

AY21-6-C

**Doctor of Occupational Therapy
Program Proposal**

School of Rehabilitation Sciences
College of Health Sciences
Old Dominion University

Table of Contents

I. Description of the Proposed Program	3
A. Program Background	3
B. Institutional Mission	4
C. Delivery Format	5
D. Program Accreditation	6
E. Admission Criteria	8
F. Curriculum	9
G. Time to Degree	13
H. Faculty Resources	14
I. Student Learning Assessment	15
J. Employment skills	20
K. Relation to Existing Programs	21
II. Justification of the Proposed Program	22
A. Response to Current Needs	22
B. Employment Demand	27
C. Duplication	29
D. Student Demand	31
III. Summary of Projected Student Enrollment	33
A. Projected Student Enrollment	33
IV. Projected Resource Needs for the Proposed Program	34
A. Narrative Description of Resources to Initiate and Operate the Degree Program	34
B. Funds to Initiate and Operate the Degree Program	35
V. Appendices	36
Appendix A: Plan of Study	36
Appendix B: Course Descriptions	37
Appendix C: Practicum Sites	44
Appendix D: Faculty Curriculum Vitae	46
Appendix E: Faculty Hiring Plan	58
Appendix F: Advisory Committee.....	65
Appendix G: Employment Demand Job Announcements	66
Appendix H: Letters of Support	67
Appendix I: Student Demand Inquiries from Prospective Students.....	68

Part I: Description of the Proposed Program

Program Background

Old Dominion University (ODU) requests approval to initiate a Doctor of Occupational Therapy (OTD) Degree program to begin in the spring semester (January) of 2023. The proposed program will be administered by the School of Rehabilitation Sciences in the College of Health Sciences on the ODU campus in Norfolk, Virginia.

The purpose of the proposed program is to prepare students to become occupational therapists who: 1) design and implement evidence-based occupational therapy services, 2) lead teams in health management, maintenance, and promotion and illness, injury, and disability prevention, and 3) design innovative interventions and programs that meet the needs of diverse individuals, communities, and populations. Students will learn the fundamentals of healthcare and the provision of professional practice across an array of settings and populations. Specific coursework will address professional and clinical reasoning, the human capacity for participation in occupation and its healing power, and holistic and empathetic care and therapeutic communication with clients. Graduates will be effective contributors to diverse teams in complex healthcare systems, effectively employ client-centered outcome measurement and data-based decision making in intervention planning, implementation, and assessment, assess social determinants and adaptive performance patterns, and identify and advocate for the role of occupations in achieving health and self-management. The proposed program will prepare graduates to work in healthcare (primary, secondary, and tertiary settings), community, and educational settings. Graduates will complete the program with a commitment to continual knowledge and skill creation, collection, and translation to serve the profession and its clients as leaders, scholars, and advocates. The proposed program graduates will lead change within interprofessional teams, healthcare, educational and business systems, and policy arenas.

Occupational therapists are certified and licensed healthcare professionals who help individuals, communities, and populations across the lifespan participate in the things they want and need to do through the therapeutic use of everyday activities (occupations).¹ Individuals who endeavor to become occupational therapists must complete a professional entry level program accredited by the Accreditation Council for Occupational Therapy Education (ACOTE),² pass the National Board for Certification in Occupational Therapy (NBCOT),³ and obtain licensure in one or more states and territories of the United States. State licensure regulation is aligned with the ACOTE standards and graduation from an ACOTE accredited program is required for licensure. In the Commonwealth of Virginia, licensure for occupational therapy practitioners is regulated by the Virginia Department of Health Professions.⁴ Graduates of the proposed program will be eligible

¹ American Occupational Therapy Association. (2021). About Occupational Therapy. <https://www.aota.org/About-Occupational-Therapy.aspx>

² Accreditation Council for Occupational Therapy Education. (2021). About. <https://acoteonline.org/about/>

³ National Board for Certification in Occupational Therapy. (2021). Our mission. <https://www.nbcot.org/>.

⁴ Virginia Department of Health Professions. (n.d.). Occupational Therapist and Occupational Therapy Assistant. <https://www.dhp.virginia.gov/Boards/Medicine/AbouttheBoard/RegulatedProfessions/OccupationalTherapy/>

to apply to and obtain Virginia licensure to practice as an occupational therapist within the state and within the states covered within its licensure compact.^{5,6}

Professionally trained Doctor of Occupational Therapy graduates complete additional academic coursework in 1) occupational therapy theory, clinical reasoning, and advanced, evidence-based clinical practice, 2) leadership, policy analysis, and advocacy, and 3) practice scholarship (analysis and application of scholarly literature and research, development of evidence and innovation in clinical practice), skills that have been identified as critical to both advanced healthcare infrastructure and access⁷ and to support a shift from traditional focus on disease management to community based, primary care, and preventative services addressing health and wellness.⁸ With an professional doctorate degree, students are better prepared to 1) address the challenges of today's complex and ever-changing healthcare, education, and community-based settings, 2) meet the healthcare demands for leadership in primary care and community-based and other roles in emerging practice settings, 3) engage in collaborative and interprofessional care, 4) increase accessibility to services across the continuum of care for the diverse populations we serve, and 5) advance the skills and knowledge in research, evidence-based practice, management, leadership, and systems navigation required by our changing healthcare markets.⁹

The College of Health Sciences and School of Rehabilitation Sciences have a commitment to interprofessional education and to expanding the diversity of the health care workforce. With the establishment of the proposed occupational therapy program, ODU will be the only institution in the state to offer the combined expertise of occupational therapy, physical therapy, speech therapy, athletic training, clinical psychology, and counseling programs on its campus. Interprofessional training pedagogy that combine all rehabilitation professionals who use scientific principles and evidence-based practice for the diagnosis, evaluation, and treatment of acute and chronic diseases, and promote disease prevention and wellness for optimum health of individuals and the community they serve, will be enhanced, and will provide programmatic leadership in the state with the addition of this program. In addition, ODU, a Minority Serving Institution, and the proposed program will give students from diverse backgrounds expanded opportunities to become healthcare professionals, which also will have the benefit of building a more diverse healthcare workforce in the region.

Institutional Mission

The mission statement of ODU asserts:

Old Dominion University, located in the City of Norfolk in the metropolitan Hampton Roads region of coastal Virginia, is a dynamic public research institution that serves its

⁵ American Occupational Therapy Association. (2021). Interstate Professional Licensing Compact. <https://www.aota.org/Advocacy-Policy/State-Policy/Licensure/Interstate-Professional-Licensing-Compact.aspx>

⁶ Occupational Therapy Interjurisdictional Licensure Compact § 54.1-2956.7:1. (2021).

⁷ HHS.gov. (n.d.) Strategic Goal 1: Reform, Strengthen, and Modernize the Nation's Healthcare System. US Department of Health and Human Services. <https://www.hhs.gov/about/strategic-plan/strategic-goal-1/index.html>

⁸ Institute of Medicine. (2015). Building health workforce capacity through community-based health professional education: Workshop summary. Washington DC: The National Academies Press.

⁹ Institute of Medicine. (2010). The Healthcare Imperative: Lowering Costs and Improving Outcomes. National Academies Press.

students and enriches the Commonwealth of Virginia, the nation, and the world through rigorous academic programs, strategic partnerships, and active civic engagement.¹⁰

In alignment with the institution’s mission, the mission of the proposed OTD program states: The Occupational Therapy Program at Old Dominion University is designed to graduate diverse intellectually inquisitive and innovative occupational therapy practice leaders, advocates and scholars, who, through their understanding of the relationship of occupation, health, and wellbeing gain through rigorous didactic and clinical academic pursuit, find scientifically grounded practical solutions to the everyday occupational needs of society.

The proposed program is a *rigorous academic program* that will promote effective clinical decision-making skills to prepare healthcare providers capable of treating diverse clients across the lifespan. Through its collaborative network of *strategic partnerships* involving the healthcare, educational, and community-based infrastructure in the region, the proposed program will leverage in-class didactic learning with service learning (*civic engagement*) and practicum experience to improve the health and wellbeing of the citizens of *the Commonwealth of Virginia, the nation, and the world*.

ODU’s vision is to, “be recognized nationally and internationally as a forward-focused metropolitan university with a collaborative and innovative approach to education and research that spurs economic growth, focuses on student success, engages civic and community partners, and uses its connections with the military and maritime industries and its exceptional strengths and leadership in related areas to provide practical solutions to complex, real world problems.”¹¹

The proposed program’s vision is to, “be *recognized* as an inclusive program that cultivates diverse *leaders, advocates* and *scholars* in healthcare, education and research that serve the right and need of society to participate in occupations that give life meaning and improve health and wellbeing of individuals, communities and populations in the metropolitan Hampton Roads region of Virginia, our nation and the world through *inquiry, collaboration* and *innovation*.”¹²

Delivery Format

The proposed program will be offered in a hybrid format. Though didactic and lab courses will be primarily offered in a face-to-face format on the campus in Norfolk, Virginia, during the summer semester of their second year in the program and during the final year of clinical learning and capstone completion, students will be engaged in online synchronous and asynchronous learning. Students will access course materials through ODU’s Blackboard Learning Management System and the EXXAT Clinical Management System.¹² Additionally, faculty student interaction will be available via email, phone, in person meetings, and web-based video conferencing (e.g., Zoom, Teams).

¹⁰ Old Dominion University. (n.d.). Mission Statement. <https://www.odu.edu/about/planning/mission-statement>

¹¹ Old Dominion University. (n.d.) Vision Statement. <https://www.odu.edu/about/planning/vision-statement>

¹² EXXAT – Educational Management Systems. (2021). Steps: Student Training Education and Placements System. <https://exxat.com/steps/>

The following core coursework will be held online:

- Summer Semester Year 2
 - Education and Learning in Healthcare and Health Education (2 credit hours)
 - Leadership and Advocacy in Occupational Therapy Practice (2 credit hours)
 - Health Care Policy and Program Management (2 credit hours)
 - Therapeutic Relationship and Client Collaboration (2 credit hours)
- Summer Semester Year 3 (Off Campus for Full-time Practicum)
 - Community and Population Health (1 credit hour)
 - Practice Scholar Seminar II (1 credit hour)
- Fall Semester Year 3 (Off Campus for Full-time Practicum)
 - Professional Development Planning (1 credit hour)
 - Practice scholar Seminar (1 credit hour)
- Spring Semester Year 3 (Off Campus for Full-time Capstone Project)
 - Practice Scholar Symposium (2 credit hours)

Faculty members who teach the online courses will be trained in course development and delivery through the Center for Learning and Teaching (CLT) at ODU. Instructional designers and technologists from the CLT will work individually and in small groups with each faculty member to develop course content, assignments, assessments, and other coursework utilizing the web-based learning platforms and the rich array of applications available through the institution. Additionally, students will have the opportunity to interact with the online tools during face-to-face learning in preparation for online learning and will have access to instructional technology support while off campus.

Program Accreditation

The Accreditation Council for Occupational Therapy Education (ACOTE)¹³ is recognized as the accrediting agency for occupational therapy education by both the United States Department of Education and the Council for Higher Education Accreditation. ACOTE accredits occupational therapy and occupational therapy assistant educational programs that satisfy states' educational requirements across the United States, the District of Columbia, Guam, and Puerto Rico. Only students who graduate from an ACOTE accredited occupational therapy and occupational therapy assistant educational program are eligible to take the National Board for Certification in Occupational Therapy (NBCOT)¹⁴ certification exam and apply for state licensure.^{15,16}

Currently, there are two professional entry points to the profession of occupational therapy: an entry level master's degree and an entry level doctorate degree. In April of 2014, the American Occupational Therapy Association's (AOTA) Board of Directors issued a position statement on

¹³ Accreditation Council for Occupational Therapy Education. (2021). About. <https://acoteonline.org/about/>

¹⁴ National Board for Certification in Occupational Therapy. (2021). Get Certified. <https://www.nbcot.org/en/Students/get-certified>

¹⁵ American Occupational Therapy Association. (2021). State OT Statutes and Regulations. <https://www.aota.org/Advocacy-Policy/State-Policy/Licensure/StateRegs.aspx>

¹⁶ Virginia Department of Health Professions Board of Medicine. (2019). Occupational Therapist and Occupational Therapy Assistant. <http://www.dhp.virginia.gov/Boards/Medicine/AbouttheBoard/RegulatedProfessions/OccupationalTherapy/>

the entry level degree for occupational therapists. In the statement, they argued that due to the increasingly complex healthcare environment, the need for high quality critical analysis, evidence based practice, and leadership, and the changing demands of higher education, the profession should take action to transition toward a doctoral-level single point of entry for occupational therapists by 2025.¹⁷ In the convening years, AOTA, in collaboration with ACOTE, have been evaluating the professional point of entry and have recommended to its stakeholders that the entry point be limited to the entry level doctor of occupational therapy degree. As of this writing, the ACOTE accreditation standards¹⁸ continue to offer both entry points. Of the 173 occupational therapy programs in the United States (US) offering master's degrees, 42 (24%) are currently transitioning to professional doctorate programs.¹⁹ Only 27% of developing programs plan to offer master's degrees.¹⁷ By the end of 2024, over 72% of all occupational therapy programs in the US will be offered at the professional doctorate level.¹⁷

In December 2019, the proposed program applied for and was granted Eligibility Status by ACOTE. A completed candidacy application providing the following information will be due to ACOTE in April of 2022:

- Overview (e.g., size of the school, location, sponsorship, mission, and if the program will meet a specific need in that area of the state or country)
- Mission and philosophy of the program
- Curriculum design and threads
- Number of student cohorts, number of students in each cohort, and start dates
- Length of the program
- Current staffing pattern
- Institutional support and approval
- Strengths of the program and the greatest barriers to program development

Once Candidacy Status is granted, the proposed program will accept and admit its first cohort in January of 2023. By November of 2024, the proposed program will be required to complete and submit a pre-accreditation self-review. To meet the ACOTE requirements, the proposed program will conduct a programmatic self-study and prepare a *Report of Self-Study*, a comprehensive self-assessment of the proposed program's compliance with ACOTE Accreditation Standards. Upon review of this report, ACOTE will grant, defer action on, or deny Pre-accreditation Status, a decision that reflects ACOTE's opinion of how likely the program is to meet the ACOTE Accreditation Standards by the time of the initial on-site evaluation. Once granted Pre-accreditation Status, the review will continue to a scheduled on-site visit.

Finally, in the late spring or early summer of 2025, ACOTE will conduct its initial on-site evaluation. At the conclusion of the on-site evaluation, the on-site visit team will prepare a *Report of On-Site Evaluation* which is used by ACOTE as the basis for action regarding the

¹⁷ American Occupational Therapy Association. (2014). AOTA Board of Directors Position Statement on Entry-Level Degree for the Occupational Therapist. <https://www.aota.org/AboutAOTA/Get-Involved/BOD/OTD-Statement.aspx>

¹⁸ Accreditation Council for Occupational Therapy Education. (2021). 2018 Accreditation Council for Occupational Therapy Education (ACOTE®) Standards and Interpretive Guide. <https://acoteonline.org/accreditation-explained/standards/>

¹⁹ Accreditation Council for Occupational Therapy Education. (2021). Schools. <https://acoteonline.org/all-schools/>

accreditation status of the program and the term of accreditation awarded (5 or 7 years). Following accreditation by ACOTE, the proposed program will be required to complete annual evaluations to ensure ongoing compliance with accreditation standards and achievement of educational objectives of the program.

The following timeline summarizes the ACOTE accreditation process:

1. December 2019 - Eligibility Status Granted
2. April 2022 - Candidacy Application Due
3. August 2022 - Notification of Candidacy Status
4. January 2023 - First Cohort Matriculates
5. November 2025 - Self Study Report Due
6. April 2025 - Initial Review Decision
7. Late Spring 2025 On-site Visit
8. August 2025 Accreditation Decision

Admission Criteria

Applicants seeking admissions to the proposed program must meet the ODU requirements for admission:

- A completed online application and application fee.
- A baccalaureate degree conferred from a regionally accredited institution or an equivalent foreign institution and official transcripts from each undergraduate and graduate program attended.
- A minimum grade point average of 3.0 in undergraduate coursework.

In addition, applicants will be required to submit documentation through the Centralized Application Service for Occupational Therapy Programs (OT CAS)²⁰ demonstrating the following requirements related to the proposed program:

- Completion of the following prerequisites at ODU or another regionally accredited institution with a minimum grade point average of 3.0:
 - Anatomy and Physiology (At least 8 credit hours with labs; the course content must address the organization of cells, tissues, organs, and organ systems in humans)
 - Developmental Psychology (A 3 credit hour child development or a lifespan course that includes learning principles and motor, language, cognitive, emotional, and social development)
 - Abnormal Psychology or Psychopathology (A 3 credit hour course addressing psychopathology)
 - Social Science (Two 3 credit hour courses can include other psychology courses, sociology, anthropology, economics, political science, public health, epidemiology, gerontology, and urban studies)

²⁰ Centralized Application Service for Occupational Therapy Programs. (2020). Welcome to OT CAS. <https://otcas.liasoncas.com/applicant-ux/#/login>

- Statistics (A 3 credit hour course addressing behavioral, educational, psychological, or mathematical statistics. Business statistics does not fulfill this requirement)
- Verification of at least 15 hours of occupational therapy related observation in either live or virtual settings with variety of client populations. Observation of occupational therapy practice is required.
- Three recommendations from professional or academic referees.
- Completion of a personal essay describing interests in and readiness for participating in a rigorous professional curriculum (additional opportunities to address diversity factors will be included and awarded in the personal essay).
- Documentation of current Emergency Cardiac Care (CPR/AED Certification) at the level of a Health Professional.
- Attestation of acknowledgement of the NBCOT Character Review²¹ eligibility requirements for certifying occupational therapy practitioners.
- Applicants will be required to participate in a behavioral interview²² for admission.
- Transfer coursework will not be allowed to count toward core and required courses.

