Course Offering 6 Credit Hours

Prerequisites Admission to the MOT Program.

Format Lecture CGS-119
Monday & Wednesdays 5:30-8:30p.m.
(See course schedule for specific time changes)

Lab CGS-LL16
Saturdays (See course schedule for dates)

Faculty
Professor Katie Dyer, OT
kmdyer@carrollu.edu
Office Hours: By appointment

Professor Cathie Johnson, OTR
cejohnson@carrollu.edu
Office Hours: By appointment

Professor Susan Peters, OTR
sjpeters@carrollu.edu
Office Hours: By appointment

Course Description
This course will introduce neurodevelopmental, sensory integrative, visual perceptual, biomechanical, human occupation, psychosocial, and coping intervention strategies in occupational therapy for pediatric and developmentally delayed populations. Focus will be on the application of neurophysiological principles, sensorimotor learning and performance. Specific intervention strategies relating to developmental stages (infant through adolescent) will be presented with consideration of developmental disabilities. The influence of developmental and motor learning theories and approaches will also be discussed.

Course Rationale
Human occupation evolves and changes through the lifespan, however, more intensely so in the earlier stages of life, before maturity. That is why, additional knowledge regarding the particular characteristics of this developing population, as well as evidence-based treatment approaches, is necessary to enhance their rehabilitation potential.

Relationship to Curriculum Design
The driving force behind the acquisition of treatment techniques and therapeutic skills is the resumption of clients’ engagement in meaningful activities. The skill set earned through this course along with knowledge gained in previous semesters will enable students to provide
required developmental guidance, as well as restorative or compensatory intervention needed to support health of children through life participation.

<table>
<thead>
<tr>
<th>Course Goals and Student Learning Objectives</th>
<th>ACOTE Standards</th>
<th>Instructional Methods/ Learning Activities</th>
<th>Assessment Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Student Learning Objectives</strong>&lt;br&gt;<em>(At course conclusion, students are expected to:)</em></td>
<td></td>
<td>The following instructional methods/learning activities will be utilized throughout the course:</td>
<td>The following assessment methods will be utilized throughout the course:</td>
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<tr>
<td>1. Perform pediatric assessment utilizing standardized and non-standardized tools and produce a report including intervention plan as well as measurable goals based on solid assessment data analysis to ensure accountability of service provision and to meet standards for reimbursement of services;</td>
<td>B.3.3, B.4.1, B.4.2, B.4.3, B.4.4, B.4.8, B.5.32</td>
<td>• Readings&lt;br&gt;• Lecture&lt;br&gt;• Labs&lt;br&gt;• Demonstrations&lt;br&gt;• Group Interaction&lt;br&gt;• Case studies</td>
<td>• Exams&lt;br&gt;• Paper</td>
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<tr>
<td>2. Use evaluation findings based on appropriate theoretical approaches, models of practice, and frames of reference (neurodevelopmental, sensory integrative, visual perceptual, biomechanical, human occupation, psychosocial, and coping theories) to develop occupation-based intervention plans and strategies;</td>
<td>B.3.3, B.5.1</td>
<td>• Readings&lt;br&gt;• Lecture&lt;br&gt;• Labs&lt;br&gt;• Demonstrations&lt;br&gt;• Class Discussion&lt;br&gt;• Group Interaction&lt;br&gt;• Case studies</td>
<td>• Exams&lt;br&gt;• Project/Presentation&lt;br&gt;• Group</td>
</tr>
<tr>
<td>3. Select and provide direct occupation therapy interventions and procedures (neurodevelopmental, sensory integrative, visual perceptual, biomechanical, human occupation, psychosocial, and coping intervention strategies) to enhance safety, health and well-being and performance in pediatric populations;</td>
<td>B.3.3, B.5.2, B.5.3, B.5.6</td>
<td>• Readings&lt;br&gt;• Lecture&lt;br&gt;• Labs&lt;br&gt;• Demonstrations&lt;br&gt;• Class Discussion&lt;br&gt;• Group Interaction&lt;br&gt;• Role play</td>
<td>• Exams&lt;br&gt;• Paper&lt;br&gt;• Group</td>
</tr>
<tr>
<td>4. Apply feeding, eating, and swallowing intervention</td>
<td>B.5.2, B.5.3</td>
<td>• Readings&lt;br&gt;• Lecture</td>
<td>• Exams</td>
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</table>
| **strategies with pediatric population and train family and caregivers in precautions and techniques;** | B.5.5, B.5.6, B.5.14 | • Labs  
• Videos  
• Demonstrations  
• Class Discussion  
• Group Interaction |   |
|   | **5. Perform evaluation of process and environment (home, school, community) and provide modification/adaptation recommendations as well as training of children, family, and care givers to improve occupational and social engagement;** | B.2.10, B.5.5, B.5.6, B.5.9, B.5.23, B.5.24 | • Readings  
• Lecture  
• Labs  
• Class Discussion  
• Group Interaction  
• Case studies  
• Problem solving |   |
|   | **6. Demonstrate knowledge of a wide variety of pediatric positioning, mobility, and adaptive technology devices and provide recommendations and training of family and caregivers to enhance occupational performance and social participation in the home and community;** | B.5.5, B.5.6, B.5.10, B.5.12, B.5.13 | • Readings  
• Lecture  
• Labs  
• Class Discussion  
• Group Interaction  
• Case studies  
• Problem solving |   |
|   | **7. Demonstrate ability to design and fabricate and/or fit and educate pediatric clients and their family/caregivers on simple orthotics/prosthetics protocols based on movement science principles;** | B.5.11 | • Readings  
• Lecture  
• Labs/experimentation  
• Group Interaction  
• Case studies |   |
|   | **8. Explain and demonstrate understand proper utilization as well as precautions and contraindications related to the use of physical agent modalities as preparatory method with pediatric population;** | B.5.15, B.5.16 | • Readings  
• Lecture  
• Labs/demonstrations  
• Group Interaction  
• Case studies |   |
|   | **9. Understand when and how to use the consultative process with groups, programs, organizations, or communities;** | B.5.26 | • Class Discussion  
• Case studies |   |
|   | **10. Re-evaluate and document response to treatment intervention in collaboration** | B.5.28, B.5.29, B.5.32 | • Readings  
• Lecture |   |
with the family and caregivers to revise/adjust the plan of care and plan for discharge including external resources for continued progression towards outcome goals;

