College of Health Sciences and Human Services

School of Family and Consumer Sciences

Child Life Specialist Program
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I. CHILD LIFE SPECIALIST PROGRAM
This handbook has been developed to provide faculty and baccalaureate/graduate students in the Child Life Specialist Program with information and answers to questions regarding the child life major at The University of Akron. Included in this handbook is information about:
1. Academic Policies relating to the child life major
2. Collegiate Policies relating to the Child Life Program
3. University Policies regarding student rights and responsibilities
4. Collegiate Program information
5. College Services available to child life students.

Accreditations
The University of Akron School of Family and Consumer Sciences has maintained accreditation through the American Association of Family and Consumer Sciences.

Mission Statement
As an integral part of The University of Akron, the Child Life Specialist Program promotes the general mission of The University of Akron. The school of Family and Consumer Sciences offers diverse and comprehensive child life specialist programs at the baccalaureate and master’s levels. The programs of study, based on professional standards, prepare individuals to provide child life services in a variety of settings. The Child Life Program supports research that contributes to the health and well being of society. The program is committed to serving culturally, racially, and ethnically diverse populations. Through academic and community collaboration, the program promotes excellence in education, research, practice, and service.

Goals
1. Prepare students who are eligible for certification.
2. Prepare child life specialists who are sensitive in caring for diverse populations in a variety of settings.
3. Prepare child life specialists who integrate leadership roles and ethical standards in a continuously changing health care arena and society.

Philosophy
The Child Life faculty believes that the foci of child life specialists are individuals, families, and communities.

The Individual is seen as a complex whole whose existence involves patterns, dynamic change, transformation, and interdependence. The individual interrelates within the environment in biological, psychological, social, spiritual, cultural, and other dimensions. The individual is unique and universal. The individual is a thinking, feeling, interacting, evolving, creating, valuing being.

Families are individuals dynamically connected with each other over time in traditional and non-traditional configurations.

Communities are groups of people with one or more common characteristics who are in relationship to one another and may or may not interact.

Child Life education at the baccalaureate level synthesizes knowledge from child development, humanities, social, cultural, physical, and natural sciences to operationalize clinical decision-making. The student is prepared to function as a child life specialist in a variety of settings. Faculty and students continually seek to refine the commitment to and understanding of the relationship between theory and practice. Students are encouraged to become self-directed, collaborative, interdependent, and independent. These variables are the foundation for life-long learning and professional development.

Child Life education at the master’s level builds upon baccalaureate education. Graduate education prepares students with expertise in critical thinking and decision-making, effective communication, and therapeutic interventions through a variety of learning experiences. Students analyze and use theoretical formulations and research findings in courses and during clinical rotations.

Academic Guidance And Counseling
Students will be assigned an academic advisor on entry to the College of Human Sciences and Health Services.

• Child life students will be advised by the child life advisor.
• On entry into the child life major, students will work with the child life adviser until graduation.
• Honor students will work with the child life advisor.

The student may contact his advisor by e-mail, telephone or in person to set up an appointment to discuss their needs. Students should print out a copy of their recent grades and current schedules from the web each semester to bring to their advising appointments.

Advising issues may include: identification of elective courses or minors; assistance with planning course sequencing; part time study; clarification of policies; assistance with time management; assistance in identifying resources for both academic and personal needs.

Personal counseling is available through the Office of Student Affairs (MGH 313), Counseling, Testing, and Career Center (Simmons Hall), and The Center for Career Management (Simmons Hall).
II. CHILD LIFE SPECIALIST PROGRAM INFORMATION

Pre-Child Life Specialist Curriculum

Required Courses:

7400:265 Child Development
7400:295 Direct Experience in the Hospital (also take 7400:296) – 3 hours weekly clinicals (50 hours) in a pediatric hospital in addition to class
7400:296 Hospital Based Child Life (one Friday during semester-taken with 7400:295)
7400:280 Theory and Guidance of Play
3100:200 Anatomy and Physiology I
3100:201 Anatomy and Physiology I Lab
3100:202 Anatomy and Physiology II
3100:203 Anatomy and Physiology II Lab
2740:120 Medical Terminology

It is recommended that Child Development is taken during the freshman year and Direct Experience and Hospital Based Child Life be taken during the sophomore year.

Basic Admission Criteria Complete Pre Child Life Curriculum

- Complete child life application by Feb. 1st
- Successfully pass interview – interviews occur in March (Students may interview twice.)
- Earn at least a “B” in 7400:295 Direct Experience. May repeat the course once.
- Provide three professional reference letters. (Faculty, Employer or Volunteer Supervisor.)
- 3.0 GPA
- Have a minimum of 50 hours of experience with children outside of course requirements. Please note that some hospital child life programs require a minimum of 100 hours of experience with hospitalized children.

Post-Baccalaureate Students

- 3.0 baccalaureate GPA from an accredited college or university.

