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Dear College of Technology Student,

Congratulations on your decision to pursue your education at the Idaho State University College of Technology. On behalf of all faculty, staff, and administration, I want to take this opportunity to personally extend a warm welcome. The College of Technology is one of seven colleges on the ISU campus designed to meet the needs of students – like you.

I am pleased to see that you made the decision to join the largest, most comprehensive postsecondary technical institution in the state of Idaho. You now belong to a college that boasts an alumni base of more than 25,000. For more than 100 years, students have graduated from Idaho State University with the technical skills necessary to successfully enter the workforce. I am confident that you will also be well prepared by our faculty to pursue your passion and have an enjoyable lifetime career.

Amid the excitement of enrolling at ISU, you probably have many questions. This student handbook has been prepared for your use and contains the answers to many of your questions. If you would like additional information, please contact your faculty or Student Services directly. We are all here to help you succeed in your studies and stand prepared to assist with your concerns.

Once again, welcome to the College of Technology.

Go Bengals!

R. Scott Rasmussen

Dean
II. Program Introduction

This handbook is designed to provide information and serve as a resource for most questions and school situations you may encounter as a student in the Occupational Therapy Assistant program. The information provided in this handbook is meant to supplement that provided in the Idaho State University Bulletin and Official Student Code of Conduct.

All students are directly responsible to the instructors first. Details regarding program procedures will be covered and questions answered during orientation at the beginning of the program or as the need arises. Problems of any nature will be brought to the attention of the instructors and program coordinator. They will seek assistance for a student problem. If a student feels a need for conference with someone other than an instructor or the program coordinator, a meeting may be arranged with an advisor from the College of Technology Student Services at (208) 282-2622.

Program Administration

The Occupational Therapy Assistant program is operated by the College of Technology, Idaho State University. The program works in cooperation with the Idaho State Board for Professional Technical Education and is approved by the State Board of Education.

The Occupational Therapy Assistant program is accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA).

Accreditation Council for Occupational Therapy Education

6116 Executive Boulevard, Suite 200
North Bethesda, Maryland 20852-4929
(301) 652-6611
acoteonline.org
Introduction

As you read this handbook, there will be six different forms you will be asked to sign. A few of these forms will be required for your participation in the Occupational Therapy Assistant program.

First, you will be asked to sign a handbook receipt acknowledgement form that stipulates your agreement to abide by the policies and rules within the handbook.

Secondly, you will be asked to sign an Access & Confidentiality Agreement that requires you to keep specific types of information confidential.

The third form that you are asked to sign is a form that asks for your consent to participate in laboratory procedures. This form must be signed before you can participate in laboratory activities. A student is not required to participate in any laboratory procedures that may have a negative impact on the student’s health. However, students must demonstrate safe and proper delivery technique for all laboratory procedures that are listed in each class syllabi.

All of the details that you agree to are discussed in the appropriate sections in this handbook. Please read carefully because you must sign all but the Photography Consent Release form to participate in the OTA program coursework. If there are any concerns or questions, please contact the OTA Program Coordinator.
Occupational Therapy Assistant Vision Statement

Be the Northwest’s preeminent Occupational Therapy Assistant program will be at the forefront of scholarship, leadership, service, and practice.

Occupational Therapy Assistant Mission Statement

We seek to develop entry-level clinicians who have a desire for lifelong learning and service to diverse populations. Our students will demonstrate occupation-based interventions with application of evidence-based practice.

Occupational Therapy Assistant Program Goals

1. Demonstrate professional behavior, ethical standards, values, and attitudes of the occupational therapy profession. Develop foundational knowledge of the profession.
2. Practice within the distinct role of the occupational therapy assistant and develop critical thinking skills.
3. Advocate for the profession, services, and the consumer.
4. Value life-long learning and the need to remain current with evidence-based practice and research.
5. Perform OT interventions using creativity and adaptive methods.
6. Serve a diverse population in a variety of systems as a generalist, entry level practitioner.

Occupational Therapy Assistant Philosophy Statement

The OTA program at Idaho State University believes that humans are unique, diverse, and creative beings that have an innate need and right to engage in activities/occupations throughout their lives. To meet the needs of the clientele that OTAs interact with, our program is committed to excellence in teaching, promoting service, and fostering inter-professional activities. We mirror the AOTA statement on philosophy of OT in that our program at Idaho State University believes therapeutic use of occupation/activity is the basis of which remediation and restoration, health promotion and well-being, health maintenance, disease and injury prevention, and adaption/compensation. In the OTA program at ISU, our graduates will understand the therapeutic value of engagement in these meaningful occupations and how they are a means an end in therapy.
The OTA program at Idaho State University believes that students are occupational beings. Students bring with them their own life experiences along with a desire to learn and for self-discovery. The faculty understands that students have different learning styles and believe that to develop excellent clinicians, we as instructors need to provide diverse instructional styles as well as opportunities to share each other’s rich life experiences to elicit meaningful and purposeful engagement and collaboration between student and instructor. This will promote active, engaging participation in the educational process and as instructors, we will work to enhance their ability to apply the learned principles in to practice. We also believe that the OTA program at Idaho State University must include coursework that covers a diverse and global population across the lifespan.

OTA students need to be able to:

- Understand and identify occupational activity for each client
- Use sound, evidence based practice
- Assist clients in adaptation to their situation
- Enter the work force with entry level skills to become excellent clinicians
- Become educators
- Develop desire to be lifelong learners impacting healthcare, political, cultural, and social systems.
- Enter emerging practice fields as well as current settings, advanced practice in rural settings, collaborate with other professionals and educate the community.

According to the philosophical base of occupational therapy, “Occupational therapy is based on the belief that purposeful activity or occupation, including its interpersonal and environmental components, may be used to prevent and remediate dysfunction and to elicit maximum adaptation.” The role of the occupational therapy assistant working collaboratively with the occupational therapist, under this philosophy, is to assist individuals who have experienced a disruption in their life, adapt to, and overcome these interruptions in human development. The job of ISU’s occupational therapy assistant program is to educate students to be able to identify occupation for each client and use sound, evidence based practice to assist that client in adaption to their situation. The core belief of this philosophy is that human beings are unique and each has a relationship with the world that is individual to that person. The role of occupational therapy then becomes a vehicle to maximize an individual’s performance with meaningful, desired activities and performance skills.

The philosophical base of OT as a profession states that human beings adapt to their circumstances as a function of intrinsic motivation. The philosophy that the human is an active being whose purpose is defined by activity also applies to the OTA student in our program. Because ISU students in the College of Technology will most likely consist of many non-traditional adult learners, the basic tenants of Malcolm Knowles’ adult learning theory were used to design the OTA curriculum. Knowles’ premise states that “adults enter into a learning experience with a need to know why they should be learning something.” Keeping that in mind, the OTA program was designed to interrelate so that
each class uses educational experiences linked to real-life job or career experiences as well as draw on student’s life history and experiences. The program plans to use standardized patients, case studies, and when able, clinic settings for students to participate in hands on learning experiences. Fieldwork level I and II will provide these opportunities.

The educational process at ISU for the OTA program begins with the learning of required competencies in the core curriculum. Once a student is accepted into the OTA program, the curriculum builds on those core competencies and becomes more specific and complex to the discipline of OT. The OTA student will learn foundational concepts that will be built upon more specialized occupational therapy theory and treatment classes which will include laboratory time to practice skills and techniques designed to prepare the student for an ever changing healthcare world. Over the course of the program, students will have the opportunity to see a wide variety of practice settings and treatment approaches. Just as it is the role of the occupational therapy practitioner to be a vehicle to maximize a client’s performance with meaningful, desired activities, occupations, and related performance skills, we believe that as instructors, it is our role to facilitate maximum learning and performance skills in our students to become excellent clinicians.

The philosophy of the OTA program at ISU in the College of Technology is congruent with the mission statement of ISU which is to advance scholarly and creative endeavors through the creation of new knowledge, cutting-edge research, innovative artistic pursuits and high-quality academic instruction. This philosophy and mission is congruent with AOTA’s philosophy of occupational therapy education which states that OT education must “reinforce the development of new knowledge supporting the use of occupation, the application of clinical reasoning based on evidence, the necessity for lifelong learning and the improvement of professional knowledge and skills.” The OTA program at ISU also shares these principles in that the objective of the educational process for the OTA is to work in a diverse world, apply skills based on knowledge and embrace the desire to be a life-long learner.

Adult learners, according to Knowles (1996), are motivated to learn by intrinsic and extrinsic motivators. Because the ultimate outcome for the graduates of ISU’s OTA program is employment, the educational process will strive to demonstrate to the student how the concepts in the classroom will directly relate to a future job. The OTA graduate is thought to be as dynamic and adaptive as the population they serve. Through the outcome of the congruent goals and mission, it is the belief that our OTA students will be intrinsically motivated to assume the role of lifelong learner by seeking learning, teaching and research opportunities that will lead to overall success and growth of the profession and our community.

These principles in that the objective of the educational process for the OTA is to work in a diverse world, apply skills based on knowledge and embrace the desire to be a life-long learner.

**Course Sequence**

Within the curriculum design there is a focus on the occupational therapy practice framework. The program curriculum is carefully structured in a stepwise fashion to facilitate adult learning and progress. The first step begins with understanding normal behavior and basic biology in the prerequisite courses of Introduction to General Psychology and Concepts Biology Human Concern. Medical Terminology will orient the students to an understanding of standardized medical language used among health care providers. Throughout the program, students will complete general education requirements with identified outcomes in the areas of communication, computation, and human relations that align with and support program goals. These skills are integral to developing a well-rounded, entry level professional.

The fall semester introduces foundational skills and information about occupation, the history of the profession, roles, ethics, supervision standards, documentation, and practice settings, along with an overview of lifespan development as a foundation to understand the impact of disease or dysfunction on occupation in Foundations of Occupational Therapy. Students have an introduction to understanding themselves, their new environment and occupations as they embark on this new career through personality testing and learning style inventories. Students are introduced to the normal structure and function of body cells, tissues, organs, and systems in Anatomy and Physiology. A conceptual overview of activity analysis and practice skills in detailed analysis of activity for therapeutic use of self, technology, manual arts, media and activity (occupations), and documentation is learned in Therapeutic Activities. Students are able to practice these new skills in laboratory activities. Group dynamics are also introduced and explored. Kinetics of human motion with an emphasis on normal motion and movement patterns in the context of activity and Occupational Therapy is taught in Human Movement for Occupations.

Evidence-based practice begins as students use research to learn to recognize limitations of human movement and impact on occupational performance. Abnormal Psychology begins the introduction of variations from normal in the context of psychosocial dysfunction, historical approaches to mental illness, and evaluation of current practice in diagnosis and treatment of psychological disorders. Students see real world application through...
as they go on their first Level I Fieldwork where they observe clinicians in diverse work settings. Student objectives are to observe, analyze and begin to reason and rationalize why we “do what we do.” This is a one week, 40 hour experience that allows students to come back to the classroom and expound on their observations.

