



**ACCREDITATION STANDARDS FOR AN EDUCATIONAL PROGRAM FOR THE
OCCUPATIONAL THERAPY ASSISTANT**

Adopted August 2006, Effective January 1, 2008

The Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA) accredits educational programs for the occupational therapy assistant. The Standards comply with the United States Department of Education (USDE) criteria for recognition of accrediting agencies.

These Standards are the requirements used in accrediting educational programs that prepare individuals to become occupational therapy assistants. The extent to which a program complies with these Standards determines its accreditation status.

PREAMBLE

The rapidly changing and dynamic nature of contemporary health and human services delivery systems requires the occupational therapy assistant to possess basic skills as a direct care provider, educator, and advocate for the profession and the consumer.

A graduate from an ACOTE-accredited occupational therapy assistant program must

- Have acquired an educational foundation in the liberal arts and sciences, including a focus on issues related to diversity.
- Be educated as a generalist with a broad exposure to the delivery models and systems used in settings where occupational therapy is currently practiced and where it is emerging as a service.
- Have achieved entry-level competence through a combination of academic and fieldwork education.
- Be prepared to articulate and apply occupational therapy principles and intervention tools to achieve expected outcomes as related to occupation.
- Be prepared to be a lifelong learner and keep current with the best practice.
- Uphold the ethical standards, values, and attitudes of the occupational therapy profession.
- Understand the distinct roles and responsibilities of the occupational therapist and occupational therapy assistant in the supervisory process.
- Be prepared to advocate as a professional for the occupational therapy services offered and for the recipients of those services.

NUMBER	OTA STANDARD
SECTION A: GENERAL REQUIREMENTS FOR ACCREDITATION	
A.1.0. SPONSORSHIP AND ACCREDITATION	
A.1.1.	The sponsoring institution(s) and affiliates, if any, must be accredited by recognized national, regional, or state agencies with accrediting authority.
A.1.2.	Sponsoring institutions must be authorized under applicable law or other acceptable authority to provide a program of post-secondary education, have appropriate degree-granting authority, or be a program offered within the military services.
A.1.3.	Accredited occupational therapy assistant educational programs may be established only in community, technical, junior and senior colleges, universities, medical schools, vocational schools or institutions, or military services.
A.1.4.	The sponsoring institution must assume primary responsibility for appointment of faculty, admission of students, and curriculum planning. This would include course content, satisfactory completion of the educational program, and granting of the degree. The sponsoring institution must also be responsible for the coordination of classroom teaching and supervised fieldwork practice and for providing assurance that the practice activities assigned to students in a fieldwork setting are appropriate to the program.

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A.1.5.	<p>The sponsoring institution or program must</p> <ul style="list-style-type: none"> • Inform ACOTE of the transfer of program sponsorship or change of the institution’s name within 30 days of the transfer or change. • Inform ACOTE within 30 days of the date of notification of any adverse accreditation action taken to change the sponsoring institution’s accreditation status to probation or withdrawal of accreditation. • Submit a Letter of Intent to add or change a program degree level at least 1 year prior to the planned admission of students into that level. • Inform ACOTE within 30 days of the resignation of the program director or appointment of a new or interim program director. • Pay accreditation fees within 90 days of the invoice date. • Submit a Report of Self-Study and other required reports (e.g., Biennial Report, Plan of Correction, Progress Report) within the period of time designated by ACOTE. All reports must be complete and contain all requested information. • Agree to a site visit date before the end of the period for which accreditation was previously awarded. • Demonstrate honesty and integrity in all interactions with ACOTE.
A.2.0. ACADEMIC RESOURCES	
A.2.1.	<p>The program must have a director who is assigned to the occupational therapy educational program on a full-time basis. The director may be assigned other institutional duties that do not interfere with the management and administration of the program. The institution must ensure that the needs of the program are being met.</p>
A.2.2.	<p>The program director must be an initially certified occupational therapist or occupational therapy assistant who is licensed or credentialed according to regulations in the state or jurisdiction in which the program is located. The director must hold academic qualifications comparable to the majority of other program directors within the institutional unit (e.g., division, college, school) to which the program is assigned. By July 1, 2012, the program director must hold a minimum of a master’s degree.</p>
A.2.3.	<p>The program director must have a minimum of 5 years of experience in the field of occupational therapy, including practice as an occupational therapist or occupational therapy assistant, administrative or supervisory experience, and at least 1 year of experience in a full-time academic appointment with teaching responsibilities.</p>
A.2.4.	<p>The program director must have an understanding of and experience with occupational therapy assistants.</p>
A.2.5.	<p>The program director must be responsible for the management and administration of the program, including planning, evaluation, budgeting, selection of faculty and staff, maintenance of accreditation, and commitment to strategies for professional development.</p>
A.2.6.	<p>In addition to the program director, the program must have at least one full-time equivalent (FTE) faculty position at each accredited location where the program is offered. This position may be shared by several individuals who teach as adjunct faculty and have one or more additional responsibilities related to student advisement, fieldwork administration or supervision, committee work, program planning, evaluation, recruitment, and marketing activities.</p>
A.2.7.	<p>The program director and faculty must possess the academic and experiential qualifications and backgrounds (identified in documented descriptions of roles and responsibilities) that are necessary to meet program objectives and the mission of the institution.</p>
A.2.8.	<p>The program must document policies and procedures to ensure that the program director and faculty are aware of and abide by the current code of ethics of the profession of occupational therapy.</p>
A.2.9.	<p>The program must identify an individual as academic fieldwork coordinator who is specifically responsible for the program’s compliance with the fieldwork requirements of Standards Section B.10.0. This individual must be a licensed or credentialed occupational therapist or occupational therapy assistant. Academic fieldwork coordinators who hold a faculty position must meet the requirements of Standard A.2.11.</p>
A.2.10.	<p>The faculty must include currently licensed or credentialed occupational therapists and occupational therapy assistants.</p>
A.2.11.	<p>By July 1, 2012, all occupational therapy assistant faculty who are either full-time or who comprise the second FTE faculty position must hold a minimum of a baccalaureate degree.</p>
A.2.12.	<p>The faculty must have documented expertise in their area(s) of teaching responsibility and knowledge of the content delivery method (e.g., distance learning).</p>

