guarantee that these results may not affect my future ability to be licensed.

I also understand and agree that while I am participating in clinical education, that I am not covered by workman’s compensation for any accident/injury that may occur during my time on site. I understand that I, or my medical insurance plan, are responsible for all expenses incurred and that the University of Pittsburgh and the Department of Occupational Therapy assumes no responsibility or liability for any injury I might sustain. Therefore, I specifically release the University of Pittsburgh, its schools, departments, agencies, officers, directors, and employees from any such responsibility or liability.

I further understand and agree that during my clinical education, I may be placed at a facility that may require me to utilize a personal vehicle for transportation purposes. I am responsible for insuring that I have adequate and appropriate automobile insurance and a valid driver’s license prior to using a personal vehicle during a clinical education experience. I accept this responsibility and I specifically release the University of Pittsburgh, its schools, departments, agencies, officers, directors, and employees from any such responsibility or liability.

Release of Information

Prior to the start of each clinical education experience, the Department of Occupational Therapy will send requested student information to the clinical site for review and verification that I meet their requirements for clinical placement. This may include clearances, certifications, health information, demographic information, and resumes.

I hereby give my permission to the Department of Occupational Therapy at the University of Pittsburgh, to release any and all information required for clinical education purposes to a contracted facility as requested. Release does not apply to my application materials, personal references, or transcripts.
I understand that under the Family Educational Rights and Privacy Act (FERPA) that I have the right not to consent to the release of my educational records and I have the right to receive a copy of such records upon request.

My signature on this agreement indicates that I have read and understand this agreement and represents that I meet all criteria listed above.

Student name __________________________________________________

Student signature________________________________________________

Date___________________________

OTD Manual 06-15-20
Page 65
APPENDIX D

University of Pittsburgh
Department of Occupational Therapy

STUDENT WAIVER FOR FACULTY/STAFF REFERENCE

I, _____________________________________ [print student’s name], hereby authorize _____________________________________ [print name of faculty/staff member] of the University of Pittsburgh to release my educational record information for the purpose of providing a written and/or oral reference to the following: [check all that apply]

☐ Any and all potential employers
☐ Any and all scholarship and award opportunities
☐ Specific recipient(s): __________________________________________________________

I understand that by signing this authorization, I am waiving my rights of nondisclosure of these records under federal law only to the person(s)/organization(s) specifically listed. This release does not permit the disclosure of these records to any other persons or entities without my written consent or as permitted by law.

I further understand that I do not have to consent to this disclosure and that I may revoke the authorization by sending a written revocation of this authorization to the University of Pittsburgh’s Department of Occupational Therapy.

I understand that any revocation of authority hereunder would only govern subsequent releases and only be valid from the time of the University of Pittsburgh’s actual receipt of a written notice.

__________________________________________  ______________________________________
[student signature]  [date]
APPENDIX E

University of Pittsburgh
Department of Occupational Therapy

OTD PROFESSIONAL BEHAVIOR EVALUATION

Instructions: There are two primary purposes of the OTD Professional Behavior Evaluation system: 1) to verify mastery in professional behavior and 2) to serve as a method to change behavior.

In attempting to change behavior it is necessary to identify, evaluate, and document the behavior. The eleven professional behavior characteristics form the basis of this evaluation. The rating options are: No Problem, Potential Problem, and Problem. Examples of professional behavior specific to each characteristic are included on the evaluation form. This is not an all-inclusive list, but serves to help the evaluator in making judgments. Any characteristic rated as a Potential Problem or Problem requires an explanation including specific behaviors and corrective actions.

The evaluator is to focus on patterns of behavior, not isolated instances that fall outside the student’s normal performance. For example, an OTD student who is consistently on time and prepared for class may have demonstrated competence in time management and should not be penalized for an isolated emergency that makes him or her late for one class. Conversely, if the OTD student is consistently late for class, he/she should be counseled and if the behavior continues, rated as Problem for the characteristic of time management/organization.
### OTD PROFESSIONAL BEHAVIOR EVALUATION
Department of Occupational Therapy
University of Pittsburgh

Student: ______________________ Evaluator: ______________________ Date: __________