In the spring semester, the next step is taken when the curriculum moves to building an understanding of basic therapeutic skills. Theory and Treatment of Psychosocial Dysfunction provides more in depth instruction in techniques and treatment related to psychological pathologies and conditions. Students learn how these diagnoses impede occupational performance and students are introduced in clinical reasoning to facilitate understanding of how we promote change to allow for occupational engagement. Students begin to utilize clinical reasoning skills to gather data, and determine performance problems in the performance areas found in the Occupational Therapy Practice Framework. Students learn to state those problems in objective, client-centered terms, and then research simple preparatory and occupation based intervention and activities to foster occupational engagement. Activity analysis, activity grading and activity selection, as wells as group dynamics are taught more in depth in these classes and students begin to see how to apply treatment principles to specific diagnoses. Students advance their presentation skills and teaching as they share knowledge about conditions and intervention with their classmates. Now that students have an understanding of themselves from the spring semester, they begin to employ themselves therapeutically to affect their clients and the environment to improve outcomes in treatment interventions. It is the beginning of understanding creativity and adaption when planning treatment. Students continue their learning of pathology and its effect on occupation with the study of Neurological Theory and Treatment. Here, the students learn diagnoses and evidence based treatment for neurological diseases and dysfunction. Normal and abnormal movement will be studied and students will learn strategies of modification, therapeutic activity and exercise to enhance engagement in occupation that are meaningful and necessary. Students utilize clinical reasoning to gather data and determine impact on performance areas as they apply to specific conditions and environments. Students identify those problems in objective, client-centered terms, and then research preparatory methods and occupational based interventions and activities to minimize those problems. Critical thinking and ability to use evidence-based research is demonstrated and assessed as the students prepare summaries of specific conditions and implementations of planned simulated treatments. Current and emerging practice techniques and methods will be explored in lecture and laboratory with simulated treatment practice. Students begin to practice documentation during these courses and are provided feedback to further develop this entry level skill. In the course, Practice Management, students learn day-to-day clinical issues related to clinical operations, documentation, quality assurance, compliance, ethics, and program management skills which builds beyond the introductory coursework in Foundations of OT in the first semester. The Practice Management coursework is designed to help students understand the dynamic and ever changing health care system and obtain critical thinking skills needed to navigate with confidence at an entry level. The second Level I Fieldwork takes place allowing students to further explore role delineation,
supervision and documentation standards while observing clinicians in diverse work settings for one week, 40 hours total and come back to the classroom to share their experiences and reflect on the impact of pathology on function.

Second fall semester, students take on the dynamic practice of pediatrics in Pediatric Theory and Treatment and Theory and Treatment of Physical Dysfunction. In these classes, students explore diagnoses and conditions commonly seen in this population such as adaptive seating, feeding, adaptive technology, as well as look into emerging practices and practice settings for children and adults. Challenges to occupational performance will be explored and students will learn to consider all areas including person, environment and occupation. Professional Transitions is a course offered to prepare students for Level II Fieldwork, the certification exam, and to make the transition from student to clinician. A portfolio or “toolkit” will be prepared that includes treatment ideas and other reference material that the students have gathered throughout the program to take with them into the working world.

At the conclusion of classroom based education, students move to the real world clinical experiential learning in their two Level II Fieldworks. The first Level II Fieldwork is during the early eight weeks of spring semester and the second Level II Fieldwork takes place during the late 8 weeks of spring session. This is where the culmination of all the previous program coursework happens. Each fieldwork is focused on a different type of practice setting under the supervision of a qualified OT and/or OTA fieldwork educator. Students will have completed and passed all didactic coursework prior to any Level II fieldwork placement. With the successful completion of fieldwork, our students should be at entry level, ready for clinical practice.

Throughout the curriculum, students discuss and research how the person, environment and occupation (PEO) impact, and are impacted, by physical, mental, and developmental challenges to occupational engagement and performance. The concept of occupational performance is applied with increasing complexity within each course as the student develops their knowledge and understanding of techniques to enhance participation in occupations. Students are given tools to understand and begin using evidenced based interventions that are client centered and occupation based. The curriculum will provide a strong base for our graduates to be mindful of the changing dynamic of the health care system, collaborate with clients, team members and families to implement intervention plans designed to enhance occupational performance. The faculty will also use the PEO theory to provide a learning environment that is student centered. This will allow for the implementation of different teaching styles and to provide guidance and feedback for student learning. Students will enter the workforce with entry level skills and the ability to effectively utilize the Occupational Therapy Practice Framework and the Person, Environment, Occupation theory with a diverse population across the lifespan.
Curriculum Design

The OTA program at ISU has developed a curriculum design that comes from several frames of reference that reflect the mission and philosophy of the program and institution and also aligns itself with the curriculum design of the OTA and MOT programs at ISU. This design provides opportunities for students to address diverse populations with occupational needs coming from existing and emerging areas. It will provide the basis for program planning, program implementation, and evaluative selection. It also will be the basis for course sequence and scope of the coursework. Embedded in the design are the curricular threads and educational goals.

The theories considered for the curriculum design are Malcolm Knowle’s theory of Adult learning and PEO (Person, Environment, and Occupation). The pattern for how courses are sequenced is derived from the Occupational Therapy Practice Framework. Using tenets from these theories, techniques for evaluating student performance is also derived. The coursework will include instructional styles such as Action Learning, Experiential Learning and Project Based Learning. Understanding the components of occupational participation and behavior, or, “why it is important” and “why we do what we do” is an integral component of the teaching and learning process throughout the curriculum. The occupational performance areas of ADL, IADL, education, work, play, leisure, rest/sleep, and social participation are embedded in lectures, assignments, discussions, assessments of the student’s ability to apply concepts of occupation to evidence based, client centered, occupation based interventions and programming throughout the OTA curriculum.

Curriculum Threads

FOUNDATIONAL KNOWLEDGE

Using adult learning models, and the OTPF, we build a foundation of core knowledge of the theory and base of OT, introducing terms, ideas, theory, founding therapists, etc. to the student. The foundation is laid for building on skills of critical thinking, ethics, and professional behaviors and responsibilities.

CRITICAL THINKING SKILLS

The students build on their foundational knowledge and begin to apply OTPF to practice settings and knowledge of the OT process. The students begin to analyze and practice real world interventions through group projects and case studies and level I Fieldwork. There is a review of relationship of occupation to normal development and how abnormal development impacts individuals mentally, physically, emotionally and spiritually. The
students begin to understand and apply occupation to a variety of circumstances and situations both current and emerging.

PROFESSIONALISM

Students learn and articulate the rationale and need for role delineation, supervision, and documentation across the spectrum of practice settings. Students learn to apply principles of management, collaboration, leadership, ethics, advocacy, accountability, and responsibility for their practice of OT as it applies to the content of each course. They learn how to accept feedback and to give it professionally and understand how this is used for professional growth opportunities.

FACILITATING ADAPTATION AND CREATIVITY

Students learn how to adapt the environment, the interventions chosen, and themselves through therapeutic use of self, choosing client centered, relevant occupation based activities and interventions, and being able to grade and analyze the activity. The students will be able to express creativity and thought by understanding the importance of culture, education, socioeconomic factors, and spiritual beliefs and practices as they are seen through the lens of occupation. This facilitates the students in their ability to work with a diverse group of individuals using effective interventions and programming.

Occupational Therapy Student Organization (SOTA)

The SOTA Organization is a student organization open to any student taking occupational therapy classes at Idaho State University. It is an affiliate of the national student OT organization, Association of Student Delegates. In addition to connecting OTA students with their national professional association, the SOTA organization provides social and educational opportunities for students at Idaho State University. This organization at Idaho State University is in the developing staging. Once up and running, activities for the school year will center around fund-raising to promote school and community activities, send delegates to IOTA and AOTA conferences, provide scholarships for students and promote OT. This organization is an important part of the educational experience at Idaho State University.

Idaho Occupational Therapy Association (IOTA)

Since 1974, the Idaho Occupational Therapy Association (IOTA) has brought occupational therapy practitioners together to advance and promote the profession of occupational therapy in Idaho.
IOTA offers networking opportunities and focuses on three core programs for our members:

- Continuing education
- Awareness
- Advocacy

To join, go to:

id-ota.org

**American Occupational Therapy Association (AOTA)**

Take another giant step toward your future and join AOTA now! Add the nuts and bolts of real-world occupational therapy to your education. Student members get the same great benefits as every other AOTA member and one more—substantial savings on dues and more!

To join, go to:

aota.org
III. Fall 2020 Health & Wellness Plan

Idaho State University will resume full campus operations for the Fall 2020 semester, which will include in-person instruction, an adjustment to the fall academic calendar, and implementation of public health guidelines. Currently, the University is following State of Idaho guidelines to rebound to normal operations. Detailed information is available online and regularly updated at: isu.edu/coronavirus/

Fall 2020 Schedule

The University will adjust the Fall 2020 academic calendar to ensure that all face-to-face instruction has be completed by Tuesday, November 24, two days before Thanksgiving. The University will shorten the Thanksgiving Break to three days (Wednesday through Friday), and classes will meet on the Monday and Tuesday of Thanksgiving Week. Following Thanksgiving, the University will have one week of online final exams (November 30 – December 4). The start date for the fall semester will remain on Monday, August 17.

This adjustment to the calendar will allow the University to complete all face-to-face instruction before late fall, when projections in our neighboring states suggest greater prevalence of general illness and perhaps an increased threat from COVID-19. The change also supports student academic progress and ensures the University meets all federal and accreditation requirements.

<table>
<thead>
<tr>
<th>Date Range</th>
<th>Event</th>
</tr>
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<tbody>
<tr>
<td>August 17</td>
<td>Fall Classes Begin</td>
</tr>
<tr>
<td>October 5 - 9</td>
<td>Mid-Term Week</td>
</tr>
<tr>
<td>November 24</td>
<td>Face-to-Face Instruction Concludes</td>
</tr>
<tr>
<td>November 25 - 27</td>
<td>Thanksgiving Break</td>
</tr>
<tr>
<td>November 30 - December 4</td>
<td>Online Final Exams</td>
</tr>
<tr>
<td>December 15</td>
<td>Semester Grades Due</td>
</tr>
</tbody>
</table>

**Note: Any deviations from this schedule will be given in advance by the instructors.**
Health and Safety

Adjustments have been made on campus to ensure health and safety. University officials are working with state and local public health officials to implement a number of recommendations from the Centers for Disease Controls. Classes are being moved into larger meeting places for increased social distancing, some class times have been changed to accommodate classroom availability, and some instruction will make use of hybrid in-person and online models.

For the Fall 2020 semester, all individuals should continue to:

- Engage in physical distancing of at least six feet.
- Wear face coverings in public places – including interactions within six feet or when indoors in common areas or classrooms.
- Stay home if sick or if someone in your household is sick.
- Practice good hand hygiene – wash hands regularly with soap and water.
- Do not shake hands, high-five, hug, etc.
- Cover coughs and sneezes.
- Disinfect surfaces and high-touch objects regularly.

Cloth Face Coverings

All members of our Bengal community have a shared responsibility in doing their part to protect one another, our families, and those who are medically vulnerable. All faculty, staff, students, and visitors are required and expected to wear face coverings for the Fall 2020 semester.