Applicants who are non-native speakers of English may need to satisfy ODU requirements for English language proficiency. To demonstrate English language proficiency, students are required to achieve a minimum score of 230 on the Test of English as a Foreign Language (TOEFL) or an 80 on the TOEFL iBT.

Acceptance into the proposed program will be based upon the above materials and preview by the proposed program's Admission Committee. The Admission Committee will include members of the proposed program's faculty and advisory committee, members of the practice community, and the School of Rehabilitation Sciences Admissions Director. The Admission Committee will be responsible for reviewing submitted materials, ranking applicants using the criteria identified above, and identifying applicants who will be offered admission.

Curriculum

The proposed Professional Doctor of Occupational Therapy program is a full-time enrollment (9 semester), 105 credit, capstone based, cohort designed professional degree program culminating in student eligibility to sit for the NBCOT examination and obtain state licensure in occupational therapy practice. The proposed program is an active learning professional curriculum with blended didactic, clinical education (fieldwork), service-learning, and capstone components designed to meet ACOTE standards.

²¹ National Board for Certification in Occupational Therapy. (2021). Certification Exam Handbook. https://www.nbcot.org/nbcot.org/-/media/NBCOT/PDFs/Cert_Exam_Handbook.ashx?la=en

²² Li, K., Wilbarger, J., & St. Louis, S. (2017). An Innovative Behavioral Interview for Pre-admission Selection of Occupational Therapy Students. *Journal of Occupational Therapy Education*, 1 (1). <https://doi.org/10.26681/jote.2017.010107>

Grounded in transformative and constructivist curricular and instructional theory^{23, 24,25,26} and situated around the central tenet of occupation and occupational science,^{27,28,29,30,31,32} the proposed program at ODU will graduate intellectually inquisitive and innovative diverse and culturally competent occupational therapy practice leaders, advocates and scholars, who, through their understanding of the relationship of occupation, health, and wellbeing, find scientifically grounded practical solutions to the everyday occupational needs of society. Uniquely situated in a region of the state and country in which occupational therapy services are in high demand and practitioners are in critically short supply, the proposed program will be recognized as an inclusive program that cultivates healthcare, social service and education professionals that serve the right and need of society to participate in meaningful occupation that improve health and wellbeing in the metropolitan Hampton Roads region of Virginia, our nation, and the world.

Required coursework will address relevant curricular content necessary for safe and proficient care of diverse individuals, communities, and populations. Students will learn to evaluate, design, and implement intervention programs to address the occupational needs of their clients. Three central themes that align both with core competences in healthcare³³ and the institution's mission and vision are embedded across the curriculum design and include: professional and clinical reasoning, leadership and advocacy, and practice scholarship.

The professional and clinical reasoning thread incorporates:

- Fundamentals of healthcare and culturally competent professional practice
 - Knowledge of the human capacity for participation and its impact on health and wellbeing

²³ Benner, P. (2012). Educating nurses: A call for radical transformation – How far have we come? *Journal of Nursing Education*, 51(4), 183-184.

²⁴ Fink, L. (2013). *Creating significant learning experiences: An integrated approach to designing college courses*. San Francisco, CA: Jossey-Bass.

²⁵ Huber, M. & Hutchings, P. (2004). *Integrative learning: Mapping the terrain*. Washington DC: Association of American Colleges and Universities.

²⁶ Wiggins, G. & McTighe, J. (2001). *The understanding by design guide to creating high-quality units*. Alexandria, VA: ASCD.

²⁷ Hooper, B., Mitcham, M. D., Taff, S. D., Price, P., Krishnagiri, S., & Bilics, A. (2015). The Issue Is—Energizing occupation as the center of teaching and learning. *American Journal of Occupational Therapy*, 69(Suppl. 2), 6912360010.

²⁸ Hooper, B., Molineux, M., & Wood, W. (2020). The Subject-centered Integrative Learning Model: A New Model for Teaching Occupational Therapy's Distinct Value. *Journal of Occupational Therapy Education*, 4(2).

²⁹ Krishnagiri, S., Hooper, B., Price, P., Taff, S. D., & Bilics, A. (2017). Explicit or hidden? Exploring how occupation is taught in occupational therapy curricula in the United States. *American Journal of Occupational Therapy*, 71, 7102230020.

³⁰ Whiteford, G., & Wilcock, A. (2001). Centralizing occupation in occupational therapy curricula: Imperative of the new millennium. *Occupational Therapy International*, 8(2), 81-85.

³¹ Wood, W., Nielsen, C., Humphry, R., Coppola, S., Baranek, G., & Rourk, J. (2000). A curricular renaissance: Graduate education centered on occupation. *American Journal of Occupational Therapy*, 54(6), 586-597.

³² Yerxa, E. (1998). Occupation: The keystone of a curriculum for a self-defined profession. *American Journal of Occupational Therapy*, 52(5), 265-372.

³³ Greiner, A.C. & Knebel, E., Eds. (2003). *Health Professions Education: A Bridge to Quality*. Washington, DC: National Academies Press.

- Awareness of and competencies to work with individuals, communities, and populations with diverse cultural experiences and mitigate the impact of cultural experience on healthcare access and participation
- Understanding of the culture and the provision of holistic and empathetic care
- Professional communication and interprofessional collaboration in healthcare
- Use of theory and research evidence in practice
- Measurement, data use, and data-based decision making in intervention planning and implementation

The leadership and advocacy thread incorporates:

- Program assessment, planning, and implementation
- Grant writing
- Capstone experience designed to build advanced skills in:
 - A clinical specialty
 - Research and education
 - Administration and leadership
 - Community or population health

The practice scholarship thread incorporates:

- Foundations of scholarly literature
- Critical appraisal of the evidence
- Using evidence to inform practice
- Research (curiosity, inquiry, and innovation)
 - A research project linking the practice scholarship and leadership and advocacy threads will be a required component incorporated across the curriculum. Students are required to complete a collaborative research project with program faculty, community partners, and other students that results in a scholarly product (manuscript [systematic review, research project], knowledge translation [practice guidelines], or dissemination project [oral and/or poster presentation]).

In their first year of study, occupational therapy students will explore foundational human and occupational sciences courses including human anatomy and physiology, neuroscience, human movement analysis, occupational therapy theory, professional reasoning, and leadership and advocacy. In their second year of study, students will gain knowledge and skills in the occupational therapy process (evaluation, intervention planning, and intervention implementation), taking courses addressing individuals, groups, and populations, participating in embedded clinical service-learning opportunities, and addressing evaluation an intervention in learning practicums in healthcare, educational, and community-based sites in the Hampton Roads community.

Finally, during their third year of study, occupational therapy students will complete 2 full-time 12-week clinical rotations in community-based settings with occupational therapy supervision (480 hours), and 1 full-time 14-week capstone experience (560 hours) culminating in the completion and dissemination of a scholarly product and a comprehensive oral capstone defense. Prior to the capstone defense, students will submit all research related materials which will be graded by the assigned faculty mentor. Following the completion of the capstone experience in

the final semester, students will participate in a comprehensive oral presentation on the research and the capstone experience. The oral presentation will be attended and graded by program faculty, community mentors and partners, and clinical faculty. Students who fail to pass the written and oral components of the capstone defense will be required to retake portions of the examination in the following semester. Students may retake the examination one time; if they are successful in the second attempt they are indefinitely suspended from the program.

The program requirements include: (All courses listed are new courses to the institution and demarked with an asterisk. Course numbers have not yet been assigned. In addition, all courses listed are core courses.)

Year 1 Summer

- *Foundations of Occupational Therapy Practice (2 credit hours)
- *Body Function and Structure for Occupational Performance (6 credit hours)

Year 1 Fall

- *Neuroscience of Occupation (4 credit hours)
- *Occupation, Health and Wellness across the Life span (3 credit hours)
- *Professional Reasoning and the Occupational Therapy Process (3 credit hours)
- *Professional Identity and Ethical Formation (3 credit hours)
- *Theories of Inquiry and Scholarly Literature (3 credit hours)

Year 1 Spring

- *Occupation and Functional Mobility (3 credit hours)
- *Pediatric Habilitation and Rehabilitation: Theory and Practice (6 credit hours)
- *Fieldwork I a - Pediatrics (1 credit hour)
- *Evaluation of Occupational Performance (3 credit hours)
- *Using Evidence to Inform Practice (3 credit hours)

Year 2 Summer (on-line)

- *Education and Learning in Healthcare and Health Education (2 credit hours)
- *Leadership and Advocacy in Occupational Therapy Practice (2 credit hours)
- *Health Care Policy and Program Management (2 credit hours)
- *Therapeutic Relationship and Client Collaboration (2 credit hours)

Year 2 Fall

- *Adult Rehabilitation: Theory and Practice (6 credit hours)
- *Evaluation and Intervention of the Upper Extremity (3 credit hours)
- *Fieldwork I b - Adults (1 credit hour)
- *Technology and Context Adaptation (2 credit hours)
- *Interprofessional Telehealth Care (1 credit hour)
- *Critical Analysis of Occupational Therapy Practice (3 credit hours)

Year 2 Spring

- *Productive Aging and Rehabilitation: Theory and Practice (3 credit hours)
- *Mental Health Promotion and Recovery: Theory and Practice (6 credit hours)

- *Fieldwork I c – Psychosocial (1 credit hour)
- *Occupational and Activity Analysis (2 credit hours)
- *Scholarship of Practice Approaches and Design (3 credit hours)
- *Practice Scholar Seminar I (1 credit hour)

Year 3 Summer

- *Fieldwork II A (6 credit hours)
- *Community and Population Health (1 credit hours)
- *Practice Scholar Seminar II (1 credit hour)

Year 3 Fall

- *Fieldwork II B (6 credit hours)
- *Professional Development Planning (1 credit hours)
- *Practice scholar Seminar (1 credit hour)

Year 3 Spring

- *Capstone (7 credit hours)
- *Practice Scholar Symposium (2 credit hours)

The proposed program is a professional degree program leading to an entry level professional degree, certification, and licensure in occupational therapy. There are no subareas or concentrations offered in this program.

The plan of study for students in this program is provided in Appendix A. Course descriptions are available in Appendix B. A sample of practicum sites is included in Appendix C.

Time to Degree

The proposed program will require year-round full-time coursework commencing in the summer semester and culminating in the spring semester three years later (summers included). Students will be expected to enroll full time and the proposed program will operate on a cohort model. Cohorts will complete the sequence of classroom, service learning, and clinical work in three years/nine semesters culminating in a professional doctorate degree and eligibility to sit for the professional certification examination and state licensure.

Applications will be accepted in the fall semester and students will be notified of acceptance in the spring semester of each year. Cohorts will begin their program of studies in the summer semester. Each semester, students will be immersed in service and clinical hands-on learning opportunities that align and with their didactic coursework.

All students enrolled in the proposed program will meet with the graduate program director at the beginning of their course of study to discuss degree program, certification, and licensure requirements. The incoming class of students will move through the program as a cohort, taking classes in sequential order, and learning and working together in classrooms and research, service learning and clinical settings. Each student will be assigned an advisor who will meet at least one time every semester to review academic achievement and educational goals. Student

performance (academic and professional) will be monitored by the graduate program director and the students' advisor. Continuation in the proposed program is contingent upon maintaining a 3.0 average in all academic coursework and maintaining identified professional standards consistent with the NBCOT³⁴ professional requirements. Students who are unable to meet the academic requirements will meet with the graduate program director and their academic advisor to develop a remediation plan designed to assist the student with academic success within the degree program.

Faculty Resources

The proposed program is expected to utilize seven full time tenure track and/or clinical faculty members. The faculty will include a Graduate Program Director, an Academic Fieldwork Coordinator, a Capstone Coordinator, a Director of Research, and additional faculty members with clinical and research backgrounds in pediatric, adult, and geriatric populations and whose experience exemplifies the depth and breadth of knowledge and skills required to cover the full range of courses offered in the proposed program, to include physical illness and disability, chronic conditions, and mental health.

In addition to being credentialed (certified and licensed) occupational therapy practitioners, the seven core faculty members will be required to have post-professional doctorates in occupational therapy or doctorate degrees in a related field. They will hold positions at the ranks of Assistant, Associate Professor, and Full Professor (tenure-track) and Clinical Assistant, Clinical Associate, and Full Clinical Professor (non-tenure-track) commensurate with their backgrounds and interests. All faculty will be recognized in the occupational therapy professional community as innovative and productive researchers and educators and will engage actively in teaching, advising, research and capstone mentoring, faculty led clinical teaching, research in their area of clinical specialty [including teaching and learning], and active service to the institution, community, and profession. The use of adjunct faculty to teach core coursework is not anticipated though practicing occupational therapists will be invited to serve as guest lecturers and lab assistants to bring to life the practice of occupational therapy in the Hampton Roads community.

The program is currently is staffed by the Graduate Program Director and the Academic Fieldwork Coordinator (See Curriculum Vitae of the Graduate Program Director in Appendix D). The Graduate Program Director is responsible for ongoing compliance with accreditation standards; planning, development, implementation, delivery, documentation, and assessment of all components of the curriculum; and oversight of the programmatic budget. In addition to the Graduate Program Director, a faculty member who will teach in the proposed program will serve as the Academic Fieldwork Coordinator, an ACOTE required position³⁵ among the occupational therapy faculty. The Academic Fieldwork Coordinator will work with the faculty to guide the continued growth of clinical practice within the proposed program. The Academic Fieldwork

³⁴ National Board for Certification in Occupational Therapy. (2021). Certification Exam Handbook. https://www.nbcot.org/nbcot.org/-/media/NBCOT/PDFs/Cert_Exam_Handbook.ashx?la=en

³⁵ Accreditation Council for Occupational Therapy Education. (2021). 2018 Accreditation Council for Occupational Therapy Education (ACOTE®) Standards and Interpretive Guide. <https://acoteonline.org/accreditation-explained/standards/>

Coordinator will also be responsible for managing clinical practice experiences, developing clinical practice requirements, overseeing clinical site standards and requirements, and ensure competency development within clinical practice. The third ACOTE mandated position that will be filled by the proposed program's faculty is the Capstone Coordinator.³⁶ The Capstone Coordinator will be responsible for overseeing the capstone sequence culminating in student engagement in and fulfillment of the capstone requirements. Finally, the Director of Research will be responsible for the development and monitoring of the proposed program's research agenda and scholarly contributions. An active research agenda that aligns with that of the institution is an accreditation requirement. Though the utilization of adjunct faculty is not anticipated to be required on a regular basis, there may be times when qualified occupational therapy educators may be added to adjunct the occupational therapy faculty.

A hiring plan has been developed and approved based upon the matriculation of students in the program and can be found in Appendix E.

The proposed program works actively with stakeholders in the community that make up the ODU OTD Advisory Committee. Members of the committee are practice experts and scholars in occupational therapy practice and consumers. The purpose of the external Advisory Committee is to enable the development and sustainability of effective stakeholder partnerships that ensure:

- The program curriculum and its learning outcomes meet the needs of the practice community and the clients served in the Hampton Roads region.
- The faculty responds effectively and flexibly to the ever changing and complex occupational therapy practice environment.
- Adequate preparation and smooth transition of students from the classroom to the clinic.
- Effective partnerships that enable students and faculty to contribute to the advancement of practice, practitioners, and client outcomes within the region.

A list of current Advisory Committee members can be found in Appendix F.

Student Learning Assessment

Student learning assessment will be conducted in alignment with the requirements outlined in the ACOTE accreditation standards.³⁶

- **Didactic Coursework:** At least two measures demonstrating student competency identified in the accreditation standards will be collected for each required course/standards and reported in the ACOTE self-study and annual reporting per the standards requirements. These measures may include but not be limited to quizzes, exams, case studies, term papers, research projects, readiness assurance tests, practicals, and presentations.
- **Clinical Experiences:** During each clinical experience, students will be formally evaluated by their clinical educators at the midterm of their experience and at the end

³⁶ Accreditation Council for Occupational Therapy Education. (2021). 2018 Accreditation Council for Occupational Therapy Education (ACOTE®) Standards and Interpretive Guide. <https://acoteonline.org/accreditation-explained/standards/>

using the Level I Fieldwork Competency Evaluation³⁷ and the Fieldwork Performance Evaluation.³⁸

- Professional Department: To ensure student professional readiness to assume clinical responsibilities in the community, students’ professional and leadership capacity will be formally evaluated each semester using a program developed measure of professional department.
- Capstone Experience and Project: Because the capstone project is the culmination of the underlying threads of the proposed program, the capstone experience will be evaluated across the curricular components of the program. Three evaluative components will be developed to address the Capstone outcomes and will include: a student learning and summative portfolio, a rubric for the capstone written scholarly product, and a rubric for the scholarly oral presentation.

Student Learning Outcomes:

1. Graduates will promote health and wellness of diverse individuals, groups, and populations through occupational engagement across the life span through holistic, patient-centered, occupation-based, and evidence informed practice.
2. Graduates will advance the practice of occupational therapy by applying comprehensive knowledge of the profession’s theoretical and evidentiary base.
3. Graduates will influence traditional and emerging practice markets by optimizing leadership and advocacy capacities and employing creative, collaborative, and innovative problem solving.

Methods of Assessment, Timeframe for Data Collection and Analysis: The proposed program’s Assessment Committee will collect and analyze data to assess students’ progress in achieving the five core student learning outcomes of the program.