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A.2.13.	The occupational therapy assistant faculty at each accredited location where the program is offered must be sufficient in number and possess the expertise necessary to ensure appropriate curriculum design, content delivery, and program evaluation.
A.2.14.	Faculty responsibilities must be consistent with and supportive of the mission of the institution.
A.2.15.	The faculty–student ratio must permit the achievement of the purpose and stated objectives for laboratory and lecture courses, be compatible with accepted practices of the institution for similar programs, and ensure student and consumer safety.
A.2.16.	Clerical and support staff must be provided to the program, consistent with institutional practice, to meet programmatic and administrative requirements including support for any portion of the program offered by distance education.
A.2.17.	The program must be allocated a budget of regular institutional funds, not including grants, gifts, and other restricted sources, sufficient to implement and maintain the objectives of the program and to fulfill the program’s obligation to matriculated and entering students.
A.2.18.	Classrooms and laboratories must be provided that are consistent with the program’s educational objectives, teaching methods, number of students, and safety and health standards of the institution, and must allow for efficient operation of the program. If any portion of the program is offered by distance education, technology and resources must be adequate to support a distance-learning environment.
A.2.19.	Laboratory space provided by the institution must be assigned to the occupational therapy assistant program on a priority basis. If laboratory space is provided by another institution or agency, there must be a written and signed agreement to ensure assignment of space for program use.
A.2.20.	Adequate space must be provided to store and secure equipment and supplies.
A.2.21.	The program director and faculty must have office space consistent with institutional practice.
A.2.22.	Adequate space must be provided for the private advising of students.
A.2.23.	Appropriate and sufficient equipment and supplies must be provided by the institution for student use and for the didactic and supervised fieldwork components of the curriculum.
A.2.24.	Students must be given access to and have the opportunity to use the evaluative and treatment methodologies that reflect both current practice and practice in the geographic area served by the program.
A.2.25.	Students must have ready access to a supply of current and relevant books, journals, periodicals, computers, software, and other reference materials needed to meet the requirements of the curriculum. This may include, but is not limited to, libraries, online services, interlibrary loan, and resource centers.
A.2.26.	Instructional aids and technology must be available in sufficient quantity and quality to be consistent with the program objectives and teaching methods.
A.3.0. STUDENTS	
A.3.1	Admission of students to the occupational therapy assistant program must be made in accordance with the practices of the institution. There must be stated admission criteria that are clearly defined and published and reflective of the demands of the program.
A.3.2.	Policies pertaining to standards for admission, advanced placement, transfer of credit, credit for experiential learning (if applicable), and prerequisite educational or work experience requirements must be readily accessible to prospective students and the public.
A.3.3.	Programs must document implementation of a mechanism to ensure that students receiving credit for previous courses and/or work experience have met the content requirements of the appropriate OTA Standards.
A.3.4.	Criteria for successful completion of each segment of the educational program and for graduation must be given in advance to each student.
A.3.5.	Evaluation content and methods must be consistent with the curriculum design, objectives, and competencies of the didactic and fieldwork components of the program.
A.3.6.	Evaluation must be conducted on a regular basis to provide students and program officials with timely indications of the students’ progress and academic standing.