The CDC recommends that everyone wear cloth face coverings when leaving their homes, regardless of whether they have fever symptoms of COVID-19. This is because of evidence that people with COVID-19 can spread the disease, even when they don’t have any symptoms.

Cloth face coverings may prevent the person wearing the mask from spreading respiratory droplets when talking, sneezing, or coughing. Since people may spread the virus before symptoms start, or even if people never have symptoms, wearing a cloth face covering may protect others around you.

When using a cloth face covering, make sure:

- The mouth and nose are fully covered.
- The covering fits snugly against the sides of the face so there are no gaps.
- You do not have any difficulty breathing while wearing the cloth face covering.
- The cloth face covering can be tied or otherwise secured to prevent slipping.
- Wash your cloth face covering after each use in the washing machine or by hand using a bleach solution. Allow it to completely dry.
IV. Program Policies

Competencies of the Program Graduate

CLIENT CARE

- Works under the supervision of an occupational therapist in an ethical, legal, safe, and effective manner.
- Implements a comprehensive treatment plan developed by an occupational therapist.
- Communicates regularly with the supervising occupational therapists about the client’s progress and the need for adjustments to be made by the occupational therapist in treatment procedures in accordance with changes in client status.
- Performs appropriate measurement and assessment techniques within the knowledge and limits of practice to assist the supervising occupational therapists in monitoring and modifying the plan of care.
- Interacts with clients and families in a manner which provides the desired psychosocial support including the recognition of cultural and socioeconomic differences.
- Participates in the teaching of other health care providers, clients and families.
- Documents relevant aspects of client treatment.
- Participates in discharge planning and follow up care.
- Demonstrates effective written, oral and nonverbal communication with clients and their families, colleagues, health care providers and the public.

OCCUPATIONAL THERAPY PROFESSIONALISM

- Understands the levels of authority and responsibility; planning, time management, supervisory process, performance evaluations, policies and procedures; fiscal considerations for occupational therapy providers and consumers; and, continuous quality improvement, practices of reading and interpreting professional literature.
- Participates in continuing development of knowledge and skills.

Essential Functions of an OTA or OTA Student

A primary role of the Occupational Therapy Assistant program is to graduate qualified individuals who can safely and competently perform the necessary skills as practitioners. The essential functions noted below have been identified as required components of the
practice of an Occupational Therapy Assistant. Students must be capable of performing the essential functions in order to successfully complete the ISU Occupational Therapy Assistant Program.

FUNCTIONAL REQUIREMENTS FOR PROGRAM PARTICIPATION

The role of an Occupational Therapy Assistant is both rewarding and demanding. The following essential functions are required of all students who enroll in the Idaho State University Occupational Therapy Assistant Program.

MOTOR

- Independently move from room to room and maneuver in small spaces
- Participate in transfers of patients (children to adult) from a variety of heights and surfaces
- Guard and assist patients with functional mobility
- Be able to physically manage self so as not to be a danger to others
- Trunk control adequate for independent balance and function
- No muscle spasms that consistently affect movement or stability
- Manipulation skills adequate to make notations, participate in clinic maintenance, adjust equipment, assist in patient/client movement, etc.
- Perform CPR
- Travel to and from academic and clinical sites
- Physically participate in an active, 8–10 hour school/work day, consistently.

COMMUNICATION SKILLS

- Use verbal, nonverbal, and written communication to effectively explain and/or demonstrate tasks and techniques to others
- Communicate effectively in English with patients, families and other healthcare providers, both verbally and in written form
- Effectively adapt communication for intended audience
- Speak with enough volume to be reasonably heard by intended audience
- Perceive, understand, and appropriately act on non-verbal communication, such as changes in mood, activity, facial expressions and postures
- Assume the role of an effective member of a health care team
- Function effectively under supervision, including collaboration as well as effectively receiving and providing feedback
- Interact and establish rapport with individuals and groups from a variety of social, emotional, cultural and intellectual backgrounds

PROBLEM SOLVING/Critical THINKING

- Function effectively under stress
- Respond appropriately to emergencies
• Use sound judgment to adhere to infection control and safety procedures
• Demonstrate problem-solving skills that reflect consideration of multiple forms of information: written, verbal, observation, etc. Must be able to reason, measure, calculate, prioritize and synthesize information
• Address problems or questions to the appropriate person at the appropriate time
• Consistently follow policies and procedures required by clinical and academic settings, governmental regulations, and requirements of reimbursement sources
• Demonstrate the capacity to consistently, effectively, and efficiently plan, organize, and perform job duties within limited time frames according to current industry standards

ACADEMIC ABILITY

• Read and understand information from textbooks, online resources, and other materials
• Synthesize information effectively to be able to demonstrate knowledge and skills through written work, tests and demonstrated performance: Student should be able to synthesize this information from a variety of formats. These formats include, but are not limited to text, lecture, video/computer, and demonstration.
• Data collection from a variety of sources and interpretation of materials that include, but are not limited to text, notes, online resources, observation, and clinical records
• Pay attention, without prompting, to teachers, guest speakers and other classmates during verbal presentations
• Effectively use a computer and computer programs. These include, but are not limited to: email, PowerPoint, search engines, up/downloading of documents, YouTube, and other online resource sites.

SENSORY CAPABILITY

• Visually observe with enough acuity (in a variety of lighting conditions) to participate in lab activities, lectures and clinical experiences
• Read small print information—such as that can be found on medical equipment
• Hear sufficiently to perceive normal tone of voice to follow directions, participate in conversations, answer phones and intercoms
• Assess and treat all assigned clients, including palpation of the client
• Monitor vital signs
• Auditory, visual, and tactile abilities sufficient to assess patient status and perform treatments
• Perform responsibilities while in close proximity or in physical contact with others

PROFESSIONAL BEHAVIORS
• Emotional health and stability sufficient to complete complex patient care responsibilities within an allotted time
• Flexibility to function and remain calm under stressful conditions, including emergency situations, taxing academic, and clinical workloads
• Consistently demonstrate compassion, empathy, tact, honesty, responsibility, integrity, and strong work ethic
• Follow safety precautions
• Perform tasks and interventions within competency level and seek assistance and training when additional knowledge or competency skills are required
• Actively seek and participate in continuing professional education opportunities in order to maintain and improve knowledge and competence
• Utilize evidence and OT theories, models, and frames of reference to provide the most effective interventions for clients and patients
• Independently track and complete multiple tasks, meeting deadlines and priorities as set by self and others
• Effectively interact with diverse populations and personalities
• Document and report activities accurately according to the requirements of the setting as well as external regulations, policies or procedures, and professional ethics

Learning Assessment

The ISU OTA program believes that students are lifelong learners and we strive to foster this behavior. To be able to assess student learning and course outcomes, we will use the Cognitive, Affective, and Psychomotor domains as described by Bloom’s educational theory.

The following is a brief description of each domain:

1. **Cognitive**: “what you know,” as determined by tests, quizzes, homework, case studies, etc. This is looking at recall and recognition of specific concepts that are necessary to develop and build on to understand more complex theory or critical thinking activity.

2. **Affective**: “how you feel, what is your attitude and value towards an activity or person, and what motivates you and how to motivate others.” This will be assessed during interactions with patient/clients on FW and during activities to understand “therapeutic use of self”

3. **Psychomotor**: “what you do,” as determined by lab exercises, skills checks, etc.
   a. **Failing a "skills check"**: Requires a make-up. Two make-ups are allowed. If the student passes a make-up they will receive the lowest passing grade (C) regardless of the score for that make-up. If the student fails all three chances at that “skills check”, they will not be allowed to continue. Students who are not allowed to continue because of failure to meet the
performance requirements in any OTA class may petition to return the following year and retake the class.

b. **Failing a Fieldwork Placement**: Fieldwork placements are graded on “Successful/Unsuccessful” basis. An FW student must complete each clinical experience with a “Successful” grade in order to continue with the program. The final decision for whether or not a student passes a Fieldwork placement rests with the AFWC and OTA faculty, not the Fieldwork educator. If an “Unsuccessful” grade results, the student will be evaluated by the faculty and may be given the option of returning the following year to re-enter the program through petition. The student may also be given the option to complete any OTA coursework partially finished by the time the fieldwork placement began. This is not guaranteed. The decision will be subjectively determined based on past performance at all levels in the cognitive, psychomotor, and affective domains, resources of the program, and availability of clinical sites.

For any failure which requires taking a class or Fieldwork placement the following year, and the student chooses not to complete those classes or fieldwork the following year, the student will be dismissed from the program. If there are extenuating circumstances, the decision to continue with the program will be up to the discretion of the OTA program faculty.

### Attendance

1. Academic Attendance policy in each OTA program course is up to the discretion of the instructor. Refer to syllabus for information.
2. Fieldwork: You are expected to follow good work ethics in performing clinical affiliations. If an emergency arises such that you are unable to attend your fieldwork, please call your fieldwork educator and explain your situation. It is also important to notify your AFWC to keep them informed and updated on fieldwork issues. You are allowed two excused absences with every attempt made to make up those days during the affiliation. Excused absences beyond two days require equivalent make up day(s) during the fieldwork rotation or at the end of the fieldwork rotation in order to pass successfully.

### Grading Policy

<table>
<thead>
<tr>
<th>Letter Grade</th>
<th>Percent</th>
</tr>
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<tbody>
<tr>
<td>A</td>
<td>93-100</td>
</tr>
</tbody>
</table>

Excellent
A- 90-93
B+ 87-89
B  83-86 Above Average
B- 80-82
C+ 77-79
C  73-76 Passing
C- 70-72
D+ 67-69
D  63-66
D- 60-62
F  Below 60
W  Withdrawal
I  Incomplete
X  Nonparticipation

The student must average a cumulative 2.0 in general education courses and must achieve a grade of "73" or better in all other courses required for the OTA program to remain in the Occupational Therapy Assistant program. Make-up examinations are given solely at the discretion of the instructor. Failure to complete an examination on the assigned date may result in "0" (zero) points for that exam.

Grading for each class will be comprised of evaluation of cognitive and psychomotor domains. Each domain must be passed with a "73" or better. For instance, a student may have scored a 90% in the cognitive domain, and a 70% in the psychomotor domain. Even though the average of the two is 80% (above 73%), the psychomotor domain is below 73%, and therefore a student will not pass the entire class. This prevents a student from moving on in the Occupational Therapy Assistant Program without having successfully completed all educational domains.

Receiving a grade below a “73” in any domain, in any OTA class is cause for immediate dismissal from the program. However, at the discretion of the OTA program faculty, the student may petition to re-enter the program at the same place the following year, as each course is delivered only once a year. Failure to successfully complete a course the second time results in termination from the program.

LATE WORK
A letter grade is dropped for every day an assignment is late.

WITHDRAWAL
Withdrawal from a course effectively withdraws the student from the OTA program.

INCOMPLETE
A grade of “I” (incomplete) will only be issued if special permission by the instructor is granted and an “incomplete” contract form is completed by the student and the instructor.

ACADEMIC DISHONESTY

Cheating may consist of plagiarism, copying from another student’s work, obtainment of online materials, etc. Students caught cheating will be dismissed from the class, given a grade of “F”, and dismissed from the OTA program. Dishonesty, stealing and other violations of the student code of conduct will be handled on an individual basis. Students should familiarize themselves with the ASISU Student Code, Handbook, and Calendar available in Student Services.