Direct measures will be collected according to the following schedule:

Student Learning Outcome	Data (Direct Measures)	Source of Data	When to Collect
Promote health and wellness of diverse individuals, groups, and populations through occupational engagement across the life span through	Intervention Plans (Pediatric, Adult, Geriatric, and Mental Health)	Student Deliverables – Course Instructor	Y1 Spring, Y2 Fall, Y2 Spring
	Simulation cases (Pediatric, Adult, Geriatric, and Mental Health)	Student Performance – Course Instructor	Y1 Spring, Y2 Fall, Y2 Spring

³⁷ American Occupational Therapy Evaluation. (2017). Level I Fieldwork Competency Evaluation for OT and OTA Students. <https://www.aota.org/-/media/Corporate/Files/EducationCareers/Educators/Fieldwork/LevelI/Level-I-Fieldwork-Competency-Evaluation-for-ot-and-ota-students.pdf>

³⁸ American Occupational Therapy Evaluation. (2012). New Fieldwork Performance Evaluation Tool. <https://www.aota.org/Education-Careers/Fieldwork/performance-evaluations.aspx>

Student Learning Outcome	Data (Direct Measures)	Source of Data	When to Collect
holistic, culturally appropriate, patient-centered, occupation-based, and evidence informed practice.	Fieldwork I and II Performance	Fieldwork Performance Evaluation – Fieldwork Educator	Y1 Spring, Y2 Fall, Y2 Spring, Y3 Summer, Y3 Fall
Advance the practice of occupational therapy by applying comprehensive knowledge of the profession’s theoretical and evidentiary base.	Critically Appraised Paper, Critically Appraised Topic, Systematic Review	Student Deliverable – Course Instructor and Community Partner	Y1 Fall, Y1 Spring, Y2 Fall
	Capstone proposal	Student Deliverable – Course Instructor and Community Partner	Y2 Spring, Y3 Summer, Y3 Fall, Y3 Spring
	Capstone dissemination project	Student Deliverable – Course Instructor and Community Partner	Y3 Spring
	Fieldwork II a and b Project	Student Deliverable – Course Instructor and Fieldwork Educator	Y3 Summer, Y3 Fall
	National Board Certification in Occupational Therapy Examination	Certifying Examination Outcome Data – Program Director	End of Program
Influence traditional and emerging practice markets by optimizing leadership and advocacy capacities and employing creative, collaborative, and innovative problem solving.	Leadership/ Advocacy Project	Student Deliverable – Course Instructor and Community Partner	Y1 Fall
	Student Portfolio (Knowledge, Skills, Professionalism, Ethics)	Student Deliverable – Advisor	Across every semester
	Occupation Adaptation	Student Deliverable – Course Instructor and Community Partner	Y2 Fall, Y2 Spring
	Capstone dissemination project	Student Deliverable – Course Instructor and Community Partner	Y3 Spring

Student Learning Outcome	Data (Direct Measures)	Source of Data	When to Collect
	Awards, fellowships, and distinctions	Awards provided – Internal and external organizations	Annually

Indirect measures will be collected according to the following schedule:

Student Learning Outcome	Data (Indirect Measures)	Source of Data	When to Collect
Promote health and wellness of diverse individuals, groups, and populations through occupational engagement across the life span through holistic, culturally appropriate, patient-centered, occupation-based, and evidence informed practice.	Course reviews	Course assessments – Students and Course Instructor and Curriculum Review Committee	Across every semester
	Grade distribution	Grade reports - Course Instructor, Program Director, Curriculum Review Committee	Across every semester
	Aggregated Fieldwork I and II Performance	Fieldwork Performance Evaluation – Fieldwork Educator and Academic Fieldwork Coordinator	Y1 Spring, Y2 Fall, Y2 Spring, Y3 Summer, Y3 Fall
Advance the practice of occupational therapy by applying comprehensive knowledge of the profession’s theoretical and evidentiary base.	Course reviews	Course assessments – Students and Course Instructor and Curriculum Review Committee	Across every semester
	Grade distribution	Grade reports - Course Instructor, Program Director, Curriculum Review Committee	Across every semester
	Aggregated community feedback regarding evidence-based practice products and capstone dissemination project	Student Deliverables – Course Instructor and Community Partner	Y1 Fall, Y1 Spring, Y2 Fall, Y3 Spring

Student Learning Outcome	Data (Indirect Measures)	Source of Data	When to Collect
	Dissemination artifacts	Professional presentation and published articles – Students and Faculty	Annually
Influence traditional and emerging practice markets by optimizing leadership and advocacy capacities and employing creative, collaborative, and innovative problem solving.	Semester and Annual Reviews	Curriculum assessments – Students and Course Instructor and Curriculum Review Committee	Across every semester
	Post-graduation career data	End of Year and Alumni Web Based Survey – Program Director	Annually
	Post-graduation leadership positions held	End of Year and Alumni Web Based Survey – Program Director	Annually

Use of Assessment Data: The following committees will be developed to assist in the assessment of program outcomes:

- Curriculum Review Committee
 - The OTD Curriculum Review Committee will meet to review courses at the completion of each semester and annually to examine the curriculum. Findings will guide program development and changes reported to the College Review Committee and accreditation bodies, as necessary.
- OTD Advisory Committee
 - The OTD Advisory Committee will review the OTD Curriculum Review Committee’s findings and develop program recommendations that reflect the priorities and considerations of the program’s stakeholder groups.

Proposed Program Benchmarks of Success: Benchmarks of success for the proposed program will include enrollment goals, first time credentialing examination rates, and professional placement of graduates. The following benchmarks will be monitored by the faculty, administration, advisory committee members, and community stakeholders at least annually:

1. 40 – 45 new students will be admitted annually (after the program’s second cohort)
2. 98% of students who begin the program will successfully complete the program
3. 50% of students will submit a proposal to present research at a state, regional, or national conference.
4. 90% of students who complete the program will pass the NBCOT credentialing examination on their first attempt.
5. 90% of students will be employed in occupational therapy positions within 6 months of graduation.

6. 90% of students will be satisfied with the program as determined by the university's Graduate Student Satisfaction Survey.

Employment Skills

The proposed program graduates will be prepared to work in a variety of practice settings to include healthcare (acute care, inpatient and outpatient rehabilitation, home health, skilled nursing), educational (early intervention and schools), and community based (club house, homeless shelters) settings. They will be prepared to work with diverse clients with a range of illnesses, injuries, and disabilities across the life span, and they will be prepared to analyze and apply evidence to design individualized intervention, establish and implement programs, and lead interdisciplinary teams to meet the needs of individuals, communities, and populations. The proposed program graduates will be prepared to:

- Demonstrate understanding of the determinants of health and the influence of occupation on the health and well-being of individuals, communities, and populations.
- Demonstrate awareness of the experiences of culturally diverse individuals, communities, and populations, and the competencies required to mitigate challenges in healthcare access and outcomes.
- Analyze and apply the theories and conceptual models that guide occupational therapy practice across the human lifespan and distinguish occupation as its central outcome.
- Gather, analyze, and interpret relevant data to determine the relationship of occupations, client factors, performance skills, performance patterns, contexts and environments on health promotion and satisfying occupational performance and participation.
- Utilize culturally appropriate, client-centered, occupation-focused, and evidence-informed principles to design and implement occupational therapy practice using remedial, adaptive, compensatory, consultative, and educational approaches in a variety of professional settings across the lifespan.
- Collaborate with interprofessional teams to support individuals, communities and populations access and optimally participate in occupations that give life meaning and improve health and wellbeing.
- Access, appraise and interpret research to guide decision making.
- Produce and disseminate guided, individualized, scholarly projects that advance occupational therapy practice and meet the needs of individuals, communities, and populations in the Hampton Roads region and beyond.
- Identify, design, and engage in initiatives that meet society's occupational needs within existing organizations and through new, entrepreneurial services and programs to move the profession of occupational therapy forward as an integral discipline in healthcare, human services, and education.
- Apply principles of leadership and advocacy to improve service access and delivery in complex systems and organizations, influence policy and regulation, and manage personnel and programs.
- Demonstrate responsibility for life-long learning and the development and translation of best available evidence for practice, policy, and research.

Relation to Existing Program

The proposed program is not similar or related to any existing degree program at ODU.

Part II: Justification of the Proposed Program

Response to Current Needs (Specific Demand)

Occupational therapy is a health and wellness profession that helps individuals, communities, and populations do the things they want and need to do to participate fully in the roles and routines that bring them meaning and wellness in their lives through the therapeutic use of daily activities and occupations.³⁹ Occupational therapy practitioners enable people of all ages to live life to its fullest by promoting health, and preventing, restoring, and adjusting to injury, illness, or disability. Traditionally, occupational therapy graduates have acquired extensive academic preparation and technical skill required to address injury, illness, and disability in their educational programs, passed the national certification exams, and become licensed practitioners. Yet, an emerging body of literature suggests that these therapists find entry into an increasingly complex work environment challenging.^{40,41,42,43,44} Entry into the occupational therapy profession and thriving in today's healthcare market requires that students have both the technical skills to meet the needs of today, as well as critical knowledge and skills to negotiate the challenges facing the future of healthcare and clients' needs.⁴⁵

To close the gaps in theory to practice, knowledge translation, and evidence-based practice commonly reported in today's healthcare market, and to meet the healthcare needs of the Hampton Roads community and beyond, occupational therapists must have knowledge, skills, and competencies in:

- Occupational therapy theory development and application, professional reflection and clinical reasoning, and cultural awareness
- Leadership, policy analysis, and advocacy
- Practice scholarship, advanced knowledge translation, and evidence-based practice (research literacy, analysis and application of scholarly literature and research, development of evidence, and innovation in clinical practice)

³⁹ American Occupational Therapy Association. (2021). What is occupational therapy?

<https://www.aota.org/conference-events/otmonth/what-is-ot.aspx>

⁴⁰ Brockwell, D., Weilandt, T. & Clark, M. (2009). Four years after graduation: Occupational therapists' work destinations and perceptions of preparedness for practice. *Australian Journal of Rural Health*, 17, 71-76.

⁴¹ McCombie, R. & Antanavage, M. (2017). Transitioning from occupational therapy student to practicing occupational therapist: First year of employment. *Occupational Therapy in Health Care*, 31(2), 126-142.

⁴² Melman, S., Ashby, S. & James, C. (2016). Supervision in practice education and transition to practice: Student and new graduate perceptions. *Internet Journal of Allied Health Sciences and Practice*, 14(3), Article 1.

⁴³ Morley, M., Rugg, S., & Drew, J. (2007). Before Preceptorship: New Occupational Therapists' Expectations of Practice and Experience of Supervision. *The British Journal of Occupational Therapy*, 70, 243 - 253.

⁴⁴ Smith, R.A., & Pilling, S. (2007). Allied health graduate program: Supporting the transition from student to professional in an interdisciplinary program. *Journal of Interprofessional Care*, 21, 265 - 276.

⁴⁵ Barnitt, R. (2004). Learning for an unknown future. *Higher Education Research and Development*, 23, 247-261.

It is no longer enough to teach students technical skills; rather we must maximize students' capacity to be effective and lead effective and efficient teams that make up complex systems of care in our nation's healthcare markets.^{46,47}

Changes in the Professional Landscape of Occupational Therapy Practice

In response to market demand in Virginia and across the nation, the occupational therapy profession has undergone significant change from skilled technician to global health contributor and leader.⁴⁸ Today's Professional Doctor of Occupational Therapy practitioners are addressing and mitigating 1) health disparities in access, quality, and costs, 2) chronic health issues, 3) cultural differences and political priorities, 4) healthcare reimbursement and practice delivery models, and 5) client outcomes in health, wellness, and quality of life.⁴⁹

Demographic Changes

Americans are living longer and the growth in the number of older adults is unprecedented. The number of individuals living in the US aged 65 or older is expected to double over the next 40 years, reaching 80 million in 2040.⁵⁰ As the population continues to age, healthcare needs related to chronic conditions, such as cardiovascular disease, diabetes, and neurological conditions, are increasing. These chronic conditions are impacting the population in the Hampton Roads Region at rates that surpass the rest of the state as well as the nation.

- *Cardiovascular*: The rate of heart-failure hospitalization in the median Hampton Roads city/county is 39.5 cases per 10,000 population aged 18 years and older, compared to 36.7 in the median Virginia county. Throughout Hampton Roads, there are notable racial disparities in the hospitalization rate due to heart failure: In most Hampton Roads counties, the hospitalization rate for whites was less than half that of Black residents. In Norfolk, the hospitalization rate due to heart failure is roughly four- times as high for Blacks (113.1 cases per 10,000 population) as it is for whites (37.3 cases per 10,000 population).
- *Diabetes*: In the median Hampton Roads county, 10.8 percent of adults ages 20 and older had diabetes, a rate that is nearly a full percentage point higher than median US county (9.9 percent). The region's Medicare beneficiaries are particularly susceptible; 29.7 percent of the Medicare recipients in the median Hampton Roads county have diabetes, compared to 27.1 percent in the median US county.
- *Neurology*: In the median Hampton Roads county, 3.9 percent of Medicare beneficiaries are treated for stroke, compared to 3.4 percent in the median US county. Stroke rates among Medicare beneficiaries are elevated throughout the region, with 95 percent of the

⁴⁶ Fortune, T., Ryan, S., & Adamson, L. (2013). Transition to practice in supercomplex environments: are occupational therapy graduates adequately prepared? *Australian occupational therapy journal*, 60 3, 217-20 .

⁴⁷ Liddiard, K., Batten, R., Wang, Y., Long, K., Wallis, A., & Brown, C.A. (2017). Job Club: A Program to Assist Occupational Therapy Students' Transition to Practice. *Education Sciences*, 7, 70.

⁴⁸ Baptiste, S. (2020). Perspectives on occupational therapy education in Canada. In S. Taft, L. Grajo, & B. Hooper, *Perspectives on Occupational Therapy: Education: Past, Present, and Future* (pp. 159-168). NJ: SLACK Incorporated.

⁴⁹ Wamble, D., Ciarametaro, M., Houghton, K., Ajmera, M., & Dubois, R. (2019). What's been the bang for the buck? Cost-effectiveness of health care spending across selected conditions in the US. *Health affairs*, 38 1, 68-75.

⁵⁰ Program on Retirement Policy. (n.d.). The US population is aging. *Urban Institute*. <https://www.urban.org/policy-centers/cross-center-initiatives/program-retirement-policy/projects/data-warehouse/what-future-holds/us-population-aging>

population living in a county where stroke rates were in the worst 50th percentile of US counties.

Professional Doctor of Occupational Therapy practitioners address the chronic healthcare needs individuals, communities, and populations through prevention, lifestyle modification, and physical and psychosocial rehabilitation. With this population, OTDs address performance deficits in daily self-care and home management tasks, teach strategies to incorporate energy conservation and activity modification techniques into daily activities, and individualize adaptations, roles and routines to effectively perform health management tasks and support physical and psychosocial health and well-being.⁵¹ OTDs are expanding services to primary care and community programs and designing prevention programs that reduce the impacts of these chronic conditions across communities and populations. The proposed program will build student competencies in program assessment, planning, and implementation that will enable creation and expansion of community-based prevention and education services that improve health and wellness.

Health Disparities and Cultural Differences

Residents of Hampton Roads have a shorter average life expectancy (Portsmouth 73.9, Norfolk 75.4, Hampton 76.7, Newport News 76.7) than both the Virginia (79.5) and US (78.5) averages. More than two-thirds of the region's population (68.3 percent) lives in an area where health insurance coverage rates are below the US median, which suggests that rates are lower in the region's largest cities. Social determinates of health and lack of quality healthcare access impacts many across the lifespan in the Hampton Roads Region from the very youngest to the oldest. Nearly one-in-10 of babies (9.5 percent) born in the median Hampton Roads county experiences low birthweight, while 1.8 percent of babies born in the median Hampton Roads county experiences very low birthweight. In both instances these shares are higher than the US value. On average, the share of Black babies born with low birthweight is more than twice the rate for white babies throughout Hampton Roads.

Once again, OTDs are moving beyond traditional hospital and outpatient care centers where master's degree occupational therapy practitioners are traditionally found, and they are working in community centers to enhance growth and development of young children. They are strengthening parenting skills and child-family bonds.⁵² OTDs are increasing family engagement and participation in daily routines and promoting inclusive environments.⁵³ OTDs are preparing children and families for transition to and through the educational pathway towards college and career.⁵⁴ OTD are designing novel interventions to build resiliency programs for children and youth, particularly those exposed to neglect and trauma, substance abuse issues, lesbian, gay, bisexual, and transgender physical and mental health issues, and youth incarceration. The

⁵¹ American Occupational Therapy Association. (2014). The role of occupational therapy in primary care. *American Journal of Occupational Therapy*, 68, S25–S33.

⁵² Sanders, M. R., & Woolley, M. L. (2005). The relationship between maternal self-efficacy and parenting practices: Implications for parent training. *Child: Care, Health, and Development*, 31(1), 65–73.

⁵³ Hanna, K., & Rodger, S. (2002). Towards family-centred practice in paediatric occupational therapy: A review of the literature on parent–therapist collaboration. *Australian Occupational Therapy Journal*, 49(1), 14–24.

⁵⁴ Missiuna, C., Pollock, N., Law, M., Walter, S., & Cavey, N. (2006). Examination of the perceived efficacy and goal setting system (PEGS) with children with disabilities, their parents, and teachers. *American Journal of Occupational Therapy*, 60, 204–214.

proposed program will build student knowledge of the human capacity for participation and its impact on health and wellbeing. It will build student competencies to work with individuals, communities, and populations with diverse cultural experiences, develop interventions that promote health and wellbeing for diverse individuals, communities, and populations, and increase access to services that improve healthcare access and occupational participation.

