

UNIVERSITY OF HAWAI'I
CODE REQUEST FORM FOR ACADEMIC PROGRAM CODES

REQUESTOR CONTACT INFORMATION	
Date: 27 Apr 2012	Effective term of request (Semester-Year): Fall 2010
Name: Jean A. Pezzoli	Title: Institutional Researcher
Campus: UH Maui College	Office/Department: Vice Chancellor of Academic Affairs
Phone: (808) 984-3234	Email: pezzoli@hawaii.edu

1. PROGRAM CODE, MAJOR CODE, CONCENTRATION CODE		Banner forms: SMAPRLE, SOACURR, STV/MAJR	
Institution: UH Maui College (MAU)	College: Instructional	Department: HLTH	
<input checked="" type="checkbox"/> New program code <input type="checkbox"/> Change/replace existing program code: Therapeutic Activity Aide (TAA)			
Level: <input checked="" type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/> First-Professional <input type="checkbox"/> Post-Baccalaureate <input type="checkbox"/> Other:			
Degree:		Certificate: CO Certificate of Competence	
If requesting an existing Major code and/or Concentration code in Banner:			
Existing Major:		Existing Concentration:	
Code	Description	Code	Description
If requesting a new <input type="checkbox"/> Major code or <input type="checkbox"/> Concentration code that does not exist in Banner:			
New Code [4 char/space limit]:		Description [30 char/space limit]:	
If a similar major/concentration code exists in Banner, please list the code:			
Is this major/concentration code being used the same way at other UH campuses? CO Activity Aide @KapCC			
Is 50% or greater of the classes in this program offered at a location other than the Home Campus? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Please consult your Financial Aid Officer on Program Participation Agreement impact)			
Is this program/major/certificate financial aid eligible? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Financial Aid Officer consultation required for all new program codes)			
Should this program be available for applicants to select as their planned course of study on the online application? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, students may select the code as their <u>only</u> program of study.)			

UNIVERSITY OF HAWAII
CODE REQUEST FORM FOR ACADEMIC PROGRAM CODES

Replacing or eliminating an existing program code:

If replacing an existing program code, are current students "grandfathered" under the old code? Yes No

Should the old program code be available for use in Banner? Yes No

Will the old program code be available for:	Banner Module	Yes	No	Ending Term (Semester-Year)
	Online Application	<input type="checkbox"/>	<input type="checkbox"/>	_____
	Recruitment	<input type="checkbox"/>	<input type="checkbox"/>	_____
	Admissions	<input type="checkbox"/>	<input type="checkbox"/>	_____
	General Student	<input type="checkbox"/>	<input type="checkbox"/>	_____
	Academic History	<input type="checkbox"/>	<input type="checkbox"/>	_____

2. CERTIFICATES ONLY:

Does this certificate qualify as a Gainful Employment Program (Title IV-eligible certificate program)? Yes No
(Please consult your Financial Aid Officer or see: <http://www.ifap.ed.gov/GainfulEmploymentInfo/index.html>)

For new certificates approved by the Chancellor, the related BOR authorized academic program is: Nursing Career Ladder

3. NEW CAMPUS, COLLEGE, DIVISION, OR DEPARTMENT CODE

Banner forms: STVCAMP, STVCOLL, STVDIVS, STVDEPT

Campus code [3 char]:	Campus description [30 char/space limit]:
College code [2 char]:	College description [30 char/space limit]:
Division code [4 char/space limit]:	Division description [30 char/space limit]:
Department code [4 char/space limit]:	Department description [30 char/space limit]:

UNIVERSITY OF HAWAI'I
CODE REQUEST FORM FOR ACADEMIC PROGRAM CODES

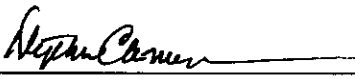
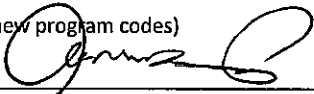
4. NEW COURSE SUBJECT CODE (Subject Alpha)		Banner form: STVSUBJ
College:	Department:	
Subject code [4 char/space limit]:	Subject description [30 char/space limit]:	

5. NEW MINOR (Minor codes are listed on the Major code table)		Banner form: STVMAJR
Minor Code [4 char/space limit]:	Minor Description [30 char/space limit]:	

Please briefly describe your request and explain why you are requesting the code(s):

