



COLUMBIA

COLUMBIA UNIVERSITY  
IRVING MEDICAL CENTER

PROGRAMS IN  
OCCUPATIONAL THERAPY

Post-Professional  
Doctor of Occupational Therapy Program  
(Cognition track)  
Student Handbook

Programs in Occupational Therapy

Fall 2022 Cohort

**Limitations of Handbook**

*This handbook is a supplement to the Programs in Occupational Therapy Student Handbook. This handbook is intended to provide information for the guidance of Columbia University Occupational Therapy Post-Professional OTD (PP-OTD) students. The contents of this handbook are subject to change, and the Programs reserve the right to depart without notice from any policy or procedure referred to in this handbook, or to revise and amend this handbook in whole or in part at any time. This handbook is not intended to and should not be regarded as a contract between the University and any student or other person.*

*Students should also refer to the Essential Policies for the Columbia Community, <http://facets.columbia.edu>, the university publication on policies and regulations.*

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# Welcome to Columbia University's Post-Professional OTD Program

## Getting Started

**UNI** - You are each assigned a UNI. This is the way Columbia systems identify you, and it also serves as the first part of your Columbia email. You will often be asked to provide your UNI when accessing certain sites and systems. You will need to activate your UNI, and you can do so by going to this link: <http://cuit.columbia.edu/cuit/manage-my-uni> click "activate UNI or Email" which is in the center of the page, read the policies that follow and click "accept". You will then be brought to the account activation page where you will need to review the responsibilities outlined, click "accept" again, and then, on the next page, click the link that says, "Click HERE to activate". Please note that doing this will allow you to access the systems required at our university. However, your email will not yet be set up. The Columbia University Irving Medical Center (CUIMC) uses a different email system than that used by the rest of the university. This is because of required security issues related to health science campuses. You will receive separate information to activate your CUIMC email.

**Students with Disabilities** – Students seeking accommodations or support services from Disability Services are required to register with the office of disability services. Please refer to their website for details. [www.health.columbia.edu/ods](http://www.health.columbia.edu/ods). We strongly advise that if you have a disability, do not "wait and see" how the academics are before applying for services. Accommodations are not retroactive. In addition, verifying disability status takes time; it is imperative that you handle this as soon as possible. If you have questions about this, contact Dr. Julia Guzman, our program's liaison to this office. She can be reached at [jg3740@cumc.columbia.edu](mailto:jg3740@cumc.columbia.edu).

**Course Registration:** Columbia uses "registration windows", which are time periods during which you may register for your classes. You will receive an email from the registrar's office about your appointment time. The registrar's office will send you an email using your Columbia email address. Registration is required for participation in all of our courses, and for access to our online platform, Canvas.

**Student Health and Immunization Requirements** – Visit this link to know required immunizations: <http://cumc.columbia.edu/student-health>. PP-OTD students are required to complete the Meningococcal Meningitis Response Form.

**Health Insurance Waiver:** Students who wish to waive Student Health Insurance must show proof that they have insurance coverage through their employers. Follow the process indicated here: <http://www.cumc.columbia.edu/student-health/insurance-and-administration/waiver>

**Mandatory HIPAA Compliance Training:** All faculty and students are required to complete an annual HIPAA compliance training. These are sent via email by the Compliance office. You must complete this online training annually before the set deadline or you will not be allowed to register for OTD courses.

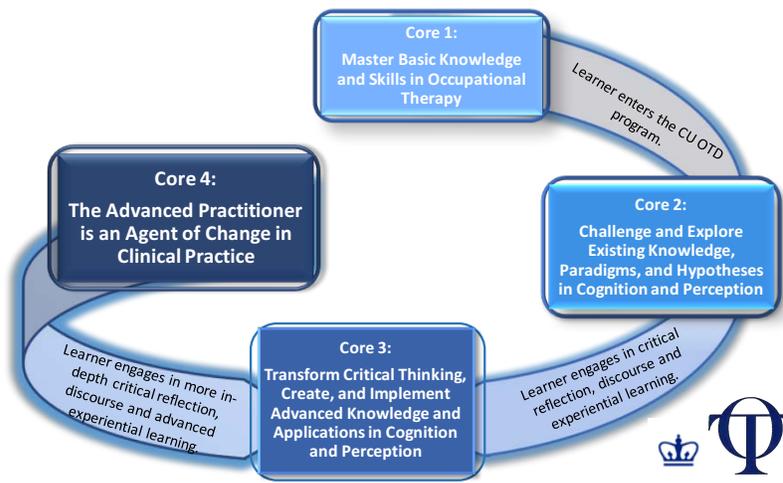
**Mandatory Human Subjects Research Training:** All doctoral students are required to complete several training programs for human subjects research through CUIMC IRB. These trainings need to be completed by the end of the first semester in the program. Instructions can be found here: <https://research.columbia.edu/human-subjects-protection-training-program-educational-resources>

1). Create a Rascal account: <https://www.rascal.columbia.edu>

2.) Complete the following trainings (save a copy of all certificates of completion):

- TC0094 – Responsible Conduct of Research
- TC0019 – HIPAA
- TC0087 – Human Subjects Protection Training (including minors, as applicable)
- TC1450 – Financial Conflicts of Interest
- TC3540 – Good Clinical Practice Training

## Post-Professional Doctor of Occupational Therapy Curriculum Design



The Post-Professional Clinical Doctoral Program in Occupational Therapy (PP-OTD) is designed for working professionals. The program aims to provide those practitioners who wish to remain in the practice arena with advanced knowledge and clinical skills. The overarching goal of our program is to deepen knowledge in cognition, pursue evidence-based practice as a clinician, being to develop skills as a clinical researcher, and apply clinical reasoning to practice at an advanced level.

### Program Outcomes

It is expected that upon completion of the Columbia University Programs in Occupational Therapy Doctor of Occupational Therapy degree, graduates will be clinical leaders with potential to expand and advance the occupational therapy profession at local, state, and national levels. Upon completion of the PP-OTD degree, students will be prepared to:

- Articulate emerging roles and areas of practice related to cognition and perception.
- Demonstrate professional and ethical standards in advanced practice.
- Apply, analyze, and synthesize theoretical frameworks related to cognition and perception.
- Analyze, develop, and implement advanced cognition and perception evaluations.
- Analyze, develop, and implement advanced cognition and perception interventions.
- Analyze, synthesize, and contribute to the scientific body of knowledge.

### Program Requirements

Receiving the Doctor of Occupational Therapy degree will involve satisfactorily a minimum of 36 points beyond the Master's degree (in occupational therapy). This includes the completion of a capstone project, a publication-ready paper, and a clinical portfolio. This program is an evening program and can be completed in two to three years of part-time study.

*\*Clinical Residency: Our program is heavily dependent on clinical experiences. All students are required to identify a site that can serve as their “clinical residency”. This can be one’s place of work, a volunteer site, or a research lab. As long as one’s site provides approval, assignments can be carried out with one’s clients, during, or after one’s work day.*

Individuals who already hold Master of Science degrees in Occupational Therapy from Columbia University will have met the requirement for Core I and will need to complete an additional 36 credits. Students with Master of Arts or Master of Science degrees in Occupational Therapy from another university, upon review and approval by the Program, can have their occupational therapy coursework count as Core 1 and credited toward the degree.

### **Program Format**

The PP-OTD program is a fully online program. There are no required campus visits. All courses are delivered through a combination of synchronous and asynchronous class activities online.

### **PP-OTD Curriculum**

#### **Core I: (up to 39 credits)**

The content of Core I is devoted to the basic study and practice of occupational therapy; and to the beginning understanding and application of research methodologies. Courses within this core include those taken in our entry level Master of Science program (as outlined in our bulletin), and courses that have been reviewed and approved as part of a master’s program from another university.