Minors and Certificates

Child Life students may want to consider working toward a minor or a certificate, rather than just taking elective courses at random, especially if they have a focused interested in another area. Child Life students earn a minor in child development. All areas offering a minor are listed in the Undergraduate Bulletin available electronically in Zipline. There are many areas that would enhance the student’s skills after graduation such as:

- Sign Language
- Family Development
- Interpersonal and Group Communication
- Community Services Technology
- Conflict Management
- Modern Languages - Spanish
- Bioethics
- Psychology
- Sociology
- Women’s Studies

Interdisciplinary and Certificate Programs are also offered. Areas related to child life might include:

- Parent and Family Education
- Victim Studies
- Women’s Studies

Always check the Undergraduate Bulletin for the most current information.

Change of Requirements

Without limiting the generality of its powers to alter, amend, or revoke rules and regulation, The University of Akron reserves the right to make changes in degree requirements of the student enrolled prior to the change by:

- Altering the number of credits and/or courses required in a major field of study
- Deleting courses
- Amending courses by increasing or decreasing the credits of specific courses
- Offering substitute courses in the same or cognate fields.
Course Sequencing:

<table>
<thead>
<tr>
<th>Year 1</th>
<th>FALL SEMESTER</th>
<th>SPRING SEMESTER</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>(1) Natural Science not in Biology set</td>
<td>3470: (3) Statistics</td>
</tr>
<tr>
<td>7400:265</td>
<td>(3) Child Development</td>
<td>3750:100: (3) Intro to Psychology</td>
</tr>
<tr>
<td>3300:111</td>
<td>(4) English Comp I</td>
<td>13300:112: (3) English Comp II</td>
</tr>
<tr>
<td>7600:105</td>
<td>(3) Intro to Public Speaking or 106:Effective Oral Communication</td>
<td>7400:270: (3) Theory and Guidance of Play</td>
</tr>
<tr>
<td></td>
<td>(3) Social Science outside of psychology</td>
<td>Alt to Language - Elective</td>
</tr>
<tr>
<td>3600:123</td>
<td>Intro to Ethics</td>
<td>7400:201: (3) Courtship, Marriage and Family</td>
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| Year 1 | 17 Credits                                                                   | 18 Credits                                                                      |

<table>
<thead>
<tr>
<th>Year 2</th>
<th>FALL SEMESTER</th>
<th>SPRING SEMESTER</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>3100:200: (3) Anatomy and Physiology 1</td>
<td>3100:202: (3) Anatomy and Physiology II</td>
</tr>
<tr>
<td></td>
<td>3100:201: (1) Anatomy and Physiology Lab 1</td>
<td>3310:203: (1) Anat &amp; Physiology Lab II</td>
</tr>
<tr>
<td>2740:120</td>
<td>(3) Medical Terminology</td>
<td></td>
</tr>
<tr>
<td>7400:295</td>
<td>(3) Direct Experience in Hospital</td>
<td>7400:280: (3) Early Childhood Curric. Methods</td>
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<tr>
<td></td>
<td>Hospital Based Child Life</td>
<td></td>
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<tr>
<td></td>
<td>(4) Humanities in Western Tradition</td>
<td>(3) General Education: Humanities</td>
</tr>
<tr>
<td>7400:133</td>
<td>(3) Nutrition Fundamentals</td>
<td>5200:360: (2) Teaching in the Early Childhood Center</td>
</tr>
</tbody>
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| Year 2 | 17.5 Credits                                                                  | 19 Credits                                                                      |

MUST have completed BOLDED courses in Year 1 & 2 in order to INTERVIEW for the Child Life Program

APPLICATIONS are due FEBRUARY 1st and INTERVIEWS will be scheduled in MARCH

<table>
<thead>
<tr>
<th>Year 3</th>
<th>FALL SEMESTER</th>
<th>SPRING SEMESTER</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>7400:484: (3) Hospital Settings, Children and Families &amp; Lab</td>
<td>7400:451: (4) Child in the Hospital &amp; Lab</td>
</tr>
<tr>
<td></td>
<td>3750:220: (4) Intro to Experimental Psych (stats prereq)</td>
<td>(2) General Education: Area Studies</td>
</tr>
<tr>
<td>7400:496</td>
<td>(3) Parenting Education</td>
<td>7400:365: (3) Infant, Family &amp; Society</td>
</tr>
<tr>
<td>3750:430</td>
<td>(4) Psychological Disorders of Children</td>
<td>(4) Alt to Language: Elective</td>
</tr>
<tr>
<td>7400:404</td>
<td>(3) Middle Childhood and Adolescence</td>
<td>7400:447: (1) Senior Seminar: Critical Issues</td>
</tr>
</tbody>
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| Year 3 | 17 Credits                                                                   | 17 Credits                                                                      |

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<thead>
<tr>
<th>Year 4</th>
<th>FALL SEMESTER</th>
<th>SPRING SEMESTER</th>
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<tbody>
<tr>
<td></td>
<td>7400:455: (3) Practicum</td>
<td>7400:495: (8) Internship</td>
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<tr>
<td></td>
<td>7400:400: (4) Nutrition Communication &amp; Educ</td>
<td></td>
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<tr>
<td></td>
<td>7400:453: (3) Facilitating Support Groups</td>
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</tr>
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<td></td>
<td>(4) Alternative to Language: Elective</td>
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<tr>
<td></td>
<td>(3) Alternative to Language: Elective</td>
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| Year 4 | 17 Credits                                                                   | 8 Credits                                                                      |

BOLDED courses are prerequisites or have prerequisites and must be taken in year indicated to avoid schedule conflicts or delay in graduation.
Basic Child Life Orientation

All students admitted to the basic CL program are required to attend a mandatory orientation program during the month of August. The exact day and time will depend on room availability as well as other factors. Students receive critical information regarding medical requirements, registration procedures, and other topics related to student success at this orientation.

