

BID SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION			
Company:	Occupational Therapy of Conway, Inc		
Address:	1626 Greenwood Circle		
City:	Conway	State:	AR Zip Code: 72034
Business Designation:	<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Public Service Corp <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit		
Minority and Women-Owned Designation*:	<input type="checkbox"/> Not Applicable <input type="checkbox"/> American Indian <input type="checkbox"/> Asian American <input type="checkbox"/> Service Disabled Veteran <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Pacific Islander American <input type="checkbox"/> Women-Owned		
AR Certification #: _____		* See <i>Minority and Women-Owned Business Policy</i>	

PROSPECTIVE CONTRACTOR CONTACT INFORMATION	
Provide contact information to be used for bid solicitation related matters.	
Contact Person:	Tina A. Mankey Title: President
Phone:	501-269-0970 Alternate Phone: 501-327-4412
Email:	tinaot63@gmail.com

CONFIRMATION OF REDACTED COPY
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input checked="" type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested.
<i>Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.</i>

ILLEGAL IMMIGRANT CONFIRMATION
By signing and submitting a response to this <i>Bid Solicitation</i> , a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract.

ISRAEL BOYCOTT RESTRICTION CONFIRMATION
By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract.
<input type="checkbox"/> Prospective Contractor does not and will not boycott Israel.

An official authorized to bind the Prospective Contractor to a resultant contract must sign below.
 The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* will cause the Prospective Contractor's bid to be disqualified:

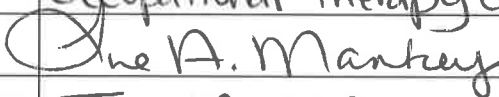
Authorized Signature: Tina A. Mankey Title: President
Use Ink Only.

Printed/Typed Name: Tina A. Mankey Date: 4/26/19

SECTION 1 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

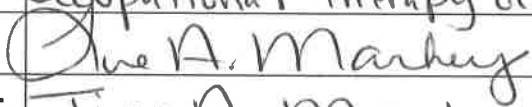
By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Vendor Name:	Occupational Therapy of Conway	Date:	4/26/19
Signature:		Title:	President
Printed Name:	Tina A. Mankey		

SECTION 2 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

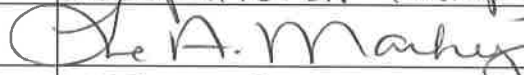
By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Vendor Name:	Occupational Therapy of Conway	Date:	4/26/19
Signature:		Title:	President
Printed Name:	Tina A. Mankey		

SECTION 3 - VENDOR AGREEMENT AND COMPLIANCE

- *Exceptions to Requirements shall cause the vendor's proposal to be disqualified.*

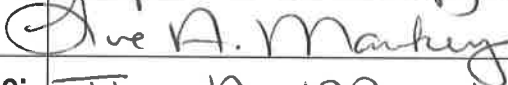
By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Vendor Name:	Occupational Therapy of Conway	Date:	4/26/19
Signature:		Title:	President
Printed Name:	Tina A. Mankey		

SECTION 4 - VENDOR AGREEMENT AND COMPLIANCE

- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Vendor Name:	Occupational Therapy of Conway	Date:	4/26/19
Signature:		Title:	President
Printed Name:	Tina A. Mankey		

PROPOSED SUBCONTRACTORS FORM

- Do not include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP
Alicia Moran, OTR	1025 Knights Drive	Conway AR 72034
Emily McCarron, OTR	4450 Tree House Drive	Conway, AR 72034
* Plan to hire COTA who has the requirements		

PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.

By signature below, vendor agrees to and shall fully comply with all Requirements related to subcontractors as shown in the bid solicitation.

Vendor Name:	Occupational Therapy of Conway	Date:	4/26/19
Signature:	<i>Tina A. Mankay</i>	Title:	President
Printed Name:	Tina A. Mankay		

BID RESPONSE PACKET
710-19-1038R

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

F-1

Failure to complete all the following information may result in a delay in obtaining a contract, lease, purchase agreement, or grant award with any Arkansas State Agency.

SUBCONTRACTOR: YES NO

SUBCONTRACTOR NAME:

Contractor for which this is a subcontractor:

Estimated dollar amount of subcontract:

TAXPAYER ID NAME: Occupational Therapy of Conway, Inc

IS THIS FOR:

Goods? Services Both?