#### **Core II: (11 credits)**

The content of Core II is directed towards challenging existing knowledge, paradigms, and hypotheses in cognition and perception. Guided by course faculty and the doctoral mentor, the learner engages in critical reflection, discourse, and experiential learning as foundational courses in the program are taken.

- Advanced Application of Theory to Practice (3 credits)
- Neuroscience of Cognition (3 credits)
- Methods of Teaching (3 credits)
- Professional Development (2 credits)

#### **Core III: (14 credits)**

The focus of Core III is directed towards transforming critical thinking and creating and implementing advanced knowledge and applications in cognition and perception. The student undergoes deeper level critical reflection, discourse, and experiential learning as courses geared towards advanced level assessments and intervention are taken.

- Cognitive Assessment & Intervention (3 credits)
- Cognitive Basis of Function and Decision Making (4 credits)
- Advanced Evidence-Based Practice (3 credits)
- Theories of Measurement and Instrument Development (3 credits)
- Case-based Application (1 credit)

**Core IV: (11 points):**

At Core IV, the student becomes an advanced practitioner who is an agent of change in clinical practice. The student completes required coursework and works with the doctoral mentor to complete the clinical residency, capstone project, clinical portfolio, and evidence-based capstone paper).

*Courses to support the capstone (5 points)*

- Writing for Publication (1 point)
- Grantsmanship (2 points)
- Ethics and Occupational Justice (2 points)

*Capstone (Capstone 1 and 2; 6 points)*

- Clinical Residency
- Capstone Project
- Clinical Portfolio
- Evidence-based Capstone Paper

*Part 1: Clinical Portfolio*

All students will be expected to submit a clinical portfolio, in which the following will be represented:

- Program Development
- Education and Continuing Education
- Evidence-Based Practice
- Clinical Residency
- Reflection on the Doctoral Process

*Part 2: Evidence-based Capstone Paper*

Students will be responsible for carrying out a project based on faculty sponsored research or programming. A faculty sponsor plus an ongoing seminar will support students during this process. This project will culminate in a paper submitted to faculty in publication ready format that may be submitted to a refereed journal with the faculty mentor.

*Part 3: Capstone Project*

Students must complete a project based on a gap in practice. The purpose of the capstone project is to prepare students to participate an integral member of a research team to implement evidence-based projects in clinical, educational, or community-based practice settings. The Capstone project will be sponsored by a faculty mentor and can be a part of a bigger project. The capstone project should integrate with and complement the roster of artifacts included in the clinical portfolio. **The Capstone Project must be approved by both the doctoral mentor and PP-OTD Program Director to ensure it meets the standards set by the program.**

### Course Sequence Fall 2022

	<b>Fall</b>	<b>Spring</b>	<b>Summer</b>
<b>Year 1</b>	OTM 8100: Advanced Applications of Theory to Practice (3 credits)  OTM 8103: Neuroscience of Cognition (3 credits)  OTM 8107: Capstone I (3 credits)	OTM 8505: Cognitive Basis of Function and Decision Making (4 credits)  OTM 8565: Measurement and Instrument Development (3 credits)  OTM 8106: Case-based Application (1 credit)	OTM 8503: Cognitive Assessment and Intervention (3 credits)  OTM 8510: Methods of Teaching (3 credits)  <i>OTM 8113: Writing for Publication (1 credit)</i>
<b>Year 2</b>	OTM 8530: Advanced Evidenced-Based Practice (3 credits)  OTM 8993: Professional Development (2 credits)  OTM 8990: Grantsmanship (2 credits)  <i>OTM 8113: Writing for Publication (1 credit)</i>	OTM 8550: Ethics & Occupational Justice (2 credits)  OTM 8994: Capstone II (3 credits)  <i>OTM 8113: Writing for Publication (1 credit)</i>	<i>OTM 8113: Writing for Publication (1 credit)</i>

### Course Descriptions

**OTM 8100: Advanced Applications of Theory to Practice**, 3 credits, Dr. Gillen and Dr. Rushanan

This course will provide an overview and synthesis of historical and contemporary perspectives that guide OT practice. Learners in this course will understand the historical development of several theoretical constructs in OT. Learners will also review and apply fundamental concepts and language used in OT theories and practice models and gain a foundational knowledge of the discipline of occupational science. Learners will use critical and clinical reasoning skills to determine how theories can inform evidence-based and client-centered practice based on applications to their own daily practices.

**OTM 8103: Neuroscience of Cognition**, 3 credits, Dr. Dimitropoulou

The course focuses on mechanisms of cognition that are integral to and impacted by engagement in daily occupations. The concept of cognition is discussed as part of the Occupational therapy framework and ICF-10. The course provides an overview of neural structures underlying cognitive function, adaptation, and participation across the life span. The course translates current research on the neural basis of human mental processing (i.e., perception-action, memory, metacognition, attention, executive functioning, etc.) and connects findings to human performance, function, and participation.

**OCCTM8107. Capstone I**, 3 credits, Dr. Lange.

In Capstone 1, students will begin development of capstone projects, which will be sponsored by a faculty mentor. This includes development of the literature review and the methodology for their recruitment, procedures, data collection, and data analysis. They will also develop their IRB's and prepare it for submission. As part of the capstone module, the student will begin to generate a clinical portfolio highlighting their growth and development throughout the OTD program. The clinical portfolio should provide evidence of the student's skills, achievements, and professional experiences through their coursework, clinical residency, and capstone project.

**OTM 8505 Cognitive Basis of Decision-Making**, 4 credits, Dr. Mendonca

The course focuses on theoretical and empirical understanding of functional cognition and decision-making as it is embedded in occupations and occupational roles. Decision-making is the cognitive process resulting in the selection of a belief or course of action among several alternative possibilities. The course provides an overview of neural and psychological perspectives underlying the process of function and decision-making in the context of adaptation and participation across the life span. Frameworks addressing the measurement and facilitation of function decision-making will be of primary focus.

**OTM 8565: Theories of Measurement and Instrument Development**, 3 credits, Dr. Norweg

This course introduces the fundamental principles of measurement in health sciences with application to occupational therapy practice, especially patient-reported outcomes. We will review important principles of traditional (classical) test theory and modern item response theory. Students will apply these principles to critique existing instruments used in occupational therapy and identify areas of clinical research need.

**OCCTM8106. Case-Based Application, 1 credit, All OTD Mentors.**

This course will allow students to refine their data collection procedures, submit IRB, collect data, or complete data analysis as appropriate to the capstone phase the student is in. Students will articulate the alignment of relevant professional development goals with core courses taken in the OTD program.

**OTM 8503 Cognitive Assessment and Intervention, 3 credits, Dr. Kaplan**

This course aims to provide an up-to-date and comprehensive overview of the process that has traditionally been called cognitive and perceptual rehabilitation but may be better described as the process of improving function for those who are living with cognitive and perceptual impairments. The course has been designed with three overarching and interrelated approaches in mind: evidence-based, function-based, and client-centered.

**OTM 8510: Methods of Teaching, 3 credits, Dr. Gillen**

This course is designed to prepare doctoral students as academic or clinical educators in occupational therapy. The course will cover various perspectives on occupational therapy education with particular emphasis on exploration of teaching and learning philosophies, signature pedagogies in occupational therapy, and the use of active learning principles in planning, implementing, and evaluating the teaching and learning process. Students will be developing an Educator Toolkit of teaching-related artifacts that will prepare them and advance their skills as academic educators. The course will also embrace active learning principles with the acquisition of teaching and learning skills and competencies primarily from a “learning by doing” approach.

**OTM 8113, Writing for Publication, 1 credit, All OTD Mentors**

This course is designed to assist OTD students translate their clinical doctoral thesis into a manuscript that can be submitted for publication to a refereed journal. Students will learn to use current health care reporting standards (e.g., CONSORT statement, COSMIN, CARE statement) as a basis from which to write a journal manuscript addressing clinical topics such as intervention effectiveness, instrument development, case reports, and professional discussion papers. Manuscript submission, revision, and publication etiquette and ethical conduct are also reviewed.