Healthcare Reimbursement

Health care costs in the US during 2017 was \$3.5 trillion, or about \$11,000 per person; within ten years, these costs are expected to increase to \$6 trillion.⁵⁵ In traditional payment structures, the amount of service a patient received largely dictated the amount of payment received by the provider of those services. Often there is little accountability for the quality of services provided or for the containment of costs in these volume-based reimbursement models. Value based reimbursement systems, however, shift this paradigm, placing quality before quantity in healthcare, and brings into alignment the cost of healthcare and its outcomes on individuals and systems. Value-based reimbursement requires reliable quality measures to identify the outcomes of intervention that enable occupational therapy practitioners and their care teams to accurately project the need for future client and program support. Value-based reimbursement programs aim to incentivize organizations to provide better care for individuals and populations, while containing or lowering health care costs.⁵⁶

While the task of advocating for and demonstrating the value of occupational therapy services to administrators and third-party value-based payers may seem daunting placing client access to quality healthcare at risk, Professional Doctor of Occupational Therapy practitioners are prepared to assist with the work that promotes value-based outcomes for clients and programs.^{57,58} OTDs are developing quality and value-based client and program assessments that lead to the development of holistic and individualized client-centered care and improve health outcomes and quality of life.⁵⁹ OTDs are to collaboratively developing occupation-based interventions which underlie the central tenet of value focused and client-centered care.⁶⁰ OTDs translate and implement evidence-based interventions that focus on the needs of individuals with a variety of health issues including chronic health conditions. They implement evidence-based

⁵⁵ Centers for Medicare and Medicaid Services (CMS). (2017). National Health Expenditures 2017 Highlights. <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/Downloads/highlights.pdf>

⁵⁶ Centers for Medicare and Medicaid Services (CMS). (2019c). What are value based programs? <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Value-Based-Programs>

⁵⁷ Lamb, A., McCarley, S. (2019). Practitioners as change agents in PDPM: Maximizing health, well-being and quality of life. <https://www.aota.org/Conference-Events/member-appreciation/webinar-library/Documentation-Coding.aspx>

⁵⁸ Mroz, T. M., Pitonyak, J. S., Fogelberg, D., & Leland, N. E. (2015). Health Policy Perspectives - Client centeredness and health reform: Key issues for occupational therapy. *American Journal of Occupational Therapy*, 69, 6905090010.

⁵⁹ Sandhu, S., Furniss, J., Metzler, C. (2018). Using the new postacute care quality measures to demonstrate the value of occupational therapy. *American Journal of Occupational Therapy*, 72.

⁶⁰ Leland, N. E., Crum, K., Phipps, S., Roberts, P., & Gage, B. (2015). Health Policy Perspectives—Advancing the value and quality of occupational therapy in health service delivery. *American Journal of Occupational Therapy*, 69, 6901090010.

interventions for both behavioral and physical health. A holistic approach is necessary to support health and wellness outcomes by building continuity across the continuum of care. OTDs assist in designing client education programs, care coordination, and high-quality community discharge plans that result in reduced hospital readmissions.⁶¹ The proposed program will graduate students that are highly skilled in measurement, data use, and data-based decision making in intervention planning and implementation and have competencies in interdisciplinary collaboration and program evaluation, planning, and management.

Client Outcomes

The goal of occupational therapy is to enable clients to engage in meaningful and purposeful activity that will empower them to achieve health, wellness, and participation in their daily lives. Occupational therapy has been shown to contribute significantly to the recovery process and the achievement of positive outcomes for individuals' lives through their development of high-quality client outcome measures. Occupational therapists have access to multiple outcome measures that can contribute to the initial assessment, inform treatment planning, and measure progress towards achieving goals. OTDs are distinctly trained to bridge the boundaries between physical and behavioral health, and they are especially well positioned to ensure that multidisciplinary teams identify and address commonly overlooked barriers to individual wellness and recovery within new models of integrated health and behavioral health care.⁶² These barriers include cognitive impairments (affecting speech, memory, language, and day-to-day decision making); sensory needs (targeting sensory response patterns needed for everyday life activities); and difficulties with activities of daily living (affecting core issues such as medication adherence, wellness self-management, health promotion, and chronic disease management); and social interactions (impacting successful engagement with peers, family, and healthcare providers).

One such area in which Professional Doctor of Occupational Therapy practitioners are making an impact related to patient outcomes is in behavioral and mental health. In the median Hampton Roads county, the age-adjusted hospitalization rate due to mental health per 10,000 population under 18 years is 31.6, compared to 26.4 in the median Virginia county. Most of the Hampton Roads' population lives in a county where hospitalization rates for pediatric mental health are in the worst quartile of Virginia Counties. The heroin-related emergency department visit rate was 18.4 visits per 100,000 population in the median Hampton Roads county, compared to 8.1 visits per 100,000 population in the median Virginia county. More than 90 percent of the region's population lives in a county where the heroin-related emergency department visit rate exceeded the Virginia county median. Because of the ability of OTDs to identify factors that may make achieving recovery goals more difficult, their greatest value to this population may be to serve on treatment planning teams, and OTDs in Virginia are doing so in greater numbers because of their designation as Qualified Mental Health Professionals in the Commonwealth.⁶³ The proposed program's graduates will be highly knowledgeable of the profession's evidentiary based and

⁶¹ Gagné, D. E., & Hoppes, S. (2003). Brief Report—The effects of collaborative goal-focused occupational therapy on self-care skills: A pilot study. *American Journal of Occupational Therapy*, 57, 215–219.

⁶² Swarbrick, M. (2012). A wellness approach to mental health recovery. In A. Rudnick (Ed.), *Recovery of people with mental illness* (pp. 30–38). Oxford, United Kingdom: Oxford University Press.

⁶³ Virginia Department of Health Professions. (2021). Qualified Mental Health Professionals (QMHP) FAQs. https://www.dhp.virginia.gov/counseling/docs/QMHP_FAQ.pdf

demonstrate the research literacy skills to apply the foundations of scholarships to the development of programs to address the physical and mental health and wellness of their clients.

Staggering Shortages

The concentration of occupational therapists per capita is lower in the Tidewater region than the other highly populated regions in the state. A needs assessment conducted in January 2020 of the major healthcare providers in the Hampton Roads region revealed a critical shortage of occupational therapists.⁶⁴ Employers and providers throughout the region report a staggering 92.3% of clients served have unmet needs that fall within the scope of occupational therapy practice. Employers and providers cite limited awareness of and access to occupational therapy services, lengthy wait lists, need for flexible scheduling, staffing shortages, and unidentified and underdeveloped service opportunities as contributors. In addition, 77% and 85% of employers and providers, respectively, report current unfilled occupational therapy positions in their departments and lingering open positions citing decreased opportunity for program expansion and development, and lost revenue due to a limited workforce. Employers suggest that numerous unfilled positions have been eliminated or usurped by other professionals over the last five years and almost all respondents indicate that caseloads and workloads are expanding beyond capacity and indicated that an entry level Doctor of Occupational Therapy program in the regions is critical to meeting the acute need for high-quality graduates to serve the growing region and its vulnerable individuals, communities, and populations.

Economic Impact

The development of the proposed program will transform the population health of the Hampton Roads region. The program and its graduates improve access to innovative and high-quality health care in both traditional healthcare (hospitals, outpatient, and skilled nursing settings) and community (schools) markets but also in community-based settings, such as health education clinics, daycares and parenting centers, and mental health centers, where OTDs can measurably reach greater underserved populations, improve healthcare outcomes, and reduce healthcare disparities. The proposed program expects to not only fill the staggering workforce shortages but create innovative models that improve the health and quality of life of the region.

Employment Demand

Graduates of the proposed program will be qualified to serve the community as credentialed and licensed occupational therapists. Proposed program graduates will be able to evaluate and provide individually designed occupational therapy intervention for individuals, communities, and populations across industry sectors with a variety of occupational needs. Graduates will be able to work in settings such as healthcare (intensive and acute care, inpatient and outpatient rehabilitation, skilled nursing, and home health), community-based service delivery (clubhouse, homeless shelter, and prisons), and education (early intervention and schools). Most importantly, graduates will be able to identify and anticipate trends in healthcare, design evidence-based interventions to address the needs of individuals, communities and populations, lead care teams

⁶⁴ Sites evaluated included hospital based acute, inpatient rehabilitation and outpatient rehabilitation (Bon Secours, Sentara Healthcare, Riverside Health System), mental health (Eastern State Hospital), home and community health, pediatric and orthopedic private practice, and school and early intervention.

in support of healthy participation of all, and advocate for services and policy that support health and well being of all.

Across the national healthcare, community services, and education markets, employment of occupational therapists is projected to increase 18% from 2018 to 2028 according to the United States Bureau of Labor Statistics. In the Commonwealth of Virginia, healthcare and social assistance careers are among those projected to experience the largest growth in the coming decade, and, between 2017 and 2026, occupational therapy employment opportunities are expected to increase by 26%. The concentration of occupational therapists per capita is lower in the Hampton Roads region than the other highly populated region in the state (Northern Virginia and Capitol regions) ensuring employment opportunities for Old Dominion University occupational therapy graduates. These data are summarized in the chart below.

Labor Market Information: Bureau of Labor Statistics, 2018 - 2028 (10-Yr)⁶⁵

Occupation Title	Base Year Employment	Projected Employment	Total % Change and #'s	Typical Entry Level Education
Occupational Therapy	133,000	156,800	18% 23,000	MS and OTD

Labor Market Information: Virginia Employment Commission, 2016 - 2026 (10-Yr)⁶⁶

Occupation Title	Base Year Employment	Projected Employment	Total % change and #'s	Annual Change	Education
Occupational Therapy	3067	3866	799 26.05%	80	MS and OTD

Wages for occupational therapy practitioners in Virginia are among the highest in the country and opportunities across healthcare and educational markets abound in the region. A scan of positions currently listed on indeed, a popular job listings site on the internet, revealed over 80 open positions within twenty-five miles of Norfolk (two for every student expected to matriculate in the first year of the program's opening).

Examples of position announcements can be found in Appendix G and letters of support are included in Appendix H.

⁶⁵ US Bureau of Labor Statistics. (2019, September 4). US Department of Labor, Occupational Outlook Handbook, Occupational Therapists. <https://www.bls.gov/ooh/healthcare/occupational-therapists.htm>

⁶⁶ Virginia Employment Commission. (2017). Virginia's Career and Workforce-Labor Market Information. <https://virginiaworks.com/occupational-projections?page79862=1&size79862=12&page80257=1&size80257=12&page81630=1&size81630=12&sort79862=Occupation&sortdir79862=asc&search79862=occupational%20therapist>

Duplication

ODU will be the first institution to offer the full complement of rehabilitation professionals training together to support clients’ needs in the Commonwealth. One public institution in the Commonwealth offers a related degree program: Virginia Commonwealth University.

Description of Comparable Degree Programs

Institution Name	Program Degree Designation and Name/Title	Focus/Purpose	Core and Required Coursework	Sub Areas, Location or Deliver format
Virginia Commonwealth University	Occupational Therapy Doctor of Occupational Therapy (OTD) 51.2306	To prepare graduates to use evidence-based practice, be consumers and assistants in research, and contribute to program development in traditional and emerging areas of practice.	Coursework in occupational therapy theory and practice	Subareas - none offered Location – Richmond, Virginia Deliver format – face-to-face

Enrollment and Degrees Awarded at Comparable Programs in Virginia

Enrollment	Fall 2016	Fall 2017	Fall 2018	Fall 2019	Fall 2020
Virginia Commonwealth University	41-1 cohort	83 – 2 cohorts	126 – 3 cohorts	132 – 3 cohorts	131 – 3 cohorts
Degrees Awarded	Year 2019	Year 2020	Year 2021		
Virginia Commonwealth University	41	42	44		

Virginia Commonwealth University

Description: The VCU entry level OTD program is focused on preparing graduates to provide direct service in all occupational therapy practice settings. The OTD degree prepares graduates to employ evidence-based practice, be consumers and assistants in research, and contribute to program development in traditional and emerging areas of practice. Along with clinical practice it is anticipated that graduates will have greater opportunity for administrative and supervisory positions and may be qualified for academic positions in occupational therapy programs or occupational therapy assistant programs.

Similarities: The ODU proposed entry level OTD program and the VCU entry level OTD programs are similar in a number of ways that include:

- The same number of didactic and clinical semesters (9 semester course sequence)

- The same number of credit hours (105)
- Culmination in 24 weeks of fulltime clinical fieldwork and 14 weeks of fulltime capstone experience and project (ACOTE requirements)
- Similar course content that is driven by ACOTE standards

Differences: On the other hand, the ODU proposed entry level and OTD program and the VCU entry level OTD programs differ significantly in the following ways:

- The ODU program is committed to address the lack of racial and ethnic diversity in the field of occupational therapy and specifically in the Hampton Roads region by specifically promoting healthcare education among underserved and diverse populations in the region and recruiting and graduating students representing diverse backgrounds (e.g., will not require the GRE, observation hours, and letter of reference from an occupational therapist – factors which can be barriers to some individuals from diverse backgrounds; will award additional points for diversity factors identified in personal essay).⁶⁷
- The ODU proposed program content is centered on its core construct of occupation and even from the first course, students will engage in learning that is integrally connected to occupation and the application of dimensions of occupation as a central attribute to health and wellness.
- The ODU proposed program has embedded service-learning activities across the entire curriculum linking learning experiences with community needs and providing faculty led services to individuals, communities, and populations in need in the region.
- The ODU fieldwork program (2 12-week rotations in full-time clinical practice) is designed to not only provide students the opportunity to practice under the supervision of an occupational therapy practitioner but to advance the practice capabilities of the site’s practitioners through faculty collaboration. Using an innovative model of reciprocal capacity building, collaborative partnerships will facilitate research literacy and knowledge translation competencies of practicing occupational therapists and their teams and implementation of best available evidence in clinical practice.^{68, 69, 70} The reciprocity in capacity building through equity partnerships in fieldwork will advance the capacity of occupational therapy professionals to serve as change agents and usher in the value outcomes of evidence-based, client-centered, and cost-effective service delivery.
- The School of Rehabilitation Sciences at ODU has an embedded therapy clinic in which students will train along side academic and clinical faculty provided client services.

⁶⁷ American Occupational Therapy Association (AOTA). (2020). Academic Programs Annual Data Report: Academic Year 2018-2019. <https://www.aota.org/-/media/Corporate/Files/EducationCareers/Accredit/Annual-Data-Report-2018-2019.pdf>

⁶⁸ Drobac, P. & Morse, M. (2016). Medical education and global health equity. *AMA Journal of Ethics*, 18(7), 702-709. <https://doi.org/10.1001/journalofethics.2016.18.7.medu1-1607>.

⁶⁹ Monroe-Wise, A., Kibore, M., Kiarie, J., Nduati, R., Mburu, J., Drake, F.T., Bremner, W., Holmes, K., & Farquhar, C. (2014). The clinical education partnership initiative: An innovative approach to global health education. *BMC Medical Education*, 14(1043). <https://doi.org/10.1186/s12909-014-0246-5>

⁷⁰ Rabin, T., Mayanja-Kizza, S., & Rastegar, A., (2016). Medical education capacity-building partnerships for health care systems development. *AMA Journal of Ethics*, 18(7), 710-717. <https://doi.org/10.1001/journalofethics.2016.18.7.medu2-1607>.

- The ODU program is collaborating with Tidewater Community College (TCC) to establish an institutional articulation agreement as well as a bridge process to support the transition of students from the Occupational Therapy Assistant (OTA) Program to a program of study at ODU and admission to the OTD program. The bridge process will be the first of its kind in the state that supports the transition of Community College OTA students to a professional occupational therapy program.
- The ODU program will offer a transition track for students interested in enrolling in the Ph.D. programs in Kinesiology and Rehabilitation or Health Service Research. This track will promote advanced research competencies for occupational therapy scholars and prepare occupational therapy faculty, roles that are in critically short supply in the state and nation.⁷¹

ODU's proposed program is the only such program in the Hampton Roads region. The proposed program fulfills a critical need for occupational therapy professionals in the Hampton Roads region and for leadership and healthcare innovation across the Commonwealth.

Student Demand

Pre-professional healthcare programs, clubs and groups exist at ODU, Christopher Newport University, and Hampton University. The trends in enrollment of Doctor of Occupational Therapy students have increased steadily over the last decade. In 2017 there were 3,862 applications for 762 admission slots across the country; in 2018 there were 5,660 for 1,128 admission slots; and in 2019 there were 7,028 for 1,550 admission slots.⁷² This represents an increase of 52% more applications for OTD program admission slots in three years. In the same period, programs report a 20% decline in applications to master's degree program. OTD programs across the nation report a 98% retention rate of admitted students.

Several programs at the university have invited the OTD Graduate Program Director in to talk to interested undergraduate students about occupational therapy and about the developing program. Undergraduate students in health science, psychology, exercise science, and therapeutic recreation have expressed interest in the program and its requirements. We are developing an articulation agreement for students in the ODU therapeutic recreation program that are interested in a professional degree in occupational therapy.

Additional evidence of student demand is drawn from inquiries from prospective students. Since January of 2020, despite no public announcement or advertisement of the program, 27 students have made inquiry about the program and its plan for development and expressed interest in applying to ODU's first cohort once the program is established. All students who inquired about the program are working toward the completion of program prerequisites and requirements. A sampling of email inquiries from prospective students are provided in Appendix I.

⁷¹ American Occupational Therapy Association (AOTA). (2020). Academic Programs Annual Data Report: Academic Year 2018-2019. <https://www.aota.org/-/media/Corporate/Files/EducationCareers/Accredit/Annual-Data-Report-2018-2019.pdf>

⁷² American Occupational Therapy Association (AOTA). (2018). Academic Programs Annual Data Report. https://www.aota.org/~/_media/Corporate/Files/EducationCareers/Educators/2017-2018-Annual-Data-Report.pdf

Student Survey Results

These data are currently being gathered and will be added to the report when analysis is completed.

