

McLennan
C O M M U N I T Y
C O L L E G E

WACO, TEXAS

COURSE SYLLABUS

AND

INSTRUCTOR PLAN

Occupational Performance
Birth Through Adolescence
OTHA 1341

Laura Shade, OTR

NOTE: This is a 16-week course.

COVID 19 Notice:

McLennan Community College is committed to providing you with every resource you need to reach your academic goals including your safety. We will continue to monitor the evolving situation with COVID 19 and adjust our safety guidelines to make sure we offer a safe environment for you and our faculty. Please make sure to consult your faculty and the MCC website on any changes to these guidelines.

OCCUPATIONAL PERFORMANCE BIRTH THROUGH ADOLESCENCE

OTHA 1341 – FALL 2021

Course Description:

Occupational performance of newborns through adolescence. Includes frames of reference, evaluation tools and techniques, and intervention strategies.

Course Credit: 3 Semester Hours
Clock Hours: 2 lec hrs/wk; 32 lec hrs/semester
4 lab hrs/wk; 64 lab hrs/semester

Prerequisites and/or Corequisites:

Admission to the Occupational Therapy Assistant Program. Concurrent enrollment in OTHA 1305 Principles of Occupational Therapy and OTHA 2201 Pathophysiology in Occupational Therapy required.

Course Notes and Instructor Recommendations:

Course meeting days and times:

Lecture: TTh 9:00 a.m. to 9:55 a.m.

Lab: TTh 10:20 a.m. to 12:15 p.m.

Instructor Information:

Instructor Name: Laura Shade

MCC Email: lshade@mclennan.edu (response will be within 2-3 business days)

Office Phone Number:

Office Location: CSC C209

Office/Teacher Conference Hours: T and TH 1:00 p.m. to 4:00 p.m.

Additional Hours by Appointment

Other Instruction Information: If you need to ensure personal contact during office hours, be sure to schedule an appointment to avoid conflicts with other student meetings, professional meetings, or clinical visits.

Required Text & Materials:

Title: Pediatric Skills for Occupational Therapy Assistants

Author: Solomon, J. and O'Brien J

Edition: 4th edition

Copyright Year: 2016

Publisher: Elsevier - Mosby

ISBN: 978-0-323-16934-9

Title: 1001 Pediatric Treatment Activities

Author: Danto, A. and Pruzansky, M.

Edition: 2nd edition

Copyright Year: 2016

Publisher: Slack, Inc.

ISBN: 978-1-61711-930-9

Title: Occupational Therapy Practice Framework: Domain and Process (*To be Provided to the Student*)

Author: AOTA

Edition: 4th edition

Copyright Year: 2020

Publisher: AOTA

MCC Bookstore Website: <http://www.mclennan.edu/bookstore/>

Methods of Teaching and Learning:

The material will be presented in lecture/demonstration format with hands on performance of specific techniques in the laboratory following the lecture. Group learning and discovery learning will also be utilized (i.e., groups will be assigned to learn about and then teach certain components of the course followed by instructor feedback and input). Other educational methods will include discussion groups, group projects, lab exercises, student presentations, and written reports. Guest lecturers and audiovisual materials may be incorporated to enhance student learning.

Student learning outcomes will be measured by written exam (basic knowledge/comprehension and higher level/critical thinking), observation assignments (technical and psychomotor skills, and higher level/critical thinking skills), case studies/intervention plans (technical and psychomotor skills, and higher level/critical thinking skills), and student presentations (basic knowledge and professional communication).

Course Objectives and/or Competencies:

Student Learning Outcomes/Competencies:

1. Identify and differentiate developmental milestones birth through adolescence.
2. Identify and describe reflex development in the infant.
3. Identify and describe the development of grasp in the infant/child.
4. Understand and apply the occupational performance areas of life tasks at each stage of life - newborn through adolescence.
5. Identify and adapt purposeful activities and occupational performance as age appropriate newborn through adolescence.
6. Recognize special needs of infants, children, and adolescents relating to common disorders and developmental delays.
7. Demonstrate a working knowledge of assessment/evaluation tools used in pediatric occupational therapy.
8. Describe varying taxonomies, theories, and models of occupational therapy practice in pediatric settings.
9. State the role of the OTA in pediatric care.

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10. Select effective evidence based strategies for pediatric intervention.
11. Document services using SOAP format while recognizing the variety of documentation practices utilized in pediatric practice today.

Course Objectives:

1.	B.1.1.	Demonstrate knowledge of: <ul style="list-style-type: none"> The structure and function of the human body to include the biological and physical sciences, neurosciences, kinesiology, and biomechanics. Human development throughout the lifespan (infants, children, adolescents, adults, and older adults). Course content must include, but is not limited to, developmental psychology. Concepts of human behavior to include the behavioral sciences, social sciences, and science of occupation. 	O'Brien Chapters 6, 7, 8, 9, 19, 20, and 21 Perception Lecture Sensory Integrative Dysfunction Lecture
2.	B.2.1.	Apply scientific evidence, theories, models of practice, and frames of reference that underlie the practice of occupational therapy to guide and inform interventions for persons, groups, and populations in a variety of practice contexts and environments.	O'Brien Chapters 18, 24, and 25 All Danto Chapters Intervention Plan Assignment
3.	B.2.2.	Define the process of theory development and its importance to occupational therapy.	O'Brien Chapters 7 and 9 Intervention Plan Assignment
4.	B.3.5.	Demonstrate knowledge of the effects of disease processes including heritable diseases, genetic conditions, mental illness, disability, trauma, and injury on occupational performance.	O'Brien Chapters 13, 16, and 17
5.	B.3.7.	Demonstrate sound judgment in regard to safety of self and others and adhere to safety regulations throughout the occupational therapy process as appropriate to the setting and scope of practice. This must include the ability to assess and monitor vital signs (e.g., blood pressure, heart rate, respiratory status, and temperature) to ensure that the client is stable for intervention.	O'Brien Chapter 25
6.	B.4.2.	Demonstrate clinical reasoning to address occupation-based interventions, client factors, performance patterns, and performance skills.	OTPF-4 All Danto Chapters Intervention Plan Assignment
7.	B.4.3.	Utilize clinical reasoning to facilitate occupation-based interventions that address client factors. This must include interventions focused on promotion, compensation, adaptation, and prevention.	OTPF-4 All Danto Chapters Intervention Plan Assignment
8.	B.4.4.	Contribute to the evaluation process of client(s)' occupational performance, including an occupational profile, by administering standardized and nonstandardized screenings and assessment tools and	Standardized Testing Lecture and Labs Morreale Ch. 12; Observation Skills Labs Child Observation Labs Intervention Plan Assignment

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		<p>collaborating in the development of occupation-based intervention plans and strategies.</p> <p>Explain the importance of using psychometrically sound assessment tools when considering client needs, and cultural and contextual factors to deliver evidence-based intervention plans and strategies.</p> <p>Intervention plans and strategies must be client centered, culturally relevant, reflective of current occupational therapy practice, and based on available evidence.</p>	
9.	B.4.6.	Under the direction of an occupational therapist, collect, organize, and report on data for evaluation of client outcomes.	Standardized Testing Lecture and Labs Morreale Ch. 12; Observation Skills Labs Intervention Plan Assignment
10.	B.4.10.	Provide direct interventions and procedures to persons, groups, and populations to enhance safety, health and wellness, and performance in occupations. This must include the ability to select and deliver occupations and activities, preparatory methods and tasks (including therapeutic exercise), education and training, and advocacy.	O'Brien Chapters 18 and 25 Sensory Integrative Dysfunction Lecture All Danto Chapters Intervention Plan Assignment
11.	B.4.11.	Explain the need for and demonstrate strategies with assistive technologies and devices (e.g., electronic aids to daily living, seating and positioning systems) used to enhance occupational performance and foster participation and well-being.	O'Brien Chapter 27
12.	B.4.12.	Explain the need for orthotics, and design, fabricate, apply, fit, and train in orthoses and devices used to enhance occupational performance and participation. Train in the safe and effective use of prosthetic devices.	O'Brien Chapter 28
13.	B.4.16.	Demonstrate interventions that address dysphagia and disorders of feeding and eating, and train others in precautions and techniques while considering client and contextual factors.	Feeding, Eating, and Swallowing Lecture Danto Chapter 7
14.	B.4.19.	Engage in the consultative process with persons, groups, programs, organizations, or communities in collaboration with inter- and intraprofessional colleagues.	O'Brien Chapter 4 Intervention Plan Assignment
15.	B.4.20.	Understand and articulate care coordination, case management, and transition services in traditional and emerging practice environments.	Intervention Plan Assignment
16.	B.4.21.	Demonstrate the principles of the teaching–learning process using educational methods and health literacy education approaches:	O'Brien Chapter 24 All Danto Chapters

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		<ul style="list-style-type: none"> To design activities and clinical training for persons, groups, and populations. To instruct and train the client, caregiver, family, significant others, and communities at the level of the audience. 	
17.	B.4.24.	Demonstrate effective intraprofessional OT/OTA collaboration to explain the role of the occupational therapy assistant and occupational therapist in the screening and evaluation process.	Standardized Testing Labs Intervention Plan Assignment
18.	B.4.25.	Demonstrate awareness of the principles of interprofessional team dynamics to perform effectively in different team roles to plan, deliver, and evaluate patient- and population-centered care as well as population health programs and policies that are safe, timely, efficient, effective, and equitable.	O'Brien Chapters 2, 3, 4, and 5 Intervention Plan Assignment
19.	B.4.26.	Identify and communicate to the occupational therapist the need to refer to specialists both internal and external to the profession, including community agencies.	Intervention Plan Assignment

Course Outline or Schedule:

COURSE OUTLINE: Order will vary to accommodate schedule. *Schedule is subject to change and students will be notified in Brightspace as well as in class.*

- I. Introduction
 - A. Course Overview
 - B. Scholarship
 1. Discovery
 2. Integration
 3. Application
 4. Teaching
- II. Family/Caregiver Systems
 - A. Systems Theories
 1. Morphostatic
 2. Morphogenetic
 3. Equifinality
 4. Implications for Practice
 5. Prescriptive role versus Consultative Role
 - B. Family Life Cycle
 - C. Family Adaptation
 1. Perceptual Coping Strategies
 - a. Passive Appraisal
 - b. Reframing

- c. Downward Comparison
 - d. Use of Spiritual Beliefs
- D. Essential Skills for Family Interventions
 - 1. Solution Focused
 - 2. Collaborative
 - 3. Acknowledgement
 - 4. Continuity