SUPPORTING DOCUMENTATION
Please see the Code Request Guide for the required supporting documents to be submitted. Documents submitted with this form:
<input type="checkbox"/> Board of Regents meeting minutes and supporting documents provided to the BOR
<input type="checkbox"/> Memo from UH President
<input type="checkbox"/> Memo from Chancellor
<input type="checkbox"/> Curriculum (required for requests for new programs/majors/minors/certificates)
<input type="checkbox"/> Gainful Employment Program notification to the US Department of Education
<input type="checkbox"/> Other: _____

UNIVERSITY OF HAWAII
CODE REQUEST FORM FOR ACADEMIC PROGRAM CODES

CAMPUS VERIFICATION		
Requestor Signature _____	Date <u>27 April 2012</u>	
Registrar (If different from Requestor)		
Steve Kameda _____	 _____	<u>5/9/2012</u> _____
Print name	Signature	Date
Email/memo in lieu of Registrar's signature may be attached		
Financial Aid Officer (Financial Aid Officer consultation required for all new program codes)		
Cathy Bio _____	 _____	<u>4/27/12</u> _____
Print name	Signature	Date
Email/memo in lieu of Financial Aid Officer's signature may be attached		
For Community Colleges, verification of consultation with OVPCC Academic Affairs:		
<u>J.Morton - see enc. Sakamoto memo</u> _____	_____	<u>2 July 2010</u> _____
Print name	Signature	Date
Email/memo in lieu of signature may be attached		

Send completed form and supporting documentation to:

Institutional Research and Analysis Office (IRAO)
 1633 Bachman Place Email: iro-mail@lists.hawaii.edu
 Sinclair Annex 2, Room 4 Fax: 808-956-9870
 Honolulu, HI 96822 Phone: 808-956-7532

After all required forms and supporting documents have been submitted, please allow at least two weeks for processing by IRAO and Banner Central.

FOR INTERNAL USE ONLY	Date form/docs received:
Program code [12]:	Program Description [30]:
CIP code [6]:	CIP description [30]:



UNIVERSITY of HAWAII
MAUI COLLEGE

July 2, 2010

MEMORANDUM

TO: Linda Johnsrud
Vice President of Academic Planning and Policy

SUBJECT: New Certificate of Competence in Therapeutic Activity Aide

This is to inform you that UH Maui College has taken the action of adding an 8-credit Certificate of Competence (CO) to its Nursing Career Ladder program effective Fall 2010 and is requesting that this certificate be added to the Master List of Curriculum Offered.

The relevant curriculum proposals to add the CO have been reviewed and approved by the Allied Health department, the college curriculum committee, the Vice Chancellor of Academic Affairs, and myself. We are in full agreement with the addition and feel that this certificate is a valuable addition to the curriculum for our students and our community.

Clyde M. Sakamoto
Chancellor

c: John Morton, VPCCs



2002-2003
MetLife Foundation
Best-Practice College
Award Recipient



2008
Bellwether
Award Recipient



2009
President's
Higher
Education
Community
Service
Honor Roll

310 W. Ka'ahumanu Avenue
Kahului, HI 96732-1617
Telephone: 808 984-3655
Fax: 808 984-3546
Website: www.maui.hawaii.edu

An Equal Opportunity/Affirmative
Action Institution

Certificate of Competence –Therapeutic Activity Aide

This certificate of competence is designed as an introductory program for people who wish to work in community-based care. It will provide basic instruction in supervised activities in the field of occupational therapy. This certificate program is developed to meet the needs of rural communities and to create an entry level position to encourage future careers. Prepares students to work as aides under the supervision of licensed professionals in community-care. Grade C or better is required in all courses for a certificate or degree from the Allied Health program, unless stipulated otherwise.

HLTH 118: Therapeutic Interpersonal Skills 3credits

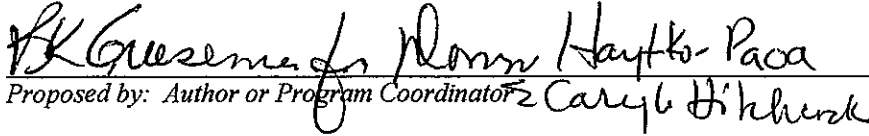
HLTH 119 Therapeutic Activities 2 credits

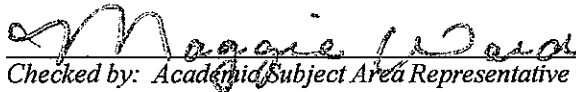
FAMR 230: Human Development or PSY 240: Developmental Psychology (3)

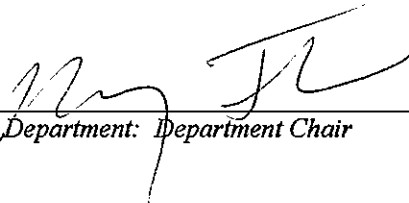
Grade C or better is required in all courses.