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A.3.7.	Students must be informed of and have access to the student support services that are provided to other students in the institution.
A.3.8.	Advising related to coursework in the occupational therapy assistant program and fieldwork education must be the responsibility of the occupational therapy assistant faculty.
A.4.0. OPERATIONAL POLICIES	
A.4.1	All program publications and advertising—including, but not limited to, academic calendars, announcements, catalogs, handbooks, and Web sites—must accurately reflect the program offered.
A.4.2.	<p>Accurate and current information regarding student outcomes must be readily available to the public in at least one publication or Web page. The following data must be reported as an aggregate for the three most recent calendar years and specify the</p> <ul style="list-style-type: none"> • 3-year time period being reported, • total number of program graduates during that period, • total number of first-time test takers of the national certification examination during that period, • total number of first-time test takers who passed the exam during that period, and • percentage of the total number of first-time test takers who passed the exam during that period.
A.4.3.	The program’s accreditation status and the name, address, and telephone number of ACOTE must be published in all of the following used by the institution: catalog, Web site, and program-related brochures or flyers available to prospective students.
A.4.4.	Faculty recruitment and employment practices, as well as student recruitment and admission procedures, must be nondiscriminatory.
A.4.5.	Graduation requirements, tuition, and fees must be accurately stated, published, and made known to all applicants. When published fees are subject to change, a statement to that effect must be included.
A.4.6.	The program or sponsoring institution must have a defined and published policy and procedure for processing student and faculty grievances.
A.4.7.	Policies and procedures for handling complaints against the program must be published and made known. The program must maintain a record of student complaints that includes the nature and disposition of each complaint.
A.4.8.	Policies and processes for student withdrawal and for refunds of tuition and fees must be published and made known to all applicants.
A.4.9.	Policies and procedures for student probation, suspension, and dismissal must be published and made known.
A.4.10.	Policies and procedures must be published and made known for human-subject research protocol (if applicable to the program).
A.4.11.	Written policies and procedures must be made available to students regarding appropriate use of equipment and supplies and for all educational activities that have implications for the health and safety of clients, students, and faculty (including infection control and evacuation procedures).
A.4.12.	A program admitting students on the basis of ability to benefit (defined by U.S. Department of Education as admitting students who do not have either a high school diploma or its equivalent) must publicize its objectives, assessment measures, and means of evaluating the student’s ability to benefit.
A.4.13.	Documentation of all progression, retention, graduation, certification, and credentialing requirements must be published and made known to applicants. This must include a statement about the potential impact of a felony conviction on a graduate’s eligibility for certification and credentialing.
A.4.14.	The program must have a documented and published policy to ensure students complete all graduation and fieldwork requirements in a timely manner. This must include a statement that all Level II fieldwork be completed within a time frame established by the program.
A.4.15.	Records regarding student admission, enrollment, and achievement must be maintained and kept in a secure setting. Grades and credits for courses must be recorded on students’ transcripts and permanently maintained by the sponsoring institution.

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A.5.0. STRATEGIC PLAN AND PROGRAM ASSESSMENT	
A.5.1.	<p>The program must document a current strategic plan that articulates the program’s future vision and guides the program development (e.g., faculty recruitment and professional growth, changes in the curriculum design, priorities in academic resources, procurement of fieldwork sites). A program strategic plan must include, but need not be limited to</p> <ul style="list-style-type: none"> • Evidence that the plan is based on program evaluation and an analysis of external and internal environments. • Long-term goals that address the vision and mission of both the institution and program, as well as specific needs of the program. • Specific measurable action steps with expected timelines by which the program will reach its long-term goals. • Persons(s) responsible for action steps. • Evidence of periodic updating of action steps and long-term goals as they are met or as circumstances change.
A.5.2.	<p>The program director and each faculty member who teach two or more courses must have a current written professional growth and development plan. Each plan must contain the signature of the faculty member and supervisor. At a minimum the plan must include, but need not be limited to</p> <ul style="list-style-type: none"> • Goals to enhance the faculty member’s ability to fulfill designated responsibilities (e.g., goals related to currency in areas of teaching responsibility, teaching effectiveness, research, scholarly activity). • Specific measurable action steps with expected timelines by which the faculty member will achieve the goals. • Evidence of annual updates of action steps and goals as they are met or as circumstances change. • Identification of the ways in which the faculty member’s professional development plan will contribute to attaining the program’s strategic goals.
A.5.3.	<p>Programs must routinely secure and document sufficient qualitative and quantitative information to allow for meaningful analysis about the extent to which the program is meeting its stated goals and objectives. This must include, but need not be limited to</p> <ul style="list-style-type: none"> • Faculty effectiveness in their assigned teaching responsibilities. • Students’ progression through the program. • Fieldwork performance evaluation. • Student evaluation of fieldwork experience. • Student satisfaction with the program. • Graduates’ performance on the NBCOT certification exam. • Graduates’ job placement and performance based on employer satisfaction.
A.5.4.	<p>The average total pass rate of OTA program graduates taking the national certification exam for the first time over the three most recent calendar years must be 70% or higher.</p>
A.5.5.	<p>Programs must routinely and systematically analyze data to determine the extent to which the program is meeting its stated goals and objectives. An annual report summarizing analysis of data and planned action responses must be maintained.</p>
A.5.6.	<p>The results of ongoing evaluation must be appropriately reflected in the program’s strategic plan, curriculum, and other dimensions of the program.</p>
<p>A.6.0. CURRICULUM FRAMEWORK The curriculum framework is a description of the program that includes the program’s mission, philosophy, and curriculum design.</p>	
A.6.1.	<p>The curriculum must include preparation for practice as a generalist with a broad exposure to current practice settings (e.g., school, hospital, community, long-term care) and emerging practice areas (as defined by the program). The curriculum must prepare students to work with a variety of populations including, but not limited to, children, adolescents, adults, and elderly persons in areas of physical and mental health.</p>
A.6.2.	<p>The program must document a system and rationale for ensuring that the length of study of the program is appropriate to the expected learning and competence of the graduate.</p>
A.6.3.	<p>The statement of philosophy of the occupational therapy assistant program must reflect the current published philosophy of the profession and must include a statement of the program’s fundamental beliefs about human beings and how they learn.</p>
A.6.4.	<p>The statement of the mission of the occupational therapy assistant program must be consistent with and supportive of the mission of the sponsoring institution.</p>