Students Not Accepted to the Child Life Major

With the current interest in child life, the program is unable to admit all students meeting the minimum requirements. Some students may need to wait a year to reapply for consideration a second time. The majority of these students usually wish to remain full time students during this period. Various options are open to students wishing to maintain the 12 credit hour minimum each semester. These options are listed elsewhere in this handbook under “Maintaining Full Time Status.” Please refer to the Undergraduate Bulletin available on the web for all course offerings and prerequisite requirements.

III. THE CHILD LIFE SPECIALIST PROGRAM INFORMATION

Purpose of The Baccalaureate/Graduate Program

The baccalaureate/graduate program’s purposes are to prepare child life specialists who provide safe care to children and their families within the health care system, provide opportunity for students to acquire theoretical and clinical competence pertinent to the practice of child life.

Competencies of The Child Life Graduate

The graduate will:

1. Possess a theoretical and practical foundation for implementation of safe, caring, and effective professional child life.
2. Exhibit critical thinking ability in making decisions and anticipating health care needs.
3. Apply a variety of communication skills in promoting health across the life span.
4. Integrate environments to assist individuals, families, groups, and communities towards health.
5. Apply leadership and management skills to professional child life roles.
6. Apply research skills in the care of clients.
7. Exhibit progressive development of ethical, professional behaviors.
8. Incorporate cultural aspects with professional practice.

The Official Documents of the Child Life Council, 2002

CHILD LIFE COMPETENCIES

I. Care of Infants, Children, Youth and Families
   a. The ability to assess and meaningfully interact with infants, children, youth and families.
   b. The ability to provide a safe, therapeutic and healing environment for infants, children, youth and families.
   c. The ability to assist infants, children, youth and families in coping with potentially stressful events.
   d. The ability to provide teaching, specific to the population served, including psychological preparation for potentially stressful experiences, with infants, children, youth and families.
   e. The ability to self-evaluate professional practice.
   f. The ability to function as a member of the services team.

II. Education and Supervision
   a. The ability to represent and communicate child life practice and psychological issues of infants, children, youth and families to others.
   b. The ability to supervise child life students and volunteers.

III. Administration
   a. The ability to develop and evaluate child life services.
   b. The ability to implement child life services within the structure and culture of the work environment.

Child Life Domains:

The curriculum reflects the philosophical tenets from Child Life Council. Child Life is operationalized in the 3 domains of child life practice identified in the Official Documents of Child Life Council

Mission Statement:

We, as child life professionals, strive to reduce the negative impact of stressful or traumatic life events and situations that affect the development, health and well-being of infants, children, youth and families. We embrace the value of play as a healing modality as we work to enhance the optimal growth and development of infants, children and youth through assessment, intervention, prevention, advocacy, and education.
Values Statement:

We, as child life professionals, value:

Infants, Children, Youth and Families

We recognize the diversity of individual and family strengths and needs, acknowledging their support systems and community links. We promote individual and family integrity, development, and well being by embracing the concepts of family-centered care.

Play

Play is an essential, natural part of childhood, important in its own right. Play facilitates healing, coping, mastery, self-expression, creativity, achievement and learning, and is vital to a child’s optimal growth and development. Play is an integral aspect of child life practice with infants, children and youth of all ages.

Therapeutic Relationships

We are committed to relationships built on trust, respect and professional competence which contribute to the development of confidence, resilience, and problem-solving skills that enable individuals and families to deal effectively with challenges to development, health and well-being.

Communication

Infants, children and youth communicate their needs through words, play and behavior. We are committed to enabling all forms of communication. We accomplish this by observing, listening and facilitating communication with those who may be misunderstood or needing support in order to be heard. Written documentation of child life assessments, interventions and evaluation of outcomes is an essential aspect of our practice.

Theoretical Foundations of Practice

Knowledge and application of our foundations in theories of child development, play, stress and coping, and family systems are the basis for our professional practices.

Professional Collaboration

The shared and reciprocal efforts of individuals, disciplines, organizations and communities are an effective means of meeting the diverse needs of infants, children, youth and families. Child life practice includes professional collaboration, as well as commitment to the education, supervision and mentoring of novice child life professionals.

Professional Standards of Practice

The commitment to excellence and integrity in our professional practices involves lifelong learning, adherence to our code of ethics, and the development and support of educational and training programs based upon defined clinical competencies.

Research

Research is a fundamental tool of inquiry to guide our practices and interventions, and strengthen and promote our profession. Child life professionals have a responsibility to maintain a current understanding of research findings and participate in research that examines our practices.