11. Terminate occupational therapy services and produce a discharge summary to include home program as well as recommendations regarding post-therapy needs and/or referral to other services as indicated.

ACOTE Standards Relating to Course Objectives
This course meets or partially meets the following standards of education for the Accreditation Council for Occupational Therapy Education (ACOTE). The student will:

- B.2.10 Use clinical reasoning to explain the rationale for and use of compensatory strategies when desired life tasks cannot be performed.
- B.3.3 Use theories, models of practice, and frames of reference to guide and inform evaluation and intervention.
- B.4.1 Use standardized and non-standardized screening and assessment tools to determine the need for occupational therapy intervention. These tools include, but are not limited to, specified screening tools; assessments; skilled observations; occupational histories; consultations with other professionals; and interviews with the client, family, significant others, and community.
- B.4.2 Select appropriate assessment tools on the basis of client needs, contextual factors, and psychometric properties of tests. These must be culturally relevant, based on available evidence, and incorporate use of occupation in the assessment process.
- B.4.3 Use appropriate procedures and protocols (including standardized formats) when administering assessments.
- B.4.4 Evaluate client(s)’ occupational performance in activities of daily living (ADLs), instrumental activities of daily living (IADLs), education, work, play, rest, sleep, leisure, and social participation. Evaluation of occupational performance using standardized and non-standardized assessment tools includes
  - The occupational profile, including participation in activities that are meaningful and necessary for the client to carry out roles in home, work, and community environments.
  - Client factors, including values, beliefs, spirituality, body functions (e.g., neuromuscular, sensory and pain, visual, perceptual, cognitive, mental) and body structures (e.g., cardiovascular, digestive, nervous, genitourinary, integumentary systems).
  - Performance patterns (e.g., habits, routines, rituals, roles).
  - Context (e.g., cultural, personal, temporal, virtual) and environment (e.g., physical, social).
Performance skills, including motor and praxis skills, sensory–perceptual skills, emotional 
regulation skills, cognitive skills, and communication and social skills.

B.4.8 Interpret the evaluation data in relation to accepted terminology of the profession and relevant 
theoretical frameworks.