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A.6.5.	The curriculum design must reflect the mission and philosophy of both the occupational therapy assistant program and the institution and must provide the basis for program planning, implementation, and evaluation. The design must identify educational goals and describe the selection of the content, scope, and sequencing of coursework.
A.6.6.	The program must have clearly documented assessment measures by which students are regularly evaluated on their acquisition of knowledge, skills, attitudes, and competencies required for graduation.
A.6.7.	The program must have written syllabi for each course that include course objectives and learning activities that, in total, reflect all course content required by the Standards. Instructional methods (e.g., presentations, demonstrations, discussion) and materials used to accomplish course objectives must be documented. Programs must also demonstrate the consistency between course syllabi and the curriculum design.
<p>SECTION B: SPECIFIC REQUIREMENTS FOR ACCREDITATION</p> <p>The specific requirements for accreditation contain the content that a program must include. The content requirements are written as expected student outcomes. Faculty are responsible for developing learning activities and evaluation methods to document that students meet these outcomes.</p>	
<p>B.1.0. FOUNDATIONAL CONTENT REQUIREMENTS</p> <p>Program content must be based on a foundation of the liberal arts and sciences. A foundation in the biological, physical, social, and behavioral sciences supports an understanding of occupation across the life span. Coursework in these areas may be prerequisite to or concurrent with occupational therapy assistant education and must facilitate development of the performance criteria listed below. The student will be able to</p>	
B.1.1.	Demonstrate oral and written communication skills.
B.1.2.	Employ logical thinking, critical analysis, problem solving, and creativity.
B.1.3.	Demonstrate competence in basic computer use, including the ability to use databases and search engines to access information, word processing for writing, and presentation software (e.g., PowerPoint).
B.1.4.	Demonstrate knowledge and understanding of the structure and function of the human body to include the biological and physical sciences. Course content must include, but is not limited to, anatomy, physiology, and biomechanics.
B.1.5.	Demonstrate knowledge and understanding of human development throughout the life span (infants, children, adolescents, adults, and elderly persons). Course content must include, but is not limited to, developmental psychology.
B.1.6.	Demonstrate knowledge and understanding of the concepts of human behavior to include the behavioral and social sciences (e.g., principles of psychology, sociology, abnormal psychology).
B.1.7.	Demonstrate knowledge and appreciation of the role of sociocultural, socioeconomic, and diversity factors and lifestyle choices in contemporary society (e.g., principles of psychology, sociology, and abnormal psychology).
B.1.8.	Articulate the influence of social conditions and the ethical context in which humans choose and engage in occupations.
B.1.9.	Demonstrate knowledge of global social issues and prevailing health and welfare needs.
B.1.10.	Articulate the importance of using statistics, tests, and measurements.
<p>B.2.0. BASIC TENETS OF OCCUPATIONAL THERAPY</p> <p>Coursework must facilitate development of the performance criteria listed below. The student will be able to</p>	
B.2.1.	Articulate an understanding of the importance of the history and philosophical base of the profession of occupational therapy.
B.2.2.	Describe the meaning and dynamics of occupation and activity, including the interaction of areas of occupation, performance skills, performance patterns, activity demands, context(s), and client factors.
B.2.3.	Articulate to consumers, potential employers, colleagues, third-party payers, regulatory boards, policymakers, other audiences, and the general public both the unique nature of occupation as viewed by the profession of occupational therapy and the value of occupation to support participation in context(s) for the client.
B.2.4.	Articulate the importance of balancing areas of occupation with the achievement of health and wellness.
B.2.5.	Explain the role of occupation in the promotion of health and the prevention of disease and disability for the individual, family, and society.