<table>
<thead>
<tr>
<th>1. INTEGRITY/DEPENDABILITY</th>
<th>No Problem [ ] Potential Problem [ ] Problem [ ]</th>
</tr>
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<tbody>
<tr>
<td>Examples of professional behavior include, but are not limited to: Consistent honesty; reliability; being able to be trusted with the property of others; can be trusted with confidential information; complete and accurate documentation of patient/client care and learning activities.</td>
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<table>
<thead>
<tr>
<th>2. EMPATHY</th>
<th>No Problem [ ] Potential Problem [ ] Problem [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examples of professional behavior include, but are not limited to: Showing compassion for others; responding appropriately to the emotional response of patients/clients and family members; demonstrating respect for others; demonstrating a calm, compassionate, and helpful demeanor toward those in need; a good listener; being supportive and reassuring to others.</td>
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<thead>
<tr>
<th>3. SELF–MOTIVATION/INITIATION</th>
<th>No Problem [ ] Potential Problem [ ] Problem [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examples of professional behavior include, but are not limited to: Taking initiative to complete assignments; taking initiative to improve and/or correct behavior; taking on and following through on tasks without constant supervision; showing enthusiasm for learning and improvement; consistently striving for excellence in all aspects of patient/client care and professional activities; accepting constructive feedback in a positive manner; taking advantage of learning opportunities.</td>
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<thead>
<tr>
<th>4. APPEARANCE AND PERSONAL HYGIENE</th>
<th>No Problem [ ] Potential Problem [ ] Problem [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examples of professional behavior include, but are not limited to: Clothing is appropriate, neat, clean and well maintained; good personal hygiene and grooming, appropriate body language.</td>
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<tr>
<th>5. SELF – CONFIDENCE</th>
<th>No Problem [ ] Potential Problem [ ] Problem [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examples of professional behavior include, but are not limited to: Demonstrating the ability to trust personal judgment; demonstrating an awareness of strengths and limitations; exercises good personal judgment.</td>
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<tr>
<th>6. COMMUNICATIONS</th>
<th>No Problem [ ] Potential Problem [ ] Problem [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examples of professional behavior include, but are not limited to: Speaking clearly; writing legibly; using correct grammar; and punctuation; listening actively; adjusting communication strategies to various situations.</td>
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<tr>
<th>7. TIME MANAGEMENT/ORGANIZATION</th>
<th>No Problem [ ] Potential Problem [ ] Problem [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examples of professional behavior include, but are not limited to: Consistent punctuality; completing tasks and assignments on time; demonstrates the ability to plan ahead.</td>
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<table>
<thead>
<tr>
<th>8. SUPERVISORY RELATIONSHIPS/TEAMWORK</th>
<th>No Problem [ ] Potential Problem [ ] Problem [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examples of professional behavior include, but are not limited to: Placing the success of others above self interest; not undermining the team/peers; helping and supporting other team/peer/faculty members; showing respect for all team/peer/faculty members; remaining flexible and open to change; gives/receives feedback from supervisors appropriately; communicating with others to resolve problems.</td>
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<thead>
<tr>
<th>9. RESPECT/COOPERATION</th>
<th>No Problem [ ] Potential Problem [ ] Problem [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examples of professional behavior include, but are not limited to: Being polite and considerate to others; not using derogatory or demeaning terms; collaborates with others; behaving in a manner that brings credit to the profession.</td>
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<tr>
<th>10. PATIENT/CLIENT ADVOCACY (CONFIDENTIALITY)</th>
<th>No Problem [ ] Potential Problem [ ] Problem [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examples of professional behavior include, but are not limited to: Not allowing personal bias to or feelings to interfere with patient/client care; placing the needs of patients/clients above self interest; protecting and respecting patient confidentiality and dignity.</td>
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<tr>
<th>11. CLINICAL REASONING/ DELIVERY OF SERVICE</th>
<th>No Problem [ ] Potential Problem [ ] Problem [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examples of professional behavior include, but are not limited to: critical thinking, patient/client-centered problem solving; demonstrating careful and safe procedures; following policies, procedures, and protocols; following instructions.</td>
<td></td>
</tr>
</tbody>
</table>

Adapted from Affective Student Evaluations, Emergency Medicine Program, University of Pittsburgh, Pittsburgh, PA.