III. Medical System and the Role of the COTA

IV. Educational System

V. Community System

VI. Principles of Normal Development

A. Period of Development

- 1. Gestation and Birth
- 2. Infancy
- 3. Early Childhood

- 4. Middle Childhood
- 5. Adolescence

B. General Principles

VII. Development of Occupational Performance Skills

A. Gestation and Infancy (handout)

- 1. Physiologic Development
- 2. Sensory Skills
- 3. Gross Motor Skills
 - a. Reflexes (handout)
 - 1) Spinal Level
 - a) Galant
 - b) Primary Righting
 - c) Crossed Extension
 - d) Extensor Thrust
 - e) Flexor Withdrawal
 - f) Placing Reaction
 - g) Rooting
 - 2) Brainstem Level
 - a) Tonic Labyrinthine
 - b) Asymmetrical Tonic Neck
 - c) Symmetrical Tonic Neck
 - d) Positive Supporting Reaction
 - e) Negative Supporting Reaction

- 3) Midbrain Level
 - a) Neck Righting
 - b) Body Righting on the Body
 - c) Labyrinthine Righting on the Head
 - d) Optical Righting
 - e) Amphibian Reaction
- 4) Associated Reactions
 - a) Moro
 - b) Landau
 - c) Protective Extensor Thrust
- 5) Cortical Level
 - a) Equilibrium Reaction
 - b) Four-Foot Kneeling
 - c) Sitting Equilibrium Reaction
 - d) Kneel-Standing
 - e) Hopping
 - f) See-Saw
 - g) Dorsiflexion Reaction
 - h) Simian Reaction
- b. Positioning and Handling
 - 1) Definitions
 - a) Positioning
 - b) Handling
 - c) Transitional Movements
 - d) Physiological Flexion
 - e) Proximal
 - f) Distal
 - g) Stability
 - h) Mobility
 - i) Symmetrical
 - j) Perception
 - k) Body Awareness
 - l) Postural Stability
 - m) Center of Gravity
 - n) Weight Shift
 - o) Pelvic Tilt
 - p) Cervical, Thoracic, and Lumbar Curves
 - 2) Positioning
 - a) Prone
 - b) Supine
 - c) Side Lying
 - d) Sitting
 - (1) Long Sit
 - (2) Tailor Sit

- (3) Ring Sit
 - (4) “W” Sit
 - 3) Mobility
 - a) Quadruped
 - b) Half-Kneel
 - c) Stand
 - c. Sensory Integration (handout) – Sensations → Percepts → Concepts
 - 1) Sensory-Motor Development
 - a) Sensory Input
 - (1) Tactile
 - (2) Protective
 - (3) Discriminative
 - (4) Vestibular
 - (5) Proprioception
 - (6) Olfactory
 - (7) Visual
 - (8) Auditory
 - b) Sensory Process
 - (1) Body Scheme
 - (2) Reflex Maturation
 - (3) Capacity to Screen Sensory Input
 - (4) Postural Security
 - (5) Awareness of Two Sides of the Body
 - (6) Motor Planning/Praxis
 - (7) Perceptual-Motor Development
 - (8) Eye-Hand Coordination
 - (9) Oculomotor Control
 - (10) Postural Adjustments
 - (11) Auditory Language Skills
 - (12) Visual-Spatial Perception
 - (13) Attention Center Functions
 - c) Cognition/Intellect
 - (1) Academic Learning
 - (2) Activities of Daily Living
 - (3) Behavior
- 4. Fine Motor Skills
 - a. Bilateral Motor Control
 - 1) Ipsilateral
 - 2) Contralateral
 - b. Reaching and Grasping
 - 1) Grasp (handout)
 - a) Palmar Grasp
 - b) Thumb-Finger Grasp
 - c) Neat Pincer Grasp

- 2) Prehension (handout)
 - a) Tip Pinch
 - b) Lateral Pinch
 - c) Tripod Pinch
 - d) Quadropod Pinch
- 3) Eye Movement Control
 - a) Saccadic
 - b) Pursuit Tracking
- c. Object Manipulation
 - 1) Construction
 - 2) In-Hand Manipulation
 - 3) Spatial-Temporal Accuracy
 - 4) Lead and Assist Usage
- d. Implement Usage
- 5. Process/Cognitive Skills
- 6. Communication and Interaction/Psychosocial Development
- B. Early Childhood
 - 1. Physiologic Skills
 - 2. Motor Skills
 - 3. Process/Cognitive Skills
 - 4. Communication and Interaction/Psychosocial Development
- C. Middle Childhood
 - 1. Physiologic Skills
 - 2. Motor Skills
 - 3. Process/Cognitive Skills
 - 4. Communication and Interaction/Psychosocial Development
- D. Adolescence
 - 1. Physiologic Skills
 - 2. Motor Skills
 - 3. Process/Cognitive Skills
 - 4. Communication and Interaction/Psychosocial Development

VIII. Anatomy and Physiology for the Pediatric Practitioner

- A. Terminology
 - 1. Anterior (Ventral)
 - 2. Posterior (Dorsal)
 - 3. Superior (Cephalad)
 - 4. Inferior (Caudal)
 - 5. Proximal/Distal
 - 6. Medial/Lateral
- B. Planes and Axes
 - 1. Sagittal (Left/Right) → Frontal Axis
 - 2. Frontal (Anterior/Posterior) → Sagittal Axis
 - 3. Transverse (Upper/Lower) → Vertical Axis