**OTM 8530 Advanced Evidence-Based Practice, 3 credits, Dr. Dimitropoulou**

This course emphasizes building breadth and depth of knowledge related to specific interventions or assessments that are utilized for those living with functional limitations secondary to cognitive or motor control impairments. Students will learn to use various methods to conduct systematic and scoping reviews and will critically appraise a topic of interest related to their proposed line of research.

**OTM 8990 Grantsmanship in OT, 2 credits, Dr. Kalina**

Grantsmanship course within the Programs in Occupational Therapy will provide an overview of drafting a grant related to the students' doctoral projects. Students will learn how to identify relevant funding agencies, draft a letter of intent, and write the sections of a full grant proposal.

**OTM 8993 Professional Development, 2 credits (may be repeated for credit), All OTD Mentors**

This course aims to support the doctoral student in identifying and aligning relevant professional development goals with core courses taken in the OTD program. Students will refine their data collection procedures, submit IRB, collect data, or complete data analysis as appropriate to the capstone phase the student is in currently. With guidance from the mentor, the student will implement their capstone projects and collect complete data collection.

**OTM 8550, Ethics and Occupational Justice, 2 credits, Dr. Falk-Kessler**

Justice based ethics include principles commonly used in health care decision making. Not typically considered one of the justice principles outside of the Occupational Therapy profession, an argument can be made that occupational justice is a unique principle that plays a significant role in healthcare outcomes. The purpose of this course is to examine the relationship between ethics and occupational justice.

**OTM 8994: Capstone II, 3 credits, All OTD Mentors**

This course is designed to synthesize content from each of the Core components, and to allow for the presentation of advanced evidence-based knowledge and clinical skills. As part of the capstone course, the student completes the study of the approved capstone project identified during Professional Development and Case-Based Application courses. This includes the creation of an evidence-based capstone paper that meets the standards for submission to a peer-reviewed professional journal. The student also generates a clinical portfolio highlighting their growth and development throughout the OTD program. The clinical portfolio should provide evidence of the student's skills, achievements, and professional experiences during their clinical residency.

## OTD Textbook Requirement List

Note: this list is subject to change. The syllabus for each course will reflect the most updated list of required texts. Check the syllabus or confirm with the instructor prior to purchasing textbooks.

Course Number and Title	Required Text
OTM 8100: Advanced Applications of Theory	<p>Grajo, L. &amp; Boisselle, A. (2018). <i>Adaptation through occupation: Multidimensional perspectives</i>. Thorofare, NJ: SLACK, Inc. (will be used in another OTD course)</p> <p>Katz, N &amp; Togli, J. (Ed.). (2018). <i>Cognition, occupation, and participation across the life span: Neuroscience, neurorehabilitation, and models of intervention in occupational therapy (4<sup>th</sup> Ed)</i>. Bethesda, MD: AOTA Press. (will be used in another OTD course)</p>
OTM 8103: Neuroscience of Cognition	Kandel, E. R., Koester, J.D., Mack, S., & Siegelbaum, S. (2021) <i>Principles of neural science (6<sup>th</sup> ed)</i> . McGraw-Hill.
OTM 8505: Cognitive Basis of Function and Decision Making	Katz, N & Togli, J. (Ed.). (2018). <i>Cognition, occupation, and participation across the life span: Neuroscience, neurorehabilitation, and models of intervention in occupational therapy (4<sup>th</sup> Ed)</i> . Bethesda, MD: AOTA Press.
OTM 8565: Theories of Measurement and Instrument Development	TBD
OTM 8503: Cognitive Assessment and Intervention	Katz, N & Togli, J. (Ed.). (2018). <i>Cognition, occupation, and participation across the life span: Neuroscience, neurorehabilitation, and models of intervention in occupational therapy (4<sup>th</sup> Ed)</i> . Bethesda, MD: AOTA Press.
OTM 8107: Capstone I	<p>Gutman, S. A. (2017). <i>Journal article writing and publication. Your guide to mastering clinical health care reporting standards</i>. Thorofare, NJ: SLACK.</p> <p>American Psychological Association. (2019). <i>Publication manual of the American Psychological Association (7<sup>th</sup> ed.)</i>. Washington DC: Author.</p>
OTM 8990: Grantsmanship in OT	Doll, J. (2010). <i>Program development and grant writing in occupational therapy</i> . Salisbury, MA, Jones, and Bartlett.
OTM 8510: Methods of Teaching	<p>Taff, S., Grajo, L., &amp; Hooper, B. (2020). <i>Perspectives on occupational therapy education: Past, present, and future</i>. Thorofare, NJ: SLACK, Inc.</p> <p>Darby, F. &amp; Lang, J. M. (2019). <i>Small teaching online: Applying learning science in online classes</i>. Jossey-Bass</p>

## Technology Requirements

Instruction within the PP-OTD program heavily requires technology use and access. All students must have access to a computer and/or a mobile device with more than sufficient access to internet connection. All computers and mobile devices need to have either built-in or available hardware for audio and video-conferencing.

- The **Online Learning Management System** for all PP-OTD Courses is **Canvas**: <https://courseworks2.columbia.edu>
- The **Video Conferencing System** is through **Zoom**.
- CUIMC IT Software for Students: <https://www.cuit.columbia.edu/cuit/software-downloads>

## Academic Standards

The Programs in Occupational Therapy use a letter grade system for core courses and Pass/Fail for the mentored courses (Professional Development 1 and 2 and Case-Based Application). A grade of “B” and/or “Pass” is considered the minimum passing grade. A minimum GPA of 3.0 per semester is required to progress in the program.

The program grades are defined as follows:

### Excellent:

- A Excellent achievement.
- A- Close to excellent work.

### Acceptable:

- B+ Very good; expected of most graduate students.
- B Good, acceptable achievement.
- Pass Meets minimum standards of doctoral competency

**Numerical values** are often given on tests and assignments. These values translate to letter grades as follows:

A	4.0	=	95-100
A-	3.67	=	90-94
B+	3.33	=	88-89
B	3.0	=	84-87
F	2.67	=	<84

## **Progression in the PP-OTD Curriculum**

### **Academic Standing**

In order to continue in good standing, students must maintain an average term GPA of 3.0 (B). Students who fall below this average will be placed on academic probation. To continue in the program, the student must achieve a GPA of 3.0 (B) by the end of the following term. Any student unable to achieve this GPA, or who is placed on academic probation for a second time, is subject to dismissal from the program. In instances where a student may withdraw from the program, be granted a leave of absence, or interrupt the program of study because of mitigating circumstances, a determination of satisfactory progress will be subject to review by the Doctoral Progress and Promotion Committee.

A student who receives a grade of F in a required course must repeat that course in our program and may do so only one time. If the student fails the course a second time, they will be dismissed from the program. Students required to repeat a course must pay full tuition and fees. The failing grade (F) remains on the student's official transcript and is included in the academic record, whether or not the student repeats the course and passes it after the second attempt. A student failing more than one course throughout the student's tenure in the program may not continue in the program.

### **Leave of Absence**

Students need to be continuously enrolled in every semester of the PP-OTD program (including summers) with a minimum of 1 credit, except for extenuating circumstances. Students who do not intend to take any credits need to file for a Leave of Absence (LOA). Only 1 LOA (good for 1 semester) is allowed in the program, otherwise, the student may lose their spot in the OTD program. The maximum residency rule (MRR) to complete the program is 4.5 years. This means that students need to complete the program within 4.5 years of their start date. Students who are not able to complete within this time frame need to file an extension with the PP-OTD Director. For students filing for a Leave of Absence, a written notification via email must be sent to the PP-OTD Program Director at least two weeks before the start of the semester for which the student is filing a leave of absence.

