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| For Academic Affairs and Research Use Only | |
| Proposal Number | NHP28 |
| CIP Code: |  |
| Degree Code: |  |

**NEW OR MODIFIED COURSE PROPOSAL FORM**

**[X] Undergraduate Curriculum Council**

**[ ] Graduate Council**

|  |
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| **[ ]New Course, [ ]Experimental Course (1-time offering), or [X]Modified Course (Check one box)** |

Signed paper copies of proposals submitted for consideration are no longer required. Please type approver name and enter date of approval.

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| Amy Hyman 3/16/2022 **Department Curriculum Committee Chair** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…  **COPE Chair (if applicable)** |
| Joseph L. Richmond 3/16/2022 **Department Chair** | Julie B. King 3/9/2022  **Head of Unit (if applicable)** |
| Shanon Brantley 3/21/2022  **College Curriculum Committee Chair** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…  **Undergraduate Curriculum Council Chair** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date… **Director of Assessment (new courses only)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…  **Graduate Curriculum Committee Chair** |
| \_\_\_\_\_\_\_Scott E. Gordon\_\_\_\_\_\_\_\_\_\_\_\_ 3/22/22 **College Dean** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…  **Vice Chancellor for Academic Affairs** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…  **General Education Committee Chair (if applicable)** |  |

1. **Contact Person (Name, Email Address, Phone Number)**

Dr. Amy Hyman, [ahyman@astate.edu](mailto:ahyman@astate.edu) 870-680-8286

1. **Proposed starting term and Bulletin year for new course or modification to take effect**

Fall 2022, Bulletin Year 2022-2023

**Instructions:**

*Please complete all sections unless otherwise noted. For course modifications, sections with a “Modification requested?” prompt need not be completed if the answer is “No.”*

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|  | **Current (Course Modifications Only)** | **Proposed (New or Modified)**  *(Indicate “N/A” if no modification)* |
| **Prefix** | **OESH** |  |
| **Number\*** | **4401** |  |
| **Title**  (include a short title that’s 30 characters or fewer) | **OESH Senior Seminar** |  |
| **Description\*\*** | Capstone course covering preparation for job searches, presentations, and certification exam preparation. Students will give formal presentations on their internship. Admission to Occupational and Environmental Safety and Health Program required. Prerequisite~~s~~, OESH 4003, ~~OESH 4013, OESH 4113, and OESH 4203~~. Fall, Spring, Summer. | Capstone course covering preparation for job searches, presentations, and certification exam preparation. Students will give formal presentations on their internship. Admission to Occupational and Environmental Safety and Health Program required. Prerequisite, OESH 4003. Fall, Spring, Summer. |

***\**** Confirm with the Registrar’s Office that number chosen has not been used before and is available for use. For variable credit courses, indicate variable range. *Proposed number for experimental course is 9*.

\*\*Forty words or fewer (excepting prerequisites and other restrictions) as it should appear in the Bulletin.

1. **Proposed prerequisites and major restrictions** **[Modification requested? Yes]**

(Indicate all prerequisites. If this course is restricted to a specific major, which major. If a student does not have the prerequisites or does not have the appropriate major, the student will not be allowed to register).

1. **YES** Are there any prerequisites?
   1. If yes, which ones?

OESH 4003 Internship

* 1. Why or why not?

This course is meant to be a capstone course in conjunction with the OESH 4003 Internship, so students will have needed to complete their internship to participate in this course.

1. **Yes** Is this course restricted to a specific major?
   1. If yes, which major? OESH majors
2. **Proposed course frequency [Modification requested? Yes]**

(e.g. Fall, Spring, Summer; if irregularly offered, please indicate, “irregular.”) *Not applicable to Graduate courses.*

Fall, Spring, Summer

1. **Proposed course type [Modification requested? No]**

Will this course be lecture only, lab only, lecture and lab, activity (e.g., physical education), dissertation/thesis, capstone, independent study, internship/practicum, seminar, special topics, or studio? Please choose one.

Enter text...

