

Stony Brook University

**OCCUPATIONAL
THERAPY PROGRAM**

Student Manual



June 2015

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Introduction

Welcome!!! We hope your experience as a student in the Occupational Therapy program at Stony Brook University will be rewarding. You are embarking on a road that will lead you to a wonderful, fulfilling career.

This manual has been created to further introduce you to the Occupational Therapy program. It is important that you use this manual in conjunction with the School of Health Technology and Management Bulletin for 2014-2015 and with the SHTM Student Handbook of Policies and Procedures. Each publication is regularly updated and will be helpful to you in your current and future clinical and academic endeavors. Please keep the manual, bulletin, and handbook in an easily accessible place so that you can refer to each for policy and procedure clarification throughout your Stony Brook University experience.

Any information in this manual is subject to change.

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Philosophical Base and Mission – BSHS/MSOT Program

Mission Statement:

The Stony Brook University Occupational Therapy Program has a five-part mission:

- Education: To provide comprehensive professional education to meet the demands and needs for 21st century occupational therapy practice for individuals and communities across the life span;
- Scholarship: To promote research and intellectual endeavors of the highest standards to advance occupational therapy;
- Service: To address community, national, and global needs of individuals, families, and populations, including being resources to health care and human services organizations, educational institutions, and government public health and social service agencies;
- Leadership and Advocacy: To promote leadership and advocacy to enable individuals and populations to maximally participate in life occupations, access health and human services, and leadership within the occupational therapy profession;
- Globalization: To advance knowledge and appreciation of diversity and its influence on human occupation, health and well being at local, national and international levels.

Progressive Philosophy of Education:

Purpose of education is to:

- promote societal well-being
- enhance an individual's effectiveness in society

Education provides learners:

- with practical knowledge
- problem solving skills

Humanist Philosophical Base

Purpose of education is to:

- enhance personal growth and development
- facilitate self-actualization

Education provides learners:

Self –reflection abilities & skills

Self –directed learning abilities & skills

Faculty believe that an individual's needs, interests and experiences are key elements in learning; that people have unlimited potential to be developed through education. We believe that it is important for students, graduates and faculty to recognize the importance of being motivated and self-directed. All individuals must take responsibility for their own learning.

The program design stresses the importance of:

- | | | |
|-----------------------|-------------------------|-------------------------|
| • Individuality | • Experiential learning | • Lifelong learning |
| • Pragmatic knowledge | • Empowerment | • Democratic ideals |
| • Problem solving | • Self-directedness | • Social responsibility |

Course Sequence

The curriculum within the School of Health Technology and Management follows a “Module” system. Each module is approximately five weeks in length. A course may be offered in a combination of modules depending upon the credit assignment. Contact hours and credit allotment are calculated on the Carnegie system. Courses are scheduled within one or more modules to accurately meet the credit assignment of the course. **Please note: Modular Schedules are subject to change and this Course Credit load may also change due to curriculum redesign. In an effort to provide the best educational experiences certain courses will be offered in the evenings and/or on weekends. These courses will be taught by experts in those fields. All students registered for these courses are expected to attend.**

Carnegie credit hour: courses are described to be either: lecture courses, courses that have both lecture and labs; be independent study, tutorials or be seminars. Each of these descriptions represents a certain number of hours that learning must be covered. For example, if a course is 3 lecture credits, which mean that there are 45 hours of learning (instruction) to be covered. So, one credit of lecture is 15 hours of learning. For every one credit for courses that are described as lab courses 30 hours of learning must be covered; so if a course is a 2 credit lab course, the learning must be 60 hours worth. The same is true for seminars and tutorials; Independent study courses require 45 hours per credit load, so a 2 credit independent study would require 90 hours of instruction.

Please see the School of Health Technology and Management bulletin for a description of each course.

First Year Graduate

<u>Course</u>	<u>Title</u>	<u>Credits</u>	<u>Module(s)</u>
HAO 561	Functional Anatomy Review	4	Summer
HAO 504	Intro to Historical & Contemporary Practices of OT	3	Summer
HAO 505	Foundations in OT	3	1-4
HAO523	Assessment & Intervention of Psychosocial Issues	4	1-4
HAO 519	Kinesiology	4	1-4
HAO 506	Growth and Develop.	3	3-5
HAO 573	Prof Behaviors I	1.5	4-5
HAO 507	Clinical Conditions	2	4-6
HAO 500	Functional Neuroscience	4	5-8
HAO 586	Fieldwork IA	1	5-8
HAO 508	Theories of Adult Rehabilitation	2	6-8
HAO 509	Pediatrics Theory/Practice	4	6-8

Second Year Graduate

<u>Course</u>	<u>Title</u>	<u>Credits</u>	<u>Module(s)</u>
HAO 520	Substance Abuse	2	Summer
HAO 522	Assessment & Treatment of Adult Rehabilitation	3	Summer
HAO 587	Fieldwork IB	1	Summer
HAO 525	Vision, Cognition, Perception	2	1-2
HAO 524	Assessment & Interventions of Upper Extremities	3	1-3
HAO 526	Gerontology	3	1-3
HAO 588	Fieldwork IC	1	1-3
HAO 549	Intro to Research Design	3	2-3
HAO 527	Sensory Integration	2	3-5
HAO 516	Universal Design	3	4-5
HAO 574	Professional Behaviors II	1	4-5
HAO 551	Research Design	3	4-5
HAO 596	FW IIA	12	6-8

Third Year Graduate

<u>Course</u>	<u>Title</u>	<u>Credits</u>	<u>Module(s)</u>
HAO 530	Community, Occupational and Health	4	Summer
HAO 580	Special Topics	2	Summer
HAO 597	FW IIB	12	1-3
HAO 585	Disability and OT	2	4-5
HAO 562	Principles of Instruct	3	4-6
HAO 534	OT Manager	3	4-6
HAO 593	Case Studies	2	5-6
HAO595	Service Learning & Capstone Project	2	5-8
HAO 570	Global Communities Occupation & Health	2	6-8
HAO 575	Professional Transition	2	6-8

Grading Criteria and Policy

Unless indicated differently in the course outlines provided by the instructor, the following is the grading criteria.

<u>Minimum Percent</u>	<u>Grade</u>	<u>Quality Points</u>
92.5	A	4
89.5	A-	3.67
86.5	B+	3.33
82.5	B	3
79.5	B-	2.67
76.5	C+	2.33
72.5	C	2
69.5	C-	1.67
66.5	D+	1.33
62.5	D	1.0
	S = Passing ("C" or higher)	----
	F = Failure	----

Students must be in good academic standing (professional gpa 3.0 and overall gpa of 3.0 throughout the program. Graduate students must maintain a gpa of 3.0 to be considered in good standing.

The occupational therapy program offers all courses starting with HAO. The occupational therapy program faculty believes that each course offered in the curriculum is essential to developing an occupational therapy professional; therefore, all courses within the curriculum are considered professional courses.

Grading policy

In addition to the School of Health Technology and Management's academic policies and procedures, all graduate HAO courses in the Occupational Therapy curriculum must be successfully completed with a minimum grade of B. Failure to earn a minimum grade of B in HAO graduate courses will require a student to repeat the course and prevent the student from participating in clinical affiliations. A student may repeat a course only once, inability to successfully pass the course when repeated, may result in recommendation for dismissal from the program.