YOUR LAST NAME: Mankey

FIRST NAME: Tina

MI: A

ADDRESS: 1626 Greenwood Circle

CITY: Conway

STATE: AR

ZIP CODE: 72034

COUNTRY: UNITED STATES OF AMERICA

AS A CONDITION OF OBTAINING, EXTENDING, AMENDING, OR RENEWING A CONTRACT, LEASE, PURCHASE AGREEMENT, OR GRANT AWARD WITH ANY ARKANSAS STATE AGENCY, THE FOLLOWING INFORMATION MUST BE DISCLOSED:

FOR INDIVIDUALS*

Indicate below if you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: Member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee:

Position Held	Mark (✓)		Name of Position of Job Held (senator, representative, name of board/commission, data entry, etc.)	For How Long?		What is the person(s) name and how are they related to you? (i.e., Jane Q. Public, spouse, John Q. Public, Jr., child, etc.)	Relation
	Current	Former		From MM/YY	To MM/YY		
General Assembly	<input type="checkbox"/>	<input type="checkbox"/>					
Constitutional Officer	<input type="checkbox"/>	<input type="checkbox"/>					
State Board or Commission Member	<input type="checkbox"/>	<input type="checkbox"/>					
State Employee	<input type="checkbox"/>	<input type="checkbox"/>					

None of the above applies

FOR A VENDOR (BUSINESS)*

Indicate below if any of the following persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in the entity: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity.

Position Held	Mark (✓)		Name of Position of Job Held (senator, representative, name of board/commission, data entry, etc.)	For How Long?		What is the person(s) name and what is his/her position of control?	Ownership Interest (%)	Position of Control
	Current	Former		From MM/YY	To MM/YY			
General Assembly	<input type="checkbox"/>	<input type="checkbox"/>						
Constitutional Officer	<input type="checkbox"/>	<input type="checkbox"/>						
State Board or Commission Member	<input type="checkbox"/>	<input type="checkbox"/>						
State Employee	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Professor - UCA	08/97	current	Tina A. Mankey	100	President

None of the above applies

* NOTE: PLEASE LIST ADDITIONAL DISCLOSURES ON SEPARATE SHEET OF PAPER IF MORE SPACE IS NEEDED

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM F-2

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency.

As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:

1. Prior to entering into any agreement with any subcontractor, prior or subsequent to the contract date, I will require the subcontractor to complete a **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM**. Subcontractor shall mean any person or entity with whom I enter an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with the state agency.
2. I will include the following language as a part of any agreement with a subcontractor:

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor.
3. No later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subsequent to the contract date, I will mail a copy of the **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM** completed by the subcontractor and a statement containing the dollar amount of the subcontract to the state agency.

I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein.

Signature Tina A. Mankey Digitally signed by Tina A. Mankey
Date: 2019.04.26 08:13:16 -05'00' Title President Date 04-26-19

Vendor Contact Person Tina A. Mankey Title President Phone No. 501-269-0970

AGENCY USE ONLY

Agency Number 0710 Department of Human Services Agency Name Agency Contact Person Contact Phone No. Contract or Grant No.
Nawania Williams

* NOTE: PLEASE LIST ADDITIONAL DISCLOSURES ON SEPARATE SHEET OF PAPER IF MORE SPACE IS NEEDED

BUSINESS ASSOCIATE AGREEMENT

Between

ARKANSAS DEPARTMENT OF HUMAN SERVICES

And

Occupational Therapy of Conway Inc.
(Business Name)

71-0812891
(Business Taxpayer Identification Number)

This Business Associate Agreement ("Agreement") is made effective on 7/1/19, (the "Effective Date") by and between the Arkansas Department of Human Services ("Covered Entity") and Occupational Therapy of Conway, ("Business Associate,") (collectively, the "Parties").

Background

- a) Covered Entity has been designated as a hybrid entity for the purposes of the HIPAA Privacy Rule, and it has designated several of its component agencies as health care components.
- b) In accordance with the laws of Arkansas, Business Associate provides services for Covered Entity unrelated to treatment, payment, or healthcare operations and therefore the Parties believe a Business Associate Agreement is required. The provision of such services may involve the disclosure of individually identifiable health information from Covered Entity to Business Associate.
- c) The relationship between Covered Entity and Business Associate is such that the Parties believe Business Associate is or may be a "business associate" within the meaning of the HIPAA Privacy Rule.
- d) The Parties enter into the Agreement with the intention of complying with the HIPAA Privacy and Security Rule provisions and the Health Information Technology for Economic and Clinical Health (HITECH) Act, that a covered entity may disclose protected health information to a business associate, and may allow a business associate to create or receive protected health information on its behalf, if the covered entity obtains satisfactory assurances that the business associate will appropriately safeguard the information.

Definitions

Catch-all definition:

The following terms used in this Agreement shall have the same meaning as those terms in the HIPAA Rules: Breach, Data Aggregation, Designated Record Set, Disclosure, Health Care

Attachment F

Operations, Individual, Minimum Necessary, Notice of Privacy Practices, Protected Health Information (PHI), Required by Law, Secretary, Security Incident, Subcontractor, Unsecured Protected Health Information, and Use.