### **Withdrawing from the Program**

Newly admitted students are no longer allowed to defer registration to a future semester once admitted in the program and their security deposits have been processed. Should a newly admitted student decide to withdraw from the program, the student must notify the PP-OTD Director at least two weeks from the start of the semester. Their tuition security deposits will not be refunded.

Returning students who wish to withdraw from the program must notify the PP-OTD Director via email. It is the student's responsibility to check deadlines for withdrawal and tuition refunds set by the Registrar's office.

## **Mentorship and Mentored Courses OTD**

### **Doctoral Student-Mentor Relationship**

After acceptance to the PP-OTD program and discussion with the OTD Director, the student will be assigned to a doctoral mentor. Doctoral mentors serve as project directors and content experts for the student through the PP-OTD program and the capstone process and will oversee the completion of the capstone components.

### **Columbia OTD Mentors**

**Dr. Tyra Banks**

Clinical and Research Areas: Diversity, Equity, Inclusion, and Belonging; Anti-racism; Culturally Responsive Care

**Dr. Katherine Dimitropoulou**

Clinical and Research Areas: Pediatrics, Functional Abilities across the Life Span, Assistive Robotics

**Dr. Daniel Geller**

Clinical and Research Areas: Adult Neurological Rehabilitation

**Dr. Glen Gillen**

Clinical and Research Areas: Adult Neurological Rehabilitation, Cognition

**Dr. Julia Guzman**

Clinical and Research Areas: Pediatrics, Instrument development, Community Practice, Telehealth.

**Dr. Razan Hamed**

Clinical and Research Areas: Mental Health, Assessment Development, Psychometric Testing

**Dr. Danielle Mahoney**

Clinical and Research Areas: Adult Neurological Rehabilitation, Assessment Development, Psychometric Testing

**Dr. Rochelle Mendonca**

Clinical and Research Areas: Assistive and Adaptive Technology, Accessibility of Products and Environments, Adult disabilities, Home and Community Based Care

**Dr. Dawn Nilsen**

Clinical and Research Areas: Adult Neurological Rehabilitation, Motor Learning and Control, Upper limb recovery, Effectiveness of Interventions to Improve Upper Limb Capacity and Occupational Performance Post-Stroke.

**Dr. Anna Norweg**

Clinical and Research Areas: Pulmonary Rehabilitation, Motivational Interviewing, Mind-and-Body Interventions, Measurement, Healthy Aging (sleep and falls prevention), Behavioral Clinical Trials.

**Dr. Pat Precin**

Clinical and Research Areas: Adult Mental Health and Community Practice

**Dr. Phyllis Simon**

Clinical and Research Areas: Productive Aging, Adult Cognition, Interprofessional Education and Collaboration, LGBTQ Older Adults

## Guidelines for Mentored Courses

- Under the guidance of the OTD mentor, the student registers for the following mentored courses:
  - OTM 8993 Professional Development
  - OTM 8106 Case-Based Application
  - OTM 8107: Capstone 1
  - OTM 8994: Capstone 2
  - OTM 8113: Writing for Publication
- **In OTM 8993 Professional Development and OTM 8106 Case-Based Application**, the mentor and student will collaborate to
  - Plan the course assignments/outputs within each of the courses in the OTD curriculum so that all assignments contribute towards the Capstone project and deliverables.
  - Refine the project questions/objectives, data collection procedures, submit IRB, collect data, or complete data analysis as appropriate.
- **In OTM 8107 Capstone I**, students will begin development of capstone projects, which will be sponsored by a faculty mentor. This includes development of the literature review and the methodology for their recruitment, procedures, data collection, and data analysis. They will also develop their IRB's and prepare it for submission. As part of the capstone module, the student will begin to generate a clinical portfolio highlighting their growth and development throughout the OTD program. The clinical portfolio should provide evidence of the student's skills, achievements, and professional experiences through their coursework, clinical residency, and capstone project.
- **In OTM 8994 Capstone II**, the mentor guides the student in completing the capstone project and evidence-based capstone paper, and reviewing the educational artifacts for the clinical portfolio. Most of the educational artifacts for the portfolio should have been drafted and finalized as assignments from the coursework.
- **In OTM 8113 Writing for Publication**, students with the mentor will refine and prepare their capstone projects in a publication-ready manuscript format.

## Capstone Components

### Part 1: Clinical Portfolio

#### 1 educational artifact on Program Development

May include:	Is this artifact a requirement for a course?
<input type="checkbox"/> Theory-Guided or Occupation-focused Practice Model	➔ Yes, final paper of Advanced Theory course
<input type="checkbox"/> Case study from the Neuroscience of Cognition Course. Case study must be relevant to the practice model or the draft of the intervention protocol/program to be developed	➔ Yes, final paper of Neuroscience of Cognition course
<input type="checkbox"/> Conceptual Draft of a Developed intervention protocol that describes theory or conceptual framework, principles of assessment and intervention, and outcome measures to be used	➔ Portions of which may be drafted from the assignment for the Cognitive Assessment and Intervention course

#### 2 educational artifacts on Education/Continuing Education/Professional Development

May include:	Is this artifact a requirement for a course?
<input type="checkbox"/> Teaching Philosophy Statement	➔ Yes, educator tool kit artifacts from Methods of Teaching
<input type="checkbox"/> Evidence of Presentation at a Local/State/National Conference	➔ No
<input type="checkbox"/> Certificate of completion, including attendance list of in-service trainings given	➔ No
<input type="checkbox"/> Completion of a Certification program/Advanced Training on a Clinical Skill	➔ No
<input type="checkbox"/> Evidence of development of a continuing education course (minimum 60 minutes; either accepted or proposed for presentation)	➔ No
<input type="checkbox"/> Evidence of teaching assistantship, guest lecturing, or development of tutoring or remedial programs (a 3-page summary of activities and reflection is required, as well as supporting evidence documents)	➔ No

### 3 Educational Artifacts on Evidence-based Practice

May include:	Is this artifact a requirement for a course?
<input type="checkbox"/> A completed mini-CAT (critically appraised topic) paper related to area of focus completed from the Advanced Evidence-Based Practice course	→ Yes, final paper for Advanced Evidence-Based Practice course
<input type="checkbox"/> A completed grant proposal related to an intervention study on area of specialization	→ Yes, final paper from Grantsmanship course
<input type="checkbox"/> A completed draft of an assessment tool with scoring process and instructional manual	→ Yes, final paper from Measurement course
<input type="checkbox"/> A completed draft of a cognitive intervention plan for a theoretical case study	→ Yes, final assignment from Cognitive Assessment and Intervention Course
<input type="checkbox"/> A publication-ready critically appraised topic (CAT) paper following guidelines of AOTA related to area of focus	→ No, but portions of which can be drafted from previous coursework
<input type="checkbox"/> A draft of a guideline for practice, intervention, or assessment derived from an extensive review of literature	→ No, but portions of which can be drafted from previous coursework
<input type="checkbox"/> A submitted/in-press/or printed publication related to occupational therapy in general (book chapters, OT Practice article). Submission or publication must be while students was enrolled in the OTD program	→ No.