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B.2.6.	Understand the effects of physical and mental health, heritable diseases and predisposing genetic conditions, disability, disease processes, and traumatic injury to the individual within the cultural context of family and society on occupational performance.
B.2.7.	Exhibit the ability to analyze tasks relative to areas of occupation, performance skills, performance patterns, activity demands, context(s), and client factors to implement the intervention plan.
B.2.8.	Use sound judgment in regard to safety of self and others, and adhere to safety regulations throughout the occupational therapy process.
B.2.9.	Express support for the quality of life, well-being, and occupation of the individual, group, or population to promote physical and mental health and prevention of injury and disease considering the context (e.g., cultural, physical, social, personal, spiritual, temporal, virtual).
B.2.10.	Explain the need for and use of compensatory strategies when desired life tasks cannot be performed.
B.2.11.	Apply models of occupational performance and theories of occupation.
B.3.0. OCCUPATIONAL THERAPY THEORETICAL PERSPECTIVES The program must facilitate the development of the performance criteria listed below. The student will be able to	
B.3.1.	Describe basic features of the theories that underlie the practice of occupational therapy.
B.3.2.	Describe models of practice and frames of reference that are used in occupational therapy.
B.3.3.	Analyze and discuss how history, theory, and the sociopolitical climate influence practice.
B.4.0. SCREENING AND EVALUATION The process of screening and evaluation as related to occupational performance and participation must be conducted under the supervision of and in cooperation with the occupational therapist and must be culturally relevant and based on theoretical perspectives, models of practice, frames of reference, and available evidence. The program must facilitate development of the performance criteria listed below. The student will be able to	
B.4.1.	Gather and share data for the purpose of screening and evaluation including, but not limited to, specified screening tools; assessments; skilled observations; checklists; histories; consultations with other professionals; and interviews with the client, family, and significant others.
B.4.2.	Administer selected assessments using appropriate procedures and protocols (including standardized formats) and use occupation for the purpose of assessment.
B.4.3.	<p>Gather and share data for the purpose of evaluating client(s)' occupational performance in activities of daily living (ADL), instrumental activities of daily living (IADL), education, work, play, leisure, and social participation. Evaluation of occupational performance includes</p> <ul style="list-style-type: none"> • The occupational profile, including participation in activities that are meaningful and necessary for the client to carry out roles in home, work, and community environments. • Client factors, including body functions (e.g., neuromuscular, sensory, visual, perceptual, cognitive, mental) and body structures (e.g., cardiovascular, digestive, integumentary systems). • Performance patterns (e.g., habits, routines, roles) and behavior patterns. • Cultural, physical, social, personal, spiritual, temporal, and virtual contexts and activity demands that affect performance. • Performance skills, including motor (e.g., posture, mobility, coordination, strength, energy), process (e.g., energy, knowledge, temporal organization, organizing space and objects, adaptation), and communication and interaction skills (e.g., physicality, information exchange, relations).
B.4.4.	Articulate the role of the occupational therapy assistant and occupational therapist in the screening and evaluation process along with the importance of and rationale for supervision and collaborative work between the occupational therapy assistant and occupational therapist in that process.
B.4.5.	Identify when to recommend to the occupational therapist the need for referring clients for additional evaluation.
B.4.6.	Document occupational therapy services to ensure accountability of service provision and to meet standards for reimbursement of services, adhering to applicable facility, local, state, federal, and reimbursement agencies. Documentation must effectively communicate the need and rationale for occupational therapy services.

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<p>B.5.0. INTERVENTION AND IMPLEMENTATION The process of intervention to facilitate occupational performance and participation must be done under the supervision of and in cooperation with the occupational therapist and must be culturally relevant, reflective of current occupational therapy practice, and based on available evidence. The program must facilitate development of the performance criteria listed below. The student will be able to</p>	
B.5.1.	<p>Assist with the development of occupation-based intervention plans and strategies (including goals and methods to achieve them) based on the stated needs of the client as well as data gathered during the evaluation process in collaboration with the client and others. Intervention plans and strategies must be culturally relevant, reflective of current occupational therapy practice, and based on available evidence. Interventions address the following components:</p> <ul style="list-style-type: none"> • The occupational profile, including participation in activities that are meaningful and necessary for the client to carry out roles in home, work, and community environments. • Client factors, including body functions (e.g., neuromuscular, sensory, visual, perceptual, cognitive, mental) and body structures (e.g., cardiovascular, digestive, integumentary systems). • Performance patterns (e.g., habits, routines, roles) and behavior patterns. • Cultural, physical, social, personal, spiritual, temporal, and virtual contexts and activity demands that affect performance. • Performance skills, including motor (e.g., posture, mobility, coordination, strength, energy), process (e.g., energy, knowledge, temporal organization, organizing space and objects, adaptation), and communication and interaction skills (e.g., physicality, information exchange, relations).
B.5.2.	<p>Select and provide direct occupational therapy interventions and procedures to enhance safety, wellness, and performance in activities of daily living (ADL), instrumental activities of daily living (IADL), education, work, play, leisure, and social participation.</p>
B.5.3.	<p>Provide therapeutic use of occupation and activities (e.g., occupation-based activity, practice skills, preparatory methods).</p>
B.5.4.	<p>Provide training in self-care, self-management, home management, and community and work integration.</p>
B.5.5.	<p>Provide development, remediation, and compensation for physical, cognitive, perceptual, sensory (e.g., vision, tactile, auditory, gustatory, olfactory, pain, temperature, pressure, vestibular, proprioception), neuromuscular, and behavioral skills.</p>
B.5.6.	<p>Provide therapeutic use of self, including one's personality, insights, perceptions, and judgments as part of the therapeutic process in both individual and group interaction.</p>
B.5.7.	<p>Describe the role of the occupational therapy assistant in care coordination, case management, and transition services in traditional and emerging practice environments.</p>
B.5.8.	<p>Modify environments (e.g., home, work, school, community) and adapt processes, including the application of ergonomic principles.</p>
B.5.9.	<p>Articulate principles of and demonstrate strategies with assistive technologies and devices (e.g., electronic aids to daily living, seating systems) used to enhance occupational performance.</p>
B.5.10.	<p>Provide fabrication, application, fitting, and training in orthotic devices used to enhance occupational performance and training in the use of prosthetic devices.</p>
B.5.11.	<p>Provide training in techniques to enhance mobility, including physical transfers, wheelchair management, and community mobility, and participate in addressing issues related to driving.</p>
B.5.12.	<p>Enable feeding and eating performance (including the process of bringing food or fluids from the plate or cup to the mouth, the ability to keep and manipulate food or fluid in the mouth, and the initiation of swallowing) and train others in precautions and techniques while considering client and contextual factors.</p>
B.5.13.	<p>Recognize the use of superficial thermal and mechanical modalities as a preparatory measure to improve occupational performance. Based on the intervention plan, demonstrate safe and effective administration of superficial thermal and mechanical modalities to achieve established goals while adhering to contraindications and precautions.</p>
B.5.14.	<p>Promote the use of appropriate home and community programming to support performance in the client's natural environment and participation in all contexts relevant to the client.</p>