Part III: Summary of Projected Student Enrollment
Projected Student Enrollment

Summary of Projected Enrollments in Proposed Program

Year 1		Year 2		Year 3		Year 4 Target Year (2-year institutions)			Year 5 Target Year (4-year institutions)		
2022 – 2023		2023 – 2024		2024 – 2025					2027 – 2028		
HDCT <u>0</u>	FTES <u>20</u>	HDCT <u>50</u>	FTES <u>50</u>	HDCT <u>90</u>	FTES <u>90</u>	HDCT _____	FTES _____	GRAD _____	HDCT <u>225</u>	FTES <u>225</u>	GRAD <u>90</u>

Assumptions:

1. Retention - 98%⁷³
2. Full-time students - 100%
3. Part-time students - 0%
4. Expected time to graduation – 3 Years
5. Number of credit hours per semester – 16

⁷³ American Occupational Therapy Association (AOTA). 2018. Academic Programs Annual Data Report.
<https://www.aota.org/~media/Corporate/Files/EducationCareers/Educators/2017-2018-Annual-Data-Report.pdf>

Part IV: Projected Resource Needs for the Proposed Program

Narrative Description of Resources to Initiate and Operate the Degree Program

The proposed program, situated in the College of Health Sciences, School of Rehabilitation Sciences, is a priority of the University, College and School. ODU, the College of Health Sciences, and the School of Rehabilitation Sciences have the resources need to initiate and sustain the proposed program. The program was initiated with the hiring of the Occupational Therapy Program Director in December of 2019 and an additional faculty position is expected to be filled by the fall of 2021. The proposed program will have seven full-time faculty members committed to it. Program development costs will be drawn from three distinct funding streams:

1. College of Health Sciences Building Funding:

- a. All instructional and office space for students, faculty and staff of the occupational therapy program are provided in the new College of Health Sciences building plans.
- b. Non-portable equipment such as desks, treatment tables, and appliances are addressed and included in the new building budget.
- c. Instructional audio-visual equipment is included in the new building plans.
- d. As the construction gets underway, naming rights for occupational therapy spaces will be available to commemorate patrons of the department. The funds garnered through the naming of occupational therapy spaces will be used to obtain targeted instructional materials, such as assistive and rehabilitation technologies.

2. Equipment Trust Fund:

- a. Equipment and materials required for program start up, such as assessment tools, treatment materials, and instructional programs, are being delineated in a cost cycle to be purchased in the year in which they will be introduced to the first program cohort.
- b. The ODU Occupational Therapy Advisory Committee, made up of stakeholders from all areas of occupational therapy practice in the community, has been consulted to ensure that the equipment and materials targeted represent relevant and essential materials required by both the Accreditation Council for Occupational Therapy Education and are consistently used in practice in the region.
- c. Equipment and materials not available for collaborative use in other programs in the School and College will be prioritized.
- d. As students matriculate, student fees will cover the costs of some of the required instructional equipment, materials, and supplies (assessment protocols, expendable materials [e.g., splinting materials], and standardized patients).

3. 3. Operating Budget:

- a. All supplies required to sustain the day to day operations of the program will be provided for through the annual operating budget.

Funds to Initiate and Operate the Degree Program

These figures are preliminary and have not been reviewed by finances.

Cost and Funding Sources to Initiate and Operate the Program			
Informational Category		Program Initiation Year 2022 – 2023	Program Full Enrollment Year⁷⁴ 2023 - 2024
1.	Projected Enrollment (Headcount)	30	42
2.	Projected Enrollment (FTE)	30	42
3.	Estimated Tuition and E&G Fees for Students in the Proposed Program	\$121,480	\$1,220,920
4.	Projected Revenue from Tuition and E&G Fees Due to the Proposed Program	\$121,480	\$1,220,920
5.	Other Funding Sources Dedicated to the Proposed Program (e.g., grant, business entity, private sources)	\$ 0	\$ 0

⁷⁴ For the “Full Enrollment Year” use: for associate degrees, initiation year plus 1; for baccalaureate degrees, initiation plus 3; for masters degrees, initiation plus 2; for doctoral degrees, initiation plus 3.

Appendix A – Plan of Study

Old Dominion University Doctor of Occupational Therapy Curriculum

Y 1 Summer	Y 1 Fall	Y 1 Spring	Y 2 Summer	Y 2 Fall	Y 2 Spring	Y 3 Summer	Y 3 Fall	Y 3 Spring
Foundations of Occupational Therapy Practice (2) Body Function and Structure for Occupational Performance (6)	Neuroscience of Occupation (4) Occupation, Health and Wellness across the Life span (3) Professional Reasoning and the Occupational Therapy Process (3) Professional Identity and Ethical Formation (3) Theories of Inquiry and Scholarly Literature (3)	Occupation and Functional Mobility (3) Pediatric Habilitation and Rehabilitation: Theory and Practice (6) FW I a - Peds (1) Evaluation of Occupational Performance (3) Using Evidence to Inform Practice (3)	Education and Learning in Healthcare and Health Education (2) Leadership and Advocacy in Occupational Therapy Practice (2) Health Care Policy and Program management (2) Therapeutic Relationship and Client Collaboration (2)	Adult Rehabilitation: Theory and Practice (6) Evaluation and Intervention of the Upper Extremity (3) FW I b - Adults (1) Technology and Context Adaptation (2) Interprofessional Telehealth Care (1) Critical Analysis of Occupational Therapy Practice (3)	Productive Aging and Rehabilitation: Theory and Practice (3) Mental Health Promotion and Recovery: Theory and Practice (6) FW I c – Psychosocial (1) Occupational and Activity Analysis (2) Scholarship of Practice Approaches and Design (3) Practice Scholar Seminar I (1)	FW II A (6) Community and Population Health (1) Practice Scholar Seminar II (1)	FW II B (6) Professional Development Planning (1) Practice scholar Seminar (1)	Capstone (7) Practice Scholar Symposium (2)
8	16	16	8	16	16	8	8	9

Appendix B - Course Descriptions

Summer – Year 1

*Foundations of Occupational Therapy Practice (2 credit hours)

- In this course, students examine the historical and philosophical foundations that have shaped the profession of occupational therapy. Students explore the cornerstones, domain, value and theories of occupational therapy practice and examine the therapeutic foundations of individuals as occupational beings in client centered, occupation-focused and evidence-based practice with individuals, groups and populations. Students will explore the *Occupational Therapy Practice Framework* and gain skills in articulating the value of occupation and the role of occupational therapy in promoting health and wellness.

*Body Function and Structures for Occupational Performance (6 credit hours)

- In this course, students are introduced to the structures, functions, and processes of the human body that support participation in occupation. Musculoskeletal, neurological, respiratory, cardiovascular, digestive, integumentary, endocrine, and genitourinary systems are emphasized and reinforced through analysis of occupation, occupational performance and cadaver prosection. Students will apply knowledge of human body systems to occupational performance skills and patterns.

Fall – Year 1

*Neuroscience of Occupation (4 credit hours)

- In this course, students will identify and describe the structural and functional features of nervous system and its dynamic relationship with occupation. Students will examine the structures and function of the central, autonomic and peripheral nervous systems, as well as principles of neuroplasticity, and will apply neuroscience principles to clinical conditions and assessment of human engagement and performance.

*Occupation, Health and Wellness across the Life Span (3 credit hours)

- In this course, students examine human development and occupational patterns across the lifespan and cultures that enable individuals, groups and populations to optimally participate in occupations that promote health. Students explore occupations and dimensions of occupation in the context of developmental, psychological, physical, musculoskeletal, neurological and chronic disorders and apply scientific reasoning to consider the impact of disorders on occupation. Students will analyze etiology, signs, symptoms, pathophysiology, psychopathology, and the impact of pharmacological interventions on select health conditions and occupational performance.

*Professional Reasoning and the Occupational Therapy Process (3 credit hours)

- This course is designed to provide students with an introduction to professional reasoning and inquiry to critically apply the occupational therapy process in client care. Students will build on their knowledge of the Occupational Therapy Practice Framework and use

professional reasoning to analyze clinical information and support clinical decision making.

***Professional Identity and Ethical Formation (3 credit hours)**

- In this course, students will integrate foundational concepts to promote professional identity, ethical reasoning, and lifelong competent and interprofessional practice. Students will explore the development of professionalism, core values and ethical principles, and occupational justice. Service-learning provides foundational opportunities to explore professional identity and the role of professional relationships in occupational therapy practice.

***Elements of Research I: Theories of Inquiry and Scholarly Literature (3 credit hours)**

- This course is designed to develop knowledge of the application of statistics for the healthcare professional. Material covered in this course includes an understanding of basic descriptive statistics, normality, parametric and non-parametric hypothesis testing and simple linear regression. The focus of the course is to develop a familiarity with statistical concepts and use basic statistics to help guide decision making. Students will apply skills gained in this course in the development of a critically appraised paper on a research topic.

Spring – Year 1

***Occupation and Functional Mobility (3 credit hours)**

- In this course, students examine the musculoskeletal system and its relationship to functional mobility and occupational engagement. Students will conduct biomechanical assessments and identify essential movement skills and patterns required to function effectively in occupation.

***Pediatric Habilitation and Rehabilitation: Theory and Practice (6 credit hours)**

- An overview of developmental and health conditions is provided to build understanding of the diagnosis and treatment of common physical, developmental, psychosocial and mental health disorders encountered during occupational therapy assessment and intervention of children and youth. In this course students examine selected medical, developmental, psycho-social and mental health conditions that impact children and youth with emphasis on their etiology, prognosis, medical and pharmacological management. Service delivery in hospital, outpatient, early intervention and school settings will be discussed. Students will use a variety of theoretical approaches to design evaluation and intervention for children and youth.

***Fieldwork I a – Pediatrics (1 credit hour)**

- This is the first in a series of three Fieldwork I courses that introduce students to the fieldwork experience, facilitate application of knowledge to practice, and foster students' understanding of client needs. Students will be immersed in a clinical or educational setting that serves the needs of children and youth. In this setting, students will develop an occupational profile (summary of a client's occupational history and experiences,

patterns of daily living, interests, values, needs, and relevant contexts) to understand individuals as occupational beings and discuss client-centered outcomes.

***Evaluation of Occupational Performance (3 credit hours)**

- This course provides students an introduction to evaluation processes in occupational therapy including observation, interviewing, psychometrics (tests and measurement theories, methods, scales, procedures, statistics, and test interpretation) ethics, assessment tools and assessment administration.

***Elements of Research II: Using Evidence to Inform Practice (3 credit hours)**

- This course is a continuation of the graduate's preparation to practice critical analysis skills related to scientific literature. Its emphasis is placed on knowing the components of research reports and concepts associated with judging the quality and value of research. Students will apply this knowledge to answer clinical questions of diagnosis, prognosis, and intervention and complete a critically appraised paper on a research topic.

Summer – Year 2

***Education and Learning in Healthcare and Academic Settings (2 credit hours)**

- As a core intervention in occupational therapy service delivery, the teaching-learning process is studied and practiced. Activity analysis and learning strategies across a variety of service delivery contexts to promote performance, engagement and behavioral change is examined. Students are exposed to teaching and learning theory and threshold concepts and signature pedagogy in occupational therapy academic and fieldwork education.

***Leadership and Advocacy (2 credit hours)**

- The approaches to leadership in traditional and emerging practice settings is emphasized in the context of professional development and behaviors, strategic planning and visioning, mentoring and professional responsibilities across the roles of practice scholar, fieldwork educator, entrepreneur, faculty, consultant, advocate and servant leader. Change management and change leadership within interprofessional teams, healthcare, educational and business systems, and policy arenas will be emphasized. Students will examine their own leadership competencies and self-efficacy and establish a leadership development plan.

***Health Care Policy and Program Management (2 credit hours)**

- This course provides an overview of the United States healthcare system and the laws, policies and procedures that related to the healthcare professions. Students will examine the impact of regulation and policy on occupational therapy and build an understanding and interpretation of how these laws and policies influence practice. This course reviews and identifies the factors, forces, and dynamics of the environment in which healthcare services are provided. Students will examine the interrelationships of healthcare institutions and project future impacts on occupational therapy.

*Therapeutic Relationships and Client Communication (2 credit hours)

- Therapeutic relationships and communication are essential functions of all healthcare providers. In this course, students will examine the elements of developing and maintaining therapeutic relationships, communicating effectively with clients and members of the interprofessional team, and resolving interpersonal challenges.

Fall - Year 2

*Adult Rehabilitation: Theory and Practice (6 credit hours)

- An overview of developmental and health conditions is provided to build understanding of the diagnosis and treatment of common physical, developmental, psychosocial and mental health disorders encountered during occupational therapy assessment and intervention of adults. In this course students examine selected medical, developmental, psycho-social and mental health conditions that impact adults with emphasis on their etiology, prognosis, medical and pharmacological management. Service delivery in acute care, inpatient and outpatient rehabilitation, skilled nursing and community-based settings will be discussed. Students will use a variety of theoretical approaches to design evaluation and intervention for adults.

*Evaluation and Intervention of the Upper Extremity (3 credit hours)

- Interventions with orthopedic-based upper extremity conditions to optimize functional use of the hand and arm are analyzed. Emphasis on physical agent modalities, orthotics fabrication and application, shoulder, arm and hand rehabilitation methods along with an introduction to training and utilization of prosthetics and emerging robotics is included.

*Fieldwork I b - Adults (1)

- In the second of three Fieldwork I experience students will be immersed in a clinical or community-based setting that serves the needs of adults with disabilities. In this setting, students will conduct an occupation-based assessment of a client to strengthen their interconnected and holistic (physical, psychosocial, social emotional and cognition components) understanding of individuals as occupational beings. Students will engage in discussion about occupational performance and its impact on participation and health and wellness.

Interprofessional Telehealth Care (1 credit hour)

- The purpose of this course is to challenge the student to interact with other health professionals in making patient care decisions. Students will examine the process and technologies required to provide interdisciplinary telehealth care, explore the legal, regulatory and reimbursement issues in telehealth care, and deliver healthcare via videoconferencing.

*Technology and Environmental Adaptation (2 credit hours)

- This course covers the assessment and modification of the physical environment to enhance occupational performance including computer resources, assistive technology, home modification, driving and environmental controls, and environmental accessibility

***Critical Analysis of Occupational Therapy Practice (3 credit hours)**

- In this course, students will gain an understanding of external and internal criticisms of the profession of occupational therapy. Students will examine the evidence addressing an occupational therapy practice/intervention of interest and complete a systematic review of the evidence.

Spring – Year 2

***Productive Aging and Rehabilitation: Theory and Practice (3 credit hours)**

- In this course, students examine the aging process and consider the common physical, developmental, psychosocial, and mental health disorders encountered during occupational therapy assessment and intervention of older adults. In this course students examine productive aging and health and safety of older adults. They will study cognitive conditions frequently encountered in therapy with this population. Service delivery in acute care, inpatient and outpatient rehabilitation, skilled nursing and community-based settings will be discussed. Students will use a variety of theoretical approaches to design evaluation and intervention for older adults.

***Mental Health Promotion and Recovery: Theory and Practice (6 credit hours)**

- In this course, students examine the influence of psychosocial factors on occupational engagement and performance. Selected occupational theory and psychosocial frames of reference and/or conceptual models of mental health practice will be explored and used to guide the evaluation process, the selection of assessment tools, and the design of therapeutic interventions. Use of self as a therapeutic agent and group process skills will be emphasized.

***Fieldwork I c – Psychosocial (1 credit hour)**

- In the final Fieldwork I experience students will be immersed in a setting where they will examine the psychological and social factors that influence occupational performance in natural environments. Students will establish intervention plans and implement interventions with individuals, groups, and/or populations.

***Occupation and Activity Analysis (2 credit hours)**

- In this hands-on practicum, students will engage with community partners to apply critical thinking and occupational and activity analysis to meet clients' needs. Students will demonstrate ability to grade and adapt activity to support client's occupational performance.

***Elements of Research III: Scholarship of Practice Approaches and Design (3 credit hours)**

- In this final course of the research sequence students will explore research approaches and design and participate in a mentored research project with a faculty member. Using an Engaged Scholarship lens, students will engage in research that will link theory and practice, facilitate understanding of real-world complex problems, and facilitate knowledge translation.

***Practice-Scholar Seminar I (1 credit hour)**

- In the Practice-Scholar Seminar series students will examine the formation of their identity as an occupation-based practice scholar and ethical leader. In the first course of the seminar series, students will explore challenges in service delivery systems and discuss occupational therapy's value and role in health and wellness promotion.

Summer - Year 3 Summer

*** Fieldwork II A (6 credit hours)**

- In this twelve-week full time course students are provided supervised field experiences applying the occupational therapy process with individuals, groups and/or populations with psychosocial and/or physical dysfunctions. Students will apply their knowledge and skills to address the needs of clients with a variety of occupational needs.

***Community and Population Health (1 credit hour)**

- In this course, students will examine the role of occupation in enhancing the health of populations through health promotion, health education, and prevention of illness. Key concepts of population health, social determinates of health, health promotion, and health behavior will be applied to develop community and population-based approaches for meeting the health needs of individuals, communities and populations.

***Practice-Scholar Seminar II (1 credit hour)**

- In the Practice-Scholar Seminar series students will examine the formation of their identity as an occupation-based practice scholar and ethical leader. In the second course of the seminar series, students will examine innovative approaches to service delivery and discuss their formative capstone experience and their potential role as a leader in health management and promotion.

Fall - Year 3 Fall

***Fieldwork II B (6 credit hours)**

- In this twelve-week full time course students are provided supervised field experiences applying the occupational therapy process with individuals, groups and/or populations with psychosocial and/or physical dysfunctions. Students will apply their knowledge and skills to address the needs of clients with a variety of occupational needs.