Use the back of this form to explain all Potential Problem or Problem ratings. Identify specific behaviors and corrective actions.
APPENDIX F

UNIVERSITY OF PITTSBURGH
School of Health and Rehabilitation Sciences
Department of Occupational Therapy

OT STUDENT INFORMATION FORM

PLEASE PRINT CLEARLY

Name: ___________________________________________ PeopleSoft #: __________________

CONSISTENT WITH HIPAA REGULATIONS, PLEASE PROVIDE THE FOLLOWING EMERGENCY
INFORMATION ON A “NEED TO KNOW” BASIS.

1. Do you have any pertinent health condition(s) or allergies which may have the potential to
result in a medical emergency? (examples: Diabetes, Allergic to Penicillin)
( ) YES ( ) NO If yes, please describe:

2. Are you currently taking any medication(s) which may have the potential to result in a medical
emergency?
( ) YES ( ) NO If yes, please identify:

4. Who should be contacted in case of emergency?

Name: _________________________________ Relationship: ___________________
Telephone: (____)_________________ Work Telephone: (____)_________________

Name: _________________________________ Relationship: ___________________
Telephone: (____)_________________ Work Telephone: (____)_________________
The following resources were identified by the Department of Occupational Therapy. If there is an organization not listed that you would recommend, please send the information to OTPitt@shrs.pitt.edu

**Department of Occupational Therapy**
Joan C. Rogers Occupational Therapy Award
Caroline Robinson Brayley Occupational Therapy Student Enrichment Fund
Department of Occupational Therapy Award of Professional Excellence

**University of Pittsburgh**
Financial Aid 412-624-7488
https://oafa.pitt.edu/learn-about-aid/
Financial Aid Representatives for the School of Health and Rehabilitation Sciences
Kellie Beach, Registrar 412-383-6554
Anne Pascasio Scholarship Fund
School of Health and Rehabilitation Sciences, Office of Student Services
Nationality Rooms and Intercultural Exchange Program Scholarships
http://www.nationalityrooms.pitt.edu/scholarshipsgrants
Provost’s Office Funds for Disadvantaged Students
Office of the Student Life, 140 William Pitt Union, 412-648-7830
PittFund$Me (scholarship opportunities that are tailored to you)
Log into my.pitt.edu and select PittFund$Me; set up a profile; refresh your profile often (at least twice a year is recommended); apply for the scholarships that interest you

**Other Resources**
Alpha Kappa Alpha Educational Advancement Foundation, Inc.
http://www.akaeaf.org/
AMBUCS
http://www.ambucs.org/
American Occupational Therapy Association (AOTA)
American Occupational Therapy Foundation (AOTF)
http://www.aotf.org/scholarshipsgrants
Back to College
http://www.back2college.com/library/finad.htm
College Answer
www.mycollegescholarship.org
College Board Scholarship Search
http://apps.collegeboard.com/cbsearch_ss/welcome.jsp
College Connection Scholarships
http://www.collegescholarships.com

Commonwealth Workforce Development System – Pennsylvania Career Link
http://www.cwds.state.pa.us

COS Funding Opportunities
https://www.library.pitt.edu/pivot-cos-funding-opportunities

Daughters of the American Revolution
http://www.dar.org/natsociety/edout_scholar.cfm

Department of Veterans Affairs
http://www.gibill.va.gov/

FastWEB Scholarship Search
http://fastweb.monster.com/

Free Application for Federal Student Aid (FAFSA)
http://www.fafsa.ed.gov/

Gates Millennium Scholars (The)
https://scholarships.gmmsp.org/Program/Details/7123dfc6-da55-44b7-a900-0c08ba1ac35c

Guaranteed Scholarships
http://www.guaranteed-scholarships.com/

Harry S. Truman Scholarship Foundation (The)
http://www.truman.gov/

Hispanic Scholarship Fund (The)
http://hsf.net

Jack Kent Cooke Foundation
http://www.jkcf.org/

Jackie Robinson Foundation
http://www.jackierobinson.org/

LULAC National Educational Service Centers
http://www.lnesc.org/

Mapping Your Future
http://mappingyourfuture.org/

Marine Corps Scholarship Foundation
http://www.mcsf.org/

Pennsylvania Occupational Therapy Association (POTA)
The Reba M. Sebelist Award
http://pota.site-ym.com/?page=studentscholarship
POTA Scholarship Fund
http://www.pota.org