C. Client Factors

1. Values, Beliefs, and Spirituality
2. Body Functions
 - a) Mental Functions
 - 1) Specific
 - (a) Higher Level Cognitive
 - (b) Attention
 - (c) Memory
 - (d) Perception
 - (e) Thought
 - (f) Sequencing
 - (g) Emotional
 - (h) Experience of Self and Time
 - 2) Global
 - (a) Consciousness
 - (b) Orientation
 - (c) Temperament and Personality
 - (d) Energy and Drive
 - (e) Sleep
 - b) Sensory Functions and Pain
 - 1) Seeing and Functions
 - 2) Hearing and Functions
 - 3) Vestibular Functions
 - 4) Taste Functions
 - 5) Smell Functions
 - 6) Proprioceptive Functions
 - 7) Touch Functions
 - 8) Pain
 - 9) Temperature
 - 10) Pressure
 - c) Neuromusculoskeletal and Movement Related Functions
 - 1) Joint Mobility
 - 2) Joint Stability
 - 3) Muscle Power
 - 4) Muscle Tone
 - 5) Muscle Endurance
 - 6) Motor Reflexes
 - 7) Involuntary Movement Reactions
 - 8) Control of Voluntary Movement
 - 9) Gait Patterns
 - d) Cardiovascular, Hematologic Immunologic, and Respiratory System Functions
 - e) Voice and Speech Functions
 - f) Digestive, Metabolic, and Endocrine System Functions
 - g) Genitourinary and Reproductive Functions

- h) Skin and Related Functions
- 3. Body Structures

IX. Development of Occupations

- A. Activities of Daily Living
 - 1. Feeding and Eating
 - a. Oral Motor Development
 - 2. Dressing and Undressing
 - 3. Hygiene and Grooming
 - 4. Bathing and Showering
 - 5. Toilet Hygiene
- B. Instrumental Activities of Daily Living
 - 1. Readiness Skills
 - 2. Home Management Activities
 - 3. Community Mobility
 - 4. Care of Others
- C. Education
 - 1. Readiness Skills
 - a. Preschool
 - b. Kindergarten
 - c. Elementary School
 - d. Middle Childhood and Adolescence
- D. Work/Vocational Skills
- E. Play/Leisure Skills
 - 1. Piaget's Stages of Play
 - 2. Toys and Activities for Various Ages
 - 3. Play Skills Acquisition
- F. Social Participation

X. Adolescent Development → Becoming an Adult

- A. Quick Facts
- B. Physical Development
 - 1. Body Image
 - 2. Sexual Identity
- C. Cognitive Development
- D. Psychosocial Development
 - 1. Self Esteem
- E. Occupational Performance
 - 1. Work
 - 2. Instrumental Activities of Daily Living
- F. Leisure and Play
- G. Social Participation
- H. Contextual Factors

XI. Pediatric Health Conditions

- A. Orthopedic Conditions
- B. Genetic Conditions
- C. Neurologic Conditions
- D. Developmental Disorders
- E. Cardiopulmonary System Disorders
- F. Sensory System Conditions
- G. Neoplastic Disorders
- H. Immunologic Conditions
- I. Environmentally Induced and Acquired Conditions
- J. Other

XII. Developmental and Pediatric Assessments

XIII. Therapeutic Media – Activity with a Purpose

- A. Neurodevelopmental Treatment
 - 1. Inhibition
 - 2. Facilitation
 - 3. Key Points of Control
 - 4. Therapeutic Handling
 - 5. Reflex Inhibiting Positions (handout)
- B. Motor Learning Concepts
 - 1. Transfer of Learning
 - 2. Feedback
 - 3. Verbal Instruction
 - 4. Knowledge of Results
 - 5. Knowledge of Performance
 - 6. Distribution and Variability of Skill Practice
 - 7. Whole versus Part Practice
 - 8. Mental Practice
- C. Assistive Technology
- D. Orthotics
- E. Animal-Assisted