### 1 educational artifact on the Clinical Residency

Must include:	Is this artifact a requirement for a course?
<input type="checkbox"/> A 250-word description of the clinical residency experience. This can include a description of the residency experience (place of work, volunteer location, or research lab) and a description of the how the residency contributed to the student’s doctoral journey	→ No

## 1 educational artifact on Reflection on the Doctoral Process

Must include:	Is this artifact a requirement for a course?
<input type="checkbox"/> A 2,000-word reflection paper synthesizing critical aspects of doctoral learning and becoming an agent of change. The paper must be supported by a synthesis of key essential readings from each of the following course work: Advanced Application of Theories, Cognition-focused courses (Neuroscience of Cognition, Cognitive Basis of Function and Decision-Making, Assessment and Intervention), and Ethics and Occupational Justice	<b>➔</b> Portions of which must be extracted from papers from the following courses: Advanced Application of Theories, Cognition-focused courses (Neuroscience of Cognition, Cognitive Bases, Assessment and Intervention), and Ethics and Occupational Justice

## Part 2: Evidence-Based Capstone Paper

Must include:	Is this artifact a requirement for a course?
<input type="checkbox"/> A publication-ready manuscript that can be derived from any of the components of the Evidence-Based Practice artifacts from the Clinical Portfolio. This can also be the student's final capstone project paper. A short-written description of plans for submission to a peer-reviewed journal is required	<b>➔</b> Portions of which can be extracted from any of the OTD courses

## Part 3: Capstone Project

Students must complete a project based on a gap in practice. The purpose of the capstone project is to prepare students to participate an integral member of a research team to implement evidence-based projects in clinical, educational, or community-based practice settings. The Capstone project will be sponsored by a faculty mentor and can be a part of a bigger project. The capstone project should integrate with and complement the roster of artifacts included in the clinical portfolio. **The Capstone Project must be approved by both the doctoral mentor and PP-OTD Program Director to ensure it meets the standards set by the program.**

Must include:	Is this artifact a requirement for a course?
<input type="checkbox"/> a 500-word Abstract synthesizing the Methods, Results (preliminary or completed), and Practice Implications (this should be submitted as a Capstone Artifact and be included in the Clinical Portfolio)	<b>➔</b> Yes, as part of Capstone 1 or 2

## The Doctoral Capstone Presentation Process

This process is to be completed during OTM 8994 Capstone 2 course. In the event a student has not completed the Capstone Project during the second Capstone course, student will need to register for an Independent Study (number of credits will be discussed with their doctoral mentor) until the Capstone project is completed.

### Note on Clinical Residency Requirement:

The student, along with the doctoral mentor, will discuss best and most appropriate use of a clinical residency site to complete the projects related to the capstone. A documentation of clinical residency and how it is utilized for the Capstone Project must be described in the Clinical Portfolio.

### Checklist of Processes to Complete the Capstone Components:

- Student must complete three Capstone components: (1) a Clinical Portfolio that must be presented using the platform Digication; (2) An Evidence-Based Capstone Paper that is completed and publication-ready; (3) A Capstone Project. Student will need to have completed OTM 8107 Capstone 1 course and registered for OTM 8994 Capstone 2.
- Student and doctoral mentor agree when student is ready for capstone presentation based on near completion of the capstone project, portfolio artifacts, and achievement of competencies required for the OTD degree. Student and mentor agree to only schedule capstone presentation when they are both confident that the quality of work meets expectations of the OTD degree.
- Student and doctoral mentor choose a second reader of all capstone projects who will serve as a member of the Capstone Committee. Second reader must be a faculty in the Programs in OT teaching in the doctoral programs.
- Once Capstone committee is formed, the OT Director decides on a date, time, and venue for final presentation of capstone project during the semester when OTM 8994 is taken.
  - Student completes all essential components of the Clinical Portfolio and Evidence-Based Paper at least 6 weeks prior to scheduled date of Capstone Presentation.
  - Student completes the Clinical Portfolio on Digication at least 5 weeks prior to presentation. See separate guidelines for Clinical Portfolio.
  - Student sends link to Clinical Portfolio (Digication), along with electronic copies of all artifacts, copy of draft of evidence-based capstone paper (and description plan of where the paper will be submitted for publication is required) to the Capstone Committee 4 weeks prior to Capstone Presentation.

- Committee has 4 weeks to review all artifacts and offer finalizing comments and suggestions.
- Student prepares a 15-minute presentation on their capstone project.
- Student presents Capstone Project and will receive feedback and discussion from committee and other attendees.
  
- Student makes final revisions on artifacts, clinical portfolio, evidence-based paper.
- Student sends link of final version of clinical portfolio, pdf copies of all artifacts, and completed evidence-based capstone paper to doctoral mentor and OTD program director within 2 weeks of capstone presentation.
  
- Doctoral mentor gives student final grade for the Capstone II course.

Note: Student and Doctoral Mentor need to be aware of Academic Calendar deadlines to submit grades and all requirements for completion of degree to be able to graduate and earn OTD degree for a given semester.

## Instructions for Submitting Capstone Artifacts

### 1. Labeling Artifact Files

When submitting the capstone artifacts for initial committee review, submit all files in pre-final versions (MS Word or PowerPoint and not in PDF) to allow your committee to track changes.

Label all files in chronological order in which they are to be reviewed. See below for example:

1\_Program Devt 1\_Artifact name

2\_Program Devt 2\_Artifact name

3\_Program Devt 2 Supplement\_artifact name (if applicable, for supplementary files)

4\_Education 1\_Artifact name

5\_EBP 1\_Artifact name

.... And so forth. For the Evidence-Based Capstone Paper, label it as “**Publication Ready Paper**” so it is not confused with the Evidence Based Practice artifacts

### 2. Create a Checklist as a Title Page

On a Word document, use the Capstone components table and list all artifacts to be reviewed in each category. The list should indicate the file name of the artifact in chronological order in which they are to be reviewed. Label the file as **Capstone Checklist**. See example below.

#### **Evidence of Program Development**

2 artifacts presented:

Files for review:

1\_Program Devt 1\_Artifact name

2\_Program Devt 2\_Artifact name

3\_Program Devt 2 Supplement\_artifact name

#### **Evidence of Teaching, Continuing Education, and Professional Development Efforts**

2 artifacts presented:

4\_Education 1\_Artifact name

5\_Education 2\_Artifact name

### **3. What artifacts need to be included (6 components)**

- 1 educational artifact on Program Development
- 2 educational artifacts on Education/Continuing Education/Professional Development
- 3 educational artifacts on Evidence-based Practice
- 1 educational artifact on Clinical Residency
- 1 educational artifact on Reflection on the Doctoral Process
- Evidence-Based Capstone Paper (publication-ready manuscript, submitted version, or published version as applicable)
- Clinical Capstone Project (abstract only)

### **4. Digication**

Once ready for committee review, publish your Digication page to Public View. Copy the URL and send the link to your clinical portfolio along with your artifacts.

### **5. Submitting Artifacts**

Put all files in a folder and convert to a zip file so they are not sent as multiple files in one email. Send this file by the deadline to Dr. Mendonca, your capstone mentor, and your capstone reader

### **6. Submitting Final Versions**

After the capstone presentation and receiving the rubric with feedback, finalize your capstone artifacts and clinical portfolio. Convert all files to final format (PDF version) and re-label chronologically. Once finalized, send the files as a zip folder with your Digication link to Dr. Mendonca and your doctoral mentor by the deadline.

