

CLO 1	Collaborate with occupational therapist and effectively interact with all concerned parties to assist with evaluation, therapeutically interact with client, and provide information for plan of care. (intake, manipulation) (recall, make use of)	2, 3, 4, 6, 5, 7, 8, 11, 12, 13, 16, 17, 18, 19, 20, 21, 22, 23	na	1-6		C2	Allen Cognitive Level Screen-6 Practical Assignment
CLO 2	Know and use safety consideration in client intervention. (intake, manipulation) (recall, demonstrate)	10, 23	na	3, 4, 5		R2	Seizure peer check-offs
CLO 3	Correlate healthcare regulations and policy, societal considerations, and social demographics with occupational therapy service delivery and this population. (intake, manipulation) (name, explain)	1, 3, 9, 14, 15, 23	na	7		C2	In Class Activity – Global Concerns
CLO 4	Know and use mental health diagnosis and condition information to plan occupational therapy service delivery. (intake, manipulate, apply) (retrieve, deduct, function)	2, 3, 4, 5, 7, 8, 11, 12, 13, 16, 17, 18, 19, 21, 22, 23, 24	na	1-2, 5	CT 3		Activity Intervention Choices

Unit Outcomes/ Competencies/Objectives

The student should, at the end of the course OCCU 1404 Mental Health and Occupational Therapy Interventions:

1. Know historical and present day factors of relevance to psychosocial occupational therapy. (intake, manipulation) B.1.4, 2.1, 2.5, 3.4, **Society**, 1.4, 1.6, 3.3, 6.2
2. Explain the concepts mental health and mental illness. (intake) B.1.3
3. Relate psychological and occupational therapy theories, frames of reference, and practice models to interventions. (intake, manipulation, application) B.2.11, 3.1, 3.2, 3.3
4. Describe components of the Diagnostic and Statistical Manual and relate the classical picture to occupation and occupational therapy intervention. (intake) B.2.6
5. Describe behaviors and symptoms, and implications for function and intervention with psychosocial disorders and be able to grade or modify intervention activities based on behaviors and symptoms. (manipulation, application) B.5.1, 5.6, 5.23
6. Use appropriate methods and tools for assessing occupational performance of persons with psychosocial disorders. Perform the Montreal Cognitive Assessment and Allen Cognitive Leather Lacing Screen. (intake, manipulation, application) B.4.1, 4.2, 4.4
7. Use the Occupational Therapy Process as related to psychosocial occupational therapy. (manipulation, application, cross application) B.2.2, 4.5, 2.9, 5.6
8. Identify a variety of interventions used in the practice of occupational therapy with persons with psychosocial disorders. (intake, manipulation, application, cross application) B.5.1, 5.2, 5.3, 5.6, 8.1
9. Describe different contexts and environmental situations occupational therapy practitioners may work in with clients with mental health and mental illness concerns and problems. (intake, manipulation) B.1.4, 1.5, 1.6, 5.7, 6.1
10. Describe various safety precautions used with clients with mental health concerns. Be able to render aid to those with seizures and bleeding emergencies. (intake, manipulation) B.2.8, 2.9
11. Identify way to promote health over the life span and the occupational therapy assistant's role with mental health and wellness. (manipulation) B.2.4, 2.5
12. Describe various professional behaviors that are needed when working with individuals in occupational therapy and begin to construct an idea of therapeutic self for occupational therapy intervention with clients. (intake, manipulation) B. 5.7

13. Use various reference materials and the internet to enhance best practice clinical decisions and intervention choices with client. (manipulation, application) B.8.3
14. Identify psychotropic medications used in the treatment of psychosocial disorders for drug class, therapeutic effect and side effects as they relate to occupational therapy interventions. Be able to offer clients ways to cope with side effects of psychotropic medications and recognize adverse drug reactions with these types of medications. (intake) B.1.2, 1.3
15. Know hospice and palliative healthcare system and role of occupational therapy in it. (intake) B.2.9
16. Complete money management activity for use as occupational therapy intervention. (manipulation) B.5.2, 5.3, 5.5
17. Identify a variety of interventions (including, but not limited to: self-care, home management, safety, leisure, social skills, social participation, work, community living, life skills) used in the practice of occupational therapy with persons with psychosocial and/or mental health dysfunctions or concerns. (manipulation, application) B.2.10, 5.2, 5.5
18. Relate such topics and skills as: self-management, self-awareness, coping, self-esteem, goal setting, anger management, assertiveness, and stress management to recovery. (manipulation, application) B.5.2, 5.3, 5.5
19. Know ways to promote health and maintain wellness for those with mental health and mental illness concerns and problems. (manipulation) B.2.5
20. Identify the role of the occupational therapy assistant with those with mental health and mental illness concerns and problems. (intake, manipulation) B. 2.5, 4.5, 5.21, 5.25, 5.31, 6.4
21. Relate occupational performance and mental health throughout the lifespan. (intake, manipulation) B.1.2
22. Relate performance skills (including but not limited to: cognitive process, sensory and motor praxis) to occupational performance and occupational therapy intervention for those with mental health and mental illness concerns and problems. (intake, manipulation, application) B.2.10, 5.7
23. In order to bridge the distance between non-professional and professional responsibilities the student will demonstrate professional behavior in all course work and activities. Student will accept faculty input to correct any student faulty thinking regarding professional behavior expectations. (dependability, professional presentation, initiative, empathy, cooperation, organization, clinical reasoning, supervisory process, verbal communication, written communication, information seeking, attitude). (intake, manipulation, application) 5.20, 9.6
24. Research and use appropriate evidence based literature for best practice for group intervention protocols or intervention techniques; and to better understand frames of reference, theory, or practice model. (manipulation, application) 2.11, 8.2, 8.3, 8.8