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Course: 1341 Occupational Performance Birth Through Adolescence - Fall 2021		
	Lecture	Lab
8/24 and 8/26 Unit 01	Introduction; Course Overview; O'Brien Chapter 6: Principles of Normal Development	Intervention Plan Assignments; Observation Videos
	O'Brien Chapter 7: Development of Occupational Performance Skills (pgs 77 - 88); Reflexes	Morreale and Borchering Ch. 12 (159-162); Observation Skills
8/31 and 9/2 Unit 02	O'Brien Chapter 7: Development of Occupational Performance Skills (pgs 77 - 88); Reflexes; Prehension Development / Gestational Development	Gross Motor Skills; Danto Chapter 17
	O'Brien Chapter 7: Development of Occupational Performance Skills (pgs 77 - 88); Reflexes; Prehension Development / Gestational Development	Fine Motor Skills; Danto Chapters 13, 14, 15, and 16
9/7 and 9/9 Unit 03	O'Brien Chapter 7: Development of Occupational Performance Skills (pgs 88 - 91)	Testing Righting and Equilibrium Reactions; Danto Chapter 18
	Exam I	O'Brien Chapter 29: Animal Assisted Activities & Therapy
9/14 and 9/16 Unit 04	O'Brien Chapter 7: Development of Occupational Performance Skills (pgs 91 - 95);	Standardized Tests - VMI, BOT, Peabody, Sensory Profile, MVPT4
	O'Brien Chapter 19 & 8: ADLs; Development of Occupations	Occupations Lab: Work Sheet
9/21 and 9/23 Unit 05	O'Brien Chapter 8 and 21: Development of Occupations; Feeding; Swallowing; Play and Playfulness	Danto Ch. 7
	O'Brien Chapter 9 and 20: Adolescent Becoming an Adult and IADLs	Child Observation Lab: Worksheet
9/28 and 9/30 Unit 06	O'Brien Chapter 9: Adolescent Becoming an Adult	Standardized Tests - VMI, BOT, Peabody, Sensory Profile, MVPT4
	Exam II	Child Observation Lab: Worksheet
10/5 and 10/7 Unit 07	O'Brien Chapters 2 and 3 (pgs 23 - 32): Family and Medical Systems	Standardized Tests - VMI, BOT, Peabody, Sensory Profile, MVPT4
	O'Brien Chapters 4 and 5: Educational and Community Systems	Child Observation Lab: Worksheet
10/12 and 10/14 Unit 08	O'Brien Chapters 13 and 16: Pediatric Health Conditions	Standardized Tests - VMI, BOT, Peabody, Sensory Profile, MVPT4
	O'Brien Chapters 13 and 16: Pediatric Health Conditions	Child Observation Lab: Worksheet
10/19 and 10/21 Unit 09	O'Brien Chapter 22: Handwriting	Standardized Tests - VMI, BOT, Peabody, Sensory Profile, MVPT4
	Exam III	Child Observation Lab: Worksheet
10/26 and 10/28 Unit 10	Visual Perception	Danto Chapters 8, 9, and 10
	O'Brien Chapter 17: Cerebral Palsy	Child Observation Lab: Worksheet
11/2 and 11/4 Unit 11	O'Brien Chapter 24: Motor Control and Motor Learning	Group Developmental Activities Project Presentations
	O'Brien Chapter 28: Orthotics	Group Developmental Activities Project Presentations
11/9 and 11/11 Unit 12	O'Brien Chapter 18: Neuro Developmental Treatment (NDT)	Danto Chapter 19
	O'Brien Chapter 18: Neuro Developmental Treatment (NDT)	Danto Chapters 11 and 12
11/16 and 11/18 Unit 13	Exam IV	O'Brien Chapter 27: Assistive Technology
	O'Brien Chapter 25: Sensory Processing and Integration	Danto Chapters 1, 5, and 6
11/23 and 11/25 Unit 14	O'Brien Chapter 25: Sensory Processing and Integration	Danto Chapters 2, 3, and 4
	THANKSGIVING	
11/30 and 12/2 Unit 15	Intervention Plan Presentations	Intervention Plan Presentations
	Intervention Plan Presentations	Intervention Plan Presentations
12/7	FINAL EXAM	

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Course Grading Information:

Exams (4)	40%
Final Exam (1)	15%
Group Developmental Activities Project	15%
Intervention Planning Assignment	15%
Lab Worksheets	5%
Quizzes	5%
Participation	5%

100% * **75% or greater is required to pass**

The following percentage system for letter grade assignment will be utilized for reporting grades: A=90-100%; B=80-89.99%; C=75-79.99%; D=65-74.99%; F=below 64.99%.

A student must receive a "C" or above for successful completion of an OTA course or science course. Any student receiving a "D" or "F" must withdraw from the OTA program, but may reapply for admission the following year following failure of only one OTA course if there are no documented counseling's due to professional behavior issues (including such items as attendance, generic professional abilities, etc.). Refer to the student handbook.

Grade Requirements: A student must have a combined average of 75% on all written exams **and** a minimum of 75% on **each** skills practical in order to receive a passing grade for this course.

- Any student scoring below 75% on a skills practical will be required to re-take that skills practical.
- A maximum of one skills practical across all OTHA courses in a given semester may be repeated one time (one re-take) during the semester for a maximum grade of 75%. (Failure of two skills practicals across all OTHA courses in a given semester will result in the student not being able to progress in the program. Refer to the Student Handbook for details.)
- If a student fails a skills practical, policy requires two faculty graders for the re-take of the skills practical. If a student fails a re-take, it will result in failure of the course. Failure of the course will result in dismissal from the program.
- Students who have failed a skills practical are required to complete their re-take **PRIOR** to the next scheduled practical. Failure to do so will be considered a failure of the re-take.
- It is the **STUDENT'S** responsibility to coordinate scheduling of the re-take by meeting with the primary instructor, corresponding among all program instructors for options to request a second grader, and ensuring that the re-take is scheduled in advance of the next skills practical to prevent interference of future performance. Faculty have busy and conflicting schedules. If a student waits until too close to the upcoming skills practical, he/she runs the risk of being unable to get the required two-grader re-take scheduled which will result in failure of the re-take.

- It is the **STUDENT's** responsibility to select another student to be his/her patient for the re-take (due to FERPA laws) and ensure that the selected student is available at the scheduled time of the re-take.

TESTING PROCEDURES

All student personal belongings are to be placed under the student's chair during written exams. No questions will be answered during the exam. Once the exam begins, students will not be allowed to leave the classroom.

When utilizing scantrons, it is the student's responsibility to ensure name, student ID number, and all answers have been marked onto the scantron. Questions answered on the exam but not transferred to the scantron will not be graded. It is the student's responsibility to ensure all questions have been answered on the scantron and that the scantron is completed clearly and precisely within the allotted space. If student fails to comply with this procedure, the grade will be assigned as it was scored on the scantron. No corrections will be made to the scantron by the instructor after it has been electronically scored.