Vision Statement

The profession of child life will continue to meet the needs of infants, children, youth and families in times of stressful or traumatic life events and situations. The philosophy and practice of child life will be applicable to any health care setting and transferable to other environments or situations in which the potential for infants, children and youth to cope, learn and master is placed at risk. The services provided by the child life profession will be holistic and will utilize applied child development and family systems theory. The objectives of such services will be to minimize the negative impact of situational disruptions while maintaining individual growth and development and family relationships.
Operating Principles Of The Child Life Profession

- We will collaborate, maintain and promote a philosophy and identity that is accepted on an international level.
- We will maintain the highest standards of professional behavior and practices.
- We will be recognized as essential in health care as well as in diverse community settings and will be available to all infants, children, youth and families regardless of ability to pay.
- We will advocate for the rights of infants, children and youth and support appropriate political, legal and ethical responses to their psychosocial needs.
- We will maintain the child life profession through education and training programs that are diverse, inclusive, continuous, and consistent with our philosophy.
- We will initiate research to validate our methodologies and further the practice of child life.
- We will maintain meaningful credentialing for child life practitioners that addresses professional philosophy and knowledge.
- We will attract highly skilled, diverse and committed individuals who are able to demonstrate competence in communication and human services skills.
- We will interface with other disciplines that provide interventions to infants, children, youth and families, and will collaborate with them in the delivery of services.

Standards of Clinical Practice:

The Standards of Clinical Practice establish criteria for child life services with infants, children, youth and families in circumstances where stress may occur. To this end, the standards:

- promote psychosocial care at the highest professional level.
- define the function of child life services in the provision of psychosocial care.
- establish professional expectations for the administration and implementation of child life services.
- provide guidance for organizations and individuals in developing child life programs and services.

1. Individuals or organizations that provide child life care will have a written plan for providing services.
2. A certified child life specialist with demonstrated administrative and supervisory skills will be accountable for the planning and implementation of child life services. In organizations where there are combined services under the direction of an administrator who is not a certified child life specialist, this individual will demonstrate a working knowledge of the Official Documents of the Child Life Council 2002.
3. Child life services will include direct care, consultation, supervision, education, advocacy, and environmental planning.
4. Child life students will be supervised by a child life specialist who provides a clinical placement experience that meets the guidelines as set out in the Official Documents of the Child Life Council 2002.
5. Child life staff will be available to assess, plan, evaluate and safely provide comprehensive child life services for infants, children, youth and family members.
6. Child life personnel will be prepared through education, supervision and evaluation as recommended in the Official Documents of the Child Life Council 2002. Ongoing professional development is recommended for all staff, and required for the certified child life specialist.
7. Child life professionals will participate in a collaborative approach to services.
8. Child life interventions will be documented in the records of infants, children, youth and families. Confidentiality, security and integrity of data and information will be maintained according to the policies of the organization, regulatory agencies and the Child Life Code of Ethical Responsibility.
9. Sufficient budget, facilities and resources will be provided to meet the clinical, educational, research and administrative goals of child life services.
10. Participation in evidence-based practice is an expected function of child life specialists in the planning, implementation and evaluation of child life services. Involvement in research activities and projects is a desirable and appropriate function of child life practice.

Environment: Environment includes all living and non-living dimensions with which the individual, family, and community have interrelationships. These dynamic interrelationships define and establish rules for health and modes of action. Throughout the program, students study factors that affect society’s ability to provide resources to meet health needs. These factors include historical, economic, political, scientific, ethical, and cultural influences. Students provide health care in a variety of settings. Students are involved in health promotion services, treatment of disease, and rehabilitative services available to clients (individuals, families, communities).

Ethics: Ethics is a branch of philosophy, which proposes to identify, organize, examine, and justify human acts by applying certain principles to determine the right thing to do in specific situations. Making judgments and acting upon them is essential to the practice of child life. Didactic experiences are provided for students to explore general values and guidelines applicable to common daily experiences that require decisions in judgments. The Child Life Council Code of Ethics Responsibility is used as a guide for the profession and its members in providing care to all without restriction to social, economic, racial, spiritual, or diagnostic characteristics. Importance of confidentiality and respect for human life is emphasized. Several child life courses apply principles of ethical decision making to situations characterized by conflict and requiring value judgments. The student is expected to apply ethical decisions related to clinical issues, performance appraisal, and research. Students explore ethical theory in application to ethical dilemmas and to advocacy.
CODE OF ETHICAL RESPONSIBILITY

The Child Life Council subscribes to a body of ethical principles which are in accordance with the Child Life Mission, Values and Vision Statements and Operating Principles and which are derived primarily for the benefit and protection of infants, children, youth and families in settings where the potential for damaging stress or trauma exists.

Child life professionals (including specialists, administrators, assistants, and students) share as goals:

1. maximizing the physical and emotional health as well as the social, cognitive and developmental abilities of children*; and
2. minimizing the potential stress and trauma that children and their families may experience.

**Communication:** The caring nature of child life is personalized through communication. Students are provided opportunities to develop a wide range of verbal, nonverbal, and active listening communication skills as a basis for promotion of health of individuals, families, groups, and communities. Professional communication becomes an integral part of the student’s practice as interviewing and documentation skills are practiced. Accountability for therapeutic communication is demonstrated through process recordings and supervised interactions. Assertiveness skills are developed and used in collegial professional relationships.