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B.5.15.	Demonstrate the ability to educate the client, caregiver, family, and significant others to facilitate skills in areas of occupation as well as prevention, health maintenance, and safety.
B.5.16.	Use the teaching–learning process with the client, family, significant others, colleagues, other health providers, and the public. Collaborate with the occupational therapist and learner to identify appropriate educational methods.
B.5.17.	Effectively interact through written, oral, and nonverbal communication with the client, family, significant others, colleagues, other health providers, and the public in a professionally acceptable manner.
B.5.18.	Grade and adapt the environment, tools, materials, occupations, and interventions to reflect the changing needs of the client and the sociocultural context.
B.5.19.	Teach compensatory strategies, such as use of technology, adaptations to the environment, and involvement of humans and nonhumans in the completion of tasks.
B.5.20.	Demonstrate skills of collaboration with occupational therapists on therapeutic interventions.
B.5.21.	Understand when and how to use the consultative process where appropriate with specific consumers or consumer groups as directed by an occupational therapist.
B.5.22.	Recognize and communicate the need to refer to specialists (both internal and external to the profession) for consultation and intervention.
B.5.23.	Monitor and reassess, in collaboration with the client, caregiver, family, and significant others, the effect of occupational therapy intervention and the need for continued or modified intervention, and communicate the identified needs to the occupational therapist.
B.5.24.	Facilitate discharge planning by reviewing the needs of the client, caregiver, family, and significant others; resources; and discharge environment, and identify those needs to the occupational therapist, client, and others involved in discharge planning. This includes, but is not limited to, identification of community, human, and fiscal resources; recommendations for environmental adaptations; and home programming.
B.5.25.	Under the direction of an administrator, manager, or occupational therapist, collect, organize, and report on data for evaluation of practice outcomes.
B.5.26.	Recommend to the occupational therapist the need for termination of occupational therapy services when stated outcomes have been achieved or it has been determined that they cannot be achieved. Assist with developing a summary of occupational therapy outcomes, recommendations, and referrals.
B.5.27.	Document occupational therapy services to ensure accountability of service provision and to meet standards for reimbursement of services. Documentation must effectively communicate the need and rationale for occupational therapy services and must be appropriate to the context in which the service is delivered.
B.6.0. CONTEXT OF SERVICE DELIVERY	
Context of service delivery includes the knowledge and understanding of the various contexts in which occupational therapy services are provided. The program must facilitate development of the performance criteria listed below. The student will be able to	
B.6.1.	Describe the contexts of health care, education, community, and social models or systems as they relate to the practice of occupational therapy.
B.6.2.	Identify potential impacts of social, economic, political, geographic, or demographic factors on the practice of occupational therapy.
B.6.3.	Identify the role and responsibility of the practitioner to address changes in service delivery policies, to effect changes in the system, and to recognize opportunities in emerging practice areas.
B.7.0. ASSISTANCE WITH MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES	
Assistance with management of occupational therapy services includes the application of principles of management and systems in the provision of occupational therapy services to individuals and organizations. The program must facilitate development of the performance criteria listed below. The student will be able to	
B.7.1.	Identify how the various practice settings (e.g., medical institutions, community practice, school systems) affect the delivery of occupational therapy services.
B.7.2.	Identify the impact of contextual factors on the management and delivery of occupational therapy services.

