Department of Occupational Therapy

MASTER OF OCCUPATIONAL THERAPY PROGRAM
STUDENT HANDBOOK

2015 - 2016
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On behalf of the Department of Occupational Therapy, I welcome you to the Master of Occupational Therapy Program at Samuel Merritt University. As you begin your professional and graduate education, you will soon view the world in a new and different way. You will find that occupational therapy is not just a profession, but also a commitment to excellence and a way of life.

To help you effectively progress through the professional coursework, this Master of Occupational Therapy Program Student Handbook has been compiled to present information and policies relevant to you as a master occupational therapy student. This handbook is a companion Samuel Merritt University Student Handbook. Since you are responsible for knowing and understanding the policies and procedures found in this handbook, please ask for clarification if you have any questions about the information. We also welcome your suggestions for inclusion of additional information that would be helpful to you. The faculty reserves the privilege of revising policies and procedures found in this handbook at any time it is deemed necessary. We will distribute written revisions to you when changes are advisable.

Congratulations on your selection of occupational therapy as a career. You have chosen wisely. The occupational therapy profession is a growing and dynamic field. Occupational therapy is a well-respected discipline with many opportunities available for growth, advancement, and achievement. We hope you will enjoy becoming a member of this very special community. We look forward to the opportunity of getting to know you.

Kate Hayner, EdD, OTR/L
Associate Professor and Chair
Department of Occupational Therapy
MISSION

Samuel Merritt University educates students to become highly skilled and compassionate healthcare professionals who positively transform the experience of care in diverse communities.

VISION

Samuel Merritt University will become nationally recognized as a premier, multi-specialty health sciences institution. Expert faculty and staff will shape an inclusive learning environment where all students experience best teaching practices and state-of-the-art learning approaches. The University will select and support students who will flourish in its rigorous academic programs, learn to practice expertly, and pass licensure or certification examinations on first attempt.

VALUES

At Samuel Merritt University we value…

• A learning environment where we challenge ourselves and our students to think critically, seek mastery, and act compassionately.

• A collegial environment where we are fair, respectful, and behave with integrity.

• A collaborative environment where we partner with one another and with others in the community.

• An innovative environment where we take reasoned risks and move nimbly.

• A results-oriented environment where we provide and expect exceptional performance and service.
OVERVIEW OF THE DEPARTMENT OF OCCUPATIONAL THERAPY
VISION AND MISSION

VISION

Occupational therapy is the study of human occupation in relationship to personal health, life satisfaction, and sense of well-being. The ultimate goal of occupational therapy is to enable individuals to assume an optimal level of independent functioning and sustain the highest quality of life to become productive, contributing members of society. To maintain this vision, occupational therapists work in a variety of health care settings including general and psychiatric hospitals, rehabilitation centers, school systems, nursing homes, private practice and community centers.

The hallmark of occupational therapy practice is the emphasis on evaluating and treating the whole person, rather than one segment of their being. Therefore, we support the Mindbody model, which views the mind and body as one entity. The Mindbody model derives its scientific support from research in neuroscience, health psychology, and psychoneuroimmunology. These evolving disciplines provide an understanding of the therapeutic value of occupation. They provide the scientific rigor to study the "whole person" and the concerns of function in daily life activities and occupations.

MISSION

The Department of Occupational Therapy offers graduate professional education for the preparation and continued development of skilled clinicians using a Mindbody Model that recognizes the wholeness of each individual. We promote skilled service to the profession and community, serving diverse populations according to the highest clinical standards. The program’s mission is actualized through excellence and leadership in teaching, scholarship, and involvement in professional and community activities.