## Rubric for Capstone Project

Capstone Educational Artifact	Quality of Work Exceeds Expectations	Quality of Work Meets Expectations	Suggested Edits and Ways to further Improve Work
<p><b>Evidence of Program Development</b></p> <p>2 artifacts presented:</p> <p>Each artifact is worth 5 points.</p> <p><b>10 pts maximum</b></p>	<p>Student presented two artifacts, both of exceptional quality, and indicate evidence of program development that is theory-guided/ occupation focused, relevant to his/her area of practice, and advances practice on cognition.</p> <p><b>(9-10 pts)</b></p>	<p>Student presented two artifacts of good quality and indicate evidence of program development that is theory-guided/ occupation focused, relevant to his/her area of practice, and advances practice on cognition. One artifact has some areas for improvement or further refinement.</p> <p><b>(8 pts)</b></p>	
<p><b>Evidence of Teaching, Continuing Education, and other Professional Development Efforts</b></p> <p>2 artifacts presented:</p> <p>Each artifact is worth 5 points.</p> <p><b>10 pts maximum</b></p>	<p>Student presented two artifacts, both of exceptional quality, that exemplify commitment to OT education and advancing knowledge and skills in a specific and specialized area of practice either by presenting, sharing an in-service, attending a high-quality training program, or teaching apprenticeship.</p> <p><b>(9-10 pts)</b></p>	<p>Student presented two artifacts of good quality that exemplify commitment to OT education and advancing knowledge and skills in a specific and specialized area of practice either by presenting, sharing an in-service, or attending a high-quality training program. One artifact needs clearer articulation on how it may advance knowledge and skills through education/ continuing education.</p> <p><b>(8 pts)</b></p>	
<p><b>Evidence of Advanced Evidence-Based Practice Competencies</b></p> <p>3 artifacts presented:</p> <p>Each artifact is worth 10 points.</p> <p><b>30 pts maximum</b></p>	<p>Student presented three artifacts of exceptional quality. Each artifact demonstrates how student's work will advance an area of cognition. The artifacts may also present strong evidence of gap in knowledge/skills/practice in area of cognition and concrete, theory-guided/occupation-focused and evidence-based approaches on how this gap may be filled.</p> <p><b>(29-30 pts)</b></p>	<p>Student presented three artifacts, all of good quality. Artifacts presents evidence on how student's work will advance evaluation, treatment, or outcome measurement in related area of cognition. One artifact needs stronger articulation of how the work may fill in a gap in knowledge/skills/practice in area of cognition.</p> <p><b>(28 pts.)</b></p>	

<p><b>Evidence of Reflective Practice</b></p> <p><b>10 pts maximum</b></p>	<p>The evidence presented shows deep reflection of learning and detailed articulation of how the doctoral process has facilitated the student's becoming an agent of change in practice. The reflection paper also shows exceptional evidence of synthesizing key readings from courses from Core 2 (Theory, Neuroscience), Core 3 (Cognitive basis, Assessment and Intervention) and Core 4 (Ethics) of the curriculum as well as evidence-based knowledge and skills related to cognition.</p> <p><b>(9-10 pts)</b></p>	<p>The evidence presented shows deep reflection of learning and detailed articulation of how the doctoral process has facilitated the student's becoming an agent of change in practice. The reflection paper also shows strong evidence of synthesizing key readings from courses from Core 2, Core 3, and Core 4 of the curriculum as well as evidence-based knowledge and skills related to cognition. Some statements need further elaboration or expansion, or some cited readings needed stronger linking to reflection and critical thinking.</p> <p><b>(8 pts)</b></p>	
<p><b>Quality of Evidence-Based Paper and Plan for Submission of Evidence-Based Paper</b></p> <p><b>20 pts maximum</b></p>	<p>The evidence-based paper submitted is a rigorous, scientific paper that advances knowledge on evaluation, treatment, or outcome measurement related to area of cognition. The methods, results, and implications of the study are presented in a manner that is easily translated to clinical practice. The paper has strong potential for acceptance in the proposed peer-reviewed publication. The description of plan for publication is realistic in terms of goals and time frame.</p> <p><b>(19-20 pts)</b></p>	<p>The evidence-based paper submitted is a rigorous, scientific paper that advances knowledge on evaluation, treatment, or outcome measurement related to area of cognition. The methods, results, and implications of the study are presented in a manner that is easily translated to clinical practice; however, one or two areas need further refinement. The paper has strong potential for acceptance in a peer-reviewed publication pending suggested revisions. The description of plan for publication is realistic in terms of goals and time frame.</p> <p><b>(18 pts)</b></p>	

<p><b>Capstone Project Abstract</b></p> <p><b>10 pts maximum</b></p>	<p>Capstone project is synthesized in a 500-word structured abstract succinctly describing background, methods, summary of available results and clinical implications.</p> <p><b>(9-10 pts)</b></p>	<p>Capstone project is synthesized in a 500-word structured abstract describing background, methods, summary of available results and clinical implications. One or two sections need some specificity or expansion.</p> <p><b>(8 pts)</b></p>	
<p><b>Organization of Clinical Portfolio</b></p> <p><b>10 pts maximum</b></p>	<p>Student provides committee the link to the Digication Portfolio platform. The Clinical Portfolio is complete and follows CU OT required template. The Portfolio looks professional, and easy to access. All required educational artifacts are presented and synthesized; tabs and links (as applicable) are accessible.</p> <p><b>(9-10 pts)</b></p>	<p>Student provides committee the link to the Digication Portfolio platform. The Clinical Portfolio is complete and follows CU OT required template. The Portfolio looks professional, and easy to access. One or two educational artifacts needs better synthesis, or one or two links or tabs are not easily accessible.</p> <p><b>(8 pts)</b></p>	
<p><b>Total</b></p> <p><b>100 pts</b></p>	<p><b>(93-100 pts)</b></p>	<p><b>(86-92 pts)</b></p>	

## Course Policies

### Attendance and Participation

As our program is guided by the philosophy of adult learning and professional education, we expect all students to attend all classes, be on time, and be engaged. Communication during class, such as talking to another student, texting, side chats, etc. are not tolerated. If you cannot attend class, you are expected to email the professor prior to class or as soon as possible. Students that miss 20% or more of class time must develop a learning contract at the discretion of the course director to address missed course content and demonstrate competency.

The Programs in Occupational Therapy follow the general university calendar. However, there are on occasion exceptions to the schedule identified by the university. Examination dates, study dates, etc. may follow a different timetable. It is imperative that each student review the Program's schedule each semester, and review each course's syllabi, before making any plans that are contingent on the calendar. All dates are subject to change.

### Technology

Laptop computers or tablets can only be used in class to participate in synchronous sessions, take notes, or participate in course activities. Other uses are not permitted nor tolerated. It is expected that students will comply with this policy. If there is a pending emergency situation, the student must notify the instructor in advance that their phone might signal, and they might have to leave the room to answer the phone. Even under these circumstances, the student should mute themselves and walk away from the computer to avoid disruptions.

### Guidelines for Synchronous Learning

During synchronous instruction, class sessions will be held via Zoom. Below are the guidelines for participating in Zoom class Sessions:

- Do not share class Zoom links with individuals outside of the course.
- Present yourself **professionally** for all Zoom class sessions. Please **dress appropriately** as if you are in a classroom setting.
- Choose the **best space available** and maintain a posture that is conducive for learning. Please do not attend class while lying in bed or reclined on your couches. Choose one spot throughout the session and avoid moving around while in class.
- Be mindful of lighting and background noise when your video and audio settings are on.
- Cameras are required to be on during class. If you have an issue that will prevent you from turning on your video, you must let the faculty member know.
- Refrain from moving your device while on-camera to avoid distraction to other users.
- Make sure to set your **microphone on Mute** unless participating in discussion or asked by the instructor to unmute.
- Please use the **Raise Hand** feature on Zoom or type in your questions in the Chat box unless otherwise indicated by the instructor.

## **University Requirements for Participating in Research**

All research protocols at Columbia University must be approved by the Columbia University Institutional Review Board (IRB) in order for the study to proceed. The university's IRB Board serves to protect human participants in biomedical and behavioral research. As of January 1, 2001, the Dean of Health Sciences at Columbia University mandated that any essential investigator (including individuals who obtain consent, collect data, and/or administer tests) submitting a research protocol to the IRB, or participating in the study, must fulfill specific requirements. While these requirements are subject to change, at this time the requirement is a passing grade on the Behavioral and Social Science Test (BSST) examination. This examination reflects the investigator's knowledge of inherent concepts for appropriate human subject protection and good clinical research. You may learn more about this requirement by accessing the rascal page of Columbia's website (see instructions below).  
<https://www.rascal.columbia.edu>.

Students involved in clinical research are also expected to comply with the Health Insurance Portability and Accountability Act (HIPAA). In order to do so, each student is required to review the course content associated with HIPAA, which is available online, and to successfully complete the HIPAA exam, also available online. Information about this is distributed prior to receiving an activated email address.