Probation and Dismissal from the Program

PROBATION AND DISMISSAL

Probation is a procedure whereby a student who is in violation of policy may return to good standing upon graduation. When a student is placed on probation, the length, reasons, and terms will be clearly outlined in writing. If a student fails to comply with the terms of the probation, he or she will be dismissed from the OTA program.

When a student is identified as having a problem serious enough to warrant dismissal from the program, the following steps are initiated:

1. Student’s problem is identified by the instructor and discussed with the student.
2. If the problem persists, the instructor discusses the situation with the OTA faculty and/or chairperson.
3. The primary instructor will confer with the student and identify in writing, remediation measures and time frame for completion, which will be signed by the student and the instructor. The original paper will be in the student’s file and a copy given to the student.
4. If remediation is not satisfactory, the student will be dismissed from the program.

A STUDENT MAY ALSO BE REQUESTED TO LEAVE THE PROGRAM AT ANY TIME FOR ANY OF THE FOLLOWING REASONS:

1. Grade below "73%" in any of the required courses.
2. Unsafe practice in the clinical area; any act that is harmful or potentially detrimental to the patient. This includes:
   - Inability to apply classroom theory to clinical practice.
   - Inability to determine capabilities or limitations.
   - Inability to follow written and/or oral instructions.
   - Inability to demonstrate occupational therapy assistant skills at level of education.
3. Consistently coming to the classroom or clinical area poorly prepared, such as, but not limited to:
   • Illness
   • Fatigue from lack of sleep
   • Impaired reflexes and/or judgment

Readmission into the Occupational Therapy Assistant Program

Note: A student is not eligible for reinstatement into the Occupational Therapy Assistant Program if dismissed on the grounds of academic or clinical dishonesty, alcohol or drug abuse, or is prohibited from training at any of the sponsoring agencies.

A student may go through the appropriate channels established by Student Services to request readmission into the OTA Program.

• Reinstatement will be limited to one opportunity after the initial failure, or postponement.
• Students who are separated from the program for greater than one year must re-apply for admission to start the program over from the beginning.
• A student may be readmitted conditionally or unconditionally. If on conditional status, specific criteria will be formulated as identified in a contractual agreement.
• A returning student must repeat skills checks successfully prior to any fieldwork.

Fieldwork

The student will attend two full-time Level II Fieldwork placements. All didactic coursework must be completed satisfactorily in order to participate in Level II Fieldwork.

Two full-time fieldwork placements must be satisfactorily performed in order to complete the OTA program. These are practical clinical rotations that are supervised primarily by a Fieldwork Educator (FE) assigned by the clinical facility. The FE will carry out day to day interaction with the OTA intern. Ultimately, the responsibility of determining satisfactory completion of an affiliation is placed upon the Academic Fieldwork Coordinator (AFWC) and the OTA faculty based on the FE’s assessment. More information on fieldwork and how such training is assessed can be found in the fieldwork handbook which is a document given to each incoming student.

Each fieldwork rotation is expected to meet standards of employment. The intern is expected to work a 40 hour week within the determined fieldwork rotation dates as specifically determined by the FE and AFWC. Interns are expected to utilize, to the best of their ability, each affiliation for educational advancement. Each intern should pursue increasing levels of responsibility as theoretical and technical abilities increase.
throughout the two fieldwork affiliations. (Likewise, each intern is only expected to perform clinical duties that they have addressed in OTA coursework, feel competent completing safely, and that are approved by the AOTA and state practice guidelines).

Each student is responsible for participating in choosing fieldwork sites that best meet their educational goals. Final decisions will be determined by the AFWC and will be based on site availability, order of choice, and educational goals. It is expected that all students will be flexible with site selection. A student should expect to relocate to an area outside of southeastern Idaho as determined by the program for both required fieldwork affiliations. Expenses incurred from any relocation (including housing, transportation, food, etc.) are the responsibility of the student.

Health Occupations faculty and fieldwork educators have the responsibility to assure that they are not involved with HO Department students in dual or multiple relationships. Dual or multiple relationships are defined as relationships that, in addition to the teacher/student role, may include financial, business, personal, sexual, or family relationships that could bring in to question the ability of the parties to perform their duties in a professional, arms-length, objective fashion, or that might subject the student to the potential of threat or coercion associated with differential positions of power. If these relationships are pre-existing, they should be disclosed to the supervising faculty or the department chairman in order to ascertain whether the student needs to be re-assigned to another faculty member or moved to an alternative fieldwork site. The sensitivity to and prohibition of dual relations is not only for the protection of the student involved, but also to the integrity of the program. Furthermore, it can serve as an assurance to other students in the program that the standards upon which a student will be graded are fair, objective, and not potentially biased by factors outside of a student’s actual performance in the program.

All Level II fieldwork must be completed within 18 months of completing didactic coursework.

INSURANCE

1. Liability insurance is required to participate in all fieldwork placements. A one-time premium of $14 will be attached as a class fee when paying for the fall semester of the second year, prior to the first eight week clinical.
2. Health insurance is required to participate in all fieldwork, Level I and Level II.
3. Workers’ Compensation insurance will be provided to the student by the University.

IMMUNIZATIONS

Along with you obtaining a physical examination by a medical professional (medical doctor, physician’s assistant or nurse practitioner) a subsequent medical history will need to be completed. Your physician must complete the Report of Medical History Form (the medical physical form) which includes:
• Hepatitis B: Documentation of the completion of the three shot series and a subsequent positive titer which indicates sero-conversion. (If the titer is negative the Hepatitis B shot series will need to be completed again.)
• TB assessment: Must be completed yearly.
• MMR: You must show documentation of two MMRs or a titer showing immunity for Rubella and Rubeola.
• Tetanus: Must have been completed within the past 10 years. This must be documented on the health form.
• Varicella (Chicken Pox): Must have a positive Varicella titer or documentation of Varicella immunization injection. History of the disease is not acceptable.

All students must have their vaccinations, including Hepatitis B (and the test for Tuberculosis) completed before the first day of the first clinical affiliation. Students who do not provide proof of the required immunizations (or a signed waiver for Hepatitis B) will not be allowed to attend an affiliation until their files are complete.

CPR CERTIFICATION

CPR Certification is required prior to entering any fieldwork placement, and the student will not be allowed to participate until certification is complete. The required CPR certification is American Heart Association Healthcare Provider.

MEDICAL EMERGENCY

In the event the student has a medical emergency at the facility they will be referred for appropriate medical treatment. The student will incur the cost of the treatment.

American Occupational Therapy Association (AOTA)

The American Occupational Therapy Association (AOTA) is the national organization dedicated to serving the occupational therapy profession. The AOTA is your best source for the latest information on occupational therapy practice trends and issues.

AOTA membership offers you the following benefits:

• Legislative Advocacy on your behalf
• Reimbursement Updates and Information
• 11 special interest sections
• Continuing Education Opportunities (at reduced fees for members)
• Career Development Resources
• Updates in Occupational Therapy Practice and Research
• Insurance and Financial Services
• Membership directory

Publications and the AOTA web site (www.aota.org) keep you abreast of professional developments. Changes and advances are occurring daily that are not in your textbooks, the AOTA has many specialty sections that give you the chance to develop a greater understanding of particular areas-and to meet and interact with professionals who share your interests.

Generic Abilities

GENERIC ABILITIES

The faculty members of the Occupational Therapy Assistant Program in the College of Technology at Idaho State University view the development of professional behaviors as necessary for the successful performance as an Occupational Therapy Assistant. Supporting this belief, students will be actively developing professional traits during their academic and fieldwork classes. All classes will address and support ongoing development in individual goal areas and academic advisors will review and challenge students in this endeavor.

METHOD

Students may wish to formally evaluate areas of concern using assessments such as the LASSI, or similar trait assessments available in the Student New Direction Center in the College of Technology. Using self-assessment tools the student will develop a focus of 1-2 areas each semester and develop an improvement plan with measureable goals/objectives to address performance. Goals/objectives will be reviewed with faculty advisor, and an ongoing action plan determined. Students will develop a “Generic Abilities Binder” that will allow the student to collect and maintain ongoing evidence of their development plan. Binders will be reviewed by the academic advisor at the start of each semester and approximately 2 weeks prior to the end of each semester.

Faculty expect to see on going evidence of refinement in generic abilities in all academic pursuits as well as evidence in out of class occupations. For example: In addressing stress management a student may identify that they wish to pursue training in “Mindfulness” by taking a community education seminar, and in addition demonstrate use of some techniques learned when encountering stress with exams in the class room.

GENERIC ABILITIES AND DESCRIPTIONS

Commitment to Learning
• Identifies problems; formulates appropriate questions; identifies and locates appropriate resources; demonstrates a positive attitude (motivation) toward learning; offers own thoughts and ideas; identifies need for further information

Interpersonal Skills

• Maintains professional demeanor in all clinical interactions; demonstrates interest in clients as individuals; respects cultural and personal differences of others; is non-judgmental about clients’ lifestyles; communicates with others in a respectful, confident manner; respects personal space of clients and others; maintains confidentiality in all clinical interactions; demonstrates acceptance of limited knowledge and experience

Communication Skills

• Demonstrates understanding of basic English (verbal and written), uses correct grammar, accurate spelling and expression; writes legibly; recognizes impact of non-verbal communication; listens actively; maintains eye contact

Effective Use of Time and Resources

• Focuses on tasks at hand without dwelling on past mistakes; recognizes own resource limitations; uses existing resources effectively; uses unscheduled time efficiently; completes assignments in timely fashion

Use of Constructive Feedback

• Demonstrates active listening skills; actively seeks feedback and help; demonstrates a positive attitude toward feedback; critiques own performance; maintains two-way information

Problem Solving

• Recognizes problems; states problems clearly; describes known solutions to problem; identifies resources needed to develop solutions; begins to examine multiple solutions to problems

Professionalism

• Abides by AOTA Code of Ethics; demonstrates awareness of state licensure regulations; abides by facility policies and procedures; projects professional image; attends professional meetings; demonstrates honesty, compassion, courage and continuous regard for all

Responsibility
• Demonstrates dependability; demonstrates punctuality; follows through on commitments; recognizes own limits

Critical Thinking

• Raises relevant questions; considers all available information; states the results of scientific literature; recognizes "holes" in knowledge base; articulates ideas

Stress Management

• Recognizes own stressors or problems; recognizes distress or problems in others; seeks assistance as needed; maintains professional demeanor in all situations


Generic Abilities will also be emphasized on fieldwork and used to assist faculty and fieldwork educators in determining achievement of entry level behaviors for professional practice. Fieldwork affords the student the opportunity to develop skills necessary for success in the work place.

