

# ESSENTIALS OF AN ACCREDITED CURRICULUM IN OCCUPATIONAL THERAPY

Approved by the Council on Medical Education of the  
American Medical Association

in collaboration with the  
American Occupational Therapy Association

Revised to December, 1965

The Council on Medical Education of the American Medical Association and the American Occupational Therapy Association are directly concerned with the education of occupational therapists. The Council on Medical Education in collaboration with the American Occupational Therapy Association develops standards, inspects and accredits professional curricula in this field. The following standards have been established for the information of prospective students, colleges, hospitals, physicians and others, as well as for the protection of the public.

Occupational therapists are being educated in these professional curricula to treat patients at the direction of, and in collaboration with qualified physicians.

## ORGANIZATION AND ADMINISTRATION

1. An occupational therapy curriculum should be established only in a college or university accredited by its regional association of colleges and secondary schools and affiliated with an acceptable hospital, or in a medical school approved by the Council on Medical Education and having a liberal arts' college affiliation. Hospitals should not seek to establish a curriculum in occupational therapy independently.

2. Financial support of the instructional program should be available through regular university budgets, endowments, grants or gifts. Experience has shown that an adequate curriculum in occupational therapy cannot be maintained solely by the income from students' fees.

3. The Director of the Curriculum should be a registered occupational therapist whose qualifications are acceptable to the Council on Medical Education and the American Occupational Therapy Association, who has had a minimum of five years of teaching, clinical and administrative experience, and who has an academic degree. The Director of the Curriculum should have sufficient authority to maintain the established educational standards.

4. Representatives from the departments or divisions of the college and medical facility who actively participate or cooperate in the teaching of occupational therapy students should serve as an advisory committee to the director of the occupational therapy curriculum.

5. Adequate lecture rooms, class laboratories and administrative offices should be provided as well as adequate equipment for efficient and effective teaching in the various disciplines. A library of adequate space and availability, and containing current standard texts, reference materials and leading periodicals related to occupational therapy should be provided and maintained.

## FACULTY

6. The curriculum in occupational therapy should have a competent teaching staff composed of well qualified instructors holding academic rank in the college commensurate with their training and experience.

7. In addition to the Director of the Curriculum, there should be at least one registered occupational therapist on the teaching staff who has had a minimum of two years of clinical experience.

8. That portion of the curriculum devoted to clinical subjects should be formulated and conducted in collaboration with physicians who represent the major medical specialties involved in the education of the occupational therapist.

9. The supervisors of clinical experience should be members of the faculty or extra-mural faculty of the college. They should be registered occupational therapists with a minimum of two years of clinical experience.

## CURRICULUM

10. The selection of the student for admission to the curriculum and his retention therein should be a joint responsibility of the Director of the Curriculum and the appropriate administrative officials of the college. Such decisions should be based on the established requirements and regulations of the college as well as on the health, personality, and academic factors essential to successful performance by an occupational therapist.

11. Admission requirements and the course offerings in the occupational therapy curriculum should be a part of the regularly published "Bulletin" of the college.

12. The philosophy underlying the education of the occupational therapist is, and must be, liberal. A broad base of natural sciences, behavioral sciences and humanities is the strongest foundation for the specialized professional subjects and required clinical experience. Professional qualifications include the successful completion of the clinical experience portion of the curriculum.

13. The minimal required professional curriculum is stated below. It is to be interpreted as subject matter rather than specific course titles and may be taken concurrently or following the liberal education portion of the degree program. Throughout the curriculum, opportunities should be provided to strengthen the student's communication skills, his understanding of principles of administration and of scientific methodology.

- a. Biological Sciences 9 semester credits  
human anatomy and physiology with emphasis on neuroanatomy and neurophysiology; principles of human motion
- b. Behavioral Sciences 9 semester credits  
human development; personality development; group processes; interpersonal and interprofessional relationships
- c. Physical and Psychosocial Dysfunction 6 semester credits  
basic general pathology and psychopathology
- d. Occupational Therapy Skills 9 semester credits  
creative and manual skills; vocational and avocational activities; daily living skills; teaching methods
- e. Occupational Therapy Evaluation and Treatment Principles 12 semester credits
  - (1) evaluation and treatment procedures for problems of psychosocial dysfunction
  - (2) evaluation and treatment procedures for problems of physical dysfunction
- f. Clinical Experience 6 months

Under the supervision of a competent, registered occupational therapist, familiar with the academic preparation of the student, clinical experience provides a setting for the integration and application of academically acquired knowledge in the effective treatment of patients with psychosocial and physical dysfunction. The clinical experience emphasizes the progressive increase of professional responsibility.

Clinical experience of one three-month period or an equivalent amount of time must be in the area of psychosocial dysfunction which is primarily concerned with patients with specific psychiatric conditions; and one three-month period or an equivalent amount of time must be in the area of physical dysfunction which is concerned with patients with specific physical disabilities. General medical and surgical conditions may be included in either the psychosocial or the physical dysfunction experience. If these conditions are not included within the minimal six months' experience,

additional clinical experience in this area should be scheduled. Clinical experience should include treatment of patients of wide age range and of both sexes, including pediatric and geriatric patients having conditions of varied levels of chronicity.

It is the responsibility of the Director of the Curriculum to select those centers which will provide meaningful clinical experiences for the occupational therapy students. Since this is a vital part of the total curriculum, close liaison between the affiliation centers and the college should be maintained at all times.

14. Clinical demonstrations and student observation of patients are essential for effective learning experiences. To further enrich and strengthen the concepts of occupational therapy evaluation and treatment principles, in particular, a close integration of didactic and clinical teaching should be effected.

15. Upon completion of this curriculum, a student should have fulfilled the minimal requirements for a baccalaureate degree.

### ACCREDITATION

16. Application for the accreditation of a curriculum in occupational therapy should be made to the Council on Medical Education of the American Medical Association, 535 North Dearborn Street, Chicago, Illinois 60610. Forms, supplied for this purpose on request, should be completed by the Director of the Curriculum and the proper administrative officer of the university and returned to the Council on Medical Education. Information and guide lines for the development of a curriculum in occupational therapy should be obtained from the American Occupational Therapy Association, 250 West 57th Street, New York, New York 10019.

17. Accreditation may be withdrawn when in the opinion of the Council on Medical Education and the American Occupational Therapy Association a curriculum fails to maintain an educational program in accordance with the above minimal standards. Whenever a curriculum has been inoperative for a period of two consecutive academic years, accreditation may also be withdrawn.

18. The Council on Medical Education and the American Occupational Therapy Association should be notified promptly of any major changes in teaching personnel and major changes in course offerings.