There will be no make-up exams for written exams or skills practicals except with permission from the instructor for excused absences only (i.e., death in family, illness with note from MD, acts of God, etc). *Minor illnesses do not constitute excused absences.* When make-up exams are granted, they will be scheduled at the instructor's convenience. Absence or tardiness for a make-up exam will result in a grade of "zero". In general, work "re-do's" will not be allowed. If, at the discretion of the instructor, a re-do is permitted, a maximum grade of 75% will be given.

PREPARATION FOR LAB:

All students must be prepared for lab sessions at all times, and appropriate lab clothing must be worn. Students who do not have appropriate lab clothing will be required to wear a hospital gown or other attire provided by the instructor, or that student will not be allowed to participate in lab. Jewelry that may be worn during lab (although it may need to be removed for certain skills/procedures) includes wedding bands/rings, watch, small chain necklace, or small stud earrings (no more than two each ear) worn in the ear. All other jewelry must be removed prior to lab, including nose and tongue studs. Fingernails must be trimmed short and modestly. Good personal hygiene is an expectation both in lab as well as clinical affiliation.

LAB SKILLS ASSESSMENTS & SKILLS PRACTICALS:

Proof of completion of lab skills assessments, or check offs, of the skills to be tested will be required prior to taking the skills practical. A student must demonstrate proficiency and competency (**safe, effective, reasonable time**) on each skill. Students may not attempt to check off on a skill with the instructor until they have been "checked off" by a fellow student.

All skills covered in lab prior to the skills practical must be checked off prior to the lab practical. Otherwise, it will count as a failure and the student will be required to repeat that skills practical for a maximum grade of 75. Only one skills practical can be retaken per semester with the maximum grade of 75. *See grade requirements above.*

CRITICAL SAFETY SKILLS:

Demonstrating mastery of specific *critical safety skills* is necessary in order to pass each skills practical. Competency with *critical safety skills* indicates that a student carries out intervention per the plan of care in a manner that minimizes risks to the patient, self, and others. Failure to demonstrate mastery of any one of these critical safety skills will require the student to re-take the skills practical for a maximum grade of 75. *These skills will be specified on the grade sheet for each skills practical.*

Discussion Session: Everyone will be expected to exhibit respectful and attentive behavior during each individual student and team presentation, as well as expected to participate in the question/answer session. Any students exhibiting disruptive or disrespectful behavior will be asked to leave and counted absent for that day. Further disciplinary action will be at the discretion of the instructor.

Late Work, Attendance, and Make Up Work Policies:**ATTENDANCE:**

Attendance is essential for attainment of course objectives and skills competencies. A student who is not present at the scheduled start time of class is considered tardy (this includes start of day as well as return from breaks and return from lunch). A student who misses more than 50% of a class period, whether it is due to late arrival or early departure, will be counted as absent. *Three (3) tardies will constitute one absence.* At the instructor's discretion, the door may be locked at the beginning of class with the late student being denied entry.

- Two (2) absences: verbal warning
- Three (3) absences: written warning
- Four (4) absences or one no call/no show: program probation
- Five (5) absences or two no call/no show's: *withdrawal from program*

Additionally, the third absence, and each additional absence, will result in a reduction of the final course grade by two points.

Students must notify the instructor in advance via e-mail or phone message whenever tardiness or absence is unavoidable. *Failure to notify the instructor will result in program probation.* Make-up work may be required for absences in order to ensure that students acquire information and skills presented during their absence

Students should not schedule travel events during any class day from the first day of the semester to the last day of finals per the college calendar. Students who plan travel and miss course content or exams will receive a grade of 0 unless *prior* written approval is given by the faculty

for an excused reason (i.e., death in the family, approved professional conference, etc.). It is the *student's* responsibility to attain the information that is missed due to his/her absence.

STUDENT RESPONSIBILITIES:

It is the responsibility of the student to come to class having read the assigned material and ready to participate in discussion and activities. This will provide a more positive learning experience for the student. It is also the responsibility of the student to turn in assignments on time.

Assignments are due at the beginning of the class day or as stated in each assignment in D2L. Late assignments will not be accepted unless it is due to a documented excused absence (i.e., death in family, illness with note from MD, acts of God, etc). *Minor illnesses do not constitute excused absences.*

The following are not acceptable forms of assignments:

- assignments in other than "Word" or pdf format
- hard copy of assignments that were to be uploaded
- illegible assignments
- emailed assignments that were to be uploaded
- jpg. or other digital formatting
- assignments sent through text message
- handwritten assignments unless specified as such by the instructor (must be in blue or black ink)
- assignments with unprofessional presentation including being incomplete
- assignments with extensive grammatical errors will not be graded and will receive a "zero"
- assignments that use identifying information of a subject/supervisor/facility (must use initials only) will receive a "zero".

In-class assignments, including but not limited to quizzes, presentations, and lab activities, missed due to an absence, late arrival, or leaving class early will be awarded an automatic "zero" and cannot be made up. Arriving to class after the morning quiz or exam has started will result in an automatic grade of "zero".

Student Behavioral Expectations or Conduct Policy:

Generic Abilities & Professional Behaviors:

Students are expected to maintain a professional classroom decorum that includes respect for other students and the instructor, prompt and regular attendance, and an attitude that seeks to take full advantage of the educational opportunity. Likewise, all communications with the instructor are to be professional (e-mails that are discourteous, use improper grammar, and/or simulate a text message will not be responded to).