Lab Rules

1. There is to be no practicing without an instructor or other qualified person present.
2. Do not use any equipment unless you have been properly instructed on the care and use of that particular item.
3. Report any unsafe situations or conditions to an instructor.
4. Report any injuries or exposure to hazardous materials to an instructor immediately.
5. There are to be sheets on the treatment tables, and pillowcases on the pillows at all times. Linens will be changed after each use.
6. Keep sharp objects from cutting into treatment table mats, and pens from staining.
7. Water in container with lid is allowed. Other food/drink is at the discretion of the instructor.
8. No shoes on treatment tables.
9. Clean-up of lab, and laundry will be assigned on a weekly basis.
10. No Walkman or other radios in the lab area.
11. Individual instructors may post lab clothes policy in their syllabus and lab clothes requirements may be attached to grades in some classes. Look at individual syllabi to understand lab clothes policy details for each class.
Safety

FIRE AND EMERGENCIES

Be aware of fire related hazards. These could include damaged electrical equipment, flammable liquids, improperly stored matches or combustible materials. Be suspicious of signs or smells that may mean there is a fire or excessive heat. In the event of a fire or smoke, remember to RACE:

1. Rescue: Rescue anyone in immediate danger from the fire to a safe area.
2. Alarm: Sound the fire alarm by pulling the nearest manual pull station and call the emergency number if there is one.
3. Contain: Contain the fire by closing all doors in and around the fire area.
4. Extinguish: If it safe, extinguish the fire by using a portable fire extinguisher. Point at the base of the fire and sweep back and forth at the base of the fire.

EVACUATION PROCEDURES

1. Students should take any belongings they have with them (backpacks, etc.), and move quickly and orderly to the designated staging area.
2. Monitors should close all doors as they move through their areas.
3. Exit the building and move to Cadet Field.

HAZARDOUS MATERIALS

Use according to manufacturer’s recommendations, and report any spills to instructor. A Minimum Safety Data Sheet (MSDS) for products can be found in the lab.

ELECTRICAL SAFETY GUIDELINES

1. Never use a modality unless you are thoroughly familiar with its operation and an instructor is in the lab.
2. Report all devices that do not seem to operate or seem different than normal to the instructor.
3. Report all devices with frayed, broken damaged, or non-functional components to the instructor. Do not allow equipment to roll over electrical cords.
4. Do not disconnect powered equipment by pulling on the electrical cord. Grasp the plug to disconnect equipment.
5. Do not use electrical cords, which are frayed.
6. Any unusual noise such as buzzing, unusual odors, tingling sensations are cause for discontinuing use of equipment.
Procedure for Reporting Potential Exposure

Any incident of potential contamination must be reported to and fully documented by the immediate supervisor, college or clinical faculty, and the appropriate college department head and dean.

Students

A. Lockers: Lockers are available to all students for storage of lab clothes, books, valuables, etc. Combination locks are recommended, and combinations or extra keys must be given to the program coordinator to be kept in a locked filing cabinet. This to ensure access in case of lost keys or forgotten combinations. No alcohol, drugs, hazardous items, or weapons may be stored in the lockers.

B. Email: An email account through the University or other provider is required throughout the program. It will be utilized for the dissemination of information, homework/classwork, research and to help the student become better acquainted with the Internet system and its application to the health field. An account through the University can be attained for $35.00 per semester.

C. Graduation Requirements: The degree of Associate of Applied Science: Occupational Therapy Assistant, will be awarded by ISU College of Technology to those students who satisfactorily complete the following minimum requirements:
   1. Pass all required didactic coursework with a "73%" or better.
   2. Pass all clinical affiliations with a grade of "Satisfactory".

D. Grievance procedure: If a student believes his or her rights have been violated or they are in disagreement with a Program decision they should first attempt to resolve the situation with the offending party. If that proves to be unsatisfactory, the student should then file an official petition with Student Services to outline the problem in detail. The petition will circulate through the program coordinator, the department chair and the Associate Dean. All parties involved will be allowed input and an appropriate decision reached. If the situation is not resolved to the satisfaction of the student or it is of sufficient consequence to take the issue to the university level, he or she may refer to "procedural rights" in the Student Code of Conduct and Scholastic Appeals in the ISU Student Handbook for further direction and information.

E. Records: The permanent record (transcript) of each student’s academic achievement is kept in the registrar’s office. Confidentiality of Records Policy follow the guidelines set forth by the Family Educational Rights and Privacy Act. ISU abides by this act. A cumulative record is kept on each occupational therapy assistant student. This record contains admission information, immunization records, and other pertinent information such as grades, advising sessions, etc. It is kept on file in a locked file cabinet in a locked office for five years after graduation. At any time, a student may check their own grade report or unofficial transcript by using their internet account to
access the school’s grade records. They may also find their class schedules listed in the same place.

F. Advising: Program advising and career counseling is available through Student Services and/or individual appointments with faculty members or the program coordinator. Once accepted into the program, the students will meet with the assigned advisor before beginning course work, and once at the beginning of every semester to discuss Generic Ability goals. At the end of the semester, students meet with OTA faculty to assess progress toward these goals and for feedback on personal growth and progress in the program. Faculty members maintain regular office hours when students can, by appointment, discuss their performance within a specific course, or their general performance in the program. The faculty can also assist with academic and/or personal problems when requested, or when the student’s conduct interferes with the learning process for himself/herself and/or others.

G. Dress Code: Occupational Therapy Assistant students will be involved in laboratory learning experiences, which include hands on participation. For all labs, appropriate dress is required. Instructors will advise in syllabus what dress is expected. Additionally, nail length should be kept short due to the potential for inadvertent scratching of fellow students or clients. For your safety, hair should be tied back during lab classes and clinical affiliations so as not to interfere with performance of therapy techniques. If a student is not properly dressed by the beginning of lab, he/she will be asked to leave that lab which will then be recorded as an unexcused absence. Required dress for fieldwork is determined by the fieldwork site. However, at the very least students are expected to dress professionally with a business casual approach, dress pants/khakis and unmarked logo-free polo or dress shirts/blouses, closed toe/heel shoes that are professional in appearance. Tennis shoes maybe worn if approval is given by the clinical site but must be a solid white or black, lab jacket/coat (if appropriate) and name tag. Fingernails should be no longer than the finger pads. Jewelry should be kept to a minimum for both the students’ and patients’ safety. Watches and wedding rings are acceptable. Piercing should be kept to a single ear lobe piercing the size of a pencil eraser. Tattoos should be covered at all times. Good hygiene is a must; uncleanness, body odor, bad breath, strong perfume and the smell of cigarette smoke are offensive to others.

H. Student Health: As a student, you should strive to maintain optimum health. Your grades are affected if you are absent and missing the learning experiences. If situations arise in which your health may be in danger, your instructor will be responsible for determining whether or not you may stay in the clinical area. These situations may include but are not limited to: back injuries, injuries requiring a cast, infectious diseases, draining wounds. In some cases, hospital policy may require you to remain at home. Should personal illness require withdrawal from the program, re-entrance will depend upon available clinical and academic space, satisfactory completion of previous course work, and department approval. Honesty about one’s health problems is encouraged. Any pre-existing conditions, i.e., severe emotional stress, drug related problems, back injuries, disabling diseases even though in an arrested state, must be documented at time of entrance into the program. Failure to
do so may be cause for dismissal. Faculty concerns for students leads us to request this information. Should a health situation arise, it is better for the faculty to be equipped to manage it than to know nothing about what is happening.

I. Policy on Transmitted Diseases: Health Occupations students and faculty should always be aware of potential contamination from infectious agents in the health care environment. It is important that everyone be alert to prevent accidental exposure. (Since medicine cannot reliably identify all patients with a transmissible disease, especially those in an emergency situation, it follows that health care practitioners should treat all patients at all times as if they were a potential source of infection.) This approach includes precautions for contact with patient’s blood and body fluids. This is referred to by CDC (Center for Disease Control) as “universal precautions”. Practice of these precautions will ensure protection against HIV (Human Immunodeficiency Virus), the cause of AIDS, HBV (Hepatitis B Virus), the primary cause of viral hepatitis, and all other blood borne infections agents. Rigorous adherence to these guidelines will be required of all students and faculty.

J. Precautions for The Transmission of HIV and other blood borne agents to Health Care Students and Faculty: Basic Aseptic Technique practiced by health care students/faculty in conjunction with the following blood and body fluid precautions can prevent the transmission of HIV, HBV and other blood borne agents.

1. All patients, their blood and other body fluids, will be considered to be infectious at all times.
2. Whether or not the patient is known to be infected with HIV or HBV, the student and faculty will:
   - Wash hands thoroughly with soap and water before and immediately after contact with patients, their blood, urine, or other body fluids.
   - Consider sharp items (needles, scalpel blades, other sharp instruments) as being potentially infective and handle with extreme care to prevent accidental injury.
   - Dispose of sharp items in puncture-resistant containers immediately after use.
   - Do not recap, purposefully bend, or otherwise manipulate by hand needles that are to be disposed.
   - Minimize the need for emergency mouth-to-mouth resuscitation by using pocket masks, bag valve masks, or other ventilation devices.
   - Wear gloves when handling patient’s blood, body fluids, and/or items soiled with blood or other body fluids.
   - Use gloves when performing venipuncture, arterial punctures and capillary sticks.
   - Wear gown, mask and protective eye wear when performing procedures where aerosolization or splattering are likely to occur (e.g. dental surgical procedures, wound irrigation, bronchoscopy, endoscopy, high speed centrifugation, hands on treatment techniques, etc.)
• Clean up spills of blood or body fluids immediately with a disinfectant such as 1:10 dilution of chlorine bleach. Dispose of clean up materials appropriately.
• A returning student must repeat skills checks successfully prior to any fieldwork.

AOTA Code of Ethics

The 2015 Occupational Therapy Code of Ethics 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:


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**

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**

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 Page 4 of 10)*

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

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. (Page 5 of 10 Related Standards of Conduct.)

Occupational therapy personnel shall:

A. Respect and honor the expressed wishes of recipients of service. 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.

B. Obtain consent after disclosing appropriate information and answering any questions posed by the recipient of service or research participant to ensure voluntariness.

C. Establish a collaborative relationship with recipients of service and relevant stakeholders, to promote shared decision making.

D. Respect the client’s right to refuse occupational therapy services temporarily or permanently, even when that refusal has potential to result in poor outcomes.

E. Refrain from threatening, coercing, or deceiving clients to promote compliance with occupational therapy recommendations.

F. Respect a research participant’s right to withdraw from a research study without penalty.

G. 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).
H. Display responsible conduct and discretion when engaging in social networking, including but not limited to refraining from posting protected health information.

I. 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**

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 Page 6 of 10)*

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

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.

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

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.

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.

References:


Your AOTA membership gives you discounts on publications, conferences, and seminars plus access to job advertisements and listings. There are AOTA sponsored insurance and business programs for you.

The AOTA has an active Idaho Chapter (www.id-ota.org) that exists as an organization to represent and be an advocate for the occupational therapy profession in the state and to assist in improving skills and knowledge of its members. The chapter is rebuilding and plans to hold regular meetings and sponsor conferences and activities throughout the year.

Registration/Licensure

To work as an Occupational Therapy Assistant in Idaho, an individual must graduate from an accredited Occupational therapy assistant educational program and successfully complete the NBCOT Examination. You are urged to become familiar with the state of

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Idaho Occupational therapy practice act, so that you can inform the public about the nature of the profession in the state. All fifty states and the District of Columbia regulate Occupational therapy assistants. If you intend to work in another state other than Idaho after graduation, you should become familiar with that state’s licensure law.