Course Descriptions:

- **7400:295 DIRECT EXPERIENCE IN THE HOSPITAL** 3 credits
  Prerequisite: permission of advisor. Individual learning experiences for students with patients, their families and the hospital personnel in various hospital settings under the direction of hospital staff. Need at least the grade of a B to qualify for the child life interview. May be repeated once.

- **7400:296 HOSPITAL BASED CHILD LIFE** .5 credits
  Taken with 7400:295 (one Friday during semester)
  Prerequisite: permission of advisor. This course focuses on the hospital setting, introducing the student to the role of the child life specialist in two pediatric hospitals.

- **7400:484/584 HOSPITAL SETTINGS, CHILDREN AND FAMILIES** 3 credits
  Prerequisite: 265, comparable course or permission of instructor. Seminar dealing with special needs and problems of hospitalized/ill child and family. Literature related to effects of separation, illness and stress. Examination of strategies for coping.

- **7400:484/584:011 HOSPITAL SETTINGS, CHILDREN AND FAMILIES LAB**

- **7400:451/551 CHILD IN THE HOSPITAL** 4 credits
  Prerequisite: 265, comparable course or permission of instructor. Seminar dealing with special needs and problems of hospitalized/ill child and family. Literature related to effects of separation, illness and stress. Examination of strategies for coping.

- **7400:451/551:011 CHILD IN THE HOSPITAL LAB**

- **7400:455/555 PRACTICUM EXPERIENCE IN A CHILD-LIFE PROGRAM** 3 credits
  Prerequisite: 451. Field experience in a child-life program and classroom activities including critical analysis of a currently functioning program. 8.5 hours in a pediatric setting.

- **7400:495/695 INTERNSHIP: GUIDED EXPERIENCES IN CHILD-LIFE PROGRAM** 8/5 credits
  Prerequisite: 455. Field experience in a child-life program at an approved pediatric facility under the supervision of Child Life Specialists. Minimum of 480 hours.

- **7400:452/552 CHILD, ILLNESS AND LOSS** 3 credits
  Prerequisite: Senior level standing. This course examines the phenomena of illness, loss and bereavement in modern society with a special emphasis on children and families.

- **7400:453:553 FACILITATING SUPPORT GROUPS** 3 credits
  Prerequisite: Senior level standing. Theories, strategies and skills needed to facilitate support groups for children and adults are studied using a variety of approaches including participation in a support group.

IV. CHILD LIFE SPECIALISTS PROGRAM POLICIES AND PROCEDURES

Essential Functions Required For Successful Completion of The Child Life Curriculum And Graduation From The College of Health Sciences and Human Services, The University Of Akron

All applicants for admission are considered on an individual basis without discrimination with regard to race, color, religion, national origin, ancestry, age, marital status, sex, physical disability, or handicap.

Students are responsible for determining their ability to meet necessary qualifications, identify to the program any potential problem areas, and recommend to the program any particular accommodations they may need. Students, who declare a disability after entering the program, need to understand they will be expected to meet course/program requirements with any reasonable accommodations the program will provide.

It is the intention of the Baccalaureate Admissions Committee to ensure both patient safety and reasonable expectation of student success in the academic program and in the post-graduate employment situation. An applicant for the Child Life degree must be able to demonstrate intellectual-conceptual, integrative, and quantitative abilities; skills in observation, communication, and motor functions; and mature behavioral, social, and ethical attributes. To be considered otherwise qualified for the baccalaureate child life program, students must be able to demonstrate, with or without accommodation, that they possess the following skills.

This list is not exhaustive, but merely representative of the skills required

1. **Observation:** Visual ability must be sufficient to observe demonstrations in child life skills and to observe patients and families at a distance and close at hand. Observation requires the functional use of hearing.

2. **Communication:** The student should be able to speak, hear, and to see patients to elicit information, describe development, mood, activity, and perceive nonverbal communications. The student must be able to communicate effectively and sensitively with patients using verbal language. The student must be able to interact with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds. Reading and writing skills must be effective for patient communication, record keeping, and professional health care team interaction.
**III. Motor:** Motor function should be sufficient to raise and lower side rails and lift 30 pounds. A student should be able to execute motor activities in a confined space reasonably required to provide support during a procedure. Such actions require coordination of both gross and fine muscular movements, and the functional use of hearing and vision. The student must be able to physically perform for at least eight hours in clinical settings.

**IV. Intellectual-Conceptual, Integrative, and Quantitative Abilities:** These abilities include reasoning, analysis, synthesis and self-reflection. Clinical judgments required of students require making assessments from observations and interactions and the development of child life goals.

**V. Behavioral, Social, and Ethical Attributes:** A student must possess the emotional health required for full use of intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities related to the emotional/developmental care of patients, and the development of mature, sensitive, and effective relationships with patients from diverse social, emotional, cultural, and intellectual backgrounds. Students must be able to tolerate physically and mentally taxing workloads and to function effectively under stress. They must be able to adapt to changing environments, to display flexibility, and learn to function in rapidly changing clinical patient care situations. Students must possess awareness of ethical actions related to the well being of patients, families, medical staff and preceptors.