Students must also maintain a professional grade point average of 3.0 in the occupational therapy graduate program courses and a 3.0 grade point average in occupational therapy graduate program courses. Failure to successfully complete 3 or more courses during the three-year curriculum will result in the student being subject to termination from the program.

Please refer to SHTM policies on academic standing found in the SHTM Student Handbook

Program and Classroom Policies

Evaluation of Student Learning

Evaluation of student learning takes place at several levels -- daily in the classroom, periodically as the result of tests and graded assignments, and during fieldwork experiences. It is a key component of teaching and learning. In keeping with the concept that students are individuals with individual styles of learning and communication, faculty is encouraged to use multiple methods of evaluation throughout the coursework. Occupational Therapy students are evaluated through objective tools and essay tests, multiple choice questions, case studies, lab work and practicals, written and oral assignments, class presentations, Professional Behavior Monitors and professional organization fieldwork evaluation forms during fieldwork experiences.

It is the prerogative of the instructor to select the specific method for evaluating learning by the student in each course. However, the evaluation methods must be included in the course outline, reviewed and recommended for approval by the School of Health Technology and Management's Curriculum Committee and the Dean.

The purpose for Fieldwork I and II, the intended learning outcomes, and the faculty, student, clinical fieldwork supervisors' expectations and responsibilities, as well as the evaluation methods are reviewed with the students prior to their attending fieldwork. Students have an opportunity to offer feedback about their grading concerns, and their opinions about fieldwork sites and their experiences in writing and verbally.

Course syllabi are given to and reviewed with the students during the first week of each class. This information includes the methods of evaluation, the weighting of the methods, and criteria for grading. As an example, if the instructor is employing a mastery learning policy for an assignment, and a "B" is the passing grade, then the students are informed of this by discussion and in the course syllabus.

Course and Instructor Evaluations

Students have the opportunity to complete course and instructor evaluations at the end of each course. Once the evaluations have been rated, they are returned to the Program Director for review with the faculty. Faculty and the director review the outcomes annually.

It is only through such input that growth and change can occur. This evaluation method not only benefits you as a student, but it assists the faculty and the program administrators in their endeavor to provide students with the best program and faculty possible. Students are encouraged to provide constructive feedback to the instructor about the knowledge disseminated during the course. Providing constructive feedback is an integral part of being an occupational therapist and of professional behaviors.

Attendance

Punctual attendance in all classes is expected of all students. Excessive absences/lateness may be grounds for recommendation to be dismissed from the program, or for being placed on academic probation. **If a student knows he/she will be absent from class or scheduled activity, he/she must personally notify the course instructor in advance. Faculty and staff e-mail and phone extensions are listed in this manual. Documentation for absences may be requested, and if requested of the student, the student is under obligation by Program Policy to produce said documentation.**

If an emergency occurs and the student will not be able to attend class, or if the student is going to be late due to an emergency, the student must notify the course instructor within 24 hours of the scheduled class explaining the absence. **Note that it is still the discretion of the course instructor to consider it an excused absence.** Attendance and participation are expected in every course. Each student is expected to be on time and remain in class for the full session. **Once the lecture or lab activity starts you are considered late. It is your responsibility to notify the instructor** via phone or e-mail prior to the absence/lateness within 24 hours of class. Failure to notify the instructor will result in an unexcused absence [no call or no email, no show]. **It is not acceptable to have your classmate or another designated person to call or email your attendance status to the instructor. The only circumstance** where this may be acceptable is in the event you are traveling to class and there is traffic that may delay you arriving on time to class. Every two unexcused absences will result in a decrease in your overall course grade by 5 points. Program Policy: Attendance is taken at the beginning of each class. **Three latenesses will equal one unexcused absence. Every three excused** absences may also result in a 5 point decrease in overall course grade (may be considered excessive absences, even though they are excused- this is at the discretion of the instructor). Please note that the course instructor may have different policy on attendance, in which case, these will be enforced for that particular course. Your academic advisor will be informed of absences, latenesses and any display of unprofessional behavior or lack of participation.

Stony Brook E-mail account and Blackboard must be checked regularly for class information or announcements from the instructor and/or for program changes or notifications.

Make-Up Exams and Lateness Assignments

Policies and procedures regarding make up exams (e.g. quizzes, mid- term exams, short exams) are established at the discretion of the individual course instructor. Students are expected to notify the course instructor at the beginning of the course if the student requires rescheduled time for a makeup exam. This make up time will follow the policy and procedure of absences and lateness of the program. Students will be required to provide documentation to support their reasons for requested make up exam time, **if the course instructor consents to a makeup exam.** There will be **no make up** for **FINAL, and PRACTICAL EXAMS**, unless there is a death in the family or an unexpected trauma emergency. In these cases, the student must inform the course instructor within 4 hours of the emergency. **Documentation of the said emergency will be requested of the student, and the student is under obligation by Program Policy to produce said documentation.**

All assignments are to be handed in on or prior to the due date. Five points will be deducted for each day of lateness, weekends included. All assignments are to be typed and saved on disk/flash drive in case revisions are necessary.

Any assignments done in groups are the responsibility of all group members. Group members must sign the final copy to acknowledge equal contribution and an understanding that each group member receives the same grade for the final project.

Social Networking Guidelines

Being health care professionals, you now need to consider the following social network guidelines to ensure you are not unintentionally noncompliant with HIPPA regulations.

1. When speaking with your peers while on FW II, you must also recognize you cannot share any information related to fieldwork on Facebook, Twitter, Instagram, etc.
2. It is a HIPPA violation if you mention a client/patient with enough information that the person might be identified, even if you avoid PHI. The consequences for violations, as you know, are severe. For more information: <http://www.aota.org/-/media/Corporate/Files/Practice/Ethics/Advisory/Social-Networking.ashx>
3. Names of supervisors, comments, and/ or criticism about sites or information about what is happening at sites should not be posted on public social network sites.
4. Students should not put posts or photos on social networks about fieldwork experiences (including location, clients, diagnosis, treatment, fieldwork educators and staff etc.).
5. Do not ask your supervisor or anyone at the clinical site to "friend" you while on fieldwork. You are not permitted to accept requests from these individuals. This is to protect your privacy and maintain the boundaries of the professional relationship. If you mutually decide to do this after graduation, this is your personal choice.
6. Do not ask or receive requests on social media from the clients and/or from family members/significant others of clients you interact with while on fieldwork. If you mutually decide to do this after graduation, this is your personal choice.
7. If there is any question or you are unsure of something regarding social networking, call the Academic Fieldwork Coordinator for advice.
8. If you are attached to your cell phone and have to look at it constantly, it is advised you leave your cell phone in your car or in the office so you are not tempted to pull it out while you are with a client, caregivers, your clinical supervisor, etc.
9. Consider what you post on any social networking site. Many potential employers go to these sites to see what you have posted and often determine if they are interested in having you as an employee. Consider Googling your name to discover what is in cyberspace that others can see about you.

I have read and agree to follow the above Social Networking Guidelines

Signature: _____

Name: _____

Date: _____

Adapted from: Occupational Therapy Program, College of Health Sciences, The University of Texas at El Paso & East Carolina University, Policy on Social Networking

Electronic Devices

All electronic communication devices are **NOT** to be used in the classrooms during all learning activities. In the event that you are waiting for an important text or phone message, you **MUST**:

- **First**, notify your course instructor prior to class explaining the urgency of such text or phone call
- Then, with permission of your course instructor, place your phone on vibrate and step out of the room to respond. No texting or twittering during any class activities, (even if it is to post how much you love this program or course!).