A Patient’s Bill of Rights

The patient has the right to considerate and respectful care.

The patient has the right to obtain from his/her physician complete current information concerning his/her diagnosis, treatment and prognosis in terms the patient can be reasonably expected to understand. When it is not medically advisable to give such information to the patient, the information should be available to an appropriate person on his/her behalf.

The patient has the right to receive from his/her physician information necessary to give informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include but not necessarily be limited to specific procedure and/or treatment, the medically significant risks involved, and the probable duration of incapacity. Where medically significant alternatives for care or treatment exist, or when the patient requests information concerning medical alternatives, the patient has the right to such information. The patient also has the right to know the name of the person responsible for the procedures and/or treatment.

The patient has the right to every consideration of his/her privacy concerning his/her own medical care program. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly. Those not directly involved in his/her care must have the permission of the patient to be present.

The patient has the right to refuse treatment to the extent permitted by law, and to be informed of the medical consequences of his/her action.

The patient has the right to expect that all communications and records pertaining to his/her care should be treated as confidential. The patient has the right to expect that within its capacity a hospital must make reasonable response to the request of a patient for services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically permissible, a patient may be transferred to another facility only after he/she has received complete information and explanation concerning the needs for and alternatives to such a transfer. The institution to which the patient is to be transferred must first have accepted the patient to transfer.
The patient has the right to obtain information as to any relationship of his/her hospital to other health care and educational institutions in so far as his care is concerned.

The patient has the right to obtain information as to the existence of any professional relationships among individuals, by name, who are treating him/her.

The patient has the right to be advised if the hospital proposes to engage or perform human experimentation affecting his/her care or treatment.

The patient has the right to refuse to participate in such research projects.

The patient has the right to expect reasonable continuity of care. He/she has the right to know in advance what appointment times and physicians are available and where.

The patient has the right to expect that the hospital will provide a mechanism whereby he/she is informed by his physician of the patient’s continuing health care requirements following discharge.

The patient has the right to know what hospital rules and regulations apply to his/her conduct as a patient.

The patient has the right to examine and receive an explanation of his/her bill regardless of source of payment.

*From the American Hospital Association

**Access and Confidentiality Agreement**

As an OTA student, you will have access to what this agreement refers to as “Confidential Information.” The purpose of this agreement is to help you understand your duty as an OTA student regarding Confidential Information. “Confidential Information” includes patient information, employee information, financial information, and information proprietary to other companies or persons. You may learn of or have access to some or all of this Confidential Information through a facility’s computer systems (which include but are not limited to the HELP system, the clinical and financial information systems, the longitudinal patient record, the actuarial, and claims systems), or through your affiliation activities.

Confidential Information is valuable and sensitive, and is protected by law and usually by strict facility policies. The intent of those laws and policies is to assure that Confidential Information will remain confidential - that is, that it will be used only as necessary to accomplish the University’s or facility’s mission.
As an OTA student, you are required to conduct yourself in strict conformance to applicable laws and a facility's policies governing Confidential Information. Your principal duties in this area are explained below. You are required to read and to abide by these duties. The violation of any of these duties will subject you to discipline, which might include, but is not limited to, dismissal from the OTA program and to legal liability.

As an OTA student, I understand that I will have access to Confidential Information which may include, but is not limited to, information relating to:

- Patients (such as records, conversations, admittance information, patient financial information, etc.)
- Employees (such as salaries, employment records, disciplinary actions, etc.)
- Facility information (such as financial and statistical records; strategic plans, internal reports, memos, contracts, peer review information, communications, proprietary computer programs, client and vendor proprietary information, source code, proprietary technology, etc.).

Accordingly, as a condition of my continued status as an OTA student and in consideration of my access to Confidential Information, I promise that:

1. I will use Confidential Information only as needed by me to perform my legitimate duties as an OTA student. This means, among other things, that:
   a. I will not access Confidential Information for which I have no legitimate need to know; and
   b. I will not in any way divulge, copy, release, sell, loan, revise, alter, or destroy any Confidential Information except as properly authorized within the scope of my status as a student; and
   c. I will not misuse Confidential Information or carelessly care for Confidential Information.

2. I will safeguard and will not disclose my access code or any other authorization I have that allows me to access Confidential Information. I accept responsibility for all activities undertaken using my access code and other authorization.

3. I will report, according to a facility’s business ethics policy and its confidentiality policy, any suspicion or knowledge that I have that my access code, authorization, or any Confidential Information has been misused or disclosed without the facility’s authorization.

4. I will report, according to a facility’s business ethics policy, activities by any individual or entity that I suspect may compromise the confidentiality of Confidential Information. Reports made in good faith about suspect activities will be held in confidence to the extent permitted by law, including the name of the individual reporting the activities.

5. I understand that my obligations under this Agreement will continue after termination of my status as an OTA student.
6. I understand that I have no right or ownership interest in any Confidential Information referred to in this Agreement. A facility may at any time revoke my access code, other authorization, or access to Confidential Information. At all times during my status as an OTA student of the University or with a facility I will act in the best interests of the University or that facility.

7. I will be responsible for my misuse or wrongful disclosure of Confidential Information and for my failure to safeguard my access code or other authorization to access Confidential Information. I understand that my failure to comply with this Agreement may also result in my dismissal from the OTA program.

Disability Services

MISSION STATEMENT

The mission of Disability Services (DS) is to increase equal opportunities and equal access to all programs and services sponsored or funded by Idaho State University. DS is dedicated to creating an accessible environment for students, employees, and community members with disabilities. In achieving this, DS:

Works collaboratively with University Partners to foster a welcoming, diverse, and inclusive University community.

Collaborates with and empowers individuals who have documented disabilities by working together proactively to determine reasonable accommodation(s).

Promotes a culture of self-advocacy, responsibility, and agency.

Ensures compliance with the Americans with Disabilities Act Amendments Act (ADAAA) and other current legislation.

Readily responds to grievances and advances inclusion through the removal of identified informational, physical, and/or attitudinal barriers.

Advocates for Universal Design (UD) as a crucial framework to support the diverse needs of students, faculty, staff, and community members.

Develops partnerships with external community members/groups to support the advancement of equity and inclusion at the local, state, and national levels.

Provides institution-wide advisement, consultation, and training on disability-related topics, including but not limited to: legal and regulatory compliance and universal design.
CONTACT INFORMATION

Disability Services; Division of Student Affairs:

Rendezvous Complex, Room 125
921 South 8th Avenue, Stop 8121
Pocatello, ID 83209-8121
Phone: 208-282-3599
Fax: 208-282-4617
VP for ASL: 208-417-0620
Email: disabilityservices@isu.edu

Office of Equity and Inclusion

MISSION STATEMENT

The Office of Equity & Inclusion is committed to creating and maintaining a safe and respectful learning and working environment for all staff and students at Idaho State University by providing leadership, expertise and education in our mission to create an environment where all members of the ISU community can thrive. Our webpage will detail the specifics of each of our areas of service to the campus community including:

- EEO policy and procedure
- Civil Rights including harassment and discrimination
- Title IX compliance
- Gender Resource Center
- Diversity Resource Center
- Training, workshops and events

Our helpful and friendly staff are available to work with any member of the university community. We look forward to serving you.

CONTACT INFORMATION

Office of Equity and Inclusion:

Rendezvous Complex, Room 157
921 South 8th Avenue, Stop 8315
Pocatello, ID 83209-8315
V. College of Technology Policies

Intoxicants Policy

Any instructor who observes behavior which suggest that a student may be under the influence or detects the odor of an intoxicant of a student will take the following actions:

1. The instructor will notify the student that they will not be allowed in the classroom or lab.
2. Public Safety should be contacted to escort the student to a safe place.
3. The student will meet with the Director of Student Services the following day to discuss which steps should be taken.
4. The Director will communicate with the Office of Student Affairs regarding the violation.
5. The Director will contact the instructor and Department Chair summarizing any outcomes.

This policy does not supersede other laws or university student conduct policies pertaining to alcohol or drug possession, consumption or delivery.

Dismissal Policy

A student may be dismissed from a College of Technology program if the student fails to meet the academic and/or nonacademic continuation standards of the program/department including unprofessional/unethical behaviors and unsafe practices, or if the student is not making satisfactory progress in the program. Prior to making a decision of dismissing a student, the faculty of the program will meet with the student for a disciplinary review in order to give the student due process which includes a student’s right to be adequately notified of charges and the opportunity to be heard.

Disciplinary Procedure

1. The faculty will notify the student privately of the incident(s) that have led to a disciplinary review and schedule a meeting time for the review. The purpose of a disciplinary review is to discuss the facts of the incident(s), to hear the student’s perspective, and if a violation has occurred, to determine an appropriate level of discipline which may lead to dismissal.
2. The meeting should be scheduled as soon as possible after the incident(s) occurred.
3. The student should refrain from attending any clinical, lab, externship, etc. that may threaten or pose a danger to the health, safety or welfare of any individual. After the disciplinary review, the faculty should determine what sanction to impose. In determining what sanction to impose, mitigating and aggravating factors may be considered, such as the individual’s prior disciplinary record, the nature of the offense, the severity of the damage, injury or harm resulting from the violation, and any restitution made.

NOTIFICATION PROCEDURES

1. The student must be notified in writing of the outcome of the disciplinary review and if sanctions will be imposed. If the student is dismissed, the letter must be sent by certified mail, return receipt requested.
2. The letter should indicate the incident(s) that occurred and the decision made regarding the incident(s). The student should be notified in the document that he or she has the right of appeal according to the Idaho State University Student Handbook. The student should be given a copy of the ISU Student Handbook or notified that it is available online.

CHANNELS OF REDRESS

An aggrieved student may:

1. Present any unresolved issues to the Department Chairperson. If the Department Chairperson is named in the complaint, the Dean of the College where the alleged infraction occurred shall appoint another member of the college to act in the Chairperson role for the appeals process.
2. Present any unresolved issues in a formal hearing before the Dean of the College involved. In the case of dismissal from a program, that is the college in which the program resides; for an appeal of a course grade, it is the college in which the course was offered. At this hearing, parties shall submit written charges, answers, and arguments to the Dean. The Dean shall preserve these documents for use in later appeals to a Scholastic Appeals Board, if such an appeal becomes necessary. Only written charges, answers and arguments presented at the Dean’s formal hearing will be subject to review by a Scholastic Appeals Board. The Deans shall be charged with preserving all tangible evidence and all written charges, answers, and arguments submitted at hearing before them. The student must have specifically demonstrated at the formal hearing before the Dean how the alleged
infraction led to his or her dismissal from the program or adversely affected his or her final grade in order to pursue an appeal to a Scholastic Appeals Board. The Dean must notify, in writing, the student and faculty member of his or her decision within one week following the formal hearing. The Dean shall have the authority to direct the Registrar to change a student’s grade.