Specific definitions:

(a) "Breach" shall have the meaning set out in its definition at 45 C.F.R. 164.402, as such provision is currently drafted and as it is subsequently updated, amended, or revised.

(b) "Business Associate" shall generally have the same meaning as the term "business associate" at 45 CFR 160.103, and in reference to the party to this agreement, shall mean [Insert Name of Business Associate].

(c) "Covered Entity" shall generally have the same meaning as the term "covered entity" at 45 CFR 160.103, and in reference to the party to this agreement, shall mean Arkansas Department of Human Services.

(d) "HIPAA Rules" shall mean the Privacy, Security, Breach Notification, and Enforcement Rules at 45 CFR Part 160 and Part 164.

(e) "Protected Health Information" or "PHI" shall have the same meaning as the term "protected health information" in 45 CFR 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

(f) "Required By Law" shall have the same meaning as the term "required by law" in 45 CFR 164.103.

(g) "Secretary" shall mean the Secretary of the United States Department of Health and Human Services or his/her designee.

(h) "Unsecured Protected Health Information" shall have the meaning set out in its definition at 45 C.F.R. 164.402; protected health information that is not rendered unusable, unreadable, or indecipherable to unauthorized persons through the use of a technology or methodology specified by the U.S. Secretary of DHHS in the guidance issued under section 13402(h)(2) of Pub. L. 111-5; as such provision is currently drafted and as it is subsequently updated, amended, or revised.

Unless otherwise defined in this Agreement, terms used herein shall have the same meaning as those terms have in the HIPAA Privacy Rule.

Obligations and Activities of Business Associate

Business Associate agrees to:

(a) Not use or disclose protected health information other than as permitted or required by the Agreement or as required by law;

(b) Use appropriate safeguards, and comply with Subpart C of 45 CFR Part 164 with respect to electronic protected health information, to prevent use or disclosure of protected health information other than as provided for by the Agreement;

Attachment F

(c) Report to covered entity any use or disclosure of protected health information not provided for by the Agreement of which it becomes aware, including breaches of unsecured protected health information as required at 45 CFR 164.410, and any security incident of which it becomes aware;

(d) Business Associate agrees to report to Covered Entity any unauthorized acquisition, access, use, or disclosure of unsecured PHI the Business Associate holds on behalf of the covered entity, including the identity of each individual who is the subject of the unsecured PHI of which it becomes aware, no case later than ten calendar days after the discovery of the breach;

(e) In accordance with 45 CFR 164.502(e)(1)(ii) and 164.308(b)(2), if applicable, ensure that any subcontractors that create, receive, maintain, or transmit protected health information on behalf of the business associate agree to the same restrictions, conditions, and requirements that apply to the business associate with respect to such information;

(f) Make available protected health information in a designated record set to the covered entity as necessary to satisfy covered entity's obligations under 45 CFR 164.524;

(g) Make any amendment(s) to protected health information in a designated record set as directed or agreed to by the covered entity pursuant to 45 CFR 164.526, or take other measures as necessary to satisfy covered entity's obligations under 45 CFR 164.526;

(h) Maintain and make available the information required to provide an accounting of disclosures to the Covered Entity as necessary to satisfy covered entity's obligations under 45 CFR 164.528;

(i) To the extent the business associate is to carry out one or more of covered entity's obligation(s) under Subpart E of 45 CFR Part 164, comply with the requirements of Subpart E that apply to the covered entity in the performance of such obligation(s); and

(j) Make its internal practices, books, and records available to the Secretary for purposes of determining compliance with the HIPAA Rules.

Permitted Uses and Disclosures by Business Associate

(a) Business Associate may only use or disclose PHI to perform functions, activities, or services for, or on behalf of, the Covered Entity as specified in:

Contract # _____, dated _____,

(known as "the Contract") between the parties, provided that such use or disclosure does not violate the policies and procedures of all HIPAA rules.

(b) Business Associate may use or disclose protected health information as required by law.

(c) Business Associate agrees to make uses and disclosures and requests for protected health information consistent with covered entity's Privacy and Security policies and procedures.

(d) Business Associate may not use or disclose protected health information in a manner that would violate Subpart E of 45 CFR Part 164 if done by covered entity, except for the specific uses and disclosures set forth below.

Attachment F

(e) Business Associate may disclose protected health information for the proper management and administration of business associate or to carry out the legal responsibilities of the business associate, provided the disclosures are required by law, or business associate obtains reasonable assurances from the person to whom the information is disclosed that the information will remain confidential and used or further disclosed only as required by law or for the purposes for which it was disclosed to the person, and the person notifies business associate of any instances of which it is aware in which the confidentiality of the information has been breached. The Business Associate will notify Covered Entity within 10 calendar days of such a disclosure.