The Master of Occupational Therapy Program aims to:

• Provide a creative and innovative graduate occupational therapy program that meet and exceed professional standards of excellence;

• Educate occupational therapy students to meet the societal needs for service provision;

• Provide an educational environment that fosters personal and professional freedom and responsibility, conducive to intellectual, social and cultural development;
• Educate qualified students from diverse backgrounds who have the potential to become competent, compassionate and contributing health care professionals;

• Offer curricula designed to prepare graduates who have the ability to think logically, critically and independently; who demonstrate competence in the application of knowledge and skills; and whose behavior is guided by professional, humanitarian and ethical values;

• Pursue its primary role as an educational program while facilitating the participation of its faculty, staff and students in community service, research, scholarly and professional activities;

• Service the community of health care practitioners by providing timely, relevant, and quality continuing education in occupational therapy;

• Engage in activities that contribute to the health and well-being of the community;

• Institute a caring atmosphere in which occupational therapy students, faculty, and community service providers work together to optimize their personal and professional development.

PHILOSOPHY

Occupational therapy is the use of purposeful activity (unique feature) or interventions to promote health and achieve functional outcomes (generic goals of most health care fields). Achieving functional outcomes means to develop, improve, or restore the highest possible level of independence (purpose/goal) of any individual who is limited by a physical injury or illness, a dysfunctional condition, a cognitive impairment, a psychosocial dysfunction, a mental illness, a developmental or learning disability, or adverse environmental conditions (population served). Evaluation is a process that is “focused on finding out what the client wants and needs to do, determining what the client can do and has done, and identifying those factors that act as supports or barriers to health and participation. Evaluation often occurs both formally and informally during all interactions with the client” (American Occupational Therapy Association [AOTA], 2008, p. 649).

PHILOSOPHY OF THE DEPARTMENT OF OCCUPATIONAL THERAPY

1. The philosophy of the occupational therapy program is based upon the premise that the process of “occupation,” has a restorative or normalizing effect. The ultimate goal of occupational therapy is to enable individuals to assume an optimal level of independent functioning and sustain the highest quality of life so they can be productive, contributing members of society.
2. Within the context of this philosophy, the faculty of the Department of Occupational Therapy believes each individual is unique and is best understood as a "biopsychosocial" human being. Each person is a unified whole who operates in a variety of roles and lives in continually developing, mutual relationships with others and with their environments. These environments consist of the aggregate of physical, psychosocial, cultural and spiritual realms within which persons and society interact and engage in purposeful occupations. The ultimate goal of occupational therapy practice is to assist individuals, families, and communities to achieve health and meaningful occupational function within the individual, situational and cultural realms.

3. The development of values, attitudes, knowledge, and skills necessary to competently serve diverse cultural populations is required in post-baccalaureate preparation. The balanced study of the natural and social sciences and the humanities provides a foundation, which promotes critical judgment, respect, and concern for individuals, communities, and society. A broad education in the liberal arts and sciences is requisite for the development of knowledge, skills, and inquiry essential to professional occupational therapy practice. Occupational therapy upholds and draws upon the tradition of scientific inquiry while contributing to and disseminating the body of knowledge in health care.

4. We strive to best serve each new generation of students by fostering an educational and social milieu that allows optimum learning. We recognize our students as adult learners who must also cooperate with each other, both in class and as therapists later on. Teaching and learning are shared processes that best occur in an environment that stimulates inquiry, promotes critical and independent thinking, and supports personal and professional development based on past experience and knowledge, skills and attitudes which students bring to the program. The faculty recognizes the uniqueness of the individual learner and implements a variety of teaching strategies to liberate the full range of individual potential. The changing health care delivery system of the future will rely more and more on the cooperation and interdependence of individuals in treatment teams for higher productivity and effective intervention.

5. The epistemological underpinnings of occupational therapy practice lies in the concept of treating the "whole person," rather than one segment of their being. The Mindbody model views the mind and body as one entity and derives its scientific support from research in neuroscience, health psychology, and psychoneuroimmunology. These evolving scientific disciplines provide the foundation to understanding the therapeutic value of occupation as we apply it in our study of occupational therapy.
In keeping with the historical philosophy of Adolph Meyer (1921), one of the founders of occupational therapy, the whole of human organization has its shape in a kind of rhythm. In addition to the biological rhythms of life, work, play, rest and sleep constitute rhythms that bring the organism into balance. It is through this process of occupation that one learns to attain balance that brings orderly rhythm to life. We are committed to the ongoing development of research on the concept of occupation and its importance in therapeutic intervention. Human occupation provides a vehicle for the interconnectedness of the person's daily life, their perceptions, values, habits and adherence to community, ritual and culture.