Students should work with their doctoral mentors within any of the mentored courses to complete all IRB-related training and to complete the IRB submission process. Students need to coordinate with their practice settings, if applicable, on whether their place of clinical residency or data collection will require a separate IRB approval process.

### **Policy on Written Assignments**

It is our Programs' policy that written assignments such as literature reviews, papers, and case studies be submitted to Turnitin.com prior to submitting to your course director. Be sure to manage your time effectively when completing assignments.

Students are expected to submit all written assignments electronically via Canvas, unless otherwise required by the course instructor. Late submission of assignments is subject to a 5% or ½ grade reduction for each calendar day the assignment is late.

### **Policy on Authorship**

#### **Authorship on Manuscripts, Presentations, and Posters**

In accordance with the *American Psychological Association* publication manual (2010) and the *American Journal of Occupational Therapy* guidelines for authors (n.d.), authorship credit of any work generated by students as part of their CU Occupational Therapy Program curriculum will be determined by the capstone advisor/course instructor based on significant contribution to three primary areas:

(1) project idea generation and/or research design;  
(2) project development and/or research data collection, analysis, and interpretation;  
(3) poster or paper presentation development, or manuscript preparation and revision.  
Authors should substantially contribute to all three areas of project generation and dissemination.

Students are not permitted to use any of the information related to a course assignment in a presentation or publication (other than using it as a citation) without the expressed permission of their faculty advisor/course instructor. This pertains to any class assignments in which the student (1) participated as a group member or (2) completed independently with significant faculty feedback and guidance.

Faculty advisors/course instructors who provided significant guidance and feedback regarding development of a student's course assignment, should be listed as authors on any poster, presentation, or manuscript derived from the course. Students should discuss all ideas for poster, presentation, and manuscript proposal submissions with their faculty advisors/course instructors prior to actual submission. Failure to do so will result in withdrawal of the submission.

For the doctoral capstone project, students should discuss manuscript or conference submission authorship prior to beginning work on the submissions.

American Psychological Association. (2019). *Publication Manual of the American Psychological Association* (7<sup>th</sup> ed.). Washington, DC: Author.

*Guidelines for contributors*. (n.d.). The American Journal of Occupational Therapy. Retrieved May 18, 2011, from [http://ajot.submit2aota.org/journals/ajot/forms/ajot\\_guidelines.pdf](http://ajot.submit2aota.org/journals/ajot/forms/ajot_guidelines.pdf)

### **Proprietary Rights in Intellectual and Technological Products**

Students, as part of a class assignment, may create, invent, and/or develop a product that has commercial value. Prior to the marketing of such products, all individuals involved must provide a report to the program outlining the plan for commercialization. The University has the right to maintain control over the marketing plan. Any proceeds from such products may be shared between the individuals involved, the Programs in Occupational Therapy, and the University, as described by the policies set forth by the Columbia Innovative Enterprises.

### **COVID Related Policies**

The most updated information on COVID related policies can be found at the [CUIMC COVID-19 Information Site](#). Any program specific policies will be communicated by the Program Director.

## Other Policies and Procedures

### Name Change

If you anticipate a name change from the name you used in your application, you will need to submit an official name change form to the registrar's office:

<http://registrar.columbia.edu/content/name-change-affidavit>.

In addition, please send an email to Dr. Mendonca and Eileen Lloyd at [eileen.lloyd@columbia.edu](mailto:eileen.lloyd@columbia.edu) indicating the name change. If you do not notify us directly, your name will not be updated in the Programs' records.

### Student Resources

Columbia offers a large number of resources for students. Resources can be found on our centralized Courseworks site as well as through the [Office of University Life](#). If you need a specific resource and cannot find it, reach out to your advisor or a member of the staff.

### Communication Policies

#### **Columbia University Student Email Communication Policy**

Columbia University has established email as an official means of communication with students. An official Columbia University email address is required for all students. The University has the right to send official communications to the University email address, which is based upon the University Network ID (UNI) assigned to the student.

The University expects that every student will receive email at their Columbia University email address and will read email on a frequent and consistent basis. A student's failure to receive and read University communications in a timely manner does not absolve that student from knowing and complying with the content of such communications.

Students may elect to redirect (auto-forward) email sent to their University email address. Students who redirect email from their official University email address to another address do so at their own risk. If email is lost as a result of forwarding, it does not absolve the student from the responsibilities associated with communications sent to their official University email address.

All use of email will be consistent with other Columbia University policies including the Acceptable Use Policy (<http://www.columbia.edu/cu/policy>), and the Responsible Use of Electronic Resources, included in this handbook.

## **Communication within our Program**

All students are expected to remain in communication with each course director and with the Programs in Occupational Therapy. To this end, daily access to the Columbia University Internet system for ongoing communications within courses and about courses, department broadcasts, course assignments/readings, etc. is required. All students must activate and use their Columbia University identification (UNI) and password to access Canvas and email.

Canvas is an Internet based program through which information related specifically to courses is disseminated. Everything from course syllabi, reading materials, class handouts, to course-based group discussions and exams, may be distributed / conducted. Each course director will review how Canvas is incorporated into each course.

The OTD program also has a Canvas site with centralized resources for students. All program communication will come through this site. We expect all students to look for resources on the centralized Canvas site.

### **Policy on the Use of the Internet and Social Media Sites**

Columbia University's Programs in Occupational Therapy appreciates the use of the Internet and of social media sites as a means of communication. Social media sites include but are not limited to Facebook, Instagram, LinkedIn, Twitter, Flickr, YouTube, blogs, and podcasts. Additional Internet uses include but are not limited to email, texts, and personal web pages.

It is important to remember that the Internet and social media sites have extensive networks and audiences; there is virtually no privacy on any of these sites or means of communication. It is important to understand that behavior on social media sites can reflect negatively on one's place of learning, work, and on one's profession. In addition, particular types of postings and communications may be unethical, if not illegal. Violations can be considered under the realm of academic misconduct and subject to disciplinary action, as well as subject to criminal and/or civil liability.

- Every student has been given a UNI, which is the basis of their Columbia University email account. It is our policy that all communication with our program and our faculty is done using the CU email. However, when establishing Facebook accounts, for example, it is expected that you use a different, personal account.
- Under no circumstance, regardless of the email address associated with any of your internet or social media sites, is personal health information or academic standing of other individuals to be posted or shared. Even if concealing one's identity, HIPAA (*Health Insurance Portability and Accountability Act*) and FERPA (*Family Educational Rights and Privacy Act*) laws may be violated.
- Comments that are derogatory, inflammatory and/or defaming of any individual, assignment, event, policy, etc. related to Columbia University or to any of our fieldwork sites or academic partners are strictly prohibited.

- In addition, the following may be considered unprofessional behavior, subject to academic misconduct, and serve as the basis for disciplinary action. Please keep in mind that if the department contacts you about any pictures, comments, texts, etc., that are considered unprofessional, it is expected that they will be taken down immediately.
- When posting information, unless otherwise officially authorized, you may not represent yourself as a spokesperson for the university or program, or as an official representative of the university or program.
- You may not disguise your identity as a means to get around any of these guidelines and policies.

### **Photography Release**

The Programs in Occupational Therapy at Columbia University and its representatives on occasion take photographs for the school's use in print and electronic publications. This serves as public notice of the Programs in Occupational Therapy's intent to do so and as a release to the Programs in Occupational Therapy of permission to use such images as it deems fit. If you object to the use of your photograph, you have the right to withhold its release by filling out a form at the Programs in Occupational Therapy, Georgian Building, room 305.