(f) Business Associate may provide data aggregation services relating to the health care operations of the covered entity.

Discovery and Notification of Breach or Incident

(a) Business Associate shall implement reasonable systems, policies, and procedures for discovery of possible HIPAA violations and breaches (as defined by HIPAA rules), and shall ensure that its workplace members and other agents are adequately trained and aware of the importance of timely reporting of possible breaches.

(b) Upon the discovery of any HIPAA violation by the Business Associate or any member of its workforce, (which includes, without limitation, employees, subcontractors and agents), with respect to PHI, the Business Associate shall promptly perform a risk assessment to determine whether a breach of unsecured PHI has occurred and whether or not the breach has resulted in any harm to the owner of the PHI as required by HITECH Act.

(c) The Business Associate shall take immediate steps to mitigate any HIPAA violation with respect to the Covered Entity's PHI that is discovered and shall provide the Covered Entity with written documentation of such steps.

(d) If the Business Associate determines that a breach of unsecured PHI may have occurred, the Business Associate shall notify the Covered Entity of such breach or incident within ten calendar days. The Business Associate will specifically notify the DHS Privacy Officer in writing via posted mail as well as email and will confirm receipt of the email immediately by phone.

Such notice shall include:

- (i) A brief description of the occurrence, including the date of the breach and the date of discovery, if known;
- (ii) To the extent possible, the identity of each individual whose unsecured PHI has been, or is reasonably believed to have been, breached;
- (iii) A description of the types of unsecured PHI involved;
- (iv) A brief description of what the owners of the PHI can do to protect themselves;
- (v) A brief description of what the Business Associate is doing to investigate the breach, mitigate harm to affected individuals, and protect against further breaches; and,

Attachment F

(vi) Any other information that the Covered Entity reasonably believes necessary to enable it to comply with its obligations under HIPAA.

(e) The Business Associate shall continue to provide the Covered Entity with any additional information related to the required disclosures that becomes available following initial notice of the breach. The Business Associate will fully cooperate with the Covered Entity's investigation.

1) For a breach involving unsecured PHI of more than 500 individuals of a state or jurisdiction, the Business Associate shall promptly provide notice of such breach to the Covered Entity, the U.S. Secretary of Health and Human Services and any other federal authorities as required by HIPAA.

2) The Business Associate agrees to maintain documentation of all breaches of unsecured PHI for a minimum of six years after the creation of the documentation, and shall make such documentation available to the U.S. Secretary of Health and Human Services upon request.

(f) The Business Associate hereby agrees to indemnify and hold the Covered Entity harmless from and against liability and costs, including attorney's fees that are created by any breach resulting from the acts of its employees, agents or workforce members.

Permissible Requests by Covered Entity

Covered entity shall not request business associate to use or disclose protected health information in any manner that would not be permissible under Subpart E of 45 CFR Part 164 if done by covered entity.

Term and Termination

(a) Term. This Agreement shall be effective as of the effective date stated above and shall terminate when all of the protected health information provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity, is destroyed or returned to the Covered Entity, or if it infeasible to return or destroy the protected health information protections acceptable to Covered Entity are extended to such information in accordance with the termination provisions below, or on the date covered entity terminates for cause as authorized in paragraph (b) of this Section, whichever is sooner.

(b) Termination for Cause. Business associate authorizes termination of this Agreement by covered entity, if covered entity determines business associate has violated a material term of the Agreement and Business Associate has not cured the breach or ended the violation within the time specified by covered entity.

(c) Obligations of Business Associate Upon Termination.

Upon termination of this Agreement for any reason, business associate shall return to covered entity or, if agreed to by covered entity, destroy all protected health information received from covered entity, or created, maintained, or received by business associate on behalf of covered entity, that the business associate still maintains in any form. Business associate shall retain no copies of the protected health information.

Attachment F

(d) Survival. The obligations of business associate under this Section shall survive the termination of this Agreement.

Miscellaneous

(a) Regulatory References. A reference in this Agreement to a section in the HIPAA Rules means the section as in effect or as amended.

(b) Amendment. The Parties agree to take such action as is necessary to amend this Agreement from time to time as is necessary for compliance with the requirements of the HIPAA Rules and any other applicable law.

(c) Interpretation. Any ambiguity in this Agreement shall be interpreted to permit compliance with the HIPAA Rules.

IN WITNESS WHEREOF, each of the undersigned has caused this Agreement to be executed in its name and on its behalf effective as of the Effective Date at the top of this document.

Business Associate: Occupational Therapy of Conway
By: Dina A. Mankey
Title: President
Date: 4/26/19

Occupational Therapy of Conway, Inc.