Assessment Description(s)

1. Understand Allen Cognitive Level client ability level with enough knowledge to demonstrate actions and behaviors with 3 out of 4 or greater accuracy on a 4-point scale. (intake, manipulation) (recall, make use of)
2. Perform seizure practicum with 100% accuracy. (intake, manipulation) (recall, demonstrate)
3. Identify and state global health concerns which can affect occupation with 75% accuracy or greater. (intake, manipulation) (name, explain)
4. Identify therapeutic activities to use with clients with mental health concern/mental illness with 75% accuracy or greater. (intake, manipulate, apply) (retrieve, deduct, function)

Materials and Technological Requirements

Access to Blackboard.

American Occupational Therapy Association membership

Occupational Therapy Practice Framework: Domain and Process, 3rd Ed. 2014. By: American Occupational Therapy Association. ISBN-13: 9781569003619

Lab uniform.

Early, M. B. (2009). Mental Health Concepts & Techniques for the Occupational Therapy Assistant. 4th ed. M. Philadelphia. Wolters Kluwer.

Byers-Connon, S., Lohman, H. L., & Padilla, R. L. (2004). Occupational Therapy With Elders Strategies for the COTA. 2nd edition. St. Louis, MO: Mosby. (a reference copy is available in the library)

Morreale, M. (2015). Developing Clinical Competence. Thorofare, NJ: Slack Books. ISBN 13: 9781617118159

American Psychiatric Publishing. (2013). Desk Reference to Diagnostic Criteria From DSM-5. ISBN 13: 9780890425565.

Sladyk, K. (2015). Ryan's occupational therapy assistant: Principles, practice issues, and techniques (Fifth ed.). Slack Incorporated ISBN: 9781556429620

Better Money Management: A Guide For Reaching Your Goals. Channing Bete. ISBN: 290937
Willard & Spackman's Occupational Therapy 12th. Schell, Gillen, Scaffa. (2014) ISBN 13: 9781451110807

Occupational Therapy Student to Clinician: Making the Transition. Davis & Rosee. (2015) Slack Books. ISBN 13: 9781617110252

Willard & Spackman's Occupational Therapy 12th. Schell, Gillen, Scaffa. (2014) ISBN 13: 9781451110807

Cole. (2012). Group Dynamics in Occupational Therapy. 4th Slack Books. ISBN 13: 9781617110115

Purnell. (2012). Transcultural Health Care. 4th FA Davis. 9780803637054

Suggested:

Wellness Recovery Action Plan - ISBN 978-09795560-9-8.

The Intentional Relationship: Occupational Therapy and the Use of Self. 9780803613652

Class Attendance Policy

Students are expected to attend all classes in which they are enrolled. If a student is absent from a class session, it is the student's responsibility to make arrangements to complete or make up any work missed. No make-up work for missed classes will be allowed without the approval of the instructor. Students who enroll late must assume all responsibility for work missed. Classes not attended as a result of late enrollment may be counted toward excessive absences. Students not attending the entire class period may be counted absent for that period. An instructor may drop students with a grade of "WE" if students have been absent for an excessive number of days. Warning letters will be sent to the students advising them of the consequences of nonattendance and urging them to contact their instructors immediately. Excessive absences are defined as follows:

Regular Semester

Courses which meet once a week 2 absences
Courses that meet twice per week..... 3 absences
Courses that meet four times per week 5 absences

Summer Session

Courses that meet four times per week in a five week session..... 3 absences
Courses which meet two evenings per week in a 10 week session..... 3 absences

Students enrolled in special programs or individualized instruction should contact their program director/instructor regarding specific attendance requirements for the program/course. Some of the selective-admission, health-science programs have specific criteria regarding attendance. Students are encouraged to refer to program policies in these matters.