Students in the Occupational Therapy Assistant program have willingly applied for, and entered into, a professional degree program. Implicit in professional degree programs is the need to develop the student's professional behaviors as well as minimum basic entry level competencies. The tool utilized in the OTA Program is the Generic Abilities assessment tool. Students will be evaluated on a continual basis throughout the program in classroom, lab activities, clinical activities, and interaction between fellow students, faculty, and instructors. If a student is found to be lacking in any area of the generic abilities, the student will be called in by the faculty member who will fill out the form and review any deficiencies.

The faculty member, and if deemed necessary the program director, will then discuss with the student a plan of action to assist the student in development in the areas that have been deemed deficient. Any student who persists with the same deficiencies with no improvement in professional behavior over 3 different episodes may be dismissed from the program based upon lack of progress in professional behavior. It will also be at the faculty member's discretion to take 2 points from the student's final grade for each documented episode related to unprofessional behavior.

Concerns regarding academic and/or clinical advising or instruction should be first addressed to the Faculty Member in question within five (5) working days from the time of occurrence. If the student feels that a problem has not been resolved, then the student should present the issue to the Program Director. If no resolution is reached at this level, in accordance with the McLennan Student Grievance Procedure, the student may discuss the issue with the Dean of Health Professions. If resolution is still not reached, then the Vice President of Instruction is contacted. A formal grievance may be initiated by submitting a request in writing to the President of the College to have the issue considered by a formal grievance committee. This procedure is outlined in the Highlander Guide, available at www.mclennan.edu.

Attachment #10 Generic Abilities

Generic abilities are attributes, characteristics or behaviors that are not explicitly part of the knowledge and technical skills but are nevertheless required for success in the profession. Ten generic abilities were identified through a study conducted at the University of Wisconsin at Madison in 1991-1992. The ten abilities and definitions developed are:

	<i>Generic Ability</i>	<i>Definition</i>
1	Commitment to learning	The ability to self-assess, self-correct, and self-direct; to identify needs and sources of learning; and to continually seek new knowledge and understanding.
2	Interpersonal skills	The ability to interact effectively with patient, families, colleagues, other health care professionals, and the community and to deal effectively with cultural and ethnic diversity issues.
3	Communication skills	The ability to communicate effectively (speaking, body language, reading, writing, listening) for varied audiences and purposes.
4	Effective use of time and resources	The ability to obtain the maximum benefit from a minimum investment of time and resources.
5	Use of constructive feedback	The ability to identify sources of and seek out feedback and to effectively use and provide feedback for improving personal interaction.

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6	Problem-solving	The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.
7	Professionalism	The ability to exhibit appropriate professional conduct and to represent the profession effectively.
8	Responsibility	The ability to fulfill commitments and to be accountable for actions and outcomes.
9	Critical thinking	The ability to question logically; to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.
10	Stress management	The ability to identify sources of stress and to develop effective coping behaviors.

May W, Morgan BJ, Lemke J, Karst G, Stone H. Model for ability based assessment in physical therapy educate; *Journal of Physical Therapy Education* 1995;91:3-6.

Technology Devices:

Personal Computer/Electronics Use: Computer use is expected throughout the Program. The MCC library has computer availability for after class hours if necessary. Access to library search engines is required and will be a part of the student's required class participation.

Students are not to use laptop computers, smart phones, iwatches/smart watches, or other electronic devices in the classroom unless prompted by the instructor. These devices are to remain stored in the student's backpack during class.

Students are not to post any classroom materials on any internet or social media site without the express written consent of the faculty.

A student who has an unauthorized electronic device activated during an examination period will not be permitted to continue the examination, will be asked to leave the classroom, and will be denied the opportunity to complete or re-take the examination. Due to the circumstance, the instructor may question the validity of any portion of the examination completed prior to the violation and may elect not to grade the examination. In such a situation, the student will not receive credit for the examination and will not be permitted to make up the missed examination.

Video & Tape Recordings: Students may only tape record or video class activities and instructors with permission of the instructor and in no circumstance are allowed to post recordings on any internet site or social network site. The recording may only be utilized by the individual. Students who do not remain in compliance with this policy will be written up, put on probation, or potentially dismissed from the program based upon the extent to which the policy has been disregarded.

Beepers, cellular telephones, text, and personal telephone calls. Students are NOT to receive or place telephone calls/beeper calls/texts during class. Beepers, smart watches, and cellular telephones are to be turned off or set to vibrate before entering the classroom and stored in backpack during class. Messages may be left with the Health Professions executive secretary

at 299-8568. Messages for a student during an emergency will be delivered immediately. At the discretion of the instructor, students may be asked to leave cell phones and electronic devices in a box during class.

Additional Items:

- ✓ **Verbal, non-verbal, and written communications** are to be polite and respectful at all times
- ✓ **Food** is not allowed in class
- ✓ **Children** are not allowed in class
- ✓ **Sleeping** is not allowed in class
- ✓ **Drinks** with screw-on lids are permitted if the student leaves the lid in place
- ✓ **Smoking, vaping, using tobacco**, using simulated tobacco or similar products are not allowed in class
- ✓ **Alcohol and drugs are not allowed** in the classroom and students should not attend class under the influence of them nor with the smell of any of them

Any of the above will result in being asked to leave the classroom and receiving an absence for the day at a minimum but could result in being written up, put on probation, or potentially dismissed from the program based upon the extent to which the policy has been disregarded.

* **[Click Here for the MCC Attendance/Absences Policy](https://www.mclennan.edu/highlander-guide/policies.html)**

(<https://www.mclennan.edu/highlander-guide/policies.html>)

Click on the link above for the college policies on attendance and absences. Your instructor may have additional guidelines specific to this course.