B.5.1 Use evaluation findings based on appropriate theoretical approaches, models of practice, and 
frames of reference to develop occupation-based intervention plans and strategies (including goals 
and methods to achieve them) on the basis of the stated needs of the client as well as data gathered 
during the evaluation process in collaboration with the client and others. Intervention plans and 
strategies must be culturally relevant, reflective of current occupational therapy practice, and based 
on available evidence. Interventions address the following components:

- The occupational profile, including participation in activities that are meaningful and necessary 
for the client to carry out roles in home, work, and community environments.
- Client factors, including values, beliefs, spirituality, body functions (e.g., neuromuscular, sensory 
and pain, visual, perceptual, cognitive, mental) and body structures (e.g., cardiovascular, 
digestive, nervous, genitourinary, integumentary systems).
- Performance patterns (e.g., habits, routines, rituals, roles).
- Context (e.g., cultural, personal, temporal, virtual) and environment (e.g., physical, social).
- Performance skills, including motor and praxis skills, sensory–perceptual skills, emotional 
regulation skills, cognitive skills, and communication and social skills.

B.5.2 Select and provide direct occupational therapy interventions and procedures to enhance safety, 
health and wellness, and performance in ADLs, IADLs, education, work, play, rest, sleep, leisure, and 
social participation.

B.5.3 Provide therapeutic use of occupation, exercises, and activities (e.g., occupation-based 
intervention, purposeful activity, preparatory methods).

B.5.5 Provide training in self-care, self-management, health management and maintenance, home 
management, and community and work integration.

B.5.6 Provide development, remediation, and compensation for physical, mental, cognitive, 
perceptual, neuromuscular, behavioral skills, and sensory functions (e.g., vision, tactile, auditory, 
gustatory, olfactory, pain, temperature, pressure, vestibular, proprioception).

B.5.9 Evaluate and adapt processes or environments (e.g., home, work, school, community) applying 
ergonomic principles and principles of environmental modification.

B.5.10 Articulate principles of and be able to design, fabricate, apply, fit, and train in assistive 
technologies and devices (e.g., electronic aids to daily living, seating and positioning systems) used to 
enhance occupational performance and foster participation and well-being.

B.5.11 Provide design, fabrication, application, fitting, and training in orthotic devices used to 
enhance occupational performance and participation. Train in the use of prosthetic devices, based on 
scientific principles of kinesiology, biomechanics, and physics.

B.5.12 Provide recommendations and training in techniques to enhance functional mobility, including 
physical transfers, wheelchair management, and mobility devices.

B.5.13 Provide recommendations and training in techniques to enhance community mobility, 
including public transportation, community access, and issues related to driver rehabilitation.

B.5.14 Provide management of feeding, eating, and swallowing to enable performance (including the 
process of bringing food or fluids from the plate or cup to the mouth, the ability to keep and 
manipulate food or fluid in the mouth, and swallowing assessment and management) and train 
others in precautions and techniques while considering client and contextual factors.
• B.5.15 Demonstrate safe and effective application of superficial thermal and mechanical modalities as a preparatory measure to manage pain and improve occupational performance, including foundational knowledge, underlying principles, indications, contraindications, and precautions.
• B.5.16 Explain the use of deep thermal and electrotherapeutic modalities as a preparatory measure to improve occupational performance, including indications, contraindications, and precautions.
• B.5.23 Grade and adapt the environment, tools, materials, occupations, and interventions to reflect the changing needs of the client, the sociocultural context, and technological advances.
• B.5.24 Select and teach compensatory strategies, such as use of technology and adaptations to the environment, that support performance, participation, and well-being.
• B.5.26 Understand when and how to use the consultative process with groups, programs, organizations, or communities.
• B.5.28 Monitor and reassess, in collaboration with the client, caregiver, family, and significant others, the effect of occupational therapy intervention and the need for continued or modified intervention.
• B.5.29 Plan for discharge, in collaboration with the client, by reviewing the needs of the client, caregiver, family, and significant others; available resources; and discharge environment. This process includes, but is not limited to, identification of client’s current status within the continuum of care; identification of community, human, and fiscal resources; recommendations for environmental adaptations; and home programming to facilitate the client’s progression along the continuum toward outcome goals.
• B.5.31 Terminate occupational therapy services when stated outcomes have been achieved or it has been determined that they cannot be achieved. This process includes developing a summary of occupational therapy outcomes, appropriate recommendations, and referrals and discussion of post-discharge needs with the client and with appropriate others.
• B.5.32 Document occupational therapy services to ensure accountability of service provision and to meet standards for reimbursement of services. Documentation must effectively communicate the need and rationale for occupational therapy services and must be appropriate to the context in which the service is delivered.