***Professional Development Planning (1 credit hour)**

- During their final Fieldwork II experience, students will examine their core knowledge, skills and professional competencies and establish a resume and professional development plan. Students will explore and develop plans for continual knowledge creation, collection and translation after graduation and will explore the value of supervision and mentorship relationships.

***Practice-Scholar Seminar III (1 credit hour)**

- In the Practice-Scholar Seminar series students will examine the formation of their identity as an occupation-based practice scholar and ethical leader. In the third and final

course of the seminar series, students will examine their capacity for advocacy for the role of occupation in achieving health and wellbeing of individuals, groups and populations. Students will reflect on their own plans for leadership and advocacy in their upcoming capstone project.

Spring - Year 3

***Doctoral Capstone (7 credit hours)**

- The doctoral capstone project is a 14 week full-time experiential course designed to develop students' skills in one or more of eight focus areas (clinical practice skills, research skills, administration, leadership, program and policy development, advocacy, education, and theory development). It is integral to acquiring deeper practice-scholar competencies reflecting the degree program's sequence and scope of content in the curriculum design and allow for development of in-depth exposure in the designated area of interest.

***Practice Scholar Symposium (2 credit hours)**

- The student will complete an individually mentored, increasingly self-directed capstone project as the culminating activity of the doctoral program. The demonstration of synthesis of in-depth exposure gained throughout the curriculum and practice-scholar apprenticeship process will reflect through a scholarly product.

Sub Areas

The proposed program is a degree program leading to an entry level professional degree, certification, and licensure in occupational therapy. There are no subareas or concentrations offered in this program.

Appendix C - Practicum Sites

ODU currently has affiliation agreements with the following organizations who have expressed interest in working our Doctor of Occupational Therapy Students:

Facility/System	Inpatient Acute and Sub Acute Care	Outpatient Adults Care/ Home Health	Skilled Nursing	Pediatric Inpatient/ Outpatient/ Education	Mental Health
Accordious Health			X		
Adlet Group		X		X	
Bon Secours Health	X	X	X	X	X
Children's Hospital of the Kings Daughter				X	X
Consulate Health Care			X		
Dominion Physical Therapy		X			
Eastern State Hospital					X
HCA Virginia Health	X	X	X	X	X
Helping Hands Therapy Services				X	
Inova Heath Care	X	X	X	X	X
Ivy Rehabilitation				X	
Medical Facilities of America			X		
Monarch PT		X		X	X
NASH UNC Health Care	X	X		X	
Naval Medical Center	X	X	X	X	X
Rehabilitation Associates				X	
Riverside Health	X	X	X	X	X
Riverside Rehabilitation	X		X		
Saber Health Care	X	X	X		
Sentara Health	X	X	X	X	X
Sheltering Arms	X	X			
UVA Health System	X	X	X	X	X
Valley Health System	X	X	X	X	X
VCU Health System	X	X	X	X	X

Virginia Health Services			X		
Wilson Workforce and Rehabilitation Center		X		X	

Additional regional organizations with whom we are working to develop affiliation opportunities:

Facility/System	Inpatient Acute and Sub Acute Care	Outpatient Adults Care/ Home Health	Skilled Nursing	Pediatric Inpatient/ Outpatient/ Education	Mental Health
Adventist Hospital System	X	X	X	X	X
Creative Health		X			
Fairfax County Public Schools				X	
Fox Rehabilitation		X	X		
Norfolk County Public Schools				X	
Prana Therapy				X	
Progressive Therapies				X	
Richmond ARC – SOAR 365				X	
Spot On Therapy Group				X	

Appendix D – Faculty Curriculum Vitae

Name: Patricia Laverdure, OTD, OTR/L, BCP, FAOTA

Current Date: January 20, 2021

Campus Address: Health Sciences Building, Room 2156, 4608 Hampton Blvd, Norfolk, VA 23529

Education

Creighton University, Doctor of Occupational Therapy, 2012

University of New Hampshire, Bachelor of Science in Occupational Therapy, 1980

Licensure

Virginia Board of Health Regulatory Professions, Licensed Occupational Therapist, Number 0119003973, January 31, 2020

National Board for Certification in Occupational Therapy, Number AA385195; March 31, 2019

American Occupational Therapy Association Board Certification in Pediatrics

Experience

- 2019 – Present Occupational Therapy, School of Rehabilitation Sciences, College of Health Sciences, Old Dominion University, Norfolk, Virginia
Assistant Professor; Program Director
- 2016 – 2019 Occupational Therapy Department, School of Allied Health Professionals
Virginia Commonwealth University, Richmond, Virginia
Assistant Professor; Director of Fieldwork
- 2004 – 2016 Physical and Occupational Therapy Services, Fairfax County Public Schools,
Fairfax, Virginia
Program Manager Physical and Occupational Therapy Services
- 2012 – 2015 Occupational Therapy Department, School of Pharmacy and Health Professions,
Creighton University, Omaha, Nebraska
Teaching Assistant
- 2012 – 2013 Division of Occupational Therapy, School of Health Professions, Shenandoah
University, Winchester, Virginia
Adjunct Faculty Member
- 1991 – 2004 Occupational Therapy Services, Merrimack, New Hampshire
Private Pediatric Practitioner, Consultant and Owner
- 1995 – 2004 Southeastern Regional Education Service Center, Inc., Bedford, New Hampshire
Consulting Pediatric Occupational Therapist
- 1989 – 1991 Valley Memorial Hospital, Livermore, California
Pediatric Occupational Therapist
- 1987 – 1988 Alexandria Hospital, Alexandria, Virginia
Assistant Director of Physical Medicine
- 1985 – 1987 Franciscan Children’s Hospital, Brighton, Massachusetts
Assistant Director of Occupational Therapy
- 1981 – 1985 Nashua Memorial Hospital, Nashua, New Hampshire
Early Intervention Program Senior Therapist

Teaching

Old Dominion University

NMED 300 – Medical Terminology (3 Credits)

PT 881 - Interprofessional Case Management and Health Promotion for Special Populations (3 Credits)

PT 882 – Seminar in Interprofessional Practice (1 Credit)

KRS 830 – Theoretical Foundations in Kinesiology and Rehabilitation (3 Credits)

KRS 887 – Structure Teaching Experiences (3 Credits)

Virginia Commonwealth University

OCCT 580 – Introduction to the Profession of Occupational Therapy (3 Credits)

OCCT 615 – Fieldwork I in Occupational Therapy (1 Credit)

OCCT 691 – Special Topics in Occupational Therapy (3 Credits)

OCCT 697 – Special Topics in Occupational Therapy Fieldwork (3 Credits)

OCCT 714 – Pediatric Evaluation and Intervention II (4 Credits)

OCCT 715 – Fieldwork I in Occupational Therapy (1 Credit)

OCCT 729 – Research (3 Credits)

OCCT 759 – Fieldwork II Seminar (2 Credits)

OCCT 760 – Fieldwork II in Occupational Therapy (9 Credits)

OCCT 761 - Fieldwork II in Occupational Therapy (9 Credits)

Shenandoah University

OT 625 - Occupational Performance and Participation: Children (4 Credits)

OT 628 – Fieldwork I in Occupational Therapy (1 Credit)

Creighton University

POTD 541 – Critical Analysis in Occupational Therapy (3 Credits)

Student Mentoring

University of North Carolina, Chapel Hill

PhD – Occupational Science – Dissertation Committee

Virginia Commonwealth University

Entry Level Doctorate – Occupational Therapy – Class Advising

Entry Level Doctorate – Occupational Therapy – Capstone Mentoring

Entry Level Masters – Occupational Therapy – Research Mentoring

Mary Baldwin University

Entry Level Doctorate – Occupational Therapy – Capstone Mentoring

Creighton University

Post Professional Doctorate – Occupational Therapy – Capstone Mentoring

New York University

Post Professional Doctorate – Occupational Therapy – Capstone Mentoring

Texas Women's University

Post Professional Doctorate – Occupational Therapy – Capstone Mentoring

Publications

Peer Reviewed Journals

- Laverdure, P. (In Press). Policy – Advocacy – Leadership: High Leverage Practices: Boosting our Influence. *Journal of Occupational Therapy, Schools, & Early Intervention*.
- Laverdure, P. & LeCompte, B. (In press). Policy – Advocacy – Leadership: Lessons Learned from COVID-19: A Leadership and Advocacy Perspective. *Journal of Occupational Therapy, Schools, & Early Intervention*.
- Laverdure, P. & Swinth, Y. (In Press). Effective School Practice: Using Indicators of Quality to Advance Practice and Improve Outcomes. *Journal of Occupational Therapy, Schools, & Early Intervention*.
- Laverdure, P., Nemecek, E., Johnson, C. & Blake, T. (2021). Development of chores to promote independent living and competitive work: A systematic review. *Journal of Occupational Therapy in Schools and Early Intervention*.
- Laverdure, P., & Beisbier, S. (2021). Occupation- and activity-based interventions to improve performance of activities of daily living, play, and leisure for children and youth ages 5 to 21: A systematic review. *American Journal of Occupational Therapy*, 75, 7501205050. <https://doi.org/10.5014/ajot.2021.039560>.
- Grajo, L. C., **Laverdure, P.**, Weaver, L. L., & Kingsley, K. (2020). Becoming critical consumers of evidence in occupational therapy for children and youth. *American Journal of Occupational Therapy*, 74, 7402170020.
- Beisber, S. & **Laverdure, P.** (2020). Occupation and activity-based interventions to improve performance of Instrumental Activities of Daily Living and Rest/Sleep for children and youth aged 5-21: A systematic review. *American Journal of Occupational Therapy*, 74(2), 7402170042.
- Laverdure, P. Book Review: Perspectives on Occupational Therapy Education: Past, Present, and Future. (2020). *Occupational Therapy in Health Care*. DOI: 10.1080/07380577.2020.1818355
- Laverdure, P. & Wilmer, B. (2018). Using an outdoor voice. *Journal of Occupational Therapy, Schools, & Early Intervention*, DOI: 10.1080/19411243.2018.1557396
- Laverdure, P., McCann, M., Mcloone, H., Moore, L., & Reed, L. (2018). Developing quality indicators for school practice. *Journal of Occupational Therapy, Schools, & Early Intervention*, 10(3), 1-13.
- Laverdure, P. (2018). Using an Outdoor Voice. *Journal of Occupational Therapy, Schools, & Early Intervention*, 11(1), 1-6.
- Laverdure, P. (2018). Some Benefit or Some Benefit. *Journal of Occupational Therapy, Schools, & Early Intervention*, 11(1), 1-6.
- Laverdure, P. (2017). Taking our seat at the advocacy table. *Journal of Occupational Therapy, Schools, & Early Intervention*, 10(2), 101-106.
- Laverdure, P. (2016). The development of expert practice in school-based occupational therapy. *Journal of Occupational Therapy Schools and Early Intervention*, 7(3-4), 225-234.
- Laverdure, P. & Rose, D. (2012). Educational relevance in school-based occupational and physical therapy. *Physical & Occupational Therapy in Pediatrics*, 32, 347-354.
- Laverdure, P. (2011). The role of occupational self-assessment in client centered practice in school based settings. *Journal of Occupational Therapy, Schools, & Early Intervention*, 4(3-4), 197-203.

Practice/Trade Publications

- Laverdure, P., Smiley, J., Stotz, N. & Varland, J. (2020, June). Student Value MVPs: Leveraging Fieldwork and Capstones to Support the Volume-to-Value Reimbursement Value Shift. *OT Practice*, 25(6), 20-23.
- Caracci, H., **Laverdure, P.**, & Reynolds, S. (2019). Optimizing creativity for innovative occupational therapy practice: Implications for value-based reimbursement. *OT Practice*, 24(12), 17-19.
- Laverdure, P., Stephenson, P., & McDonald, M. (2019). Using the occupational therapy practice framework to guide the evaluation process and make assessment choices in school practice. *OT Practice*, 24(2), CE1-8.
- Laverdure, P. (2018). Collecting participation-focused evaluation data across the school environment. *Special Interest Section Quarterly Practice Connections*, 3 (20) 5-7.
- Laverdure, P., Hebard, P., Norris, M., Roberts, K., & Smiley, J. (2018). Cultivating occupational therapists: Transitions from classroom to the clinic. *OT Practice*, 23(4), 5 – 8.
- Stephenson, P., **Laverdure, P.**, Seruya, F. M., & Cosbey, J. (2017): Not just for children: Facilitating behavior change in school-based practice. *Special Interest Section Quarterly Practice Connections*, 2(4), 2–4.
- Laverdure, P., Carter Smith, L., DuPrey, J., Lynn, J., & Swope, K. (2017). Beyond the badge: Supporting the orientation and training of new employees across practice settings. *OT Practice*, 22(17), 8–13.
- Laverdure, P., Cosbey, J., Gaylord, H. & LeCompte, B. (2017). Providing contextual and collaborative service in school contexts and environments. *OT Practice*, 22(15), CE-1–CE-8.
- Laverdure, P. (2017). Using reflection to advance professional expertise: A novice-to-expert trajectory. *OT Practice*, 22(4), 8-11.
- Laverdure, P., Seruya, F., Stephenson, P., & Cosbey, J. (2016). Paradigm transitions in pediatric practice: Tools to guide practice. *SIS Quarterly Practice Connections*, 1(2): 5-7.
- Laverdure, P., Paulsen, M., Rumery, E., & Strunk, A. (2016). Promoting inclusion for children with disabilities and their families. *OT Practice*, 21(5), 9–12.
- Laverdure, P. (2011). Using the evidence for decision making in school-based practice. *OT Practice*, 16(4), 8 – 11.

Peer Reviewed Professional Guidance Documents

- American Occupational Therapy Association. (2018). Guidelines for documentation of occupational therapy. *American Journal of Occupational Therapy*, 72(Suppl. 2), 7212410010.
- American Occupational Therapy Association. (2017). Guidelines for occupational therapy services in early intervention and schools. *American Journal of Occupational Therapy*, 71(Suppl. 2).
- Holahan, L., Burton, S., **Laverdure, P.**, & Muhlenhaupt, M. (2014). Guidance for performance evaluation of school occupational therapists. American Occupational Therapy Association, Bethesda, MD. Retrieved from <http://www.aota.org/-/media/Corporate/Files/Practice/Children/Performance-Evaluation-School-based-Therapists10-31-13.pdf>

Books and/or chapters

- Laverdure, P. & Seruya, F. (Eds.). (Under Contract). Theoretical Perspectives to Guide School Based Practice: A Conceptual and Pragmatic Model of Integrating Theory Based Decision Making in School Practice. Thorofare, NJ: Slack Incorporated.
- Laverdure, P. (Under Contract). Value Added Fieldwork. In Elizabeth D. DeJuliis & Debra Hanson, Eds., The Fieldwork Educator's Guide to Level II Fieldwork. Thorofare, NJ: SLACK Incorporated.
- Laverdure, P. (2019). Managing Organizational Change. In Karen Jacobs and Guy McCormick (Ed.). The Occupational Therapy Manager (pp. 175-184). Bethesda, MD: AOTA Press.
- Laverdure, P. & Polichino, J. (2019). Best Practices for Occupational Therapy Practitioners as Administrators. In Gloria Frolek Clark, Barbara Chandler & Joyce Rouix (Eds.). Best Practices for Occupational Therapy in Schools (pp. 61-68). Bethesda, MD: AOTA Press.
- Laverdure, P. (1989). Oral motor skills. In Martha Logigian & J. Ward, J. (Eds.). A Team Approach to Pediatric Rehabilitation (pp. 48-61). Boston, MA: Little, Brown & Co.