McLennan

C O M M U N I T Y

COLLEGE

ACADEMIC RESOURCES/POLICIES

Student Support/Resources:

MCC provides a variety of services to support student success in the classroom and in your academic pursuits to include counseling, tutors, technology help desk, advising, financial aid, etc. A listing of these and the many other services available to our students is available at <http://www.mclennan.edu/campus-resource-guide/>

College personnel recognize that food, housing, and transportation are essential for student success. If you are having trouble securing these resources or want to explore strategies for balancing life and school, we encourage you to contact a Success Coach by calling (254) 299-8226 or emailing SuccessCoach@mclennan.edu. Students may visit the Completion Center Monday-Friday from 8 a.m.-5 p.m. to schedule a meeting with a Success Coach and receive additional resources and support to help reach academic and personal goals. Paulanne's Pantry (MCC's food pantry) provides free food by appointment to students, faculty and staff based on household size. Text (254) 870-7573 to schedule a pantry appointment. The Completion Center and pantry are located on the Second Floor of the Student Services Center (SSC).

MCC Foundation Emergency Grant Fund:

Unanticipated expenses, such as car repairs, medical bills, housing, or job loss can affect us all. Should an unexpected expense arise, the MCC Foundation has an emergency grant fund that may be able to assist you. Please go to <https://www.mclennan.edu/foundation/scholarships-and-resources/emergencygrant.html> to find out more about the emergency grant. The application can be found at https://www.mclennan.edu/foundation/docs/Emergency_Grant_Application.pdf.

Minimum Technical Skills:

Students should have basic computer skills, knowledge of word processing software, and a basic understanding of how to use search engines and common web browsers.

Backup Plan for Technology:

In the event MCC's technology systems are down, you will be notified via your MCC student email address. Please note that all assignments and activities will be due on the date specified in the Instructor Plan, unless otherwise noted by the instructor.

Minimum System Requirements to Utilize MCC's D2L|Brightspace:

Go to <https://www.mclennan.edu/center-for-teaching-and-learning/Faculty%20and%20Staff%20Commons/requirements.html> for information on the minimum system requirements needed to reliably access your courses in MCC's D2L|Brightspace learning management system.

Email Policy:

McLennan Community College would like to remind you of the policy (<http://www.mclennan.edu/employees/policy-manual/docs/E-XXXI-B.pdf>) regarding college email. All students, faculty, and staff are encouraged to use their McLennan email addresses when conducting college business.

A student's McLennan email address is the preferred email address that college employees should use for official college information or business. Students are expected to read and, if needed, respond in a timely manner to college emails.

Instructional Uses of Email:

Faculty members can determine classroom use of email or electronic communications. Faculty should expect and encourage students to check the college email on a regular basis. Faculty should inform students in the course syllabus if another communication method is to be used and of any special or unusual expectations for electronic communications.

If a faculty member prefers not to communicate by email with their students, it should be reflected in the course syllabus and information should be provided for the preferred form of communication.

Email on Mobile Devices:

The College recommends that you set up your mobile device to receive McLennan emails. If you need assistance with set-up, you may email Helpdesk@mclennan.edu for help.

Forwarding Emails:

You may forward emails that come to your McLennan address to alternate email addresses; however, the College will not be held responsible for emails forwarded to an alternate address that may be lost or placed in junk or spam filters.

MCC Academic Integrity Statement:

Go to www.mclennan.edu/academic-integrity for information about academic integrity, dishonesty, and cheating.

Accommodations/ADA Statement:

Any student who is a qualified individual with a disability may request reasonable accommodations to assist with providing equal access to educational opportunities. Students should contact the Accommodations Coordinator as soon as possible to provide documentation and make necessary arrangements. Once that process is completed, appropriate verification will be provided to the student and instructor. Please note that instructors are not required to provide classroom accommodations to students until appropriate verification has been provided by the Accommodations Coordinator. For additional information, please visit www.mclennan.edu/disability.

Students with questions or who require assistance with disabilities involving physical, classroom, or testing accommodations should contact:

disabilities@mclennan.edu

254-299-8122

Room 319, Student Services Center

Title IX:

We care about your safety, and value an environment where students and instructors can successfully teach and learn together. If you or someone you know experiences unwelcomed behavior, we are here to help. Individuals who would like to report an incident of sexual misconduct are encouraged to immediately contact the Title IX Coordinator at titleix@mclennan.edu or by calling Dr. Drew Canham (Chief of Staff for Diversity, Equity & Inclusion/Title IX) at (254) 299-8645. Individuals also may contact the MCC Police Department at 299-8911 or the MCC Student Counseling Center at MCC at (254) 299-8210. The MCC Student Counseling Center is a confidential resource for students. Any student or employee may report sexual harassment anonymously by visiting <http://www.lighthouse-services.com/mclennan/>.

Go to McLennan's Title IX webpage at www.mclennan.edu/titleix/. It contains more information about definitions, reporting, confidentiality, resources, and what to do if you or someone you know is a victim of sexual misconduct, gender-based violence or the crimes of rape, acquaintance rape, sexual assault, sexual harassment, stalking, dating violence, or domestic violence.

Disclaimer:

The resources and policies listed above are merely for informational purposes and are subject to change without notice or obligation. The College reserves the right to change policies and other requirements in compliance with State and Federal laws. The provisions of this document do not constitute a contract.