The use of laptops for note taking purposes must be approved by the course instructor prior to class time. The course instructor has the right to require that all laptops must be closed and not used during class time-unless the student is using the laptop as a mode of ADA accommodation requirements. Any student using the laptop for purposes other than note taking (after instructor's approval) during class time without prior approval by the course instructor will not be allowed to bring in a laptop and will receive a reprimand in their file.

University phones located in the classrooms are for *EMERGENCY* purposes only. Use of the phone for other than emergency purposes *without the expressed permission* of a faculty or staff member will be considered unprofessional conduct.

Dress Code

Students will dress appropriately. Students are expected to dress neatly and conservatively. Only under the direction of a faculty member will students wear shorts, t-shirts or sweats for a class. No shirts/blouses that are low cut will be permitted; Jeans and slacks are to be worn at waist level and should remain at that point upon movement. Failure to dress responsibly will result in a penalty for professional behavior grading and a reprimand in the student folder. A reprimand will result in the student being placed on probation.

Caps, hoods, hats, or any other outerwear headcover that **ARE NOT** worn for religious, cultural, or medical reasons are considered unprofessional attire and must be removed and remain off during class time.

Email and Black Board Accounts

Timely & efficient communication is necessary in the academic and professional environments. All students must use their **Stony Brook Email Account** for all correspondences regarding school related information. Students are also expected to check this email account daily as well as BlackBoard course accounts and Program account for any information such as registration charts and notices.

In addition, any changes in student's personal contact telephone number(s) and address must be provided to the Occupational Therapy Program to the administrative assistant immediately in order to always maintain current emergency contact information. **All students are responsible for updating this information on SOLAR.**

Professional Behavior

Attitude and professional behavior, along with knowledge and skill, are evaluated during **ALL** classroom and fieldwork experiences. **Please remember, this is a professional program.** The faculty believe that students' knowledge, skills, and attitudes exhibited in the classroom are reflective of those they will exhibit during fieldwork experiences. The faculty encourage students to view the classroom setting (lectures, laboratories) as an extension of the clinical setting.

The faculty expect students to utilize their critical thinking, communication skills, and reflective reasoning at all times. Seeing these abilities on an ongoing basis assists the faculty when they are assessing the students' professional development. **Any student who communicates in a manner that is deemed unprofessional either through behaviors or means of communication will be spoken to first and will be placed on academic probation if this behavior should occur a second time. A formal reprimand will always be placed in the student's folder. If, after noted offenses, the student does not correct the noted unprofessional behaviors, that student may be dismissed from the program.**

Whether on fieldwork, attending classes on campus, or enjoying special activities/events, students must remember that they are a reflection of the school, faculty, and the profession. Students are expected to be prompt, to follow the rules and regulations of the facility, to be courteous and to dress professionally. **Failure to do so will result in placing the student on probation and having a formal reprimand on file.**

Please be respectful to fellow students, the faculty and staff of the Health Sciences Center. This means speaking quietly in the hallways and limiting participation in any stress relieving, physical recreation activities to the areas outside of the Health Sciences Center.

Social Networking

Students **are not allowed** to contact **ANY faculty, staff member (this includes core faculty, adjunct faculty, Clinical Field Work Supervisors- both FW Level I and FW Level II, and any facility staff members)** or clients via any social type of networking while they are in the OT Program. After graduation, students may contact any one they wish to "friend" via social network. In addition, students are expected to maintain privacy regulations when it concerns the program and clinical sites, as well as clinical supervisors. **Students cannot post on their social network ANY INFORMATION regarding their experiences with any Clinical Supervisors or Field Work clinical sites, this also includes pictures or videos of any nature that contains any information (whether it is written, visual or auditory presentation) of the clinical site, clients, clinical staff members, or clinical supervisors.** Any comments posted on such sites is considered a violation of privacy and/or slanderous. Under **NO** circumstances will such postings be tolerated by the program.

Such acts will be considered as unprofessional behaviors and will be addressed accordingly, including, but not limited to, removal of the student from that site and failing the student for that Field Work experience.

Program Events/Activities

Several times during the school year, the program will host a community event where all faculty and students are expected to attend and actively participate. These events are important as they are representative of our program mission statement and represent our conviction and commitment to making a difference in our communities as occupational therapists. **It is expected that students will make arrangements to attend and participate in those functions, which may take place on week nights or weekends.**

Social Events

There will be times when the students and faculty will gather together for social events designed for enjoyment of all and entertainment. All students are encouraged to attend such events. Please remember, although the venue is of entertainment and social interactions with the faculty members, **students are expected to behave towards the faculty in a manner reflective of professionalism and respect.** A good time can be had by all while maintaining respect towards the faculty.

Withdrawal/Leave of Absence

Please refer to the School of Health Technology and Management student handbook. If withdrawing or requesting a leave of absence, students must follow the policies and procedures delineated in the School of Health Technology and Management bulletin and the SHTM Student Handbook of Policies and Procedures.

Plagiarism

The Occupational Therapy Faculty will not tolerate ANY form of academic dishonesty. The faculty will readily enforce the policies and procedures regarding academic dishonesty as set by the Health Sciences Bulletin and the School of Health Technology and Management. Please refer to the Health Sciences Bulletin and the School of Health Technology and Management Student Handbook of Policies and Procedures for further information regarding the definitions of plagiarism, as well as the definitions of academic dishonesty.

Students are expected to follow the examples given in the American Psychological Association reference manual for proper citation, references of work and format of paperwork. Students are expected to purchase said manual prior to the start of OT coursework. The current edition of the APA manual is the 6th edition; the purchase of the APA software is suggested. It is the student's responsibility to be aware of all steps needed to avoid plagiarism and other academic dishonesty behaviors; i.e. the rules and recommendations for proper citation and referencing.

All work must be original to the course. If a student submits a paper or posts on Blackboard, any body of work that was submitted previously in another course without approval of current professor, this action will be considered an act of plagiarism. Only with the course instructor's approval may a student submit a previously written body of work.

Any assignments done in groups are the responsibility of all group members. Group members must sign the final copy to acknowledge equal contribution and an understanding that each group member receives the same grade for the final project. Unless otherwise directed by the course instructor or the course instructor consents with prior approval, **all assignments are to be completed individually** and is considered to be the sole representation of that individual student's work. **Without prior course instructor's approval, any unauthorized group work is considered an act of plagiarism.**

Also see appendix for AOTA Advisory on Plagiarism.

Academic Honesty Policy for Distance Education Courses

Honesty in any college class is critical to your success as a student. Stony Brook University is committed to maintaining the highest ethical standards possible related to student academic performance in our distance and face-to-face courses.

As a Stony Brook Occupational Therapy student, when you are given access to Blackboard, our online course software, you are expected to keep confidential your username and password and to never allow anyone else to log-in to your account. Sharing access or passwords to Blackboard is considered a breach of academic integrity and could result in you being removed from your class.

When you log-in to Blackboard, you do so with the understanding and agreement to produce your own work, to complete course activities yourself, including online discussions, and to take course exams, tests or quizzes without the assistance of others.

Allowing others to complete your course work, discussions, or to take your quiz, test, and exams is considered cheating and could subject you to receiving an "F" for the course. In addition, this type of dishonesty can result in formal disciplinary action being taken against you by the college.