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B.7.3.	Identify the systems and structures that create federal and state legislation and regulation and their implications and effects on practice.
B.7.4.	Demonstrate knowledge of applicable national requirements for credentialing and requirements for licensure, certification, or registration under state laws.
B.7.5.	Demonstrate knowledge of various reimbursement systems (e.g., federal, state, third-party, private-payer) and documentation requirements that affect the practice of occupational therapy.
B.7.6.	Identify the mechanisms, systems, and techniques needed to properly maintain, organize, and prioritize workloads and intervention settings including inventories.
B.7.7.	Demonstrate the ability to participate in the development, marketing, and management of service delivery options.
B.7.8.	Participate in the documentation of ongoing processes for quality improvement and implement program changes as needed to ensure quality of services.
B.7.9.	Identify strategies for effective, competency-based legal and ethical supervision of non-professional personnel.
B.7.10.	Describe the ongoing professional responsibility for providing fieldwork education and the criteria for becoming a fieldwork educator.
B.8.0. PROFESSIONAL LITERATURE Application of professional literature includes the ability to read and understand professional literature and recognize its implications for practice and the provision of occupational therapy services. The program must facilitate development of the performance criteria listed below. The student will be able to	
B.8.1.	Articulate the importance of professional research and literature and the continued development of the profession.
B.8.2.	Use professional literature to make evidence-based practice decisions in collaboration with the occupational therapist that are supported by research.
B.8.3.	Identify the skills necessary to follow a research protocol including accurate and confidential collection of data and related documentation.
B.9.0. PROFESSIONAL ETHICS, VALUES, AND RESPONSIBILITIES Professional ethics, values, and responsibilities include an understanding and appreciation of ethics and values of the profession of occupational therapy. The program must facilitate development of the performance criteria listed below. The student will be able to	
B.9.1.	Demonstrate a knowledge and understanding of the American Occupational Therapy Association (AOTA) <i>Occupational Therapy Code of Ethics, Core Values and Attitudes of Occupational Therapy Practice</i> , and AOTA <i>Standards of Practice</i> and use them as a guide for ethical decision making in professional interactions, client interventions, and employment settings.
B.9.2.	Explain and give examples of how the role of a professional is enhanced by knowledge of and involvement in international, national, state, and local occupational therapy associations and related professional associations.
B.9.3.	Promote occupational therapy by educating other professionals, service providers, consumers, and the public.
B.9.4.	Discuss strategies for ongoing professional development to ensure that practice is consistent with current and accepted standards.
B.9.5.	Identify professional responsibilities related to liability issues under current models of service provision.
B.9.6.	Identify personal and professional abilities and competencies as they relate to job responsibilities.
B.9.7.	Identify and appreciate the varied roles of the occupational therapy assistant as a practitioner, educator, and research assistant.
B.9.8.	Identify and explain the need for supervisory roles, responsibilities, and collaborative professional relationships between the occupational therapist and the occupational therapy assistant.
B.9.9.	Identify professional responsibilities and issues when providing service on a contractual basis.
B.9.10.	Identify strategies for analyzing issues and making decisions to resolve personal and organizational ethical conflicts.
B.9.11.	Identify the variety of informal and formal ethical dispute-resolution systems that have jurisdiction over occupational therapy practice.

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B.9.12.	Identify strategies to assist the consumer in gaining access to occupational therapy services.
B.9.13.	Demonstrate professional advocacy by participating in organizations or agencies promoting the profession (e.g., American Occupational Therapy Association, state occupational therapy associations, advocacy organizations).
<p>B.10.0. FIELDWORK EDUCATION Fieldwork education is a crucial part of the preparation of the occupational therapy assistant and is best integrated as a component of the curriculum design. Fieldwork experiences should be implemented and evaluated for their effectiveness by the educational institution. The experience should provide the student with the opportunity to carry out professional responsibilities under supervision and for role modeling. The academic fieldwork coordinator is responsible for the program's compliance with fieldwork education requirements. The academic fieldwork coordinator will</p>	
B.10.1.	Document the criteria and process for selecting fieldwork sites. Ensure that the fieldwork program reflects the sequence, depth, focus, and scope of content in the curriculum design.
B.10.2.	Ensure that the academic fieldwork coordinator and faculty collaborate to design fieldwork experiences that strengthen the ties between didactic and fieldwork education.
B.10.3.	Provide fieldwork education in settings that are equipped to meet the curriculum goals, provide educational experiences applicable to the academic program, and have fieldwork educators who are able to effectively meet the learning needs of the students.
B.10.4.	Ensure that the academic fieldwork coordinator is responsible for advocating the development of links between the fieldwork and didactic aspects of the curriculum, for communicating about the curriculum to fieldwork educators, and for maintaining contracts and site data related to fieldwork placements.
B.10.5.	Demonstrate that academic and fieldwork educators collaborate in establishing fieldwork objectives, identifying site requirements, and communicating with the student and fieldwork educator about progress and performance during fieldwork.
B.10.6.	Document a policy and procedure for complying with fieldwork site health requirements and maintaining student health records in a secure setting.
B.10.7.	Ensure that the ratio of fieldwork educators to student(s) enables proper supervision and the ability to provide frequent assessment of student progress in achieving stated fieldwork objectives.
B.10.8.	Ensure that fieldwork agreements are sufficient in scope and number to allow completion of graduation requirements in a timely manner in accordance with the policy adopted by the program.
B.10.9.	For programs in which the academic and fieldwork components of the curriculum are provided by two or more institutions, responsibilities of each sponsoring institution and fieldwork site must be clearly documented in a memorandum of understanding. For active Level I and Level II fieldwork sites, programs must have current fieldwork agreements or memoranda of understanding that are signed by both parties. (Electronic contracts and signatures are acceptable.)
B.10.10.	Documentation must be provided that each memorandum of understanding between institutions and active fieldwork sites is reviewed at least every 5 years by both parties. Programs must provide documentation that both parties have reviewed the contract.
<p>The goal of Level I fieldwork is to introduce students to the fieldwork experience, to apply knowledge to practice, and to develop understanding of the needs of clients. The program will</p>	
B.10.11.	Ensure that Level I fieldwork is integral to the program's curriculum design and include experiences designed to enrich didactic coursework through directed observation and participation in selected aspects of the occupational therapy process.
B.10.12.	Ensure that qualified personnel supervise Level I fieldwork. Examples may include, but are not limited to, currently licensed or credentialed occupational therapists and occupational therapy assistants, psychologists, physician assistants, teachers, social workers, nurses, and physical therapists.
B.10.13.	Document all Level I fieldwork experiences that are provided to students, including mechanisms for formal evaluation of student performance. Ensure that Level I fieldwork is not substituted for any part of Level II fieldwork.