THE CURRICULUM

In 2007, the AOTA developed a *Centennial Vision* and proposed occupational therapy to be “a powerful, widely recognized, science-driven, and evidence-based profession with a globally connected and diverse work-force meeting society’s occupational needs” (AOTA, 2007, p. 614). In keeping with the *Centennial Vision*, the curriculum emphasizes evidence-based practice. Evidence based practice has been defined as “the conscientious, explicit and judicious use of current best evidence in making decisions about the care of the individual patient. It means integrating individual clinical expertise with the best available external clinical evidence from systematic research” (Sackett, 1996, p. 71).

The professional coursework in the Master of Occupational Therapy (MOT) program emphasizes the Mind-body model. In order to move in the direction of wellness and prevention a functional, in addition to a diagnostic approach, is implemented. Occupational therapy is strongly influenced by medicine, and functional problems fall neatly into the biomedicine model (treating physical injuries or illnesses with specific treatment techniques). However, occupational therapy practice goes far beyond the realm of the physical body. The occupational therapy process addresses the client and his or her occupations as well as the context and environment in which those occupations are performed (Christiansen, Baum, & Bass-Hagen, 2005).

In addition to developing the competencies to become a "generalist" practitioner, students will engage in critical thinking, theories of inquiry, research methodology and applied research. In the occupational therapy curriculum, research employs use of quantitative research and qualitative research methods. Over three semesters of study students will collaborate with faculty on research projects relevant to occupational therapy with clients who have physical or psychiatric disorder.
The curriculum will provide a sequential and developmental progression. The courses will be taken in sequence because the previous course material will provide the foundation for more advanced concepts and practice skills. The first year will provide traditional courses such as anatomy and physiology (OT 610), functional neuroscience (OT 618), applied kinesiology and biomechanics (OT 627), and human growth and development (619) to establish the anatomical and physiological basis for human occupation and performances. Study of the occupational therapy theoretical frames of reference (OT 611), familiarization with therapeutic media (616), and immersion in research methodology (OT 612 & 615) will prepare students for applied research projects and fieldwork during the first summer. In the Spring semester, students will begin implementing theory into practice in a problem-based course (OT 601).

The second year will incorporate more problem-based learning (Brasic Royeen, 1995) and adult-learning models (Knowles, 1970; Jacobs, Aja, & Hermenau, 1994) and includes conditions of human dysfunction (OT 624), psychosocial dysfunction (OT 626), and physical dysfunction (OT 629). These classes will address pathophysiology and medical diagnoses with an emphasis on function and the recognition of the whole person. To augment this awareness, three clinical experiences (psychosocial, pediatric, and adult physical dysfunction) have been woven into the program. In these courses, students will be introduced to the assessment process. Documentation of occupational therapy practice (OT 609) precedes the clinics to provide real-world practice of documentation skills. Basic concepts of measurement and statistics along with standardized evaluation tools will be addressed. Students will learn about health reform, global health issues, and the dilemmas of everyday clinical practice (OT 623).

Students will receive entry-level information about orthotics and prosthetics, assistive and adaptive technology, and physical agent modalities as used in occupational therapy (OT 631).

Principles of administration and management (OT 628) will provide the student with the rudimentary principles of managing a hospital-based clinic or community-based practice with a focus on prevention and wellness. Professional ethics, communications (reading, writing, speaking, listening and group participation) and documentation will be addressed throughout the curriculum (OT 611, OT 612, OT 613, OT 617, OT 622, OT 623, OT 628, OT 630).

Cultural Diversity is included throughout the program with focus in OT 611 and OT 633. Because many consumers use alternative health care services, OT 633 will explore cultural health beliefs and practices.

In addition to the integration of problem based learning and the adult learning philosophies into the curriculum, three important documents have been included in the planning process: *Accreditation Standards for a Master's-Degree-Level Educational Program for the*
Occupational Therapist (AJOT, 2007); Occupational Therapy Practice Framework: Domain and Process, 2nd Edition (AOTA, 2008), The Guide to Occupational Therapy Practice (Moyers, 2007). These documents have provided the guide posts necessary to develop a viable occupational therapy program.