Copyright Materials

It is required that all Occupational Therapy program faculty, staff, and students adhere to the laws of copyright. When appropriate, the Occupational Therapy Program faculty, if using copyright material for educational purposes will provide a *single* copy of the material for student and class use. The material will be made available in class or through the "reserved" area of the Health Sciences Center Library and the Southampton Library. Under no circumstances should a student or class interpret the access to the *single* copy as having permission to make multiple copies of the material. Multiple copies may only be made with the expressed and/or written permission of the author(s).

COURSE CONTENT: Course material accessed from Blackboard, SB Connect, SB Capture or a Stony Brook Course website is for the exclusive use of students who are currently enrolled in the course. Content from these systems cannot be reused or distributed without written permission of the instructor and/or the copyright holder. Duplication of materials is protected by copyright, and cannot be disseminated without permission of the copyright holder. It is a violation of the Federal copyright law, as well as a violation of Stony Brook's Academic Integrity and Student Conduct Codes:

<http://www.stonybrook.edu/uaa/academicjudiciary/policies.shtml> (you may have to copy and paste the address in a browser).

Recording Classroom Lectures and Activities

No student may record, tape or photograph any faculty presentation or classroom activity without the express written consent of the faculty or instructor. Generally, faculty has the discretion as to whether students are permitted to audio tape or video record lectures for their personal use. There may be circumstances, however, when such audio taping or video recording is necessary as a reasonable accommodation of a properly documented disability. Assistance and advice with respect to such requests may be obtained from the department chair, the dean's office, the Office of Student Services.

If a student believes that he/she has a disability that requires a reasonable accommodation for audio or visual recording of lectures and classroom activities, he/she should contact Disability Support Services at (631) 632-6748 to request an appropriate accommodation.

The use of laptops for note taking purposes must be approved by the course instructor prior to class time. Any student using the laptop for purposes other than note taking during class time without prior approval by the course instructor will not be allowed to bring in a laptop and will receive a formal reprimand in their file.

Confidentiality

Faculty, as ethical professionals, are expected to respect students' and clients' rights to confidentiality. It is also imperative that students pursuing a professional career understand that they are held to the *same ethical standards in clinical placements and academic areas of the program. Students are expected to complete HIPAA training and adhere to regulations regarding ethics and privacy matters.*

Fellow students personal information, i.e. grades, concerns, and behaviors revealed in or out of class should not be openly shared with others since it is in direct violation of school and clinic policies.

Patient information is regarded as confidential. Any reports completed for submission to class are not to reveal the patient's name. Students must use the first name, a pseudonym, or initials. This also pertains to any discussions students may have about the patient outside of the clinic and or classroom. Students may not copy or remove medical records on any client unless it has been indicated in writing that the facility has permission from the patient and is authorized to grant approval to do so. It is the responsibility of the student to clearly ask for and to understand the facilities rules and regulations regarding confidentiality.

HIPPA(Health Insurance Portability and Accountability Act)

See School of Health Technology and Management Policy and Procedures Manual regarding HIPPA and student's responsibilities to adhere to HIPPA regulations.

Annual Physical History/Assessment and Immunization Record

All Occupational Therapy students are required to complete and submit the Stony Brook University, School of Health Technology and Management, physical history, health assessment form and immunization record prior to beginning coursework. The information on the forms is to be updated annually. The school provides these forms. Forms may be completed by making an appointment with the Student Health Services on West Campus, or by your own physician.

Students who have submitted incomplete forms, or students who have not submitted forms, will **NOT BE ALLOWED** to attend Fieldwork Level I or II until the forms are submitted and/or properly completed. Student Health Services must advise the Occupational Therapy Academic Fieldwork Coordinator that all health obligations have been satisfactorily met before a student will be placed on any fieldwork assignment. Failure to comply by the program and/or school recommended date may result in the student being placed on academic probation. *(See SHTM Student Handbook of Policies and Procedures regarding academic probation). Please note: even if you have been a student at SUNY Stony Brook you are still required to complete the School of Health Technology and Management's health forms.*

Student Advisement

Each student is assigned a faculty member as an advisor. **It is the responsibility of the student to formally meet with the advisor during which time the Professional Behavior Monitor will be reviewed. All students are expected to initiate and maintain contact with their advisors.**

Student ID's

Unless otherwise instructed, students are to utilize the Stony Brook University, School of Health Technology and Management identification badge as their official identification during any school or program related activity, on or off campus. Some activities or locations may require the students to block out their last name. Students may do so by adding a piece of masking or colored tape to the badge cover.

Graduation Criteria

Graduation is dependent upon the successful completion of all prerequisite, basic sciences, core, as well as the research sequence and final results pages and professional courses including HAO 596, HAO 597, HAO 598 (Fieldwork Level II). Fieldwork Level II must be completed within six months of successful completion of all coursework.

The Program and School must review all student records prior to notifying the New York State Department of Education of the student's graduation date, or before issuing a diploma. The student may then apply for a New York State limited permit (See New York State Licensure) to practice Occupational Therapy and may sit for the National Board for Certification examination in Occupational Therapy.

Certification by the NBCOT

The National Board for Certification in Occupational Therapy (NBCOT) administers a national certification examination to all students graduating from an accredited Occupational Therapy curriculum, and maintains a roster of all certified occupational therapists.

Students must register for this examination directly with the testing agency, and pay all required fees. To be eligible to sit for the examination, all academic and clinical work must be successfully completed.

The examination is given "on demand" at designated computerized testing sites. Students will receive specifics about the exam application process as they near graduation.

A felony conviction may affect a graduate's ability to sit for the NBCOT certification examination or attain state licensure. All students who are not certain if they can sit for the exam should go to the website: www.NBCOT.org

New York State Licensure

To practice occupational therapy in New York and most other states, a therapist must hold a valid, current professional license with the state. The purpose of licensure is to protect the public from unqualified and incompetent practitioners. To obtain a professional license in New York State, the individual must file an application for licensure, submit final college or university transcripts, submit the NBCOT examination results indicating successful passage of the examination, and pay all necessary fees. New York State uses the NBCOT exam as the state licensure examination, but a separate application for licensure must be filed with the New York State Department of Education, Division of Professional Licensing, in Albany, New York.

<http://www.op.nysed.gov/>

Students who have completed all their degree requirements and have secured employment, but have not yet taken the certification examination, will be able to apply for a “Limited Permit” to practice Occupational Therapy. While working under a limited permit, you must be supervised by a licensed, registered Occupational Therapist. Your potential employer must sign the limited permit application forms to verify that you will be practicing under the supervision of a licensed, registered occupational therapist. The limited permit is good for one year, or until the student passes or fails the certification exam. Passage leads to full licensure; failure leads to the cancellation of the permit.

Once licensed, occupational therapists are expected to practice ethically and safely, and to maintain their licensure registration. License registration is required to be renewed every three years. A therapist can lose their professional license for unethical, illegal or immoral practices, or for infraction of the licensure law. It is imperative that you understand this law, and practice within its scope.

Students intending to practice in another state must file for a license in that state. Contact that state’s licensure division, or American Occupational Therapy Association, for information and assistance in obtaining state licensure.

Student and Professional Organizations

Students are encouraged to join and participate in the student associations at Stony Brook University and in the School of Health Technology and Management.