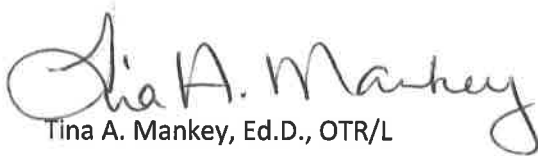
1626 Greenwood Circle

Conway, AR 72034

(501) 269-0970

Tinaot63@gmail.com

This business does not have an EEO policy in place at this time.

A handwritten signature in black ink that reads "Tina A. Mankey". The signature is written in a cursive style with a large, looped initial "T".

Tina A. Mankey, Ed.D., OTR/L

President

04/26/19



ARKANSAS STATE MEDICAL BOARD

1401 West Capitol, Suite 340, Little Rock, Arkansas 72201 (501) 296-1802 FAX: (501) 603-3555

www.amedicalboard.org

Detailed License Verification

Queried on: Monday, April 08, 2019 at: 3:39 PM

General Information

Name: Tina Ann Mankey, OT

Specialty:

Address Information

Mailing Address: 1626 Greenwood Circle

City/State/Zip: Conway, AR 72032

Phone: (501) 327-4412

Fax: (501) 450-3622

License Information

License Number: OTR308

Original Issue Date: 4/9/1986

Expiration Date: 9/30/2019

Basis: Exam

License Status: Active

License Category: Unlimited

No Information Found for: License Board History

TINA A. MANKEY, Ed.D., OTR/L
1626 Greenwood Circle
Conway, Arkansas 72035
501-269-0970
tinaot63@gmail.com

EDUCATION

- 2005 University of Arkansas at Little Rock
Doctorate – Higher Education
- 1996 University of Central Arkansas, Conway, AR
Master of Science degree in Occupational Therapy
- 1986 University of Central Arkansas, Conway, AR
Bachelor of Science degree in Occupational Therapy

PROFESSIONAL LICENSES AND CERTIFICATIONS

- 2016 University of Arkansas of Medical Sciences (UAMS) Interprofessional Education
Master Facilitator
- 1985 Arkansas State Medical Board, license to practice occupational therapy
- 1986 National Board for Certification in Occupational Therapy

ACADEMIC AND PROFESSIONAL APPOINTMENTS

University of Central Arkansas, Department of Occupational Therapy

- | | |
|----------------|---|
| 2018 – present | Interim Program Director |
| 2016 – present | Doctoral Capstone Coordinator & Professor |
| 2010 – 2016 | Associate Professor, tenured |
| 2005 – 2010 | Assistant Professor, tenure-track |
| 1997 – 2005 | Clinical Instructor I |

CLINICAL EXPERIENCE

- | | | |
|-----------------------|------------------------|-----------------------------------|
| 1988 – present | Occupational Therapist | Occupational Therapy of Conway |
| 1994 – 1997 | Occupational Therapist | Conway Public Schools, Conway |
| 1988 – 1994 | Occupational Therapist | private practice, Central AR |
| 1985 – 1988 | Occupational Therapist | J.L. McClellan Veteran's Hospital |

TEACHING EXPERIENCE

GRADUATE

OTHY 6404 Occupational Therapy Assessments
OTHY 6307 Theories in Occupational Therapy
OTHY 6321 Administration & Management
OTHY 7317 Applied Research I
OTHY 6510 Holistic Interventions – Birth to Young Adult
OTHY 7318 Applied Research II
OTHY 7319 Applied Research III
OTHY 6309 Population and Community Based Programming
OTHY 7V50 Doctoral Capstone
OTHY 6330 Transdisciplinary and Collaborative Practices
OTHY 6354 Transdisciplinary Intervention of Young Children
(Assisted by teaching content on occupational therapy)
OTHY 6325 Occupational Therapy in Public Schools
OTHY 6340 Sensory Integration
OTHY 5316 Development for Occupational Performance I
OTHY 6220 Clinical Reasoning
OTHY 6346 Interdisciplinary Leadership in Pediatric Family-Centered Practice I
OTHY 6347 Interdisciplinary Leadership in Pediatric Family-Centered Practice II
OTHY 6317 Research I
OTHY 6318 Research II
OTHY 6510 Holistic Interventions Birth to Young Adult
OTHY 6404 Occupational Therapy Assessment
OTHY 6309 Population and Community-Based Programming
OTHY 6407 Theories in Occupational Therapy
OTHY 6321 Administration & Management

UNDERGRADUATE

OTHY 4316 Development for Occupational Performance I
OTHY 3220 Human Development II
OTHY 3375 Evaluation and Treatment in Pediatrics I
OTHY 4375 Evaluation and Treatment in Pediatrics II
OTHY 3101 Fieldwork Clinical Rotation II
OTHY 4100 Fieldwork Clinical Rotation III
OTHY 3330 Therapeutic Activities in Occupational Therapy

SCHOLARSHIP

PEER-REVIEWED PUBLICATIONS

Spence, A., Berg, L., Carroll, T., Hollenbeck, J., Majeski, K., & Mankey, T. (2019). *Evaluation of student preparation for postsecondary transition: An opportunity to demonstrate occupational therapy's distinct value*. Occupational Therapy Practice, American Occupational Therapy Association, Bethesda, Maryland.