3. And Department Chairperson or College Dean may elect to utilize an internal committee to assist in making a decision on academic appeals at the departmental and/or college levels. Department Chairs and Deans may interview the student and/or instructor, or conduct an additional investigation deemed appropriate to help in the decision-making process. Nothing contained in these procedures shall act to enlarge or restrict the existing authority, if any, of any Dean or the Provost and Vice President for Academic Affairs to take any action, including the changing of student grades or reinstating a student, outside of the appeals process described herein.

PROCEDURE FOR AN APPEAL TO SCHOLASTIC APPEALS BOARD

1. If the student wants to appeal the decision reached in the formal hearing, he/she must obtain a scholastic appeal petition form from the Office of Student Affairs, and return it there when completed. The completed petition shall include a concise description of the complaint, the signature of the student instituting the petition, and the signatures and comments of the faculty member, Department Chairperson, if any, and the Dean involved, if said persons are still available.

2. Copies of all written charges, answers, and arguments and all tangible evidence presented at the Dean’s formal hearing shall be made available to the student to attach to the original petition submitted to the Office of Student Affairs. The petition and additional materials will be secured in the office.

3. A scholastic appeal petition must be initiated before the end of the semester following the formal hearing. The petition is initiated when the student formally presents his or her complaint to the Office of Student Affairs and requests a scholastic appeals petition.

4. The Office of Student Affairs will then notify the Chairperson of the Academic Standards Council of the need to consider the petition. The Chairperson will then choose a Chair for the Scholastic Appeals Board, and the rest of the Board will be constituted.
VI. Idaho State University Policies

The following policies fall under the guidance of the Idaho State University Student Handbook.

For more information on each topic, please find the policy and descriptions using the handbook link.

1. Smoking (page 23; Smoking Policy ISUPP 2370)
2. Sexual Harassment (page 18; Sexual Harassment Policy)
3. Withdrawal (page 6; Withdrawing from Courses)
4. Academic Standing (page 10; Academic Standing)
5. Petitions (page 16; Petition Policies)
6. Academic Integrity (page 15; Academic Integrity and Dishonesty Policy ISUPP #4000 for Undergraduates)
7. Substance Abuse (page 20; Substance Abuse Policy)

isu.edu/Student_Handbook

Additional Idaho State University policies:

1. FERPA
   - isu.edu/ferpa
2. Title IX
   - isu.edu/titleIX
3. Satisfactory Academic Progress
   - isu.edu/satisfactory-academic-progress
VII. Idaho State University Resources and Services

The following are Idaho State University resources and services to help our students succeed.

For more information on each topic, please use the links given.

1. Disability Services
   • isu.edu/disabilityservices
2. Student Resources
   • isu.edu/student-resources
3. Parking Services
   • isu.edu/parking
4. Counseling and Testing Services
   • isu.edu/ctc
5. Health at ISU
   • isu.edu/health
6. Commencement
   • isu.edu/graduation
7. Career Services
   • isu.edu/career/
8. Coronavirus
   • isu.edu/coronavirus
VIII. College of Technology Resources and Services

Section I: Services for Students

Student Services: This office is located in two locations, the main floor of the Roy F. Christensen (RFC) Complex, Room 184, and the William M. and Karin A. Eames Advanced Technical Education and Innovations (Eames) Complex, Room 102. Student Services assists students with specific information about the programs at the College of Technology. Academic advisors are available to give students assistance with admissions, class and schedule advisement, academic resources, and specific information pertaining to a student’s educational goals.

Hours are 7:30 am to 5:00 pm Monday through Friday. Appointments can be made by calling (208) 282-2622. Appointments are recommended but are not required. Tours of the programs are available by appointment and can be set up by calling (208) 282-2800.

isu.edu/tech/student-services

Tutoring Assistance: Students who are experiencing difficulties with their program instruction or classroom assignments may receive assistance. The student’s instructor should be contacted first, as many of the training programs have ‘peer tutors’ available who are familiar with the required curriculum and assignments.

Note: It is important to request assistance as EARLY in the semester as possible! At the point a student recognizes he/she is having difficulty, help should be sought immediately! Contact the TAP Center, (Tutoring, Academic support, Peer mentoring), located in Room 162 of the RFC Complex. Or telephone at (208) 282-3208 for an appointment to discuss specific tutoring needs.

isu.edu/tech/tutoring

The Center for New Directions: Located within the RFC Complex on the third floor. The Center’s telephone number is (208) 282-2484. Support programs are available at no cost for men and women who are interested in entering/re-entering the job market due to issues which might include: divorce; separation; death; or disability of a spouse. Services are available on job seeking skills, career information, self-esteem, self-confidence
building, and personal counseling. The Center also provides a limited number of scholarships for single parents and for women and men interested in pursuing ‘not-traditional’ fields of training.

isu.edu/cnd

Section II: Registration and Fee Collection Policy

- All students who are enrolled in semester-based programs must pay their tuition by the Friday before classes begin to avoid a $50 late fee. For tuition payment information, login to the ISU BengalWeb and go to the Finances tab.
- Students who are enrolled only in the eight-week classes (early and late), must pay tuition by the first day of class.

Note: It is the individual student’s responsibility, regardless of funding source, to see that their tuition is paid on time and that they are officially enrolled at ISU. Students who do not pay tuition prior to the deadline may be disenrolled.

Section III: Financing Your Education

Students attending the ISU College of Technology can apply for federal financial aid by submitting a Free Application for Federal Student Aid (FAFSA) form each year they are enrolled at the University. FAFSA applications are available on the web at:

studentaid.gov/fafsa

It is strongly recommended that students apply early. Keep the Financial Aid office notified of any changes in student status such as address change, marriage, etc.

Note: Students who leave school prior to successful completion may have to repay federal financial aid received. Call the ISU Financial Aid office immediately if you plan to withdraw from school, (208) 282-2756. The website for financial aid is:

isu.edu/financialaid

Numerous scholarships are available to College of Technology students. The ISU Scholarship Department website lists those scholarships through the Bengal Online Scholarship System (BOSS).

The most common scholarships are the Associated Students of ISU (ASISU) Need and Scholastic awards. Funds for these scholarships come from a portion of the registration
fees each student pays. Many scholarships are donated by business/industry, organizations, or individuals and have specific criteria, which must be met.

isu.edu/scholarships

Section IV: Short-Term Loans

The Short-Term loan program is funded by Friends of Idaho State University. It is limited to loans for books and educational expenses. The maximum amount of each loan is $500. The loans are issued for up to 90 days. They must be repaid upon receipt of financial aid, 90 days after issue, or the last day of the semester, whichever arrives first. Your ISU internal credit rating will be reviewed prior to loan approval. Failure to pay this loan as agreed will adversely affect the credit rating used internally by ISU.

isu.edu/short-term-loans

Section V: Traffic and Parking

Note: Please refer to the ISU Parking web address at:

isu.edu/parking

Every motor vehicle on the ISU campus must be registered and display an appropriate ISU decal. Parking permits are available at the ISU Traffic Office located at the corner of South 5th and Humboldt Street, telephone (208) 282-2625.

Cost:

- General Lot: $100
- Reserved Lot: $300
- Reduced Fee: $50 (at Holt Arena only)

Students may park only in the area their parking decal designates. Students at the College of Technology may not park in the Cosmetology Patron parking spaces. The parking meters at the RFC Complex are reserved for visitors and new applicants inquiring about school. Students are NOT PERMITTED to park in metered spaces. Students should be aware of the ISU towing policy. Any vehicle will be towed at the owner’s expense when it accumulates $50 in citations.

Any traffic tickets resulting in fines owed to the University must be paid or student’s transcripts, certificates, and/or degrees will not be released upon completion of their
training program. In addition, registration for the next term will not be permitted until the fines and other financial obligations are paid or proper arrangements are made by the student.

Section VI: Transportation

**ISU Commuter Express:** Idaho State University Commuter Express is a system designed to assist commuting students enrolled at ISU with a source of transportation to and from the campus. Buses run on a daily basis (Monday through Friday) and pick up students at various locations in outlying areas of the region including Idaho Falls and Blackfoot. The bus schedule operates from the first day of each semester and continues until the last day of final examination week. For information on costs and schedule, telephone (208) 282-4460, or go to:

[isu.edu/transportation/commuter-express](https://isu.edu/transportation/commuter-express)

**Bengal Shuttle:** Pocatello Regional Transit (PRT) provides a shuttle bus service on campus from Holt Arena to various drop off points on a 10-minute basis during the school day and is free of charge. PRT provides transportation services within the metropolitan Pocatello vicinity. Student discounts are available. For information on schedule and drop off points, go to:

[isu.edu/parking/bengal-shuttle](https://isu.edu/parking/bengal-shuttle)
IX. Handbook Signature Form & Photography Consent Release

HANDBOOK SIGNATURE FORM

I acknowledge that I have received, read and understand the Occupational Therapy Assistant Handbook. I have also reviewed the Idaho State University Student Handbook and understand the privileges and responsibilities of attending Idaho State University.

PRINTED NAME        DATE

__________________________________________
SIGNATURE

__________________________________________
BENGAL ID #

INSTRUCTOR SIGNATURE

CONSENT FOR PHOTOGRAPH RELEASE

I understand that my photograph may be used for educational purposes. I also understand that these photographs may be used in classroom discussions, reproduced to facilitate written and digital formats (including online), and/or be used in promotional materials (brochures, pamphlets, flyers, etc.).

If there are limitations, please check one of the following boxes:

- Photographs must be altered to ensure facial identity is hidden.
- Do NOT use my photo for promotional or educational use.

PRINTED NAME        DATE

__________________________________________
SIGNATURE
X. Computer Usage Policy

COMPUTER USAGE POLICY

Person(s) using any of the ISU computing resources for personal gain, violation of security/privacy or who otherwise compromise the integrity of the hardware and/or software shall be prosecuted to the full extent of the law.

Legitimate use of a computer or computer network does not extend to whatever you are capable of doing with it. Although some rules are built into the system itself, these restrictions cannot limit completely what you can do and can see. In any event, you are responsible for your actions whether or not rules are built in, and whether or not you can circumvent them.

Inappropriate use of the computer is considered computer misuse. The supervisor of each lab will determine what deemed “inappropriate use” for their particular lab. For specific computer lab policies, see individual lab instructors. Inappropriate use may result in denial of computer lab access at the College of Technology.

The misuse of this computing account, or use of an account belonging to another, may result in the loss of your computer privileges. Where computing is required to complete course work this may effectively require transfer to a non-computer related program and/or hinder your pursuit of a degree. Examples of misuse are: sharing your personal account with another individual, using unauthorized passwords, use for financial gain or business purposes, sending offensive electronic mail or internet correspondence, chain letter, or other such correspondence, unauthorized transfer of computer programs or data, attempts to circumvent established procedures, computer security breach or attempts to break security.

I have read the entire student computing contract. I acknowledge and agree to use the ISU computing resources solely for University instructional, administrative, or research activities in accordance with above policy. I further acknowledge that any abuse of the above privilege may result in loss of computing privileges whether or not such privileges are necessary for continued enrollment in my present course of study.