ACCREDITATION STATUS

Samuel Merritt University is fully accredited by the Senior Commission of the Western Association of Schools and Colleges (WASC), most recently in 2000.

The Occupational Therapy Program is accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA), located at 4720 Montgomery Lane, P.O. Box 31220, Bethesda MD 20824-1220. AOTA’s phone number is (301) 652-AOTA. The next evaluation site visit for continued accreditation of the SMU MOT program will be 2017-2018. The Department of Occupational Therapy was last re-accredited IN 2008 for 10 years. The full accreditation report is in the Chair’s Office and may be reviewed at any time.

Graduates of the program will be able to sit for the national certification examination for the occupational therapist administered by the National Board for Certification in Occupational Therapy (NBCOT) (www.NBCOT.org). After successful completion of this exam, the individual will be an Occupational Therapist, Registered (OTR). The credential will qualify the individual for state licensure in California.

The Accreditation Council for Occupational Therapy Education (ACOTE) is listed by the United States Department of Education as a nationally recognized accrediting agency for professional programs in the field of Occupational Therapy. To be in compliance with accreditation, educational programs in occupational therapy must meet or exceed the minimum standards outlined in the 2006 STANDARDS FOR AN ACCREDITED EDUCATIONAL PROGRAM FOR THE OCCUPATIONAL THERAPIST OR OCCUPATIONAL THERAPY ASSISTANT. The standards document describes the minimum standards of quality used in accrediting programs that prepare individuals to enter the occupational therapy profession. A new section has been added to emphasize functional outcomes, that is, specific objectives and competencies to be acquired. The extent to which a program complies with these standards determines its accreditation status.
FACULTY AND STAFF

- Kate Hayner, EdD, OTR/L  
  Chair, Department of Occupational Therapy
- Drew Ward, Administrative Assistant
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- Donna Breger Stanton, OTD, OTR/L, CHT, FAOTA
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- Beth Ching, MEd, OTR/L
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- Linda Monroe, MPT, OCS
- Barb Puder, PhD
- Chi Kwan Shea, PhD, OTR/L
- Renee Smey, MOT, OTR/L
- Corry Wagner, MOT, OTR/L
- Robyn Wu, OTD, OTR/L

FACULTY AND COURSE EVALUATIONS

All instructors and courses are evaluated each semester using the University’s uniform evaluation form. Students are encouraged to provide constructive feedback and criticism of the courses and faculty so we can continue to improve our curriculum and teaching skills. The results of these evaluations will be anonymous. Although we encourage your feedback and input, we must remind you that the intent of the evaluation is to improve classroom and laboratory instruction. Comments of a personal nature concerning the instructor are not appropriate on professional evaluations. Please see the instructor during his or her office hours to discuss any concerns you wish to express about their style of teaching and how we can best match your particular learning style.

For many students, the adjustment to a problem-based learning and adult learning model is a difficult transition. Graduate students learn best when they are stakeholders in the learning process and when the student takes responsibility for their own study habits and behaviors.
ADVISEMENT

Each student will be assigned to an academic advisor. This faculty member will remain your advisor throughout the academic course work. When you begin Fieldwork II, the Fieldwork Coordinator will take over as your advisor. Your academic advisor is responsible for consultation or guidance with respect to courses and program requirements as well as individual problems that impact your educational endeavors. Students are encouraged to meet once a semester to review their progress through the program.

STUDENT PROGRESS

Bi-monthly faculty meetings are held to discuss, among other agenda items, concerns regarding individual students. The faculty’s aim is to address problems early on and to assist in insuring the student’s success in the program. Occasionally, problems with writing (grammar, spelling, organization, flow/sequence, proper use of APA guidelines) arise. If the faculty determines a student needs assistance beyond the scope of the specific class, the student may be required to attend writing workshops on campus and verify attendance.