Trujillo, C., Mankey, T., & Carroll, T. (2019). *State transition efforts: Advocacy in three states*. Occupational Therapy Practice, American Occupational Therapy Association, accepted for publication, Bethesda, Maryland.

Mankey, T., Filer, J., & McGee, M. (2017). *Trainees learning together using a solution-focused approach*. American Occupational Therapy Association EDSIS Quarterly Practice Connections. accepted for publication, February 2018.

Beard-Raymond, M. & Mankey, T. (2016). Parents' of children with disabilities lived experiences: Exploring outcomes of participation, *Occupational Therapy International*, not accepted

Mankey, T., Canizares, L., Krehel, C., & Warner, S. (2017). Voices of transition planning teams: Role and involvement of occupational therapy as a related service, in review

Mankey, T. (2014). Exploring funding for occupational therapy in transition services, *Journal of Occupational Therapy, Schools, & Early Intervention*, 7:3-4, 194-203.

Mankey, T. (2012). Educator's perceived role of occupational therapy in secondary transition, *Journal of Occupational Therapy, Schools, and Early Intervention*, 5 (2), 105 - 113. [Invited Author]

Mankey, T. (2011). Occupational therapists' beliefs and involvement with secondary transition planning, *Physical & Occupational Therapy in Pediatrics*, 31 (4), (in print). [40% acceptance rate]

GRANTS

EXTERNAL FUNDING

Mankey, T. & Acre, C. (2016). "Through My Lens" & "Come Grow with Us", Conway Human Development Center Volunteer Council, Conway, AR, \$500.00, community projects. (*awarded*)

Shultz, E., Deere, G.D., et al. (Mankey, T., Co-Investigator), 2016 - 2021. Leadership Education in Neurodevelopmental Disabilities (LEND) Grant submission to the U.S. Department of Health and Human Services for 5 years to the University of Arkansas for Medical Sciences (UAMS); subcontract to UCA, for a total of \$397,680, as support for (3) faculty salary for 5 years (*awarded*)

Pierce, D. & Phillips, B. (Mankey, T. expert panel), 2011. Exploring Development of Occupational Therapy Transition Outcomes (OTTO) Grant submission to the Institute of Education Sciences for 4 years to Eastern Kentucky University (EKU); subcontract to UCA, for a total of \$60,781, as support for salary (0.10 FTE) plus fringes per year (*authored but not funded*)

Shultz, E., Deere, G.D., et al. (Mankey, T., Co-Investigator), 2011. Leadership Education in Neurodevelopmental Disabilities (LEND) Grant submission to the U.S. Department of Health and Human Services for 5 years to the University of Arkansas for Medical Sciences (UAMS); subcontract to UCA, \$ 52, 104 (each year, Year 1 – Year 5,) for a total of \$260,520, as support for Tina Mankey, UCA Department of Occupational Therapy: \$ 13,082 salary (0.20 FTE) plus \$ 4,055 fringes) per year (*awarded*)

Schultz, E., Mankey, T., Brown, E., & Vinsant, N. (2010). Sensory Integration for Children with ASD: Evidence and Practice. Autism Treatment Network, Autism Speaks, May 2010, \$2,700. (*awarded*)

Hidecker, M., Crook, T. Filer, J. & Mankey, T. (2010). Investigating Contributing Factors of Parents' Decisions of Whether to Seek Services, Center for Disease Control/Association of University of Centers on Disabilities, April, 2010, \$48,656. (*authored but not submitted by UAMS*)

Mankey, T. & Johnson, J. (2010). Implementing I.M. Brainy Curriculum: Community Experiences for Occupational Therapy Students, The Brain Injury Association of Arkansas, an affiliate of the national organization, the Brain Injury Association of American, February, 2010, \$6,750.00. (*awarded*)

INTERNAL FUNDING

Mankey, T. (2017). LEND: Interdisciplinary Training for Future Leaders in the Lives of Our Children. University Research Council, \$270 (*awarded*)

Mankey, T. (2017). Media Monsters, University Research Council, \$300 (*awarded*)

Mankey, T. (2016). Parents' Voices: What Can OTs Learn? University Research Council, \$300 (*awarded*)

Mankey, T. (2016). Lived Experiences of Families: Outcomes of Participation in an Interprofessional Education Program, University Research Council, \$300 (*awarded*)