Jury Duty/Military/Official School Function

Scheduled absences are those that occur due to college-related activities or as a result of summons to jury duty or military duty. Classes missed as a result of scheduled absences will not be counted as excessive absences if the instructor is notified and provided documentation prior to the absence(s). Make-up work for scheduled absences will be at the discretion of the instructor.

In all instances, documentation must be provided to the instructor within 24 hours of receipt. Documentation should come from an appropriate party on letterhead or other official stationery with a signature and contact information. Documentation should list the corresponding dates of the leave.

Medical leave

For medical-related absences, documentation must include written notice from the treating medical professional documenting time needed off related to medical reasons and time student may resume classes. The medical reason does not need to be listed on the documentation; the documentation must include only that there is a medical reason, the amount of time the student needs to be absent, and the time the student should be able to return to classes. Students who elect to work at home while on excused leave must meet with their instructors to make arrangements to

do so. Working on coursework while on medical leave is not a requirement but can be requested by students. If students request that they be allowed to work at home while on an excused leave, the instructor will make every reasonable effort to ensure that the student is able to do so.

For students who have a medical condition necessitating time off or accommodation:

- 1) They may work at home on assignments if they choose to if on medical leave approved by a medical professional
- 2) Receive appropriate accommodations related to coursework (i.e., excused from labs with potentially harmful chemicals, have a larger desk, etc.)
- 3) Resume their studies where they left off once they return to classes
- 4) Be allowed to make up any missed work related to medical leave
- 5) Receive incompletes on their transcripts until coursework is completed, according to the incomplete grade contract.
- 6) Be given a reasonable time frame in which to complete missed coursework

Academic Honesty Policy

Students enrolled at South Arkansas Community College are expected at all times to uphold standards of integrity. Students are expected to perform honestly and to work in every way possible to eliminate academic dishonesty. Academic dishonesty includes cheating and plagiarism, which are defined as follows:

- Cheating is an attempt to deceive the instructor in his/her effort to evaluate fairly an academic exercise. Cheating includes copying another student's homework, class work, or required project (in whole or in part) and/or presenting another's work as the student's own. Cheating also includes giving, receiving, offering, and/or soliciting information on a quiz, test, or examination.
- Plagiarism is the copying of any published work such as books, magazines, audiovisual programs, electronic media, and films or copying the theme or manuscript of another student. It is plagiarism when one uses direct quotations without proper credit or when one uses the ideas of another without giving proper credit. When three or more consecutive words are borrowed, the borrowing should be recognized by the use of quotation marks and proper parenthetical and bibliographic notations. If, upon investigation, the instructor determines that the student is guilty of cheating or plagiarism, the following penalties will apply:
 - The student will receive a penalty of no less than a zero on the work in question.
 - The instructor will submit a Student Academic Misconduct Form, written report of the incident, to the appropriate dean.
 - The dean will submit form to Vice President for Learning to determine disciplinary action.
 - The Vice President for Learning will determine whether further disciplinary action will be taken.
 - All decisions may be appealed for review through the college's academic appeals procedure.

Equal Opportunity-Affirmative Action Statement

South Arkansas Community College does not discriminate on the basis of age, race, color, creed, gender, religion, marital status, veteran's status, national origin, disability, or sexual orientation in making decisions regarding employment, student admission, or other functions, operations, or activities.

Library Services

Library Homepage: <http://southark.libguides.com/homepage> Library Contact: LibraryStaff@southark.edu or 870.864.7115

Procedures to Accommodate Students with Disabilities

If you need reasonable accommodations because of a disability, please report this to the Vice President of Student Services with proper documentation. VPSS Contact: 870.875.7262

The Early Alert System

In an effort to ensure student retention and success, South Arkansas Community College employs an Early Alert System to identify and support at-risk students as soon as possible in a given semester. The intent of Early Alert is to provide this assistance while there is still time to address behaviors or issues that have the potential of preventing students from completing their courses and degree plans. Students referred through the Early Alert System will be required to work on a corrective action plan with their student advising coach and to include attendance accountability and mandatory academic tutoring either in the academic division or in the Testing and Learning Center (TLC).

Once the Student Advising Coach has met with the referred student, and again when the student has met the prescribed corrective actions, the coach will update the Early Alert System so that the instructor is kept informed of the progress in resolving issues.

Behavioral Review Team

At South Arkansas Community College (SouthArk), we are committed to proactive leadership in student wellbeing and campus safety. By focusing on prevention and early intervention with campus situations that involve any person experiencing distress or engaging in harmful or disruptive behaviors, the BRT will serve as the coordinating hub of existing resources to develop intervention and support strategies and offer case management. Students, faculty, staff, and campus guests are encouraged to report any person on campus who is a concern. BRT Contact: 870.875.7262
BRT@southark.edu

Date of Revision: 8/16/2016