**Required Texts**


Additional readings will be provided by instructors via eLearning course site. TBD.

**Grading and Course Requirements**

Grading for this course will be based on a total possible accumulation of 1000 points, with letter grades applied to a percentage of this total as follows:

<table>
<thead>
<tr>
<th>Grading Scale</th>
<th>Letter Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>93-100 %</td>
<td>A</td>
</tr>
<tr>
<td>90-92.9%</td>
<td>A/B</td>
</tr>
<tr>
<td>83-89.9%</td>
<td>B</td>
</tr>
<tr>
<td>80-82.9%</td>
<td>B/C</td>
</tr>
<tr>
<td>70-79.9%</td>
<td>C</td>
</tr>
<tr>
<td>60-69.9%</td>
<td>D</td>
</tr>
</tbody>
</table>
Progress will be evaluated through the following means

<table>
<thead>
<tr>
<th>EVALUATION</th>
<th>POINTS</th>
<th>LINKED STUDENT LEARNING OBJECTIVES</th>
<th>LINKED ACOTE STANDARDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exams (5) 125 points each</td>
<td>625</td>
<td>1-11</td>
<td>B.2.10, B.3.3, B.4.1, B.4.2, B.4.3, B.4.4, B.4.8, B.5.1, B.5.2, B.5.3, B.5.5, B.5.6, B.5.9, B.5.10, B.5.11, B.5.12, B.5.13, B.5.14, B.5.15, B.5.16, B.5.23, B.5.24, B.5.26, B.5.28, B.5.29, B.5.31, B.5.32</td>
</tr>
<tr>
<td>Mental Health Group and Presentation</td>
<td>100</td>
<td>1, 2, 9</td>
<td>B.3.3, B.4.1, B.4.2, B.4.3, B.4.4, B.4.8, B.5.1, B.5.32, B.5.26</td>
</tr>
<tr>
<td>Adolescent Social Profile Observation</td>
<td>25</td>
<td>2, 3, 5</td>
<td>B.2.10, B.3.3, B.5.1, B.5.2, B.5.3, B.5.5, B.5.6, B.5.9, B.5.23, B.5</td>
</tr>
<tr>
<td>Paper</td>
<td>75</td>
<td>1-3, 5, 9-11</td>
<td>B.2.10, B.3.3, B.4.1, B.4.2, B.4.3, B.4.4, B.4.8, B.5.1, B.5.2, B.5.3, B.5.5, B.5.9, B.5.26, B.5.28, B.5.29, B.5.31, B.5.32, B.5.6</td>
</tr>
<tr>
<td>Playground Project</td>
<td>90</td>
<td>5, 6</td>
<td>B.2.10, B.5.5, B.5.6, B.5.9, B.5.10, B.5.12, B.5.13, B.5.23, B.5.24</td>
</tr>
<tr>
<td>Splint</td>
<td>50</td>
<td>7</td>
<td>B.5.11</td>
</tr>
<tr>
<td>Peabody Assessment Presentation</td>
<td>75</td>
<td>1</td>
<td>B.3.3, B.4.1, B.4.2, B.4.3, B.4.4, B.4.8, B.5.32</td>
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<tr>
<td>Total</td>
<td>1040</td>
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</tbody>
</table>

**Think-Pair-Share:** Short learning activity performed during class consisting of initial individual thinking time to address a given problem or scenario for about 5-10 minutes, followed by an exchange of ideas and expansion of concepts with a classmate for about 10 more minutes, and finally sharing of the combined effort outcome with the rest of the class for 2-3 minutes.

**Exams (5):** These include multiple choice questions, short essay questions as well as case studies to encourage integration of concepts introduced during the course, and to strengthen the relationship between theory and practice.

**Paper:** Standards Addressed B.2.10., B.3.3., B.4.1., B.5.1., B.5.2., B.5.9., B.5.26., B.5.28., B.5.29., B.5.31, B.5.32
This will consist of a case study that includes evaluation, intervention, goals, recommendations and discharge planning. Students must demonstrate the ability to document services to insure accountability of service, clear communication with other team members, as well as meet reimbursement standards.
Splint Fabrication: Standard Addressed B.5.11
Each student will fabricate a soft splint using neoprene fabric. They will then discuss the splint's use, purpose/function, and wearing schedule in a short 5 minute presentation as if talking to a caregiver. Overall the student will be graded on the splint's appearance, fit, description of its function, and wearing schedule.