ATTENDANCE

Regular classroom attendance is expected and essential to successful academic achievement in the occupational therapy program. Students are responsible for all work missed due to absences and must make arrangements with their instructors to make-up work. Make-up work for unexcused absences, including missed examinations, is at the discretion of the faculty member. All classes will have sign-in sheets. It is the responsibility of each student to sign in. No student may sign in for another student unless the professor provides explicit permission.

ACADEMIC HONESTY

Academic integrity is expected of all faculty, staff and students in order to promote a productive and safe environment for learning. Key components of academic integrity are communication and mutual respect among the members of the Samuel Merritt University community. Faculty, staff, and students are expected to abide by the codes of conduct and ethics of this University, as well as, the code of ethics of their respective professions, which includes reporting misconduct to the appropriate authorities. Lack of academic integrity includes, but is not limited to,
plagiarizing, cheating, deception, breach of confidentiality, failure to report a clinical error, falsifying research results, and failure to confront and/or report misconduct of others.

Faculty members reserve the right to evaluate individual cases of academic dishonesty by a student and to take appropriate action, which may include failure on a paper or exam or failure in the course. Faculty may also recommend censure, probation, suspension or dismissal to the Academic Vice President. A written report of any action will be placed in the student’s file in the Office of the Registrar. If the student’s status in the program is affected, a permanent notation will be made on his/her transcript.

Regardless of any action taken by the course faculty member, lack of academic integrity constitutes grounds for suspension or dismissal from Samuel Merritt University through the Office of the Academic Vice President.

PLAGIARISM

Plagiarism is not acceptable and may result in a number of consequences. Most people understand plagiarism to be the action of copying someone else’s work, words, or ideas without giving proper credit. Sometimes it is very evident and at others, it is not as clear to the student. There are degrees of plagiarism, from outright copying written material without quotations or citation, to copying a small phrase or statistic without properly quoting or citing the source. We assume all graduate students understand what plagiarism is and how to avoid it. If you do not feel you understand plagiarism please seek out help. Many sources are available in the library and on-line.

If a faculty member feels plagiarism has occurred on an assignment in his or her course in the MOT program, he or she may do any of the following, depending on the extent of plagiarism:

- Counsel the student on plagiarism with a notice of this occurrence placed into the student’s file.
- Give the student a failed grade on the assignment and require the student to complete the assignment again for the minimum possible passing points of 70%. A notice of this occurrence will go into the student’s file.
- Fail the student’s assignment without the option of redoing it. A notice of this occurrence will go into the student’s file.
If a student has record of prior counsel regarding plagiarism the second occurrence will be sent to the chair of the department for determination of severity and consequences. Or, if the plagiarism is deemed to be so egregious on the first occurrence the faculty member may inform the chair of the department for possible further actions. The chair will make a determination after counsel with two uninvolved faculty members. The determination will take into account the following:

- The quantity of plagiarism in an assignment
- The number of prior occurrences
- The student’s feedback on the occurrence
- The assignment instructions that were given to the student
- The involved faculty member’s statement and suggested outcome
- The level of plagiarism (from citing the wrong source or poor paraphrasing to copying a full paragraph or paper)

Faculty recognizes plagiarism is often unintentional. Whether or not the student did or did not intend to plagiarize is considered but the extent of the infraction will determine the outcome versus the student’s reported intent. When the plagiarism is minor, such as giving the wrong citation, the student will be counseled. Further consequences may be failing the assignment, receiving a D in the course, or failing the course and subsequently being dismissed from the program.

**PROFESSIONAL BEHAVIORS**

There is an expectation that all students will behave in a professional manner at all times. Please refer to the SMU Catalog. Professional behaviors include, but are not limited to:

- Engaging in responsible and courteous communication
- Maintaining a professional tone of voice in all communications
- Listening to and acknowledging feedback from peers and faculty
- Choosing appropriate dress for class and clinical activities
- Participating actively in course activities and maintaining attention in class
- Following directions during program activities including classroom and clinical setting.