A student may not progress in the curriculum if the disability will pose a direct threat to the health or safety of others and the threat cannot be eliminated by modifying policies, practices, or procedures. Under these circumstances, the student is not otherwise qualified to progress in the program.

If accommodation is needed to meet the essential functions, you may contact the Director of the Office of Accessibility, in Simmons Hall for information on reasonable accommodation.

**Acceptable Achievement**
A minimum GPA of 3.0 must be maintained to progress through the child life program courses.

**Procedure:**
- Student will be denied advancement to the interview process for child life if grade below “B” exists in the course 7400:295 Direct Experience.

**Baccalaureate Course Grading Scale**
Grades will be based on a 100% scale. The faculty will use 2 decimal points. Rounding will be done on the final grade only, not on individual grades.

<table>
<thead>
<tr>
<th>Grade</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>94—100</td>
</tr>
<tr>
<td>A-</td>
<td>90—93</td>
</tr>
<tr>
<td>B+</td>
<td>87—89</td>
</tr>
<tr>
<td>B</td>
<td>84—86</td>
</tr>
<tr>
<td>B-</td>
<td>80—83</td>
</tr>
<tr>
<td>C+</td>
<td>77—79</td>
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<tr>
<td>C</td>
<td>74—76</td>
</tr>
<tr>
<td>C-</td>
<td>70—73</td>
</tr>
<tr>
<td>D+</td>
<td>67—69</td>
</tr>
<tr>
<td>D</td>
<td>64—66</td>
</tr>
<tr>
<td>D-</td>
<td>59—63</td>
</tr>
<tr>
<td>F</td>
<td>0—59.49</td>
</tr>
</tbody>
</table>

**Taking Of Examinations**

**Policy:**
ALL students are expected to take examinations at the scheduled time. Any exceptions must be approved by the faculty prior to the scheduled date of the examination. An examination may not be retaken by a student for the purpose of improving a grade. Make-ups are not routinely given except in extenuating circumstances.

Final exams are subject to the above policy as well. Faculty has the right to designate the content, duration and method of testing involved.

**Procedure:**
- Each faculty member course will determine its make-up policy on exams and quizzes.
- Course faculty must be notified prior to the scheduled date of the examination if it will be missed.
- Students must contact faculty on the day of their return to school to schedule a make-up of the exam.
- Faculty may require documentation of reason for absence.

**Faculty Evaluations by Students**
Students will be provided with an opportunity to evaluate the lecture and/or clinical teaching of faculty. A standardized faculty evaluation form is utilized. Students will be provided guidelines to follow when filling in the evaluation form. Faculty members do not handle the collection of these forms. Results of student evaluations are not distributed to the appropriate faculty member until after final course grades are submitted.
Clinical Evaluation System

Clinical Attendance Policy
- All clinical experiences are mandatory.
- It is the responsibility of the student to notify the instructor and the agency in advance if unable to attend the planned clinical experiences.
- Failure to notify the instructor and the agency represents a lack of professional accountability.
- Any clinical absence may result in the student being asked to withdraw from the course. Make up days for clinical absences will be determined at the discretion of the instructor.
- Upon request of the instructor, students must present a medical permission slip that includes a statement from the physician identifying any limitations resulting from an illness.

Professional Liability/Malpractice Insurance
Each student in the child life program is required to have and maintain liability insurance in the amounts of $1,000,000/$3,000,000 as a prerequisite to enter a clinical course. Cost of this liability insurance is included in course fees.

Safe Clinical Practice Definition
Safe practice is essential to all clinical courses. Care is provided in a reasonable and prudent manner providing for the welfare and protecting the well being of the client. Safe practice implies that the student can demonstrate awareness of the potential effect of actions and decisions. Such actions and decisions shall not endanger the integrity of the client.

Policy for Unsafe Practice
Safe Practice is an essential requirement for progression to the next course and will be determined within the clinical faculty and clinical site personnel. Students who engage in unsafe practice will receive an unsatisfactory grade for the clinical portion of the course, resulting in a grade of “F” for the course. Student will be counseled and may, if appropriate, be given the chance to improve within the time frame of the course. Documentation of unsafe practices will be formulated by faculty and discussed with and signed by students. Faculty will have the sole discretion to determine if the student is to be dismissed for the day or for the remaining portion of the course.

Statement Of Confidentiality
All information that a student learns about a client/patient while providing care is private and confidential. This information is not to be shared with anyone except an instructor and those members of the health care team directly involved with the care of the patient/client.

The right of privacy is an inalienable right of all persons; therefore, confidential information about the client acquired from any source is to be safeguarded. With the child life-client relationship based on trust, the client’s welfare and reputation can be jeopardized by inappropriate disclosure and the child life-client relationship destroyed. Students are expected, without exception, to observe the client/patient’s right to privacy. Serious consequences will result if the student fails to maintain this privacy. Students are reminded that confidentiality has legal and ethical implications, and that an inappropriate break of confidentiality may expose the student to liability.