Grants Awarded

- Ivey, Carole (Principal Investigator) & **Laverdure, P.** (Program Coordinator; 10% Effort) (10/1/2017-9/30/2022)
U.S. Department of Education #H325K170012 – Office of Special Education and Rehabilitation Services Personnel Development Grant to Improve Services and Results for Children with Disabilities—Interdisciplinary Preparation in Special Education, Early Intervention, and Related Services for Personnel Serving Children with Disabilities who have High-Intensity Needs (\$1.1 Million over 5 years)
- Laverdure, P – (Principal Investigator)
(Each year for the past 11 years)
Virginia Department of Special Education Training Grant to improve occupational and physical therapy services to children and you in educational settings (\$4900/year)

Research Papers Presented at Professional Meetings (In the last 10 years)

Invited National Presentations

- Tinguely, E., Burns, E., Kelly, J., Laverdure, P., Patch, L., & Ray, L. (2021, January 27). The impact of COVID on related services. Presented at the Council of Administrators of Special Education and National Alliance for Medicaid in Education National Coalition Conference. Virtually Presented.
- Laverdure, P. (2020, June 29). Highlighting Strategies and Practices in Providing Related Services to Enhance the Continuity of Learning During COVID-19 for Children with Disabilities. The US Department of Education Office of Special Education Programs Webinar. Laverdure, P., Helgeson, L.A., & VanCamp, A. (2020, March 25). Strengthening Capacities through Collaborative Partnership: A Look at the Work of Fieldwork Councils [Invited Conference Session]. American Occupational Therapy Association Annual Conference and Expo, Boston, MA. (Conference Cancelled).
- Laverdure, P. Holohan, L., Hollenbeck, J. (2020, June 9). School-based Medicaid: What We're Learning about Reimbursement for Non-IEP Services [Invited Conference

- Session]. American Occupational Therapy Association's 2020 Virtual Conference Series. Ideas and Connections. Redefined.
- Laverdure, P., Smiley, J., Stoltz, N., & Varland, J., (2020, June 8). How Fieldwork Students Can Help Us Address the Challenges of Client Care During COVID – 19. American Occupational Therapy Association's 2020 Virtual Conference Series. Ideas and Connections. Redefined.
- Laverdure, P., Grinnell, M., & Mason, J. (2020, May 22). Building Community: Steps to Address the National Fieldwork Challenge. American Occupational Therapy Association Academic Leadership Council Webinar.
- Laverdure, P. (2020, May 18). A Scholarship of Practice: Advancing Knowledge Uptake and Use in Occupational Therapy Practice. American Occupational Therapy Association Academic Literacy Community of Practice Webinar.
- Laverdure, P., Lannigan, L., Simons, D., & Kraft, T. (2020, May 15). Finding Balance During Times of Crisis: The Impact of COVID 19 on Academic Fieldwork and Capstone Coordinators. American Occupational Therapy Association Academic Leadership Council Webinar.
- Laverdure, P. Holohan, L., Hollenbeck, J. (2020, March 28). School-based Medicaid: What We're Learning about Reimbursement for Non-IEP Services [Invited Conference Session]. American Occupational Therapy Association Annual Conference and Expo, Boston, MA. (Conference Cancelled).
- Laverdure, P., Mason, J., Smith, L., Stoltz, N. Toussaint, L., VanCamp, A., & Varland, J. (2019, October 16). Addressing the C Standards: Sharing Best Practice to Ensure Compliance. Paper presented at the Academic Leadership Council Meeting at the American Occupational Therapy Association Annual Conference, Las Vegas, Nevada.
- Laverdure, P. (2019, October 4). Medicaid Funding and Occupational Therapy Practice. Paper presented at the National Alliance on Medicaid in Education Conference; Albuquerque, New Mexico.
- Laverdure, P., Stoltz, N., & Varland, J. (2019, April 2). Value Based Reimbursement: Implications for Fieldwork Educators and Students. Paper presented at the Academic Leadership Council Meeting at the American Occupational Therapy Association Annual Conference, New Orleans, Louisiana.
- Laverdure, P. Helgeson, L., & Kraft, T. (2019, April 2). Expanding and Strengthening the Fieldwork and Capstone Experience. Paper presented at the Academic Leadership Council Meeting at the American Occupational Therapy Association Annual Conference, New Orleans, Louisiana.
- Laverdure, P. (2018, October 19). Association initiatives: Supporting best practices. Paper presented at the National Alliance on Medicaid in Education Conference; Baltimore, Maryland.
- Laverdure, P. & Stephenson, P. (2018, September 28). Inspiring change: Implementing inclusive, contextual and collaborative services. Paper presented at the American Occupational Therapy Association School Children and Youth Specialty Conference, Milwaukee, Wisconsin.
- Dorsey, J., Bopp, C., Cahill, S., Gronkski, M., Kearney, K., **Laverdure, P.**, Nevill, M., Synovek, C., & Herr, B. (2018, April, 20). AOTA Commission on Practice: Using AOTA's Official Documents for advancing knowledge and professional advocacy. Paper presented at the 2017 Annual American Occupational Therapy Association Conference & Expo, Salt Lake City, Utah.
- Lieberman, D., Hunter, B., Grajo, L., Candler, C., Sarafian, A., Cahil, S., Egan, B., **Laverdure, P.**, & Beisber, S. (2018, April 19). Systematic review on occupational therapy interventions for children and youth (Age 5-21 Years). Paper presented at the

2017 Annual American Occupational Therapy Association Conference & Expo, Salt Lake City, Utah.

- Laverdure, P., Cosbey, J., Seruya, F., & Stephenson, P. (2018, February 20). Webinar: Clinical reasoning and dosing in the school setting. Webinar presented online for the American Occupational Therapy Association.
- Laverdure, P. (2017, December 17). Evaluating and promoting effective school practice. Paper presented at the American Occupational Therapy Association School Specialty Conference, Orlando, Florida.
- Laverdure, P., Frolek Clark, G., & Schefkind, S. (2017, December 18). Facilitating student participation: Providing occupational therapy in everyday school routines. Paper presented at the American Occupational Therapy Association School Specialty Conference, Orlando, Florida.
- Laverdure, P. (2017, October 17). Related services Medicaid Cost Recovery: Celebrations and challenges. Panel presented at the National Alliance for Medicaid in Education Annual Conference, Fort Lauderdale, Florida.
- Laverdure, P., Bazyk, S., Grajo, L., LeCompte, B., Schefkind, S., & Schwind, D. (2017, March 30). (AOTA) Building inter-professional collaboration to improve student outcomes in school settings. Paper presented at the 2017 Annual American Occupational Therapy Association Conference & Expo, Philadelphia, Pennsylvania.
- Laverdure, P., Cosbey, J., Seryu, F., & Stephenson, P. (2017, March 31). Embracing our value in school settings through a workload framework. Paper presented at the 2017 Annual American Occupational Therapy Association Conference & Expo, Philadelphia, Pennsylvania.
- Holohan, L., **Laverdure, P.** & Polochino, J. (2016, August 25). Medicaid in schools. National virtual presentation for section on children and youth. American Occupational Therapy Association.
- Laverdure, P., Holohan, L., & Edwards, A. (2016, April 7). Medicaid in schools. Paper presented at the 2016 Annual American Occupational Therapy Association Conference & Expo, Chicago Illinois.
- Lamb, A., **Laverdure, P.**, Mikush, C.M., Piazza, R.A., Reder, R.D. & Wilhite, C.S. (2015, April 16). Centennial Vision in action: The power in occupational therapy's distinct value. Paper presented at the 2015 Annual American Occupational Therapy Association Conference & Expo, Nashville, Tennessee.

Peer-Reviewed International Presentations

- Rose, D., **Laverdure, P.**, & Palisano, R. (2012, September 15). Clinical practice points for therapists working with children with cerebral palsy in the school setting. Paper presented at the 66th Annual Meeting of the American Academy for Cerebral Palsy and Developmental Medicine, Toronto, Canada.

Peer-Reviewed National Presentations

- Laverdure, P. & Schwab, T. (2020, March 26). App Guide to Support Individualized Postsecondary Transition for Youth with Intellectual Disabilities [Peer Refereed Conference Session]. American Occupational Therapy Association Annual Conference and Expo, Boston, MA. (Conference Cancelled).
- Laverdure, P. & Seruya, F. (2020, March 26). Collaborative Decision-Making in School Practice: Blending Theory, Context & Occupation [Peer Refereed Conference Session]. American Occupational Therapy Association Annual Conference and Expo, Boston, MA. (Conference Cancelled).

- Laverdure, P. & Swaringen, K. (2020, March 28). Leveraging Involvement for Professional Evolvement: Participation in Professional Organizations to Support Learning, Practice, and Leadership [Peer Referred Conference Session]. American Occupational Therapy Association Annual Conference and Expo, Boston, MA. (Conference Cancelled).
- Laverdure, P., Stoltz, N., & Varland, J. (2019, October 19). Value Based Reimbursement: How Students Add Value to Fieldwork Sites. Paper presented at the Academic Leadership Council Meeting at the American Occupational Therapy Association Annual Conference, Las Vegas, Nevada.
- Ivey, C. & **Laverdure**, P. (2019, October 19). Building Advanced Competency in Education Through Successful Doctoral Capstones. Paper presented at the Academic Leadership Council Meeting at the American Occupational Therapy Association Annual Conference, Las Vegas, Nevada.
- Stephenson, P., Frolek Clark, G., Cosbey, J., & **Laverdure**, P. (2019, April 4). Transitioning to School-Based Practice: A Primer for Practitioners. Paper presented at the Annual American Occupational Therapy Association Conference and Expo, New Orleans, Louisiana.
- Chu, V. Gentry, T., **Laverdure**, P., & Simons, D. (2019, April 5). Understanding the Neuroscience and Treatment of Pain Across the Lifespan. Presented at the Annual American Occupational Therapy Association Conference and Expo, New Orleans, Louisiana.
- Laverdure, P., & Swinth, Y. (2019, April 6). I'm Just the OT: Talking Points to Build an Advocacy Stance in Your School District. Presented at the Annual American Occupational Therapy Association Conference and Expo, New Orleans, Louisiana.
- Laverdure, P., & Ivey, C. (2019, April 6). Considering Context: The Keystone in Evidence-Informed Decision Making in School Practice. Presented at the Annual American Occupational Therapy Association Conference and Expo, New Orleans, Louisiana.
- Frolek Clark, G., Fischbach, J., Schmidt, E., Weaver, E., Reifenberg, G., **Laverdure**, P., & Beisbier, S. (2018, September 29). Translating research into practice: Systematic review on occupational therapy for children and youth. Paper presented at the American Occupational Therapy Association School Children and Youth Specialty Conference, Milwaukee, Wisconsin.
- Laverdure, P. & Swinth, Y. (2018, April 21). Effective school practice: Using indicators of quality service to advance practice and improve outcome. Paper presented at the 2017 Annual American Occupational Therapy Association Conference & Expo, Salt Lake City, Utah.
- Laverdure, P., Cosbey, J., Seryu, F., & Stephenson, P. (2017, March 31). Embracing our value in school settings through a workload framework. Paper presented at the 2017 Annual American Occupational Therapy Association Conference & Expo, Philadelphia, Pennsylvania.
- Laverdure, P., Cosbey, J., Seruya, F., & Stephenson, P. (2018, April 20). Documenting outcomes in occupation based service delivery in school settings. Paper presented at the 2017 Annual American Occupational Therapy Association Conference & Expo, Salt Lake City, Utah.
- Laverdure, P., & Swinth, Y. (2017, March 31). Quality indicators for school occupational therapy practice. Paper presented at the 2017 Annual American Occupational Therapy Association Conference & Expo, Philadelphia, Pennsylvania.
- Laverdure, P., & Quigley, E. (2017, March 30). Building blocks for developing effective continuing education models for school practitioners. Poster presented at the 2017 Annual American Occupational Therapy Association Conference & Expo, Philadelphia, Pennsylvania.

- Laverdure, P. & Alexander, K. (2016, April 9). (AOTA) Children and youth accountability and outcomes. Paper presented at the 2016 Annual American Occupational Therapy Association Conference & Expo, Chicago Illinois.
- Swinth, Y, **Laverdure, P.**, Schoonover, J., & Alexander, K. (2016, April 8). Quality indicators for effective school based practice. Paper presented at the 2016 Annual American Occupational Therapy Association Conference & Expo, Chicago Illinois.
- Laverdure, P. & Blake, T. (2014, April 4). The development of expert practice in school-based occupational therapy. Paper presented at the 2014 American Occupational Therapy Association Annual Conference and Expo, Baltimore, MD.
- Laverdure, P. (2013, July 27). Translating evidence to practice in school settings. Paper presented at the AOTA Advanced Practice Specialty Conference on School Based Practice, Minneapolis, Minnesota.
- Laverdure, P. (2011, April). Designing client centered and occupation based evaluation in school-based practice. Paper presented at the 2011 AOTA Annual Conference and Expo, Philadelphia, PA.

Peer-Reviewed State Presentations

- Laverdure, P. & Smiley, J. (2020, October 17). How Fieldwork Students Can Help Us Address the Challenges of Client Care During the COVID - 19 Pandemic. Virginia Occupational Therapy Association Annual Conference, Virginia.
- Laverdure, P. (2020, October 4). Perspectives on Occupational Therapy Education Past, Present and Future ~ A Book Club Examination of Literature Regarding Occupational Therapy Education. Virginia Occupational Therapy Association Annual Conference, Virginia.
- Laverdure, P., Ianotti, A., & Brognano, E. (2020, March 26). Self-care during a Pandemic. Virginia Occupational Therapy Association Virtual Workshop, Virginia.
- Laverdure, P. & Pinkleton, C. (2020, March 31). Evaluating Students Remotely. Virginia Occupational Therapy Association Virtual Workshop, Virginia.
- Laverdure, P. Ianotti, A., & Beason, A. (2020, April 1). Tools for Supporting Schools, Families, and Students during COVID – 19. Virginia Occupational Therapy Association Virtual Workshop, Virginia.
- Laverdure, P. & Stephenson, P. (2020, April 5). Clinical reasoning in the Age of COVID – 19. Virginia Occupational Therapy Association Virtual Workshop, Virginia.
- Laverdure, P., Richardson, E. & Carter Smith, L., (2020, April 24). Addressing Issues of Student Placements During COVID-19. Virginia Occupational Therapy Association Virtual Workshop, Virginia.
- Laverdure, P., Richardson, E. & Carter Smith, L., (2020, May 6). Fieldwork Town Hall – Addressing the Fieldwork Crisis in Virginia. Virginia Occupational Therapy Association Virtual Workshop, Virginia.
- Laverdure, P. (2020, August 26). Keynote: Using Clinical Reasoning to Guide the Evaluation Process and Make Assessment Choices in School Practice. District of Columbia Return to School Annual Conference.
- Laverdure, P. & Smiley, J. (2019, October 12). Value Based Reimbursement Systems: How Students Add Value to Fieldwork Sites. Paper presented at the Virginia Occupational Therapy Association School System Symposium, Fairfax, Virginia.
- Laverdure, P. & Kraft, T. (2019, October 13). Expanding and Strengthening the Fieldwork and Capstone Experience Through Collaborative Partnerships. Paper presented at the Virginia Occupational Therapy Association School System Symposium, Fairfax, Virginia.

- Laverdure, P. & Stephenson, P. (2019, March 9). Plenary Address: Inspiring Change: Implementing inclusive, contextual and collaborative services. Paper presented at the Virginia Occupational Therapy Association School System Symposium, Harrisonburg, Virginia.
- Laverdure, P., & Johnson, C. (2019, March 8). Building a Leadership Community of Practice. Paper presented at the Virginia Occupational Therapy Association School System Symposium, Harrisonburg, Virginia.
- Laverdure, P., & Johnson, C. (2019, March 9). A Team Based Learning Approach to Meeting the Complex Needs of Students. Paper presented at the Virginia Occupational Therapy Association School System Symposium, Harrisonburg, Virginia.
- Laverdure, P. (2018, October 26). Using Communities of Practice to Build and Lead Inter-professional Evidence Based Practice. Paper presented at the VOTA Annual Conference, Wintergreen, Virginia.
- Laverdure, P. (2018, October 27). Effective supervision of occupational therapy Students: using leadership and reflection models to support student success. Paper presented at the VOTA Annual Conference, Wintergreen, Virginia.
- Laverdure, P. (2018, October 9). Feedback: An important tool for facilitating learning and changing practice. Paper presented at the VOTA Capital District Meeting, Richmond, Virginia.
- Laverdure, P. Johnson, C., & Rose, D. (2018, March 10). Clinical decision making across the life span for cerebral palsy. Paper presented at the Virginia Occupational Therapy Association School System Symposium, Chesterfield, Virginia.
- Laverdure, P., Rose, D., & Ireland, M. (2018, March 9). Evaluation in school practice - Interpretation and analysis. Paper presented at the Virginia Occupational Therapy Association School System Symposium, Chesterfield, Virginia.
- Laverdure, P. (2017, October 14). Effective supervision of occupational therapy students: Using leadership and reflection models to support student success. Paper presented at the Virginia Occupational Therapy Association Annual Conference, Portsmouth, Virginia.
- Laverdure, P., & Richardson, E. (2017, October 13). Innovative models in occupational therapy fieldwork education. Paper presented at the Virginia Occupational Therapy Association Annual Conference, Portsmouth, Virginia.
- Laverdure, P. (2017, March 11). Quality indicators for effective school practice. Paper presented at the 2016 Virginia Occupational Therapy Association School System Symposium, Virginia Beach, VA.
- Laverdure, P., & LeCompete, B. (2017, March 11). Overcoming barriers to providing collaborative and contextual services. Paper presented at the 2016 Virginia Occupational Therapy Association School System Symposium, Virginia Beach, VA.
- Stephenson, P. & **Laverdure, P.** (2017, March 11). Changing practice in school based settings: Strategies for nudging colleagues along the change continuum. Paper presented at the 2016 Virginia Occupational Therapy Association School System Symposium, Virginia Beach, VA.
- Johnson, C. & **Laverdure, P.** (2017, March 10). Assessment in school based practice: Physical and occupational therapy. Paper presented at the 2016 Virginia Occupational Therapy Association School System Symposium, Virginia Beach, VA.
- Laverdure, P. (2016, December 2). An evidence based approach to the evaluation process for children and youth in schools. Paper presented at District of Columbia Public School, District of Columbia.
- Laverdure, P. (2016, August 17-18). Using communities of practice to build accountability in school practice. Paper presented at Colorado School Division Training, Cherry Creek, Colorado.

- Laverdure, P. & DuPrey, J. (2015, October 18). Mentoring leaders: A compass for mentoring new practice leaders. Paper presented at the 2015 Annual Virginia Occupational Therapy Conference, Manassas, Virginia.
- Laverdure, P. & Rose, D. (2015, October 17). Using knowledge translation to lead practice change. Paper presented at the 2015 Annual Virginia Occupational Therapy Conference, Manassas, Virginia.
- Laverdure, P. (2014, November 4). Using the evidence to guide practice in educational settings. Paper presented at the 64th Conference on Exceptional Children, Greensboro, NC.
- Laverdure, P. & Stephenson, P. (2014, October 24). Practice issues in school therapy: A round table discussion. Paper presented at the 2014 Annual Virginia Occupational Therapy Conference, Roanoke, Virginia.
- Laverdure, P. (2014, April 15). Using the evidence to guide occupational and physical therapy practice in the educational setting. Keynote address at the Regional and Statewide Services for Students with Orthopedic Impairments: Therapy in Educational Settings Conference, Eugene, Oregon.
- Laverdure, P. (2014, March 15). Developing an evidence repository for school occupational and physical therapy practitioners. Paper presented at the 2014 Virginia Occupational Therapy Association School System Symposium, Norfolk, VA.
- Laverdure, P. (2013, March 9). Evaluating the performance of related service providers in Virginia. Paper presented at the 2013 Annual School System Symposium, Harrisonburg, Virginia.
- Laverdure, P. (2012, December 6). Evidence based practice in school settings. Paper presented at the District of Columbia Public Schools on behalf of the American Occupational Therapy Association, Washington, DC.
- Laverdure, P. & Blake, T. (2012, October 27). The development of expert practice in school-based occupational therapy. Paper presented at the 2012 Annual Virginia Occupational Therapy Conference, Wintergreen, Virginia.
- Laverdure, P. (2012, March). Using the core competency self-assessment to establish a professional development plan in school based practice. Paper presented at the 2012 Virginia Occupational Therapy Association School System Symposium, Richmond, VA.
- Laverdure, P. (2011, October). Developing a scholarship of practice in school-based settings. Paper presented at the 2011 Virginia Occupational Therapy Association Annual Conference, Williamsburg, VA.
- Laverdure, P. (2011, October). Building competency in school-based occupational therapy service delivery. Paper presented at the 2011 Virginia Occupational Therapy Association Annual Conference, Williamsburg, VA.
- Laverdure, P. (2010, October). Designing client centered and occupation based practice evaluation in school-based practice. Paper presented at the Virginia Occupational Therapy Association Annual Conference, Richmond, VA.
- Laverdure, P. (2009, March). And the survey said: Developing a collaborative VOTA School System Special Interest Group Leadership Plan. Paper presented at the 2009 Virginia Occupational Therapy Association School System Symposium, Alexandria, VA.