Some *examples* of unprofessional behaviors:

- Tardiness
• Side-talking in class
• Eating in class (by permission only)
• Putting one’s head on the desktop during lecture
• Absence from class without notifying the professor prior to class
• Walking away from a faculty member or peer during the course of a conversation
• Using computers and electronic media during class for non-class related activity
• Refusing to meet with a faculty member or the department Chair upon request of the faculty member or department Chair

Faculty will track all unprofessional behaviors (as noted, in part, above) and will address these with the student as appropriate. If three occurrences of the same behavior occur, the student will be required to meet with the Program Chair. A mutual plan of resolution will be determined and a record will be placed in the student’s file.

ACADEMIC CLINICAL EXPECTATIONS

In the clinical setting, observations and fieldwork experiences are designed to complement and reinforce the academic course work. The University expects students and faculty to conduct themselves in a manner consistent with State law and ethical practice and to observe and honor patient's rights, privacy, informed consent and dignity.

In the clinical setting, the fieldwork educator (preceptor) is authorized to dismiss a student for cause without notice. Situations in which this action is justifiable include, but are not limited to: behavior that seriously jeopardized the safety of others; substance abuse; insubordination; violation of State law and ethical practice.

Such dismissal from a clinical practicum site is automatically referred to the Fieldwork Coordinator and the Chairperson of the Department of Occupational Therapy. The student may be subject to further disciplinary action.

LIABILITY AND MALPRACTICE

Samuel Merritt University provides professional liability coverage for students and faculty as it pertains to Fieldwork and other educational experiences. The acquisition of additional coverage is an individual decision based upon individual circumstances. Specific information about malpractice insurance is available upon request.
ACADEMIC POLICIES

Progression Policy

For progression and graduation, students must achieve satisfactory performance. In the Department of Occupational Therapy, progression is contingent upon taking courses in sequence and achieving a minimum grade point of 2.0 in all required courses. This policy also applies to Fieldwork I and Fieldwork II where satisfactory performance is of equal importance. If a student falls below a cumulative 2.0 grade point average in occupational therapy courses, or receives a “D” or “F” in any one course during a semester he or she cannot progress to the next semester. A student who receives a “D” is expected to repeat the course in which the “D” was received. A student who receives an “F” will be dismissed from the program. Students are also expected to maintain current CPR certification, provide evidence of successful completion of a tutorial on blood-borne pathogens, and maintain updated required immunizations and TB tests prior to progressing to fieldwork.

Grades

Grades students receive in the Occupational Therapy Program are listed below. As is common in graduate programs, plus or minus grades will not be offered. Please refer to each course syllabus for the grading criteria. Grades in the Master of Occupational Therapy Program are computed on the following percentages:

- A = 90 - 100%
- B = 80 - 89%
- C = 70 - 79%
- D = 60 - 69%
- F = Less than 60%
- I = Incomplete
- IP = In progress
- S = Satisfactory
- U = Unsatisfactory
- W = Withdrawal
- Z = Audit
Final examinations are given during the final week of each term and cannot take place prior to the final week of the semester. Faculty enters grades on the SMURF system. Final grades are permanent with the exception of "Incomplete" and are to be changed only in case of clerical error in computation of percentages. See the University catalog for policies on grade changes.

**Add/drop**

In the MOT program if a student drops a course during the add/drop period that student will become a part-time student and consequently will be subject to a change in tuition and may be restricted in progressing to fulltime status in subsequent semesters.

**Withdrawal From A Course**

After the end of the drop/add period, a student may withdraw from a course without academic penalty **up until the midpoint of the course, as specified in the course syllabus, or when no more than 50% of the course has been completed, which ever occurs last.** A student may withdraw from a single course only once. The course remains on the student transcript with a grade of “W”. Petitions to withdraw from a course beyond this period would be approved only for serious and compelling reasons such as serious accident or illness. The approval of the instructor and the department chair are required on the petition form, which the student files in the Registrar’s Office. If the petition is granted, the course remains on the student record with a “W” grade. If the petition is denied or the student fails to complete course requirements without formally withdrawing, the grade will be determined by the instructor based on the grading policy and requirements as noted in the course syllabus. In the MOT program if a student withdraws from a course that student may become a part-time student and consequently will be subject to a change in tuition. Additionally the student may be restricted in progressing to fulltime status in subsequent semesters.