Mankey, T. (2015). Producing Roots: A Therapeutic Gardening Experience in a Rural Community Environment, University Research Council, \$300 (*awarded*)

Mankey, T. (2013). American Occupational Therapy Association Annual Conference, Instructional Development Center, \$985.32

Mankey, T. (2012). Building Evidence in Transition Services: Qualitative Inquiry of Transition Teams Regarding Occupational Therapy Services, University Research Council, \$5,617.50. (*awarded*)

Mankey, T. (2011). Outcome Analysis of Ready, Set, Go: An Occupational Therapy Model to Community Transition, University Research Council, American Occupational Therapy Association Annual Conference, Houston, TX, \$334.00. (*awarded*)

Mankey, T. (2011). Educator's Perceived Role of Occupational Therapy in Secondary Transition, University Research Council, to author an article in *Journal of Occupational Therapy, Schools and Early Intervention*, \$3,000.00 (*awarded*).

PRESENTATIONS

PEER-REVIEWED PRESENTATIONS

Mankey, T., Filer, J. & McGee, M. (2018). *Building Future Leaders: Using Solution-Focused Learning in Interprofessional Education*, accepted for poster presentation, American Occupational Therapy Association, New Orleans, LA.

Carroll, T., Schefkind, S., & Mankey, T. (2018)., *State advocacy in transition*, accepted for 1 ½ hour short course as am AOTA sponsored session, American Occupational Therapy Association, New Orleans, LA.

Halverson, M., Barrios, M, & Mankey, T. (2018). *Family-Centered Practice in Early Intervention: Parent and Occupational Therapy Practitioners Perceptions*, accepted for poster presentation, American Occupational Therapy Association, Salt Lake City, UT.

Carroll, T., Hollenbeck, J., Mankey, T., Rudd, L. & Spence, A. (2018). *Supporting Student Success through Occupation-Centered Assessment from K to 21*, accepted for 3-hour workshop, American Occupational Therapy Association, Salt Lake City, UT.

Filer, J. Mankey, T, & McGee, M. (2017). *LEND: Interdisciplinary Training for Future Leaders in the Lives of Our Children*, Early Childhood's 33rd Annual International Conference on Young Children with Special Needs and Their Families. Accepted for a marketplace presentation in Portland, Oregon.

Mankey, T. & Stoops, C. (2017). Media monsters: Promotion of health and wellness with elementary students, poster presentation, American Occupational Therapy Association, Philadelphia, PA.

Mankey, T., Hollenbeck, J. & Trujillo, C. (2017). *Where are we now? State and national efforts in secondary transition*, accepted for presentation, Conversations That Matter, American Occupational Therapy Association, Philadelphia, PA.

Filer, J., Mankey, T., & McGee, M. (October, 2016). Graduate students' perspectives of interprofessional education in the LEND program. DEC's 32nd Annual International Conference on Young Children with Special Needs and Their Families, accepted for poster presentation, Louisville, KY.

Mankey, T. & Saviers, B. (April, 2016). Parents Voices: What OT's Can Learn. 2 hour poster presentation. American Occupational Therapy Association, Chicago, IL.

Beard-Raymond, M. & Mankey, T. (April, 2016). Lived Experiences of Families: Outcomes of Participation in an Interprofessional Education Program. accepted for 2 hour poster presentation. American Occupational Therapy Association. Chicago, IL.

Harris, H. & Mankey, T. (2015). Producing Roots: A Therapeutic Gardening Experience in a Rural Community, accepted for a 2 hour poster presentation, American Occupational Therapy Association, Nashville, TN.

Mankey, Canizares, L., Krehel, C. & Warner, S. (2014). Building Evidence in Transition Services: Qualitative Inquiry of Transition Teams regarding Occupational Therapy Services, research presentation, American Occupational Therapy Association, Baltimore, MA.

Deere, D., Mankey, T. Canizares, L. & Golden, K. (2013). The Role of Sensory Processing Disorder in Autism and Fetal Alcohol Spectrum Disorder, accepted for a 3 hour presentation, National Association of Social Workers Annual Conference, Arkansas Chapter, North Little Rock, AR.

Mosley, L., Rowe, V., & Mankey, T. (2012). Effectiveness of Cooperative Learning in Occupational Therapy Education: Translating Evidence on Innovative Teaching Strategies, accepted for a 2 hour poster presentation, American Occupational Therapy Association, Indianapolis, IN.

Mankey, T. & Moore, J. (2012). Implementing IM Brainy Curriculum: An Approach to Preventing Brain Injuries with Preschool Children, accepted for a 2 hour poster presentation, American Occupational Therapy Association, Indianapolis, IN.