1. **Proposed grade type [Modification requested? No]**

What is the grade type (i.e. standard letter, credit/no credit, pass/fail, no grade, developmental, or other [please elaborate])

Enter text...

1. **NO** Is this course dual-listed (undergraduate/graduate)?
2. **NO** Is this course cross-listed?

*(If it is, all course entries must be identical including course descriptions. Submit appropriate documentation for requested changes. It is important to check the course description of an existing course when adding a new cross-listed course.)*

**a.** – If yes, please list the prefix and course number of the cross-listed course.

Enter text...

**b.** – **Yes / No** Can the cross-listed course be used to satisfy the prerequisite or degree requirements this course satisfies?

Enter text...

1. **NO** Is this course in support of a new program?

a. If yes, what program?

Enter text...

1. **NO** Will this course be a one-to-one equivalent to a deleted course or previous version of this course (please check with the Registrar if unsure)?

a. If yes, which course?

Enter text...

**Course Details**

1. **Proposed outline** **[Modification requested? No]**

(The course outline should be topical by weeks and should be sufficient in detail to allow for judgment of the content of the course.)

Enter text...

1. **Proposed special features** **[Modification requested? No]**

(e.g. labs, exhibits, site visitations, etc.)

Enter text...

1. **Department staffing and classroom/lab resources**

Current OESH faculty will teach this course

1. Will this require additional faculty, supplies, etc.?

**NO**

1. **NO** Does this course require course fees?

*If yes: please attach the New Program Tuition and Fees form, which is available from the UCC website.*

**Justification**

**Modification Justification (Course Modifications Only)**

1. Justification for Modification(s)

The BS degree program in OESH was originally meant to be a lock step program, but it is no longer. Students should be able to register for this course in the semester after they finish their internship. Therefore, we would like to offer the course in Spring, Fall, and Summer terms.

**New Course Justification (New Courses Only)**

1. Justification for course. Must include:

a. Academic rationale and goals for the course (skills or level of knowledge students can be expected to attain)

Enter text...

b. How does the course fit with the mission of the department? If course is mandated by an accrediting or certifying agency, include the directive.

Enter text...

c. Student population served.

Enter text...

d. Rationale for the level of the course (lower, upper, or graduate).

Enter text...

**Assessment**

**Assessment Plan Modifications (Course Modifications Only)**

1. **NO** Do the proposed modifications result in a change to the assessment plan?

*If yes, please complete the Assessment section of the proposal*

**Relationship with Current Program-Level Assessment Process (Course modifications skip this section unless the answer to #18 is “Yes”)**

1. What is/are the intended program-level learning outcome/s for students enrolled in this course? Where will this course fit into an already existing program assessment process?

Enter text...

1. Considering the indicated program-level learning outcome/s (from question #19), please fill out the following table to show how and where this course fits into the program’s continuous improvement assessment process.

*For further assistance, please see the ‘Expanded Instructions’ document available on the UCC - Forms website for guidance, or contact the Office of Assessment at 870-972-2989.*

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| **Program-Level Outcome 1 (from question #19)** | Type outcome here. What do you want students to think, know, or do when they have completed the course? |
| Assessment Measure | Please include direct and indirect assessment measure for outcome. |
| Assessment  Timetable | What semesters, and how often, is the outcome assessed? |
| Who is responsible for assessing and reporting on the results? | Who (person, position title, or internal committee) is responsible for assessing, evaluating, and analyzing results, and developing action plans? |

*(Repeat if this new course will support additional program-level outcomes)*

**Course-Level Outcomes**

1. What are the course-level outcomes for students enrolled in this course and the associated assessment measures?

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| **Outcome 1** | Type outcome here. What do you want students to think, know, or do when they have completed the course? |
| Which learning activities are responsible for this outcome? | List learning activities. |
| Assessment Measure | What will be your assessment measure for this outcome? |