The Student Occupational Therapy Association here at Stony Brook University is listed with the American Occupational Therapy Association (www.aota.org) and there is a student delegate who attends student meetings at the AOTA Annual Conference. Students play an important part in helping our profession stay current and progressive. Each organization provides a basis for student’s professional growth through the offering of various meetings, conferences, and publications. Many of these offerings are available at reduced rates to the organization’s members.

Please see Stony Brook University SOTA by-laws in appendix. SOTA elections occur in July of each academic year.

Applications for student membership in the New York State Occupational Therapy Association (NYSOTA) and the American Occupational Therapy Association are made available to each student. AOTA student membership is a requirement and proof must be submitted in the Professional Behavior courses. All students are expected to maintain active membership in NYSOTA and AOTA until graduation.

Pi Theta Epsilon (PTE) is the national honor society for occupational therapists (www.pithetaepsilon.org). PTE requires a membership fee for students and provides opportunity for

lifetime participation. Student members are acknowledged at graduation and wear an honor cord that identifies them as a member of PTE. The mission of Pi Theta Epsilon is to support the practice of occupational sciences and the practice of authentic occupational therapy by promoting research and other scholarly activities by its members. In this way, the organization serves not only the profession, but helps to insure quality health care services for the general public.

Alpha Eta Health Professional Honor Society - Every year, just before graduation, faculty from each SHTM program reviews the academic records of their students. A limited number of the graduates from any one program who have demonstrated outstanding scholarship and exceptional leadership are nominated for induction into our local chapter of Alpha Eta---the National Honor Society for Allied Health Professionals.

Lifetime membership in Alpha Eta, which includes your membership certificate, Alpha Eta pin, and honor cord to be worn at graduation, entails a one-time fee of \$30. In addition, your official university transcript will permanently designate your induction into the honor society.

Any student who receives formal reprimand or who is on academic probation, or who is not in good academic standing may be disqualified from being inducted to any honor society or from applying to any health professions scholarship.

Job Placement/Listings

The Occupational Therapy program receives many job listings and job fair announcements from various schools and agencies in the metropolitan area.

The job listings that the Occupational Therapy program receives are posted on the program's bulletin board or filed in the Occupational Therapy Office. Students are welcome to review the postings at any time. In addition, many journals and periodicals that list Occupational Therapy openings are made available to students by the Occupational Therapy faculty and through the Health Sciences Library.

Graduates of the program are encouraged to provide the program with up-to-date email and mailing addresses. The program strives to notify alumni of job vacancy postings as frequently as possible or as they become known to us.

Scholarship Announcements

The OT program receives announcements from various schools and agencies in the metropolitan area. These will be posted on the program's bulletin board and/or sent via e-mail to all students.

Americans with Disabilities Act

If you have a physical, psychological, medical or learning disability that may impact your course work, please contact Disability Support Services, 128 ECC Building, Telephone (631) 632-6748. They will determine with you what accommodations are necessary and appropriate. All information and documentation is confidential.

Students who require assistance during emergency evacuation are encouraged to discuss their needs with their professors and Disability Support Services. For procedures and information, go to the following website: <http://www.ehs.sunysb.edu> and search for 'Fire Safety and Evacuation/Physical Disabilities'.

Supporting the Occupational Therapy Program

The success of our program is not just excellence in teaching; it also involves excellence in providing support to our communities, as well as excellence in supporting our students in different activities. We are able to support our students in many ways, including, but not limited to, providing activities (end of the year dinner, program field trips, purchasing of special equipment, etc.) ceremonial pins (graduation pins, Level I FW Program Professional Shirts, etc.), and honor awards (Vera Jean Clark-Brown Leadership Award, Jacqueline Barrera Distinguished Student Award) These types of activities, awards and ceremonial recognition are funded through the **OCCUPATIONAL THERAPY IN EXCELLENCE FUND (SBF account number 297250), NOT through the SBU Alumni Association Fund.**

As a Program Chairperson, I cannot stress the value and importance of the Occupational Therapy in Excellence Fund. It is an account that allows us to do many things for the students in our program that the SBU Alumni Association Fund cannot do for the program. Please consider supporting the Occupational Therapy in Excellence Fund not only during your time here with us, but also after you graduate and are representing our program in your community as a highly trained professional. When you are ready to support the OT in Excellence Fund, please make your check out to:

OT in Excellence Fund account number SBF 297250

Appendix

1. Curriculum Chart and Credit Hour Information
2. OT Curriculum
3. SOTA Bylaws
4. Faculty Advisors List
5. Professional Behavior Monitor
6. OT Program Flowchart
7. AOTA Occupational Therapy Code of Ethics and Ethics Standards (2015)
8. Guidelines: OT Practice Framework (separate document)

Appendix 1- Curriculum Chart and Credit Hour Information

Curriculum Chart

Course	Code	Credits	Summer	Mod 1	Mod 2	Mod 3	Mod 4	Mod 5	Mod 6	Mod 7	Mod 8
FIRST YEAR GRADUATE											
Functional Anatomy Review	HAO 561	4	x M								
Intro to Historical & Contemporary Practices of OT	HAO 504	3	x M								
Foundations in OT	HAO 505	3		x	x	x	x				
Assessment & Intervention of Psychosocial Issues	HAO 523	4		x	x	x	x				
Kinesiology	HAO 519	4		x	x	x	x				
Growth and Development	HAO 506	3				x	x	x			
Functional Neuroscience	HAO 500	4						x	x	x	x
Professional Behaviors I	HAO 573	1.5					x	x			
Clinical Conditions	HAO 507	2					x	x	x		
Fieldwork IA	HAO 586	1						x	x	x	x
Theories of Adult Rehabilitation	HAO 508	2							x	x	x
Pediatrics Theory/Practice	HAO 509	4							x	x	x
Total Credits for Year I		35.5									
SECOND YEAR GRADUATE											
Substance Abuse	HAO 520	2	x M								
Assessment & Treatment of Adult Rehabilitation	HAO 522	3	x M								
Assessment & Interventions of Upper Extremities	HAO 524	3		x	x	x					
Vision, Cognition, & Perception	HAO 525	2		x	x						
Gerontology	HAO 526	3		x	x	x					
Sensory Integration	HAO 527	2				x	x	x			
Intro to Research Design	HAO 549	3			x	x					
Fieldwork IB	HAO 587	1	x M								
Fieldwork IC	HAO 588	1		x	x	x					
Universal Design	HAO 516	3					x	x			
Professional Behaviors II	HAO 574	1					x	x			
Research Design	HAO 551	3					x	x			
FW IIA	HAO 596	12							x	x	x
Total Credits Year 2		39*									

THIRD YEAR GRADUATE											
Community, Occupational and Health	HAO 530	4	x M								
Case Studies	HAO 593	2						x	x		
Special Topics	HAO 580	2	x M								
FW IIB	HAO 597	12		x	x	x					
Disability and OT	HAO 585	2					x	x			
Principles of Instruct	HAO 562	3					x	x	x		
OT Man	HAO 534	3					x	x	x		
Global Communities, Occupation & Health	HAO 570	2							x	x	x
Professional Transitions	HAO 575	2							x	x	x
Service Learning & Capstone Project	HAO595	2						x	x	x	x
Total Credits Year 3		34									
Total Credits MS		108.5									
*24 of 107 = Fieldwork II credits		83	course credits								

***Carnegie credit hour:** courses are described to be either: lecture courses, courses that have both lecture and labs; be independent study, tutorials or be seminars. Each of these descriptions represents a certain number of hours that learning must be covered. For example, if a course is 3 lecture credits, which mean that there are 45 hours of learning (instruction) to be covered. So, one credit of lecture is 15 hours of learning. For every one credit for courses that are described as lab courses 30 hours of learning must be covered; so if a course is a 2 credit lab course, the learning must be 60 hours worth. The same is true for seminars and tutorials; Independent study courses require 45 hours per credit load, so a 2 credit independent study would require 90 hours of instruction.*

Appendix 2 – OT Curriculum Design

VISION:
 Stony Brook University's Occupational Therapy Program expands the context and content of occupational therapy education through high quality innovative and comprehensive educational programs that support 21st century practice. Our changing world requires practitioners who have the knowledge, skills, and training to be leaders to address global, community, and individual health concerns and promote our human need for engagement in life activities and quality of life across the life span. Our program supports Stony Brook University's collective vision to provide accessible graduate education and foster the advancement of a diverse occupational therapy workforce.