Peabody Presentations: Standards Addressed B.3.3, B.4.1, B.4.2, B.4.3, B.4.4, B.4.8, B.5.32
Students will work in small groups of 4-5 to administer the Peabody Developmental Motor Scales with a child they select. Students will video tape themselves administering the test and then score the protocol. All students in the group should be involved in administering part of the assessment. The group will present a short 20-25 minute presentation to the class of their assessment and findings for the child they chose to assess. It should include the child's strengths, weakness, emerging skills, interest areas, possible areas/activities in need of growth and carryover ideas.

Playground Project: Standards Addressed: B.4.8, B.5.2, B.5.5, B.5.9, B.5.12, B.5.23
The purpose of this project is to explore childhood occupations including activities of daily living, play, and social participation by examining playground accessibility and relating this information to potential therapeutic interventions and family home exercise programs.

Mental Health Group Presentation: Standard B.5.27.
Each student will complete two groups at Hope Street Ministries, 1 adult and one pediatric. Hope Street is located at 2522 W Capital Drive, Milwaukee. This assignment is linked with OTH665. Each group will consist of four to five students. Only two-3 students from each group will lead each group at Hope Street. All group members will contribute. The following are a list of topics with corresponding dates. Students will present on their group to the class in a presentation format.

<table>
<thead>
<tr>
<th>Date</th>
<th>Adult Group</th>
<th>Children’s Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 21, 2017</td>
<td>Safety within the home (Home Safety and Protection)</td>
<td>Jump, Sit, Stand (Gross Motor Skills)</td>
</tr>
<tr>
<td>October 5, 2017</td>
<td>The Need for Z’s (Importance of Sleep)</td>
<td>Yummy Foods (Cooking)</td>
</tr>
<tr>
<td>October 19, 2017</td>
<td>Your body is a temple (Nutrition)</td>
<td>Fun with Glitter (Craft/activity)</td>
</tr>
<tr>
<td>November 2, 2017</td>
<td>Planning Quick and Simple Meals (Meal Planning)</td>
<td>Getting Ready for the Day (Dressing &amp; Grooming Skills)</td>
</tr>
<tr>
<td>November 16, 2017</td>
<td>Be and Live Well (Health and Wellness)</td>
<td>How to regulate your body (Sensory Skills)</td>
</tr>
<tr>
<td>November 30, 2017</td>
<td>Managing Every Day Stress (Stress Management and Relaxation)</td>
<td>ABC’s (Academic Skills)</td>
</tr>
<tr>
<td>December 7, 2017</td>
<td>10 coping strategies for everyday practice (Positive coping Skills)</td>
<td>Firefighters to Princesses (Imagination Play)</td>
</tr>
</tbody>
</table>
**Participation/Attendance:** Every student’s attendance and participation is critical for the success of all students. After 1 absence (excused or unexcused) you will lose 5 points. Two late arrivals count as one absence.

**Student Writing Guidelines**
The MOT program requires that students follow APA (American Psychological Association) style for all written work. Papers submitted in a format other than APA will be returned ungraded. It is strongly recommended that students purchase the *Publication Manual of the American Psychological Association, 6th Edition.* Thus, all work submitted in written or presentation form (including references), must be APA style and format.

**Statement of the Right to Modify Course Content**
The instructor and the University reserve the right to modify, amend, or change the syllabus (course requirements, grading policy, etc.) as the curriculum and/or program require(s).

**Academic Progression and Proficiency**

Academic progression in the MOT program requires a grade of C or better in all MOT courses. A student receiving a D, F, or U on any assignment or exam in any course must remediate and be reassessed to ensure competence. It is necessary for the student to demonstrate proficiency before progressing through the course. Successful remediation results in demonstration of competence NOT a change in the initial grade.

The minimum passing score for practical examinations and skill checks is 80%. If a student does not pass the exam in the initial attempt, remediation occurs and reassessment is performed to ensure competence. The recorded grade from the initial examination remains unchanged. The maximum number of attempts varies between courses/faculty and depends on examination content and faculty judgment. Failure to meet this standard results in a failing grade in the course and an inability to progress in the program.

In addition, students may be required to complete a learning contract in collaboration with faculty and MOT advisor. The learning contract is a method through which a student identifies potential barriers to learning and creates an action plan toward successful learning and performance.