NUMBER	OTA STANDARD
	<p>The goal of Level II fieldwork is to develop competent, entry-level, generalist occupational therapy assistants. Level II fieldwork must be integral to the program’s curriculum design and must include an in-depth experience in delivering occupational therapy services to clients, focusing on the application of purposeful and meaningful occupation. It is recommended that the student be exposed to a variety of clients across the life span and to a variety of settings. The program will:</p>
B.10.14.	<p>Ensure that the fieldwork experience is designed to promote clinical reasoning appropriate to the occupational therapy assistant role, to transmit the values and beliefs that enable ethical practice, and to develop professionalism and competence in career responsibilities.</p>
B.10.15.	<p>Provide Level II fieldwork in traditional and/or emerging settings, consistent with the curriculum design. In all settings, psychosocial factors influencing engagement in occupation must be understood and integrated for the development of client-centered, meaningful, occupation-based outcomes. The student can complete Level II fieldwork in a minimum of one setting if it is reflective of more than one practice area, or in a maximum of three different settings.</p>
B.10.16.	<p>Require a minimum of 16 weeks’ full-time Level II fieldwork. This may be completed on a part-time basis as defined by the fieldwork placement in accordance with the fieldwork placement’s usual and customary personnel policies as long as it is at least 50% of a full-time equivalent at that site.</p>
B.10.17.	<p>Ensure that the student is supervised by a currently licensed or credentialed occupational therapist or occupational therapy assistant who has a minimum of 1 year of practice experience subsequent to initial certification, and is adequately prepared to serve as a fieldwork educator. The supervising therapist may be engaged by the fieldwork site or by the educational program.</p>
B.10.18.	<p>Document a mechanism for evaluating the effectiveness of supervision (e.g., student evaluation of fieldwork) and for providing resources for enhancing supervision (e.g., materials on supervisory skills, continuing education opportunities, articles on theory and practice).</p>
B.10.19.	<p>Ensure that supervision provides protection of consumers and opportunities for appropriate role modeling of occupational therapy practice. Initially, supervision should be direct and then decrease to less direct supervision as is appropriate for the setting, the severity of the client’s condition, and the ability of the student.</p>
B.10.20.	<p>Ensure that supervision provided in a setting where no occupational therapy services exist includes a documented plan for provision of occupational therapy assistant services and supervision by a currently licensed or credentialed occupational therapist or an occupational therapy assistant (under the direction of an occupational therapist) with at least 3 years of professional experience. Supervision must include a minimum of 8 hours per week. Supervision must be initially direct and then may be decreased to less direct supervision as is appropriate for the setting, the client’s needs, and the ability of the student. An occupational therapy supervisor must be available, via a variety of contact measures, to the student during all working hours. An on-site supervisor designee of another profession must be assigned while the occupational therapy supervisor is off site.</p>
B.10.21.	<p>Document mechanisms for requiring formal evaluation of student performance on Level II fieldwork (e.g., the American Occupational Therapy Association <i>Fieldwork Performance Evaluation for the Occupational Therapy Assistant Student</i> or equivalent).</p>
B.10.22.	<p>Ensure that students attending Level II fieldwork outside the United States are supervised by an occupational therapist who graduated from a program approved by the World Federation of Occupational Therapists and has 1 year of experience in practice. Such fieldwork must not exceed 8 weeks.</p>