MISSION:

LEARNING: Providing comprehensive undergraduate, graduate, and professional education of the highest quality to current and future occupational therapy practitioners to meet the demands of 21st century practice across the life span, enhancing their becoming critical reflective thinkers and lifelong learners.
 Courses: Functional Anatomy; Kinesiology; Assessments & Intervention of Psychosocial Issues; Life Span Growth & Development for O.T.; Functional Neuro-anatomy; O.T. Pediatrics Theory & Practice; Theories of Adult Rehabilitation; Clinical Conditions; Assessment & Treatment of Adult Rehabilitation; Assessment & Interventions of Upper Extremities; Gerontology and O.T.; Substance Abuse and O.T.; Sensory Integration Theory & Practice in O.T.; Vision, Perception & Cognition; Universal Design; Fieldwork I A, B, C. **Core Curricular Thread:** Procedural Reasoning/learning/clinical reasoning; critical thinking; new knowledge; scientific learning

Knowledge of Biomechanical Concepts; Basic anatomical structures & Physiological function; Human Growth & Development; Mental Health & Substance Abuse Concepts

SCHOLARSHIP: Engaging in research and intellectual endeavors of the highest standards in collaboration with other service providers in order to contribute to the body of knowledge related to the study of occupation and its immediate and long-range practical significance. **Courses:** Introduction to Research, Research Design for OT; Historical & Contemporary Perspectives in OT. **Core Curricular Thread:** Procedural Reasoning/learning/clinical reasoning; critical thinking; new knowledge; scientific learning

Knowledge of Research Methodology; Evidence Based Practice; Basic Statistical Analyses; Literature Review

SERVICE: Providing service to meet societal needs in local communities and the wider geographic region through enhancing occupational performance and the facilitation of economic, personal, social, and aesthetic contributions by individuals and populations. **Courses:** Foundations of O.T.; Professional Behaviors I & II; Patient Education; Case Studies; Fieldwork IIA, IIB; Service Learning & Capstone course **Core Curricular Thread:** Service Competency/community service; advocacy; experiential learning)

Knowledge of History of Profession & Core Values of OT; Patient Education Principles; Relationship between Occupation & Health; O.T. Assessments/evaluations & Interventions in all diagnostic categories

LEADERSHIP & ADVOCACY: Education of Practitioners to provide state-of-the-art in innovative health care to assist persons to engage in meaningful occupation and full participation in society, serving as resources to health care providers, educational institutions, and human service communities, while striving to provide and strengthen the OT profession. **Courses:** O.T. Manager; Professional Transition Seminar; Principles of Instruction; Special Topics in O.T. **Core Curricular Thread:** Democratic Idealist; social action; producing change)

Knowledge of Management theories; reimbursement systems; application of OT in non-traditional settings; learning theories

GLOBALIZATION: Supporting diversity in local and global contexts through positioning the Stony Brook Occupational Therapy Program in regional, national, and global community initiatives and opportunities. **Courses:** Global Communities, Occupations, & Health; Disability and O.T.; Community Occupation & Health; **Core Curricular Thread:** Social Responsibility (seeking commonalities including shared human experiences)

Knowledge of advanced theories of occupation development, human & societal development, and health issues; advanced advocacy skills; advanced theories of disability identity development and OT practices

PROGRAM OUTCOMES:

Skills For: -establishing therapeutic relationships with clients
 -goniometry & manual muscle testing
 -interviewing clients to collect information
 -performing assessments/evaluations
 Administering norm-referenced & criterion tests
 -designing, implementing & conducting treatment protocols
 -fabricating & training of orthoses & prosthetics
 -applying PAMs as adjunctive modality
Attitudes Fostered:
 -critical thinking, interactive & procedural reasoning, client centered practice, therapeutic sense of self, active collaboration within & outside of the profession

Skills For: -clinical reasoning
 -collecting, analyzing & interpreting data
 -collaborative participation in scholarly activities
 -seeking out information independently
Attitudes Fostered: -self directed learning, clinical reasoning, best and current practice, innovators in research & practices

Skills For: -advanced application of OT theories & practices
 -ethical decision making
 -cultural competency
Attitudes Fostered: -professional membership; service to the profession; professional behaviors; culturally competent practices;

Skills For: -Entrepreneurship OT Practice in non-traditional settings; advanced documentation that maximizes reimbursement; Teaching and supervision of OT students and other learning communities; advanced application of OT practices
Attitudes Fostered: -self-directed learning; leadership skills; self-awareness for professional growth.

Skills For: - advanced application of OT theory/practice; advanced understanding of relationship between occupation, health, community development and identity/development
Attitudes Fostered: -advocacy skills; community leadership;

Appendix 4 - Faculty Advisor Lists

Stony Brook Campus

Class of 2016	Class of 2017	Class of 2018
Karen DeChello		
Alyssa Gianotti	Juliann Martin	Leah Ahn
Christy Jean-Jacques	Zachary Trenary	Lindsay Altman
Randall Juarez	Brittney Newton	Michelle Ambrosio
Eileen Kelleher	Tania Nunez	Alison Beede
Soobeen Kim	Kendall Perks	Melissa Berger
Jessica Konop	Jennifer Polito	Alison Bodner
Emily Wiegel	Leah Hertz	
Joanna Wilkinson	Ji In kang	
	Jo Kirschner	
Pamela Karp		
James Descalso	Thu Ha Le	Richard Brenza
Greg Bustamante	Brian Lee	Gabrielle Carleo
Thresia Moonjely	Jessica Poris	Jennifer Cavadas
Sean McDonald		Morgan Teeratananon
Kristen Jata		
Tamara Irving		
Pamela Linden		
Erin Klimkowski	Ranazoor Rahaman	Winnie Chen
Ronald Lee	John Riloquio	Bridget Christie
Melissa Pelaez	Melissa Sanmiguel	Christopher DePasquale
Gary Wu	Andrew Talia	Ashlee Diaz
Patrick Martinucci	Katherine Oleksiej	Brittany Faison
Jessica Otis	Chris Meketansky	Maria Hernandez
Marie-Karine Maillot	Ranazoor Rahaman	Stephanie Wohlberg
Luz Bove	John Riloquio	Corinne Kelly
Sarah Chung	Alexis Watkins	
Eva Rodriguez		
Michelle Lazar	Alexa Goldstein	Shannon McWilliams
Laura Gaffney	Chelsea Haedrich	Vanessa Oliva
Erin Mateer	Alexis Watkins	Kay Ortiz
Lindsey Heckmann	Danielle Tanamy	Melissa Peyser
Jessica Nacinovich	Nopawan Poomchonghko	Kerrin Reilly
Mary Skaalerud	Stephanie Espinosa	Angela Sanfilippo
Caitlin Davies		Jessica Schelin
Cheryl Wasiewski		Jonathan Schofield
Mary Squillace		
Elana Perew	Frank Artura	Christina Singh
Courtney Prada	Erika Centra	Kelly Song
Michelle Scarcello	Jocelyn Decrescenzo	Chung Shing Kwong
Kristen Somoza	Jesse DeFilippo	Jessica Samouki
Liana Spiciarich	Gregory Durante	
Kerry Sullivan		