Student Signature On Clinical Documents
The correct student signature is “M. Wells, Child Life Intern” or according to the individual agency’s document requirements.

Mandatory Agency Requirements for Clinical Experience
In order to meet mandatory agency clinical requirements for health and immunization, students must submit a copy of the following:
1. Results of recent physical exam (within last year). A copy of physical exam from places of employment, military, etc. can be submitted.
2. Verification that the student has had Rubeola, Rubella, Mumps, and Chickenpox, or can provide proof of MMR after age five or has had blood drawn for titers for any of these diseases.
3. Hepatitis B vaccination or a statement of waiver; student must have received 2 out of 3 injections prior to starting clinical or verification that series is complete; 3rd injection should be received six months after 2nd injection.
4. Tuberculin (TB) testing is to be done YEARLY. Initially, proof of a two-step Mantoux is required. Once the two step Mantoux is documented, all subsequent yearly testing need be only a single step Mantoux unless one of the following exceptions apply:
   a. If students have a positive Mantoux, they will need to provide results of a chest x-ray upon admission and sign an annual follow up form. (See Form - Appendix H)
   b. If students have had BCG vaccine, they must have a single TB test plus a chest x-ray.
   NOTE: For those over 32 years of age, verification is needed only for: TB testing, Hepatitis B, Rubella, physical exam, and CPR certification/re-certification.
5. Fingerprinting must be completed before clinical attendance. Results are reported to the State of Ohio and are kept on file in the college.
6. Other requirements may be added as stipulated by contracting agencies.

If students fail to provide the required proof for ANY of the above requirements, all clinical courses on their schedule will be dropped and a hold will be placed on their file. Once documentation for these requirements has been received by the Records Specialist, the hold will be removed and the students will need to re-register for any sections of clinical placements as are available at that time.

Students MUST keep a copy of all of the above documentation for their own records. Students will need a copy of their health history for employment applications.
Privacy
Standards of Individually Identifiable Health Information:
Information enacted under the Health Insurance Portability and Accountability Act of 1996 was created to address patient information privacy concerns. If you would like more information about these standards, the United States Department of Health and Human Services website, located at http://www.hhs.gov/ocr/hipaa/, has a number of resources, including a publication titled “Privacy and your Health Information,” located at http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/consumer_summary.pdf.

Policies Related To Professional Conduct of Students
The program administrator and faculty shall implement policies related to student conduct that incorporate the standards for Child life
1) A student shall implement measures to promote a safe environment for each client.
2) A student shall delineate, establish, and maintain professional boundaries with each client.

Policy Related to Professional Behavior at The University of Akron
Professional conduct is expected in all venues of student life: behavior inside and outside the classroom including clinical sites and environments external to them, as well as in all forms of communication, including electronic. The Child Life Program will abide by all statements and recommendations contained in “A Civil Climate For Learning: Statement of Expectations.” The details of this policy can be found in the current Undergraduate Bulletin (available from the main University of Akron web page).

Policy Related to Academic Misconduct
The foundation of professional practice rests on the development of established core values which include Altruism, Autonomy, Human Dignity and Integrity, and guides interactions with patients, colleagues, faculty, other professionals and the public. Therefore, the CLS Program will take very seriously any infraction of The University of Akron’s Student Code of Conduct. Any student found responsible for committing an act of academic misconduct through the University’s Student Judicial Affairs processes may be subject to disciplinary sanctions up to and including failure of that course, suspension or dismissal. This policy refers to any form of academic dishonesty such as cheating on quizzes, tests, and exams as well as plagiarism on written work or other forms of academic dishonesty. For more detailed information, see the Student Code of Conduct found at www.uakron.edu/sja/index.php and Guidelines for Avoiding Plagiarism found at www.uakron.edu/ogc/PreventiveLaw/plagiarism.php.

Incompletes In Child Life Courses
Policy:
• An incomplete may be given at the option of the instructor, or when, because of seriously extenuating circumstances, the student is unable to complete the last requirements of the course.
• Students may not register for the next clinical course until the incomplete is removed.

Procedure:
• To remove the incomplete, the instructor who assigned the incomplete must evaluate the required work and process the grade forms.
• The university policy regarding incompletes will be applied.

Child Life Student Dismissal Policy:
• A student will be dismissed for unethical professional conduct or conviction of a felony.
• A student may be dismissed for unsafe practice in the clinical area.
• A student may be dismissed for Academic Dishonesty. See University Policy in the current Undergraduate Bulletin. Also see Student Code of Conduct at http://www.uakron.edu/sja/index.php.
• A student who is dismissed will not be granted readmission.

Personal Health Insurance
Students are strongly advised to carry their own personal health insurance coverage. If the student does not have personal insurance, information on other options can be found at the Student Health Services web site.

Student Health Requirements
Pregnancy
Students are responsible for their own health and health of their unborn child. When a student is aware of her pregnancy, either confirmed or non-confirmed, it is her responsibility to inform her clinical faculty member and the course coordinator. The student must notify the appropriate Coordinator in writing of the pregnancy as soon as the pregnancy is confirmed. Examples of diagnoses or treatment regimes that may jeopardize the unborn include but not limited to: radiation and viral infections. The student will be responsible for being aware of potential risks to her or her unborn related to clinical assignments. It is her responsibility to discuss this with the instructor so that necessary assignment changes may be made. Class or clinical time missed because of the pregnancy will be handled in the same manner as other absences. Course objectives must be met to successfully complete the course.