for page 28 of 2009-10 catalog


Maui Community College
Curriculum Action Request (CAR) Signature Page



Proposed by: Author or Program Coordinator Caryl H. Hensel 11/5/09
Date



Checked by: Academic Subject Area Representative to Curriculum Committee 11-4-09
Date


Requested by Department: Department Chair 11/13/09
Date


Recommended by: Curriculum Chair 12/10/09
Date


Approved by Academic Senate: Academic Senate Chair 12/10/09
Date


Endorsed by: Chief Academic Officer 1/7/10
Date


Approved by: Chancellor MAR 30 2010
Date

HEALTH SCIENCES PROGRAMS

Under Occupational Therapy Asst. pgm.

ACTIVITY AIDE CURRICULUM

CERTIFICATE OF COMPETENCE, ACTIVITY AIDE (5 SEMESTER CREDITS)

Program Description: The Activity Aide Certificate of Competence prepares students to use specific craft materials and procedures in activities adapted to the needs of the patient and to communicate effectively with residents of long-term care facilities. The certificate is aimed at expanding the capabilities of health care providers to take on additional responsibilities as activity aides employed in long-term care settings.

Program Objectives:

- Provide basic theory and practice in analyzing and fabricating selected therapeutic crafts and other activities for long-term care facilities.
- Provide concepts in grading and adapting crafts and other activities for residents with decreased functional abilities due to aging or disease.
- Provide guidelines for safe implementation of activities and patient handling.
- Provide self awareness concepts for health care practitioners.
- Provide basic principles and practice in identifying and resolving moral or ethical dilemmas.
- Provide basic theory and practice for effective communication to establish rapport with residents in long-term care and their significant others.
- Provide concepts of burnout and stress management techniques to benefit health care workers.

Program Competencies: Upon satisfactory completion of the Certificate of Competence in Activity Aide, the student should be able to:

- Define self awareness and values and their effect on human behavior and helping.
- Discuss strategies for analyzing issues and making decisions to resolve personal and organizational ethical conflicts.
- Describe the effects of disability on the individual within the cultural context of family and society, as well as on occupational performance.
- Describe how sociocultural, socioeconomic, diversity factors and lifestyle choices impact contemporary society.
- Describe positive health behaviors and identify the importance of balancing areas of occupation with the achievement of health and wellness.
- Give examples of effective communication techniques and application using characteristics of effective helping, cultural sensitivity and assertiveness.
- Define professional burnout and identify stress management techniques to promote wellness.
- Fabricate crafts most commonly utilized in Occupational Therapy treatment and activity programs
- Demonstrate therapeutic use of activities through grading, adapting and modifying the environment,

tools, materials and occupations.

- Use the teaching-learning process and effectively interact through written, oral and nonverbal communication with client.
- Demonstrate competency in basic client management techniques to enhance mobility, including physical transfers, wheelchair management, and positioning.
- Use sound judgment in regard to safety of self and others, and adhere to safety regulations.
- Demonstrate proper maintenance and storage of various materials, equipment, tools and inventory of supplies.

CERTIFICATE OF COMPETENCE CURRICULUM, ACTIVITY AIDE (5 CREDITS)		
Course	Title	Credits
Certificate Requirements (5 credits)		
OTA 119	Therapeutic Activities	2
HLTH 118	Therapeutic Interpersonal Skills	3
TOTAL		5
<p><i>The issuance of a Certificate of Competence requires that the student's work has been evaluated and determined to be satisfactory.</i></p> <p><i>In a credit course sequence the student must earn a grade point ratio (GPR) of 2.0 or higher for all courses required in the certificate.</i></p>		

COMMUNITY HEALTH WORKER CURRICULUM

CERTIFICATE OF COMPLETION, COMMUNITY HEALTH WORKER (11 SEMESTER CREDITS)

Program Description: The CHW Certificate of Completion program prepares students to function as primary health care providers and to link disadvantaged families with existing health care resources. This is carried out by identifying needs, providing information, making referrals to appropriate health care providers or agencies, and following up on referrals. The program is currently limited to special enrollment.

Please call the Wai'anae Health Academy at 696-3155 for additional information.

Program Student Learning Outcomes: Upon successful completion of the Certificate of Completion in Community Health Worker program, the student should be able to:

- Demonstrate basic knowledge and skills in community health needs assessment.
- Work as a part of a community-based health care team.