Southampton Campus

Shannon Scott	
Class of 2017	Class of 2018
Jennifer Achampong	Victoria Ali
Alyssa Attanasio	Katherine Andrusin
Germia Baptiste	Jessica Campo
Michelle Bardin	Nicole Carrasquillo
Benita Basil	Paulina Chrostowski
Julie Boyer	Jacqueline D'Aries
Matthew Carlins	Whitney Eand
Ming Cheung	Sheri Renee Egert
Meghan Clifton	Sarah Ferraro
	Joseph Ferreri
Leon Chang	
Nicholas Croce	Lauren Gennarelli
Jessica Doria	Danielle Herman
Jennifer Fredrickson	Jessica Hickey
Julie Giacalone	Blake Johnson
Elizabeth Hickey	Kristina Kuhen
Doo Hwan Kang	Lauren Linker
Amelie Kastning	Alyssa Mangieri
Christy Jean Lanieri	Kateri McBride
Lia Levine	Katelyn Napoli
Allison Lye	Pritesh Patel
Sean Getty	
Ashley Mendez	Puja Rai
Danielle Miceli	Mallory Reilly
Gabrielle Piazza	Shirley Lin
Denise Saberon	Ilana Saffeir
Damion Singh	Rachael Stenzler
Stephanie Smith	Stephanie Toso
Alexander Stein	Darby Uhlinger
Amy Sun	Diana Williams
Jennifer Wellman	Eric Wong
Alexis Woodcock	Wendy York

Appendix 5 - Professional Behavior Monitor

**Stony Brook University
Occupational Therapy Program**

Student Academic Advisement Form

All students are to meet with their faculty advisor a minimum of two times an academic year. The purpose of this form is to document and review academic progress. The student is to come prepared for the advisement session by completing the student sections on academic progress/goals [below] and professional behaviors [reverse side]. This information will be reviewed with the academic advisor. Following completion of this form, it is to be signed by the student and advisor. It is to be kept on file by the student advisor. All forms are reviewed annually by the program faculty and program director during a scheduled faculty meeting. These forms will be available for review by the School of Health Technology and Management Academic Standing Committee should a student's academic performance be in question.

Student Name: _____

SBID
Number: _____

Year of Graduation: _____

Track: Day
Weekend

GPA: _____

	Outcome/Action
Student's Review of Academic Progress	
Student's Academic goals:	
Advisor's Review of Academic Progress:	

Student Signature

Date

Advisor Signature

Date

PROFESSIONAL BEHAVIOR AND ATTENDANCE

Professional Behavior	Student self-rating Yes or No	Discussion/Comments
Arrival to lab/class/scheduled meetings on time		
Contacts appropriate faculty member when late/absent from class		
Full utilization of lab/class time		
Appropriate dress for lab/class activities		
Respectful of peers		
Respectful of faculty		
Displays appropriate communication skills and/or interactions with peers		
Displays appropriate communication skills and/or interactions with faculty		
Appropriate role play as both the client and the OT		
Hands in assignments/papers when due		
Appropriate use of safety precautions		
Arriving prepared for lab/class		
Assisting in set-up of material used during lab/class		
Assisting in cleanup of material used during lab/class		

Definitions: Professional Behavior

Arrival to lab/class on time: Student is present and ready to participate at the assigned time.

Full utilization of lab/class time: Utilizes lab time to review materials presented, spends time interacting with tools (e.g., ADL equipment), participates in lab discussions/questions and asks appropriate questions of faculty related to course content/practice/clinical issues.

Appropriate dress for lab/class activities: Clothing which allows for full participation in lab experiences while maintaining decency. Clothing for class presentation should be congruent with standards in that area of clinical practice.

Respect of peers and faculty: Student is listening when faculty/peers present information without side conversations or completing alternate tasks (e.g., answering emails/text), student respects opinions which differ from his/her own.

Displays appropriate communication skills and/or interactions with peers: Student responds to direction given by faculty/peers, utilizes appropriate empathy (e.g., adapts lab experience based on partner's response, eye contact, etc.). Communication with faculty should be honest and direct. Student should demonstrate support and empathy for peers. Should be able to offer meaningful feedback to peers as it applies to course content and lab experiences

Role play as both the client and the OT: *As the OT:* Utilizes appropriate practice framework terminology for client, completes introduction, asks permission to handle client, etc. *As the client:* Stays in client role without demeaning clients in any way or overacting within the role.

Proper use of safety precautions: Reviews and practices safety procedures with all modalities and activities as per protocol.

Arriving prepared for lab/class: Has all materials prepared which were assigned for lab.

Assisting in setting up of materials used during lab/class: Retrieves materials and places in the proper locations for use during lab/class.

Assisting in cleanup of materials used during lab/class: Replaces material to the proper locations after use. Cleans up personal space after class

Appendix 6 - OT Program Flow Chart

STONY BROOK UNIVERSITY
SCHOOL OF HEALTH TECHNOLOGY AND MANAGEMENT
OCCUPATIONAL THERAPY PROGRAM CURRICULUM OUTLINE

A Professional Graduate Entry-Level Program Leading to the MSOT Degree

ADVANCED (YEAR 3)

Courses and fieldwork experiences focus on preparation for practice in traditional and emerging areas that involve the application of scholarly inquiry, and sophisticated professional behaviors to solve complex problems. Independent work is encouraged as student transitions to professional roles. Beginning research skills are enhanced and students continue to develop evidence-based practices.

YEAR 3

Fieldwork IIB
 The O.T. Manager
 Principles of Instruction
 Community, Occupation and Health
 Case Studies
 Global Communities, Occupation, & Health
 Professional Transition Seminar
 Disability Studies & OT
 Special Topics
 Service Learning & Community Based Research

KNOWLEDGE OF:

- learning theories
- measurement outcomes
- relationship between occupation and health
- reimbursement systems
- emerging practice areas
- concepts of disabilities and development, culture, and society
- management theories

SKILLS FOR:

- advanced application of O.T. theory/practices
- advanced documentation that maximizes reimbursement
- seeking out information independently

ATTITUDES THAT LEAD TO:

- culturally competent practice
- self-directed learning
- leadership & advocacy skills
- professional commitment
- self-awareness for on-going personal/professional growth

INTERMEDIATE (YEAR 2)

Courses and introductory fieldwork experiences reflect principles of practice in OT and continue to develop students' professional skills, therapeutic use of self, problem-solving behaviors, and clinical reasoning. Documentation, clinical conditions, theories that guide practice, and treatment interventions, modalities, and techniques are taught in the context of occupation. Beginning research skills are taught, as well as, advanced applications of evidence-based practices.