**Withdrawal From Samuel Merritt University**

A student wishing to withdraw from the University must follow the proper procedures. Any student who leaves the University during a term or who terminates enrollment at the end of a term must complete a withdrawal form available on the Samuel Merritt University website (www.samuelmerritt.edu) and in the Campus Service Center. Notice of clearance with several other University offices is to be secured on this form. Final transcripts may be released only after
the completed form is on file in the Registrar’s Office. Students are to make an appointment to meet with the Vice President of Enrollment & Student Services for an exit interview. Withdrawal from the University through the tenth week of instruction will result in grades of “W” in all courses. Eligibility to withdraw from the University after the tenth week will be determined individually. A student who has withdrawn from the University may request readmission by applying to the Director of Admission.

Graduate Probation, Suspension, and Dismissal

An entry-level occupational therapy student may be suspended from the program if s/he earns a grade of “D” in a required class or “Unsatisfactory” on a field experience, affiliation or the internship. The occupational therapy curriculum is sequential. Courses and affiliations must be taken in sequence. Therefore, the student is suspended until the course is repeated or another affiliation can be arranged. S/he may not progress in the curriculum until the course or affiliation is successfully completed or graduate until the internship is completed. A MOT student is subject to dismissal if (1) a course, field experience, affiliation, or internship is not successfully repeated at its next offering; or (2) the student receives a second “D”/“U” grades in required courses or field experiences, affiliations or internships; or (3) a student receives a grade of “F” in any required course.

NOTE THAT IT IS THE RESPONSIBILITY OF EVERY STUDENT TO REVIEW, AND BECOME FAMILIAR WITH, THE POLICIES AND PROCEDURES OF SAMUEL MERRITT UNIVERSITY AS PRESENTED IN THE UNIVERSITY CATALOG (available at www.samuelmerritt.edu).

PROFESSIONAL AND STUDENT ORGANIZATIONS

1. Our national organization is the American Occupational Therapy Association (AOTA). The Association is responsible for developing standards for education and practice, for promoting the profession in important political issues such as in Health Reform and for marketing the profession to the public and to other professional organizations. We strongly encourage the students in our program to join the national association. It is a way of having representation at national meetings and having a voice in important decisions, which will affect you as an occupational therapist. The student fee for membership is $75.00 per year.
Membership in AOTA is mandatory for students in the MOT program at Samuel Merritt University. Benefits include receiving The American Journal of Occupational Therapy and OT Practice (a monthly newsletter that includes job notices). Additionally membership with AOTA provides access to important information via online resources as needed for classes, and discounted continuing education opportunities. Website: www.aota.org

2. Every state has an Occupational Therapy association. In California it is called the Occupational Therapy Association of California, or OTAC. The state association is actively involved in issues such as licensure and practice. The California association is one of the largest in the nation and sponsors a state conference each year. Again, we strongly encourage students to be active members of the state association. The state conference is usually well attended and takes place in either Northern or Southern California. We would like to have student representation at the conferences so we can become a force in the political decision making process in the State of California. Membership includes a newsletter and reduced rates for conferences and workshops. Information on state membership other than California may be obtained from the Fieldwork Coordinator. The Department of Occupational Therapy highly recommends student membership in OTAC. The student fee for membership is $50.00 per year. Website: www.otaconline.org

Membership in OTAC is mandatory for students in the MOT program at Samuel Merritt University.

3. The Student Occupational Therapy Association (SOTA) is the official organization for educational programs. The purpose of the SOTA is to promote greater unity and understanding among the occupational therapy students and to present educational material that is of particular interest. The student association also serves as a community of support, is active in fund raising, and acclimates the student with the organizational structure and decision making process of the profession. Students elect their own officers and send representatives to local chapter meetings. We encourage student involvement in this association so you can participate in faculty meetings and be involved in departmental and professional affairs. The one-time fee for membership is $10.00.
4. American Society of Hand Therapists (ASHT). Student membership is available. Benefits include receipt of the Journal of Hand Therapy (bimonthly) and ASHT Times, as well as reduction of cost for courses/workshops. Website: www.asht.org

References