*(Repeat if needed for additional outcomes)*

**Bulletin Changes**

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| **Instructions** |
| **Please visit** [**http://www.astate.edu/a/registrar/students/bulletins/index.dot**](http://www.astate.edu/a/registrar/students/bulletins/index.dot) **and select the most recent version of the bulletin. Copy and paste all bulletin pages this proposal affects below. Please include a before (with changed areas highlighted) and after of all affected sections.**  **\*Please note: Courses are often listed in multiple sections of the bulletin. To ensure that all affected sections have been located, please search the bulletin (ctrl+F) for the appropriate courses before submission of this form.** |

PAGE 575 Course Descriptions Before

**OESH 4401. OESH Senior Seminar** Capstone course covering preparation for job searches, presentation, and certification exam preparation. Students will give formal presentations on their internship. Admission to the Occupational and Environmental Safety and Health Program required. Prerequisite~~s~~, OESH 4003. ~~, OESH 4013, OESH 4113, and OESH 4203.~~ Fall, Spring, Summer.

**Occupational Therapy Assistant (OTA)**

**OTA 2013. Fundamentals of Treatment** Fundamental aspects of the occupational therapy profession including the profession’s role and scope, practice framework, reimbursement, supervision, service delivery, interdisciplinary healthcare teams, ethics, and the importance of occupation in health and wellness. Fall. Prerequisite, Admission to OTA Program. Fall.

**OTA 2023. Emergence of OT Science** Historical and theoretical foundation of the profession with emphasis on the impact of cultural, social, political, and contextual factors on occupational performance. Students also gain an understanding of evidence-based practice and emerging practice areas. Prerequisite, Admission to OTA Program. Fall.

**OTA 2033. Technology Skills Training I** Examination and student demonstration of the basic technology and skills used with clients across the lifespan in the occupational therapy evaluation and intervention process. Prerequisite, Admission to OTA Program. Fall.

**OTA 2043. From Disease to Practice** Exploration of human diseases, conditions, and disorders commonly seen by occupational therapy practitioners. Students will gain knowledge of a variety of diagnoses, the impact on occupational performance, and implications for practice. Prerequisite, Admission to OTA Program. Fall.

**OTA 2053. Adult Practice for the OTA** Analysis of the influence of environmental and per- sonal factors on occupational performance in the adult client. Provides advanced application of the occupational therapy practice framework for the adult client including evaluation, interven- tion, and outcome processes. Prerequisite, Admission to OTA Program. Spring.

**OTA 2063. Pediatrics for the OTA** Analysis of the influence of environmental and personal factors on childhood development. Provides advanced application of the occupational therapy practice framework for the pediatric client including evaluation, intervention, and out- come processes. Prerequisite, Admission to OTA Program. Spring.

**OTA 2071. Fieldwork Education I-A** Understanding occupational therapy practice through experiential learning, simulation, and/or service-learning experiences within a given client popu- lation. Corresponding seminar with emphasis on professional behaviors, growth, and develop- ment. Prerequisite, Admission to OTA Program. Fall.

**OTA 2081. Fieldwork Education I-B** Understanding occupational therapy practice through experiential learning, simulation, and/or service-learning experiences within a given client population. Corresponding seminar with emphasis on ethics, advocacy, leadership, and program development. Prerequisite, Admission to OTA Program. Spring.

**OTA 2093. Technology Skills Training II** Examination and application of intermediate to advanced technology and skills used with clients across the lifespan in the occupational therapy evaluation and intervention process. Prerequisite, Admission to OTA Program. Spring.

**OTA 2103. OTA in Behavioral Health** Explores the influence of social, political, environmen- tal, and personal factors on mental health and wellness. Provides application of the occupational therapy practice framework for the psychosocial client including evaluation, intervention, and outcome processes. Prerequisite, Admission to OTA Program. Fall.

**OTA 2115. Fieldwork Education II-A** Immersion in occupational therapy practice with hands-on experiences in client evaluation, intervention, and outcome processes. Students engage in eight weeks of instruction, supervision, and evaluation from a certified and licensed occupational therapy practitioner. Prerequisite, Admission to OTA Program. Spring.

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