YEAR 2

Assessment & Treatment of Adult Rehabilitation
 Assessments & Interventions of Upper Extremities
 Vision, Perception & Cognition
 Substance Abuse & OT
 Universal Design
 Gerontology and O.T.
 Sensory Integration
 Fieldwork IIA
 Intro to Research Design
 Research Design
 Fieldwork 1B, 1C
 Professional Behaviors II

KNOWLEDGE OF:

- research methodology/developing proposals
- patient education principles
- basic statistical analysis
- normal aging process
- evidence based practice
- culturally competent practice
- O.T. interventions in all diagnostic categories

SKILLS FOR:

- fabricating orthoses
- prosthetic training
- assessing strength, sensation, vision, perception & cognition
- administering standardized & non-standardized evaluations
- transfer training and functional mobility
- applying PAMS as an adjunctive modality
- collecting, analyzing and interpreting data
- participation in scholarly activities

ATTITUDES THAT LEAD TO:

- interactive reasoning
- active collaboration within & outside of discipline
- realization of individual treatment needs
- client-centered practice and therapeutic use of self

BEGINNING (YEAR 1)

Courses provide foundation in the basic sciences, history of occupational therapy, nature of human occupation; begin to develop self-awareness, professional behavior, problem-solving, and critical thinking, and evidence based practices.

YEAR 1

Functional Anatomy
 Historical & Contemporary Perspectives in O.T.
 Foundations of O.T.
 Assessment & Interventions of Psychosocial Issues
 Kinesiology
 Growth & Development
 Functional Neuroanatomy
 Prof. Behaviors I
 Theories of Adult Rehabilitation
 Clinical Conditions
 Pediatrics Theory & Practice
 Fieldwork IA

KNOWLEDGE OF:

- bio-mechanical concepts
- basic anatomical structures & physiological function
- human growth and developmental processes
- mental health & substance abuse concepts
- history of profession & core values of OT
- ethics, issues in current healthcare & universal precautions

SKILLS FOR:

- goniometry & manual muscle testing
- interviewing individuals to collect information
- establishing therapeutic relationships with consumers
- performing mental health assessment/evaluations
- designing, implementing & conducting group protocols
- professional writing & clinical documentation

ATTITUDES THAT LEAD TO:

- critical thinking
- demonstrating an understanding of professional behavior
- procedural reasoning
- responsibility & organization
- effective time management strategies

Appendix 7 - AOTA OT Code of Ethics and Ethics Standards (2015)

Occupational Therapy Code of Ethics and Ethics Standards (2015)

Preamble

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

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

The Code serves two purposes:

1. It provides aspirational Core Values that guide members toward ethical courses of action in professional and volunteer roles, and
2. It delineates enforceable Principles and Standards of Conduct that apply to AOTA members.

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

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

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

Core Values

The profession is grounded in seven long-standing Core Values: (1) Altruism, (2) Equality, (3) Freedom, (4) Justice, (5) Dignity, (6) Truth, and (7) Prudence. *Altruism* involves demonstrating concern for the welfare of others. *Equality* refers to treating all people impartially and free of bias.

Freedom and personal choice are paramount in a profession in which the values and desires of the client guide our interventions. *Justice* expresses a state in which diverse communities are inclusive; diverse communities are organized and structured such that all members can function, flourish, and live a satisfactory life. Occupational therapy personnel, by virtue of the specific nature of the practice of occupational therapy, have a vested interest in addressing unjust inequities that limit opportunities for participation in society (Braveman & Bass-Haugen, 2009).

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

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

Principles and Standards of Conduct

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

Beneficence

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

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

Related Standards of Conduct

Occupational therapy personnel shall

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

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

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

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

Nonmaleficence

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

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

Related Standards of Conduct

Occupational therapy personnel shall

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

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

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

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

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

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

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

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

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

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

Autonomy

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

The Principle of *Autonomy* expresses the concept that practitioners have a duty to treat the client according to the client’s desires, within the bounds of accepted standards of care, and to protect the

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

Related Standards of Conduct

Occupational therapy personnel shall

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

Justice

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

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

Related Standards of Conduct

Occupational therapy personnel shall

- A. Respond to requests for occupational therapy services (e.g., a referral) in a timely manner as determined by law, regulation, or policy.
- B. Assist those in need of occupational therapy services to secure access through available means.

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

Veracity

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

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

In communicating with others, occupational therapy personnel implicitly promise to be truthful and not deceptive. When entering into a therapeutic or research relationship, the recipient of service or research participant has a right to accurate information. In addition, transmission of information is incomplete without also ensuring that the recipient or participant understands the information provided.

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

Related Standards of Conduct

Occupational therapy personnel shall

- A. Represent credentials, qualifications, education, experience, training, roles, duties, competence, contributions, and findings accurately in all forms of communication.
- B. Refrain from using or participating in the use of any form of communication that contains false, fraudulent, deceptive, misleading, or unfair statements or claims.
- C. Record and report in an accurate and timely manner and in accordance with applicable regulations all information related to professional or academic documentation and activities.
- D. Identify and fully disclose to all appropriate persons errors or adverse events that compromise the safety of service recipients.
- E. Ensure that all marketing and advertising are truthful, accurate, and carefully presented to avoid misleading recipients of service, research participants, or the public.
- F. Describe the type and duration of occupational therapy services accurately in professional contracts, including the duties and responsibilities of all involved parties.
- G. Be honest, fair, accurate, respectful, and timely in gathering and reporting fact-based information regarding employee job performance and student performance.
- H. Give credit and recognition when using the ideas and work of others in written, oral, or electronic media (i.e., do not plagiarize).
- I. Provide students with access to accurate information regarding educational requirements and academic policies and procedures relative to the occupational therapy program or educational institution.
- J. Maintain privacy and truthfulness when utilizing telecommunication in delivery of occupational therapy services.

Fidelity

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

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

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

Related Standards of Conduct

Occupational therapy personnel shall

- A. Preserve, respect, and safeguard private information about employees, colleagues, and students unless otherwise mandated or permitted by relevant laws.
- B. Address incompetent, disruptive, unethical, illegal, or impaired practice that jeopardizes the safety or well-being of others and team effectiveness.
- C. Avoid conflicts of interest or conflicts of commitment in employment, volunteer roles, or research.
- D. Avoid using one's position (employee or volunteer) or knowledge gained from that position in such a manner as to give rise to real or perceived conflict of interest among the person, the employer, other AOTA members, or other organizations.

- E. Be diligent stewards of human, financial, and material resources of their employers, and refrain from exploiting these resources for personal gain.
- F. Refrain from verbal, physical, emotional, or sexual harassment of peers or colleagues.
- G. Refrain from communication that is derogatory, intimidating, or disrespectful and that unduly discourages others from participating in professional dialogue.
- H. Promote collaborative actions and communication as a member of interprofessional teams to facilitate quality care and safety for clients.
- I. Respect the practices, competencies, roles, and responsibilities of their own and other professions to promote a collaborative environment reflective of interprofessional teams.
- J. Use conflict resolution and internal and alternative dispute resolution resources as needed to resolve organizational and interpersonal conflicts, as well as perceived institutional ethics violations.
- K. Abide by policies, procedures, and protocols when serving or acting on behalf of a professional organization or employer to fully and accurately represent the organization's official and authorized positions.
- L. Refrain from actions that reduce the public's trust in occupational therapy.
- M. Self-identify when personal, cultural, or religious values preclude, or are anticipated to negatively affect, the professional relationship or provision of services, while adhering to organizational policies when requesting an exemption from service to an individual or group on the basis of conflict of conscience.

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