## **Student Policies and Procedures on Discrimination, Harassment, Gender-Based and Sexual Misconduct and Consensual Romantic and Sexual Relationships**

Columbia University is committed to providing a learning, living, and working environment free from discrimination, harassment, and gender-based and sexual misconduct. Consistent with this commitment and with applicable laws, the University does not tolerate discrimination, harassment, or gender-based or sexual misconduct in any form and it provides students who believe that they have been subjected to conduct or behavior of this kind with mechanisms for seeking redress. All members of the University community are expected to adhere to the applicable policies, to cooperate with the procedures for responding to complaints of discrimination, harassment and gender-based and sexual misconduct, and to report conduct or behavior they believe to be in violation of these policies to the [Office of Equal Opportunity and Affirmative Action](#) or [Student Services for Gender-Based and Sexual Misconduct](#). For additional information on these issues, policies, and resources, please visit the Sexual Respect website at: <https://titleix.columbia.edu/>.

Complaints against students for gender-based misconduct are processed in accord with the [Gender-Based Misconduct Policies for Students](#). Students who attend Barnard College and Teachers College as well as Columbia University are covered by these policies. The use of the term “gender-based misconduct” includes sexual assault, sexual harassment, gender-based harassment, stalking, and intimate partner violence. Complaints against students for other forms of discrimination and harassment are processed in accord with the [Student Policies and Procedures on Discrimination and Harassment](#) and should be filed with the Dean of Students of the school in which the accused student is enrolled. Complaints against employees and third parties affiliated with the University for discrimination and harassment are processed in accord with the [Employment Policies and Procedures on Discrimination and Harassment](#). The use of the term “discrimination and harassment” includes discrimination, discriminatory harassment, gender-based harassment, stalking, intimate partner violence, sexual harassment, and sexual assault.

Columbia University maintains policies regarding consensual romantic and sexual relationships between faculty and students, and staff and students. The [Faculty-Student Relationship Policy](#) states that no faculty member shall exercise academic or professional authority over any student with whom he or she has or previously has had a consensual romantic or sexual relationship. This policy covers all officers of instruction, research, and the libraries, including student officers of instruction, research, and teaching assistants. The [Staff-Student Relationship Policy](#) states that no staff member at Columbia should participate in the supervision, employment actions, evaluation, advising or mentoring of any Columbia University student with whom that staff member has or has had a consensual romantic or sexual relationship, except in unusual circumstances, where explicit advance authorization has been obtained.

**For further information and assistance, contact:**  
Office of Equal Opportunity and Affirmative Action

103 Low Library, MC 4333

<http://eoaa.columbia.edu/>; [eoaa@columbia.edu](mailto:eoaa@columbia.edu); 212-854-5511

Columbia offers a number of confidential resources to students who believe they were subjected to discrimination, harassment, or gender-based or sexual misconduct and who do not wish to report to the University:

***Counseling Services***

CUIMC Mental Health Services (212) 305-3400

Columbia Morningside (212) 854-2878

**Center for Student Wellness (CSW)** (212) 305-3400

***Sexual Violence Support Center***, (212) 854-HELP

***Office of the University Chaplain***, 212-854-6242

***Health Services\****

CUIMC (212) 305-3400, CUIMC clinician-on-call (212) 305-3400

Columbia Morningside (212) 854-2284, Columbia Morningside clinician-on-call (212) 854-9797

\*Medical providers are considered confidential resources in the context of providing medical treatment to a patient.

## **Official University Regulations and Policies**

The University's official regulations are included in the University handbook, Essential Policies for the Columbia Community. This handbook is available online and at the Office of the University Senate, 406 Low Memorial Library. Because university policies and procedures are subject to change, please check the website, <https://universitypolicies.columbia.edu/>, for the most current information.

Regulations on the university policy site include but are not limited to:

[Student Email Communication Policy](#)  
[Information Technology \(CUIT\) Policies](#)  
[Social Security Number \(SSN\) Usage Policy](#)  
[Access to Student Records \(FERPA\)](#)  
[University Regulations](#)  
[Policies on Alcohol and Drugs](#)  
[University Event Management Policies](#)

[Gender-Based Misconduct and Interim Title IX Policies and Procedures for Students](#)  
[Policy on Partisan Political Activity](#)  
[Campus Safety and Security](#)  
[Voluntary Leave of Absence Policy](#)  
[Involuntary Leave of Absence Policy](#)  
[Military Leave of Absence Policy](#)

We encourage you to access these sites as they host the most updated policies. In addition, please review all the policies included in this document. The following pages also contain university policies.

## **Honor Code for Academic and Professional Conduct**

The Programs in Occupational Therapy are committed to the highest academic and professional standards. To this end, there is an expectation that all students, faculty, and staff will act in ways consistent with these standards. Conduct must reflect honesty and integrity in all activities associated with our programs and with all parts of the university. The following reflects our programs' Honor Code and applies to but is not limited to classroom and clinical settings.

To signify your understanding and agreement with these standards, please read the following and sign where indicated. Note that academic work includes but is not limited to all assignments handed in for review, all presentations, all labs, and all fieldwork assignments, as determined by course directors and/or clinical instructor, and all extracurricular assignments associated with Columbia University. Clinical settings are those settings in which students are placed for any assignment used in fulfillment of our program's requirements, or as part of an extracurricular activity associated with Columbia University.

- Students in the Programs in Occupational Therapy are expected to fully engage in all aspects of the academic curriculum. This includes fulfilling all requirements of each class, as delineated in each course syllabus, and in the student handbook.
- All assignments and examinations will reflect full participation in accordance with the guidelines established by the course directors.
- Each student must fully contribute to all assignments that are collaborative or group based. Under no circumstance will a member of a collaborative effort be "carried" by their group or receive credit when that student did not contribute.
- All submitted assignments will reflect original work. Any information that is not original must be properly referenced according to the APA guidelines.
- All students are expected to be respectful of classmates' and of faculty work; do not forward information, course material, slides or handouts provided to you in any form of media, whether in hard copy, online, via email attachments, or via *Courseworks*, to anyone who would not ordinarily have access to this information. Keep in mind that material prepared for you by faculty is typically under copyright control.
- No assistance, unless authorized by the course director, will be used on any assignment or examination. Under no circumstance will cheating, including plagiarism, be tolerated.

Cheating is defined as *"the giving or receiving of unauthorized and or unfair aid in academic work. This may occur by, but is not limited to: lying, deceiving, stealing, talking, signaling, copying from other students, and unauthorized usage of books, data (both in hardcopy and electronic formats),*

*study aids, or other sources in a manner inconsistent with the expectations established by”<sup>1</sup> the Programs in Occupational Therapy.*

Plagiarism includes but is not limited to:

- *Submitting essays, or portions of essays, or other prose written by other people as one’s own;*
- *Failing to acknowledge, through proper footnotes and bibliographic entries, the source of ideas essentially not one’s own;*
- *Failing to indicate paraphrases or ideas or verbatim expressions not one’s own through proper use of quotations and footnotes;*
- *Submitting an essay written for one course to a second course without having sought prior permission from both instructors;*
- *Collaborating with other students or outside sources on an assignment or examination without specific permission from the faculty member to do so;*
- *Using another person’s or institution’s research or data without attribution.”<sup>2</sup>*

It is each student’s responsibility to direct any questions or concerns about what constitutes academic and clinical integrity to a faculty member. Within the Programs in Occupational Therapy, the Faculty and the Due Process Committee shall be responsible for reviewing charges of academic misconduct brought against a student. The consequences of a violation will be determined by the faculty. The Programs in Occupational Therapy reserves the right to dismiss, or to deny admission, registration, readmission, or graduation to any student who in the judgment of the Faculty of the Programs in Occupational Therapy is determined to be unsuited for the study or practice of Occupational Therapy. The Programs in Occupational Therapy reserves the right to require its students to sign the Honor Code annually.

My signature below signifies that I read, understand, and am fully committed to the Honor Code.

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Signature

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Date

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Print Name

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<sup>1</sup> Based in part on the Social Media Policy from the University of Kansas Medical Center <http://www.kumc.edu/Pulse/policy/socialmedia.html>

<sup>2</sup> SIPA. <http://www.sipa.columbia.edu/prog/deans.html> Accessed June 9, 2006