Personal Illness
When the student questions whether he/she should attend the clinical setting because of illness, the student shall report to University Student Health Services on main campus or personal physician for evaluation. A written statement must be obtained from the student’s personal physician or the University Health physician regarding the student’s health status before returning to the clinical setting following the absence. The statement should be presented to the instructor.
It is the responsibility of all students to maintain their own health. Students should notify faculty and clinical instructor(s) of pre-existing health conditions, especially those requiring medications. Such information will be helpful to the instructor(s) in the event of a student becoming ill in the clinical setting. (See substance Abuse Policy)

**Student Illness/Injury in a Clinical Setting**
Regular attendance in the clinical area is expected. If an emergency arises (such as sudden illness), the student must notify the appropriate person in the clinical agency and/or the clinical instructor before the expected time of arrival (at the earliest time the agency can be called) at the clinical site so that patient care can be reassigned without delay. This is a professional responsibility each student must assume, and will be part of the clinical performance evaluation.

If a student becomes ill (or is injured) while in the clinical setting, the clinical instructor will determine whether the student needs to be seen immediately, sent home, or allowed to rest in a quiet area. If immediate care is needed, the student may go to the emergency room, or decide to seek care from his/her own physician. If an injury does occur in an agency, it is best the student be seen in the emergency room, in the event it becomes necessary for further evaluation. If the student requires transportation assistance, the clinical instructor will assess the best means by which this can be accomplished (e.g., peer, family member, friend).

If the student does seek emergency treatment in the agency’s emergency room, the student will be billed for services rendered. Students should maintain their own health insurance coverage to protect them in case an illness or injury should occur.

The CLS Program has affiliation agreements with numerous health care agencies. Faculty reviews the agreement with the agency where they clinically supervise students so that they know what measures to take should a student become ill or be injured. The clinical supervisor will also initiate an incident report (if appropriate) or a note pertinent to the situation and place a copy of the report (or note) in the student's official record.

**Professional Dress Requirements For Clinicals:**
- Closed toes shoes, no sandals
- No Jeans
- Midriff should be covered when stretching or reaching
- Chest area should be covered when bending over

**Professional Appearance Policy**
In order to comply with infection control policies and enhance the comfort of your patients, the student must be clean, neat and in compliance with the College and agency dress code when reporting for clinical laboratory experience. Noncompliance with this Professional Appearance Policy will result in dismissal from the clinical setting.

**Jewelry:** No hoops, dangling earrings, necklaces, as well as no facial or tongue piercings are allowed to be worn.

**Nail:** Nails are to be kept short, clean and in good repair. Polish should be clear and not chipped. No artificial nails or nail enhancements are permitted (artificial nail tip, wraps, appliqués, acrylic gels, and any additional items applied to the nail surface).

**Perfumes/After Shave Lotions Policy:** Use of perfumes, after-shave, and scented lotions are not permitted.

**Body Art:** Any form of body art must be covered by the clothing.

**Transportation To Off-Campus Learning/Clinical Sites**
Students are responsible for their transportation to and from the institution and agencies used for educational experiences. Examples of such facilities include: preschools and hospitals
Child Life Practicum and Internship Site Information

For student reference, here is a list of the local hospitals and contact information for Child Life practicum and internship placements:

Akron Children’s Hospital                  (330) 543-8015  Gena Valloric
MetroHealth Medical Center                 (216) 778-7142  Erin Whipple
Rainbow Babies and Children’s Hospital     (216) 844-1187  Catherine Cashin
Cleveland Clinic Foundation               (216) 444-3165  Shannon Sonnhalter

Not all hospitals take students every semester, so make sure that you apply to a variety of hospitals. Contact hospital child life student coordinators in advance for their requirements.

Child Life Council Scheduling Recommendation:

<table>
<thead>
<tr>
<th>Starting Date</th>
<th>Application Due Date</th>
<th>Offer Date</th>
<th>Student Acceptance Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>September 5</td>
<td>October 22</td>
<td>October 28</td>
</tr>
<tr>
<td>June</td>
<td>January 5</td>
<td>February 22</td>
<td>February 28</td>
</tr>
<tr>
<td>September</td>
<td>May 5</td>
<td>June 22</td>
<td>June 28</td>
</tr>
</tbody>
</table>

In addition to the local hospitals, there are some other hospitals that are not too far away that accept practicum and internship students. The dates at these hospitals are not the same as at the local hospitals, so make sure that you get their applications early and check the due dates.

Cincinnati Children’s Hospital                  (513) 630-8759
Nationwide Children’s Hospital                 (614) 722-4275
Children’s Hospital of Pittsburgh              (412) 692-6103

Volunteer opportunities are available for students as well. Please contact the volunteer department and inform them that you are interested in volunteering with children through the child life department.

The Gathering Place will accept volunteers only after completion of volunteer work in a hospital.