Consulting Activities

Advisory Board Member

AbleLink Technologies and Jessica Kramer, Ph.D. for the development of The Pediatric Evaluation of Disability Inventory- Patient Reported Outcome

Book/Article Reviewer

Columnist - Policy, Advocacy and Leadership, Journal of Occupational Therapy, Schools and Early Intervention
Reviewer, American Journal of Occupational Therapy
Reviewer, Journal of Occupational Therapy, Schools and Early Intervention
External Advisory Board Member and Reviewer, OT Practice

Honors, Awards, and Prizes

2020 – American Occupational Therapy Association Certified Academic Leader
2020 – Virginia Occupational Therapy Association Award of Excellence
2019 – Fellow of the American Occupational Therapy Association
2012 – American Occupational Therapy Association Board Certification in Pediatrics

Membership in Professional Societies

2019 – Present Fellow of the American Occupational Therapy Association
1980 – Present Member American Occupational Therapy Association
2004 – Present Member Virginia Occupational Therapy Association

University Service

2020 – Present Member of the College of Health Sciences Graduate Program Directors Committee

Professional Service

State

Co-Chair, Virginia Occupational Therapy Fieldwork Council (2016 – Present)
Chair, Children and Youth Conference Committee - Virginia Occupational Therapy Association (2004 – Present)
Board Member, School Liaison, Virginia Occupational Therapy Association (2004 – 2015)
Chair of the Re Imagine: Innovative Remote Learning Practices in School-Based Occupational and Physical Therapy Virtual Conference (August 31 – September 30).
Conference Sessions provided:
Asynchronous: Inspiring Change: Implementing Inclusive, Contextual and Collaborative Services
Asynchronous: Using the Quality Indicators to Guide Practice in Virtual Contexts
Asynchronous: Occupational Therapy Fieldwork Experiences in Virtual Contexts: A Population Based Approach
Asynchronous: US Department of Education Technical Assistance Network
Asynchronous: Evaluation in School Practice: Identifying Adverse Educational Impact
Asynchronous: Diagnostic and Dynamic Evaluation During COVID – 19
Asynchronous: Decreasing Bias and Increasing Confidence in Evaluation Findings
Asynchronous: Remote Audio Coaching
Synchronous: ReImagine ~ Reflecting on our Boldest Ideas
Synchronous: A ReImagined Future of School Practice ~ What's on the Horizon?

National

- Chair, AOTA Special Interest Section Council (2019 – Present)
- Chair, AOTA Children and Youth Special Interest Section (2015 – 2018)
- Chair, Chairperson AOTA ALC Academic Fieldwork and Capstone Coordinators Continuing Education Ad Hoc (2018 – Present)
- Member, AOTA Commission on Practice (2017 – 2018)
- Member, AOTA School Practice State Leaders Work Group (2009 – Present)
- Member, Annual and School-based Practice Special Conference Planning Committee (2013, 2017, 2018)
- Reviewer, AOTA Board Certification in School Based Practice (2012 – Present)
- Member, Pediatric Representative AOTA Distinct Value Work Group (2013 – 2016)
- Member, AOTA Uniform Standards for Pay for Performance in School Based Practice Ad Hoc (2012 – 2015)
- Member, Distinct Value Committee and Children and Youth Distinct Value Committee (2015 – 2017)
- Reviewer, AOTA Board Certification in School Based Practice Standards Development (2010 – 2012)

Community Engagement

- 2017 – Present - International Innovation Foundation, Inc., Newport News, Virginia
Leveraging the expertise of engineering community mentors to facilitate the development of adapted devices to meet the needs of individuals with disabilities in the Hampton Roads community.
- 2019 – Present - Housing Resource Center, Virginia Beach, Virginia
Providing educational supports in instrumental activities of daily living, work, and leisure to individuals experiencing shelter insecurity and homelessness.

Appendix E: Faculty Hiring Plan

Date (Courses/Credits)	Number of Students	Courses	Faculty	Other
Spring 2021 (3/9)		PT 881 (3) KRS 830 (3) KRS 887 (3)	1	Recruit for AFWC (HIRED)
Summer 2021			1	
Fall 2021 (3/7)		PT 882 (1) KRS 835 (3) KRS 887 (3)	2	AFWC Begins
Spring 2022 (3/9)		PT 881 (3) KRS 830 (3) KRS 887 (3)	2	Recruit for 2 Tenure Track April - Complete ACOTE Applicant Status Study
Summer 2022			2	August – Applicant Status Decision
Fall 2022 (3/7)	Cohort 1 – 20+	PT 882 (1) KRS 835 (3) KRS 887 (3)	4	2 Tenure Track Begins Accept Cohort 1 – 20+ for January
Spring 2023 (2/8) (3/9)	Cohort 1 - 20 +	Foundations of Occupational Therapy Practice (2) Body Function and Structure for Occupational Performance (6)	4	Recruit for 1 Tenure Track Cohort 1 Begins
	OTHER	PT 881 (3) KRS 830 (3) KRS 887 (3)		
Summer 2023 (7/24)	Cohort 1 - 20 +	Neuroscience of Occupation (4) Occupation, Health and Wellness across the Life span (3) Professional Reasoning and the Occupational Therapy Process (3) Professional Identity and Ethical Formation (3) Theories of Inquiry and Scholarly Literature (3)	4	Cohort 2 Begins
	Cohort 2 – 30 +	Foundations of Occupational Therapy Practice (2) Body Function and Structure for Occupational Performance (6)		

Date (Courses/Credits)	Number of Students	Courses	Faculty	Other
Fall 2023 (10/32) (2/6)	Cohort 1 - 20 +	Occupation and Functional Mobility (3) Pediatric Habilitation and Rehabilitation: Theory and Practice (6) FW I a - Peds (1) Evaluation of Occupational Performance (3) Using Evidence to Inform Practice (3)	5	1 Tenure Track Begins
	Cohort 2 – 30 +	Neuroscience of Occupation (4) Occupation, Health and Wellness across the Life span (3) Professional Reasoning and the Occupational Therapy Process (3) Professional Identity and Ethical Formation (3) Theories of Inquiry and Scholarly Literature (3)		
	OTHER	KRS 835 (3) KRS 887 (3)		
Spring 2024 (9/24) (2/6)	Cohort 1 - 20 +	Education and Learning in Healthcare and Health Education (2) Leadership and Advocacy in Occupational Therapy Practice (2) Health Care Policy and Program Management (2) Therapeutic Relationship and Client Collaboration (2)	5	Recruit for 1 Clinical Line
	Cohort 2 – 40 +	Occupation and Functional Mobility (3) Pediatric Habilitation and Rehabilitation: Theory and Practice (6) FW I a - Peds (1) Evaluation of Occupational Performance (3) Using Evidence to Inform Practice (3)		
	OTHER	KRS 830 (3) KRS 887 (3)		
Summer 2024 (12/32)	Cohort 1 - 20 +	Adult Rehabilitation: Theory and Practice (6) Evaluation and Intervention of the Upper Extremity (3) FW I b - Adults (1) Technology and Context Adaptation (2) Interprofessional Telehealth Care (1) Critical Analysis of Occupational Therapy Practice (3)	6	Cohort 3 Begins
	Cohort 2 – 30 +	Education and Learning in Healthcare and Health Education (2) Leadership and Advocacy in Occupational Therapy Practice (2)		

Date (Courses/Credits)	Number of Students	Courses	Faculty	Other
		Health Care Policy and Program Management (2) Therapeutic Relationship and Client Collaboration (2)		
	Cohort 3 – 45	Foundations of Occupational Therapy Practice (2) Body Function and Structure for Occupational Performance (6)		
Fall 2024 (17/48) (2/6)	Cohort 1 - 20 +	Productive Aging and Rehabilitation: Theory and Practice (3) Mental Health Promotion and Recovery: Theory and Practice (6) FW I c – Psychosocial (1) Occupation and Activity Analysis (2) Scholarship of Practice Approaches and Design (3) Practice Scholar Seminar I (1)	7	1 Clinical Line Begins November - Complete and submit ACOTE Accreditation Self Study. We may need adjunct instructor support this semester.
	Cohort 2 – 30 +	Adult Rehabilitation: Theory and Practice (6) Evaluation and Intervention of the Upper Extremity (3) FW I b - Adults (1) Technology and Context Adaptation (2) Interprofessional Telehealth Care (1) Critical Analysis of Occupational Therapy Practice (3)		
	Cohort 3 – 45	Neuroscience of Occupation (4) Occupation, Health and Wellness across the Life span (3) Professional Reasoning and the Occupational Therapy Process (3) Professional Identity and Ethical Formation (3) Theories of Inquiry and Scholarly Literature (3)		
	OTHER	KRS 835 (3) KRS 887 (3)		
Spring 2025 (14/40) (2/6)	Cohort 1 - 20 +	FW II A (6) Community and Population Health (1) Practice Scholar Seminar II (1)	7	April – Self Study Decision May – June – Site Visit
	Cohort 2 – 30 +	Productive Aging and Rehabilitation: Theory and Practice (3) Mental Health Promotion and Recovery: Theory and Practice (6) FW I c – Psychosocial (1) Occupation and Activity Analysis (2) Scholarship of Practice Approaches and Design (3)		

Date (Courses/Credits)	Number of Students	Courses	Faculty	Other
		Practice Scholar Seminar I (1)		
	Cohort 3 – 45	Occupation and Functional Mobility (3) Pediatric Habilitation and Rehabilitation: Theory and Practice (6) FW I a - Peds (1) Evaluation of Occupational Performance (3) Using Evidence to Inform Practice (3)		
	OTHER	KRS 835 (3) KRS 887 (3)		
Summer 2025 (12/32)	Cohort 1 - 20 +	FW II B (6) Professional Development Planning (1) Practice scholar Seminar (1)	7	Cohort 4 Begins August – Accreditation Status We may need adjunct instructor support this semester.
	Cohort 2 – 30 +	FW II A (6) Community and Population Health (1) Practice Scholar Seminar II (1)		
	Cohort 3 – 45	Education and Learning in Healthcare and Health Education (2) Leadership and Advocacy in Occupational Therapy Practice (2) Health Care Policy and Program Management (2) Therapeutic Relationship and Client Collaboration (2)		
	Cohort 4 - 45	Foundations of Occupational Therapy Practice (2) Body Function and Structure for Occupational Performance (6)		
Fall 2025 (16/50) (2/6)	Cohort 1 - 20 +	Doctoral Capstone (7) Practice Scholar Symposium (2)	7	Cohort 1 Graduates in December 2025
	Cohort 2 – 30 +	FW II B (6) Professional Development Planning (1) Practice scholar Seminar (1)		
	Cohort 3 – 45	Adult Rehabilitation: Theory and Practice (6) Evaluation and Intervention of the Upper Extremity (3) FW I b - Adults (1) Technology and Context Adaptation (2) Interprofessional Telehealth Care (1) Critical Analysis of Occupational Therapy Practice (3)		
	Cohort 4 – 45	Neuroscience of Occupation (4) Occupation, Health and Wellness across the Life span (3)		

Date (Courses/Credits)	Number of Students	Courses	Faculty	Other
		Professional Reasoning and the Occupational Therapy Process (3) Professional Identity and Ethical Formation (3) Theories of Inquiry and Scholarly Literature (3)		
	OTHER	KRS 835 (3) KRS 887 (3)		
Spring 2026 (13/41) (2/6)	Cohort 2 – 30 +	Doctoral Capstone (7) Practice Scholar Symposium (2)	7	Cohort 2 Graduates May 2026
	Cohort 3 – 45	Productive Aging and Rehabilitation: Theory and Practice (3) Mental Health Promotion and Recovery: Theory and Practice (6) FW I c – Psychosocial (1) Occupation and Activity Analysis (2) Scholarship of Practice Approaches and Design (3) Practice Scholar Seminar I (1)		
	Cohort 4 - 45	Occupation and Functional Mobility (3) Pediatric Habilitation and Rehabilitation: Theory and Practice (6) FW I a - Peds (1) Evaluation of Occupational Performance (3) Using Evidence to Inform Practice (3)		
	OTHER	KRS 835 (3) KRS 887 (3)		
Summer 2026 (9/24)	Cohort 3 – 45	FW II A (6) Community and Population Health (1) Practice Scholar Seminar II (1)	7	Cohort 5 Begins We are now in full and typical cycle
	Cohort 4 – 45	Education and Learning in Healthcare and Health Education (2) Leadership and Advocacy in Occupational Therapy Practice (2) Health Care Policy and Program Management (2) Therapeutic Relationship and Client Collaboration (2)		
	Cohort 5 - 45	Foundations of Occupational Therapy Practice (2) Body Function and Structure for Occupational Performance (6)		
Fall 2027 (14/40)	Cohort 3 – 45	FW II B (6) Professional Development Planning (1)	7	

Date (Courses/Credits)	Number of Students	Courses	Faculty	Other
(2/6)		Practice scholar Seminar (1)		
	Cohort 4 – 45	Adult Rehabilitation: Theory and Practice (6) Evaluation and Intervention of the Upper Extremity (3) FW I b - Adults (1) Technology and Context Adaptation (2) Interprofessional Telehealth Care (1) Critical Analysis of Occupational Therapy Practice (3)		
	Cohort 5 - 45	Neuroscience of Occupation (4) Occupation, Health and Wellness across the Life span (3) Professional Reasoning and the Occupational Therapy Process (3) Professional Identity and Ethical Formation (3) Theories of Inquiry and Scholarly Literature (3)		
	OTHER	KRS 835 (3) KRS 887 (3)		
Spring 2027 (13/41) (2/6)	Cohort 3 – 45	Doctoral Capstone (7) Practice Scholar Symposium (2)	7	Cohort 3 Graduates May 2027
	Cohort 4 – 45	Productive Aging and Rehabilitation: Theory and Practice (3) Mental Health Promotion and Recovery: Theory and Practice (6) FW I c – Psychosocial (1) Occupation and Activity Analysis (2) Scholarship of Practice Approaches and Design (3) Practice Scholar Seminar I (1)		
	Cohort 5 - 45	Occupation and Functional Mobility (3) Pediatric Habilitation and Rehabilitation: Theory and Practice (6) FW I a - Peds (1) Evaluation of Occupational Performance (3) Using Evidence to Inform Practice (3)		
	OTHER	KRS 835 (3) KRS 887 (3)		

Appendix F - Advisory Committee

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Email: plgaldin@sentara.com; pgaldini@gmail.com

Appendix G - Employment Demand Job Announcements

What Occupational Therapist Where Norfolk, VA Find jobs Advanced Jo

Occupational Therapists > ... > ... > Physical Health Therapy Occupations

Date Posted within 25 miles Salary Estimate Job Type Location Company Experience Level

Upload your resume - Let employers find you

Occupational Therapist jobs in Norfolk, VA

Sort by: relevance - date Page 1 of 57 Jobs

Select Rehabilitation

Occupational Therapist (OTR)
 Select Rehabilitation 2.9 ★
 Newport News, VA 23601

- Graduate of an accredited Occupational Therapist (OT) therapy program.
- Excellent verbal, written and interpersonal communication skills.

9 days ago · Save job

Be the first to see new Occupational Therapist jobs in Norfolk, VA

Email address

Activate

By creating a job alert, you agree to our Terms. You can change your consent settings at any time by unsubscribing or as detailed in our terms.

My recent searches

Occupational Therapist - Chesapeake, VA

Job Listings in indeed on March 18, 2021 lists 87 jobs within 25 miles of Norfolk, Virginia.

Included in the job listings are position for occupational therapists from the following facilities:

- Adaptive Rehab Services
- All-4-One Home Healthcare Services, Inc.
- Allied Instructional Services
- Aveanna Healthcare
- Bon Secours
- Chesapeake Regional Healthcare
- Children's Therapy Concepts
- Encompass Health
- FOX Rehabilitation
- Genesis Rehab Services
- Global Speech Services
- Hampton City Schools
- Ivy Rehab
- Kempsville Health & Rehab Center
- Legacy Health Care Services
- Medical Facilities of America, Inc.
- Norfolk Public School District
- Ortho Virginia
- Patients' Choice Home Healthcare
- Personal Touch Home Care
- Riverside Health System
- Select Rehabilitation
- Select Specialty Hospital
- Sentara Healthcare
- Serene Home Nursing Agency
- Soliant
- Southeastern Home Health Services
- Sunbelt Staffing
- US Air Force
- Virginia Beach City Public Schools
- Waterside Health and Rehab Center

Appendix H - Letters of Support

Appendix I - Student Demand Inquiries from Prospective Students