**Statement on Academic Integrity**
The Carroll University Academic Integrity Policy is located in your student handbook on the University website at [https://my.carrollu.edu/ICS/Departments/Student_Affairs/](https://my.carrollu.edu/ICS/Departments/Student_Affairs/)
Please familiarize yourself with it. If *a student is found in violation of the Carroll University Academic Integrity Policy, I reserve the right to fail the student on the assignment/exam or even FAIL the student in the course.*

Some examples of violations will be discussed on the first day of class. These will include:

1. Plagiarism
   - Must use OWN words
• If you copy more than two or three consecutive words from an author, then you are plagiarizing that author.
• A student who uses an author’s words as her/his own will receive 0 points for that assignment. A second offense will result in failure in the course.

(2) Failure to return or removal of an exam
(3) Submitting work completed by another individual
• A student who copies another student’s work and the student who allowed the other student to copy her/his work will each receive 0 points for that assignment. A second offense will result in failure in the course.

(4) Discussing quiz/exam questions with students who have not yet taken the quiz/exam.
(5) Any other forms of cheating

Core Professional Behaviors
We insist on student development of ethical and professional behaviors expected of practitioners according to standards, values, and attitudes of the occupational therapy profession. As a reminder, an expectation for MOT program graduation is the demonstration of appropriate behaviors consistent with professional standards as mentioned, as well as Carroll University and MOT Program policies.

1. PERSONAL RESPONSIBILITY
   • Student is punctual
   • Student completes assignments and tasks on time
   • Student attends all lecture and laboratory sessions

2. PERSONAL HONESTY & INTEGRITY
   • Student is honest in word and actions and is accurate in reporting all information
   • Student maintains positive learning environment
   • Student follows the University policies regarding academic integrity (i.e., cheating on exams, removal of an exam, passing exam information to peers)

3. RESPECT
   • Student gives full attention to lecturer, does not talk in class, treats others with dignity
   • Student refrains from the use of technology during class (cell phones, headphones, “surfing” the web on laptops)

4. TEACHABILITY/ADAPTABILITY
   • Student takes responsibility for own actions and understands consequences of inappropriate actions
   • Student behavior is appropriate during times of high stress

5. COMMUNICATION
   • Student properly formats emails to instructors and with respect (i.e., correct punctuation and salutations)
   • Student refrains from spreading rumors regarding instructors and course assessments
   • Student follows appropriate procedures for discussion of course issues and concerns
     ➢ 1st → Student contacts their lecture or laboratory instructor
2nd Student communicates concerns to course coordinator (should the need arise, the coordinator will direct the student to the Departmental Chair)

6. RELATIONSHIP WITH PEERS
   • Student participates in class and small group discussions
   • Student demonstrates ability to function within a group (i.e. student respects the opinions of others and can work collaboratively to solve problems).

7. PERSONAL APPEARANCE
   • Student dresses appropriately for presentations and palpation

CONSEQUENCES (SHOULD STUDENT NOT MEET EXPECTATIONS)

*At the discretion of the Instructor:
   ➢ A deduction in course points (i.e., -10 pts for cell phone use)
   ➢ Tardiness of required assignments, -5% per day late
   ➢ Removal from class
   ➢ Multiple offenses may result in a full letter grade deduction

Disability/Illness:
Any student who feels s/he may need an accommodation based on the impact of a disability should contact the instructor privately to discuss the specific needs. Please contact the Office of Services for Students with Disabilities at 262-524-7335 in the Walter Young Center to coordinate reasonable accommodations for students with documented disabilities.

If you are ill and unable to attend a class, it is your responsibility to notify faculty in a timely fashion. In order to make up an assignment you must document that illness.
Extended illness may make it impossible for you to complete the class requirements.

Courtesy:
Course faculty will treat you with respect, while expecting the same in return. You are also expected to respect your fellow students. Therefore, please do the following:

1. Turn off your cell phone, beeper, or anything else that might make noise.
2. Do not converse while the teacher or a fellow student is speaking in class.
3. You are expected to arrive on time. If, because of some problem, you are forced to come in late, do come in. However, do so quietly and do not walk in front of the instructor while s/he is lecturing. There is no excuse for chronic lateness. Those who are routinely late will be invited to withdraw from the class and have points deducted from their class participation grade. If you have an emergency, please let me know.
4. Computer use policy: If you use a computer, it must be used ONLY for taking notes UNLESS specifically given permission otherwise. If you use a computer for any other purpose, you will permanently lose computer use privileges in the classroom.