Pittsburgh Foundation (The)
http://www.pittsburghfoundation.org/

Pittsburgh Schweitzer Fellows Program (The)
http://schweitzerfellowship.org/

Ron Brown Scholar Program (The)
http://www.ronbrown.org/
Roothbert Fund Scholarships  
http://roothbertfund.org/scholarships.php

Sallie Mae  
http://www.salliemae.com/

Scholarship & Financial Aid Help  
http://www.blackexcel.org/fin-sch.htm

Scholarships & Resources for African Americans  
https://www.edumed.org/financial-aid/african-american-student-scholarships-resources/

Scholarships & Resources for Minority Students  
https://www.publicservicedegrees.org/financial-aid/minority-students-scholarships-resources/

Scholarships.com  
http://www.scholarships.com

Smart Student Guide to Financial Aid (The)  
http://www.finaid.org/loans/

State Farm Insurance  
http://www.statefarm.com/about/part_spos/grants/grants.asp

Tylenol Scholarship (The)  

United Negro College Fund  
http://www.uncf.org/

U.S. Department of Education  

U.S. Department of Health and Human Services, Bureau of Health Profession  
http://bhpr.hrsa.gov/index.html

U.S. Federal Government Student Financial Aid Programs  
http://www.fedmoney.org

Zonta International  
http://zontadistrict4.org/
APPENDIX H

**Required Documents**

All required documents are maintained with the Department of Occupational Therapy. OTD students will receive detailed information from the Department regarding completion and submission of required documents.

<table>
<thead>
<tr>
<th>Document</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Health Appraisal</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Health Appraisal</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>10 Panel Drug Screen</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Personal Health Insurance</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>First Aid Training</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CPR/AED Training (Adult/Child)</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recognizing and Reporting Child Abuse: Mandated and Permissive Reporting in Pennsylvania</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Module: Bloodborne Pathogen Training</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Module: Information Privacy and Security Awareness Training for Physicians, Mid-level Providers, Dentists, Staff and Students Who Are Not Employed by UPMC but Who Encounter Protected Health Information in UPMC Facilities</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Module (CITI): Biomedical Course</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Module (CITI): Responsible Conduct of Research</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Module (CITI): Conflicts of Interest</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Module (CITI): GCP – Social and Behavioral Research Best Practice for Clinical Research</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Module (CITI): Privacy and Information Security</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>PA Background Check (Criminal Abuse Clearance)</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>PA Child Abuse Clearance</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>PA DHS Fingerprint-based Background Check</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>PA DOE Fingerprint-based Background Check</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Influenza Vaccination</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

Note: List of required documents and due dates is subject to change. OTD students are responsible for any and all costs incurred to complete and maintain required documents.
MANUAL ACKNOWLEDGEMENT AGREEMENT

I have read the Manual for the Doctor of Occupational Therapy (OTD) Student in its entirety. I understand all the policies and procedures included in this manual and agree to abide by them at all times while enrolled as an OTD student in the Department of Occupational Therapy, School of Health and Rehabilitation Sciences, at the University of Pittsburgh. If I have questions at any time regarding the content of the Manual, I will make an appointment with my Academic Advisor for clarification.

☐ Yes  ☐ No

I agree that any photos and videos taken during education related activities (curricular and extracurricular) may be used by the Department of Occupational Therapy, with or without my name attached to the photo or video, for recruitment, educational, and promotional materials.

☐ Yes  ☐ No

I give permission to the faculty of the Department of Occupational Therapy to share samples of my academic products for future educational purposes (e.g., accreditation, curriculum review, models for future students).

☐ Yes  ☐ No

I understand that the authorization for photos and videos and samples of my academic products is indefinite; however, I may revoke authorization by sending a signed, written revocation of the authorization to:

Department of Occupational Therapy
University of Pittsburgh
Bridgeside Point I
100 Technology Drive, Suite 350
Pittsburgh, PA 15219

Revocation of authorization will only be effective upon the date of receipt going forward and will not impact prior disclosures. I further understand that: 1) I am not required to consent to the disclosure, and 2) I am doing so knowingly and voluntarily.

____________________________________
Name of Student – PLEASE PRINT

____________________________________  ______________________________
Signature of Student  Date

PLEASE RETURN to the Department of Occupational Therapy Administrative Assistant by September 15, 2020.