PRINTED NAME ______________________________ DATE ______________

SIGNATURE ______________________________ BENGAL ID # __________
XI. Acknowledgement of Clinical Affiliation Placement Outside of Southeast Idaho

The student will attend two full-time clinical affiliations

Spring: OTA 222A: Clinical Affiliation I (eight weeks)
Summer: OTA 222B: Clinical Affiliation II (eight weeks)

Two full-time clinical affiliations must be satisfactorily performed in order to complete the OTA program. These are practical clinical rotations that are supervised primarily by a Fieldwork Educator (FE) assigned by the clinical facility. The FE will carry out day to day interaction with the OTA intern. Ultimately, the responsibility of determining satisfactory completion of an affiliation is placed upon the Academic Fieldwork Coordinator (AFWC) and the OTA faculty based on the FE’s assessment. More information on clinical affiliations and how such training is assessed can be found in the clinical handbook which is a document given to each incoming student.

Each clinical rotation is expected to meet standards of employment. The intern is expected to work a 40 hour week within the determined clinical rotation dates as specifically determined by the FE and AFWC. Interns are expected to utilize, to the best of their ability, each affiliation for educational advancement. Each intern should pursue increasing levels of responsibility as theoretical and technical abilities increase throughout the two clinical affiliations. (Likewise, each intern is only expected to perform clinical duties that they have addressed in OTA coursework, feel competent completing safely, and that are approved by the AOTA and state practice guidelines.)

Each student is responsible for participating in choosing clinical sites that best meet their educational goals. Final decisions will be determined by the AFWC and will be based on site availability, order of choice, and educational goals. Each intern will complete one acute care rotation, “acute care/neuro rotation” and one rotation of their choosing. It is expected that all students will be flexible with site selection. A student should expect to relocate to an area outside of southeastern Idaho as determined by the program for both required clinical affiliations. Expenses incurred from any relocation (including housing, transportation, food, etc.) are the responsibility of the student.
Health Occupations faculty and clinical instructors have the responsibility to assure that they are not involved with HO Department students in dual or multiple relationships. Dual or multiple relationships are defined as relationships that, in addition to the teacher/student role, may include financial, business, personal, sexual, or family relationships that could bring into question the ability of the parties to perform their duties in a professional, arms-length, objective fashion, or that might subject the student to the potential of threat or coercion associated with differential positions of power. If these relationships are pre-existing, they should be disclosed to the supervising faculty or the department chairman in order to ascertain whether the student needs to be re-assigned to another faculty member or moved to an alternative clinical location. The sensitivity to and prohibition of dual relations is not only for the protection of the student involved, but also to the integrity of the program. Furthermore, it can serve as an assurance to other students in the program that the standards upon which a student will be graded are fair, objective, and not potentially biased by factors outside of a student’s actual performance in the program.

**Student acknowledgement of Clinical Affiliation placement outside of Southeast Idaho**

__________________________________________________________________________    Date

Student’s Name (Print)  

__________________________________________________________________________

Student’s Signature  

__________________________________________________________________________

Bengal ID Number
XII. Access and Confidentiality Agreement

ISU College of Technology OTA Program

As an OTA student, you will have access to what this agreement refers to as “Confidential Information.” The purpose of this agreement is to help you understand your duty as an OTA student regarding Confidential Information.

“Confidential Information” includes patient information, employee information, financial information, and information proprietary to other companies or persons. You may learn of or have access to some or all of this Confidential Information through a facility’s computer systems (which include but are not limited to the HELP system, the clinical and financial information systems, the longitudinal patient record, the actuarial, and claims systems), or through your affiliation activities.

Confidential Information is valuable and sensitive, and is protected by law and usually by strict facility policies. The intent of those laws and policies is to assure that Confidential Information will remain confidential—that is, that it will be used only as necessary to accomplish the University’s or facility’s mission.

As an OTA student, you are required to conduct yourself in strict conformance to applicable laws and a facility’s policies governing Confidential Information. Your principal duties in this area are explained below. You are required to read and to abide by these duties. The violation of any of these duties will subject you to discipline, which might include, but is not limited to, dismissal from the OTA Program and to legal liability.

As an OTA student, I understand that I will have access to Confidential Information which may include, but is not limited to, information relating to:

- Patients (such as records, conversations, admittance information, patient financial information, etc.)
- Employees (such as salaries, employment records, disciplinary actions, etc.)
- Facility information (such as financial and statistical records, strategic plans, internal reports, memos, contracts, peer review information, communications, proprietary computer programs, client and vendor proprietary information, source code, proprietary technology, etc.)

Accordingly, as a condition of my continued status as an OTA student and in consideration of my access to Confidential Information, I promise that:

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1. I will use Confidential Information only as needed by me to perform my legitimate duties as an OTA student. This means, among other things, that:
   a. I will not access Confidential Information for which I have no legitimate need to know; and
   b. I will not in any way divulge, copy, release, sell, loan, revise, alter, or destroy any Confidential Information except as properly authorized within the scope of my status as a student; and
   c. I will not misuse Confidential Information or carelessly care for Confidential Information.

2. I will safeguard and will not disclose my access code or any other authorization I have that allows me to access Confidential Information. I accept responsibility for all activities undertaken using my access code and other authorization.

3. I will report, according to a facility’s business ethics policy and its confidentiality policy, any suspicion or knowledge that I have that my access code, authorization, or any Confidential Information has been misused or disclosed without the facility’s authorization.

4. I will report, according to a facility’s business ethics policy, activities by any individual or entity that I suspect may compromise the confidentiality of Confidential Information. Reports made in good faith about suspect activities will be held in confidence to the extent permitted by law, including the name of the individual reporting the activities.

5. I understand that my obligations under this Agreement will continue after termination of my status as an OTA student.

6. I understand that I have no right or ownership interest in any Confidential Information referred to in this Agreement. A facility may at any time revoke my access code, other authorization, or access to Confidential Information. At all times during my status as an OTA student of the University or with a facility I will act in the best interests of the University or that facility.

7. I will be responsible for my misuse or wrongful disclosure of Confidential Information and for my failure to safeguard my access code or other authorization to access Confidential Information. I understand that my failure to comply with this Agreement may also result in my dismissal from the OTA Program.

Student acknowledgement of the Access and Confidentiality Agreement

_________________________________________                      _____________
Student’s Name (Print)                                          Date

_________________________________________                      _____________
Student’s Signature                                            Bengal ID Number
XIII. Background Check with CastleBranch

Order Instructions for:

Idaho State University College of Technology Health Occupations

1. Go to mycb.castlebranch.com
2. In the upper right hand corner, enter the Package Code that is below.
   • Package Code ID41

ABOUT

About CastleBranch:
Idaho State University College of Technology Health Occupations and CastleBranch – one of the top ten background screening and compliance management companies in the nation – have partnered to make your onboarding process as easy as possible. Here, you will begin the process of establishing an account and starting your order. Along the way, you will find more tailed instructions on how to complete the specific information requested by your organization. Once the requirements have been fulfilled, the results will be submitted on your behalf.

Order Summary

Payment Information:
Your payment options include Visa, Mastercard, Discover, debit, electronic check, and money orders. Note: Use of electronic check or money order will delay order processing until payment is received.

Accessing Your Account:
To access your account, log in using the email address you provided and the password you created during order placement. Your administrator will have their own secure portal to view your compliance status and results.

Contact Us:
For additional assistance, please contact the Service Desk at 888-666-7788 or visit mycb.castlebranch.com/help for further information.
XIV. Medical History and Physical Examination

Idaho State University

Occupational Therapy Assistant Program

College: ___________________________ Department: ___________________________
921 South 8th Avenue, MS
Pocatello, Idaho 83209

Program of Study ___________________________ Fax Number: ___________________________
ATT: ___________________________

STUDENTS PLEASE COMPLETE
BEFORE GOING TO YOUR PHYSICIAN FOR EXAMINATION

REPORT OF MEDICAL HISTORY

<table>
<thead>
<tr>
<th>M/F</th>
<th>Last Name</th>
<th>First</th>
<th>Middle</th>
<th>Sex</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Home Address: Number & Street    City    State    Zip    Date of Birth

PERSONAL HISTORY
Please check those which you have had or now have

<table>
<thead>
<tr>
<th>Have You Had</th>
<th>Yes</th>
<th>Date</th>
<th>Comments</th>
<th>Have You Had</th>
<th>Yes</th>
<th>Date</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head Injury with Unconsciousness</td>
<td></td>
<td></td>
<td></td>
<td>Tuberculosis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High or Low – Blood Pressure</td>
<td></td>
<td></td>
<td></td>
<td>Heart Condition</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Back Problems</td>
<td></td>
<td></td>
<td></td>
<td>Jaundice</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stomach, Intestinal, Gallbladder Trouble</td>
<td></td>
<td></td>
<td></td>
<td>Disease or Injury of Joints</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>List All Operations:</td>
<td></td>
<td></td>
<td></td>
<td>Kidney Disorder</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>List All Current Medications:</td>
<td></td>
<td></td>
<td></td>
<td>Allergy: Asthma</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I hereby declare that I have no illnesses or emotional problems not discussed with my physician that will interfere with my enrollment in the program. I hereby grant permission for the information requested on this form to be released to the

_________________________________________    ____________________________
Applicant’s Signature    Date

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**PHYSICIAN PLEASE COMPLETE**

**REPORT OF HEALTH EVALUATION**

<table>
<thead>
<tr>
<th>BP</th>
<th>Height</th>
<th>Vision – Right 20/</th>
<th>Left 20/</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pulse</td>
<td>Weight</td>
<td>Corrected – Right 20/</td>
<td>Left 20/</td>
</tr>
</tbody>
</table>

**ARE THERE ANY ABNORMALITIES?**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DESCRIBE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Head, Ears, Nose, or Throat</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Respiratory</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Cardiovascular</td>
<td></td>
<td></td>
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<tr>
<td>4. Gastrointestinal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Hernia</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Eyes</td>
<td></td>
<td></td>
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<tr>
<td>7. Genitourinary</td>
<td></td>
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<tr>
<td>8. Musculoskeletal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Metabolic/Endocrine</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Neuropsychiatric</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Skin</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**HEPATITIS B**

- Positive Titer
  - Attach lab result

- Negative Titer
  - Yearly Vaccine
    - August – March
  - Attach copy of vaccine administration record OR attach lab result

**INFLUENZA**

**MMR**

- 2 documented doses OR proven serologic immunity to all three
- Attach copy of vaccine administration record

**Tdap**

- Booster as an adult within the last 10 years
- Attach copy of vaccine administration record

**VARICELLA**

- 2 documented doses OR proven serologic immunity
- Attach copy of vaccine administration record

**TB**

- Skin Test (PPD)
  - Mm induration (>10mm is +)
  - OR IGRA + or –
- Attach copy of document PPD mm reading or IGRA lab result

**Please refer to ISU screening recommendations for details about serologic immunity, vaccines, and *TB screening**

Is the patient now under treatment for any medical or emotional condition? Yes ___________ No ___________

Does this person have any limitations regarding lifting and moving of people and or equipment? Yes ___________ No ___________

In your opinion, does this applicant have the mental and physical health to meet the requirements of being an active and successful student in the ___________________ Department as well as for being employed professionally following graduation? Yes ___________ No ___________

Comments:

________________________________________
Physician’s Signature

________________________________________
Date

________________________________________
Address

________________________________________
Print Name

________________________________________
Phone

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