Mankey, T. (2012). Building Evidence in School-Based Practice: Exploring Educators' Perceptions of Occupational Therapy In Transition Services, accepted for a 2 hour poster presentation, American Occupational Therapy Association, Indianapolis, IN.

Pierce, D., Summers, K. & Mankey, T. (2011). Developing Occupational Therapy Secondary Transition Services: Research in Three States, Accepted for presentation as a

75 minute session for the 5th Annual Secondary Transition State Planning Institute, Charlotte, North Carolina

Orentlicher, M., Scheffkind, S., Pierce, D., & Mankey, T. (2011). (AOTA) Are you Ready to Provide Secondary Transition Services? as a 3-hour workshop at the American Occupational Therapy Association annual conference, Philadelphia, PA.

Mankey, T. (2011). Outcome Analysis of Ready, Set, Go: An Occupational Therapy Model to Community Transition, Accepted for presentation as a 1 hour research platform for the American Occupational Therapy Association annual conference, Philadelphia, PA.

Mankey, T. (2010). Occupational Therapists' Beliefs and Involvement with Secondary Transition Planning, Accepted for presentation as a 1 ½ hour research platform for the American Occupational Therapy Association annual conference, Orlando, FL.

Mankey, T. & Acre, C. (2010). Ready, Set, Go!: An Application of Occupational Therapy Model to Community Transition, Accepted for a poster presentation for a 2 hour presentation for the American Occupational Therapy Association annual conference, Orlando, FL.

INVITED PRESENTATIONS

Mankey, T. (2018). Related Services (OT): *Supporting Students using an Educational Model*, accepted for 1 hour session, Arkansas CEC conference, Little Rock, AR.

Mankey, T. (May 30, 2018). *Occupational Therapy in Transition: Where Are We Now?* 2018 Arkansas Rehabilitation Association Conference: Strength through Inclusion, Hot Springs, AR.

Mankey, T. (2017). *Related Services Supporting Students in the General Education Classroom: Educational Model vs. Medical Model*, 2017 Special Education Administrators' Academy with the Arkansas Department of Special Education, Hot Springs, AR

Mankey, T. (2017). *Occupational Therapy in Transition Services*, Arkansas Rehabilitation Services Transition Counselor Training: Building Our Bridge to Success, Ferndale, AR

Sample, J. & Mankey, T. (November, 2016). The role of occupational therapy in post-secondary transition services. Missouri Occupational Therapy Association, accepted for 2 hour workshop, Branson, MO.

Filer, J., Mankey, T. & McGee, M. (2015). Round-tables for Engaging an Alliance for

Collaborative Healthcare, Interprofessional Education Conference, invited for presentation, University of Central Arkansas, Conway, AR.

Mankey, T., Acre, C. & Moran, A. (2013). Sensory Approaches with Individuals with Developmental Disabilities, invited for a 4 hour workshop, Conway Human Development Center, Conway, AR.

Mankey, T. (2010). Sensory Integration: Putting the Pieces Together; Invited for presentation, Leadership Education in Neurodevelopmental and Other Related Disabilities (LEND), University of Arkansas Medical Sciences, Little Rock, AR

OTHER PRESENTATIONS

Mankey, T. (co-presenter along with LEND faculty) (July, 2016). IPE Summer Institute: Hands-On Problem-Based Learning in the Differential Diagnosis of Neurodevelopmental Disabilities in Children, University of Arkansas Medical Sciences, Little Rock, AR

George-Paschal., L & Mankey, T. (April, 2016). Assistive Technology (AT): Incorporating AT into activities at home, school, and work!" Parent Advocate Conference, Little Rock, AR

Deere, D., Mankey, T., Crook, T., Robinson, G. (2014). Setting the Stage for Engaged Students with FASD: What Allied Health Professionals Can Offer, Arkansas 2nd Annual Conference on Fetal Alcohol Spectrum Disorders, Little Rock, AR.

Mankey, T. (2013). Too Loud, Bright, Tight and Fast!! Living and Working in a Sensory World, accepted for a 1 hour presentation, Association of People Supporting EmploymentFirst, North Little Rock, AR.

Boaz, B. & Mankey, T. (2011). Filling the Occupational Void: How OTs can be a Part of the Transition Team! Arkansas Occupational Therapy Association, accepted for a 1 hour presentation, Little Rock, AR.

Mankey, T. & Boaz, B. (2011). Filling the Occupational Void: How OTs can be a Part of the Transition Team! Arkansas Council for Exceptional Children, accepted for a 1 hour presentation, Hot Springs, AR.

Filer, J., Mankey, T. McGee, M. & Siders, J. (2011). Special Education and Related Services Under IDEA. LEND Teleconference to the University of Southern Mississippi, University of Central Arkansas, University of Arkansas Medical Sciences, and Louisiana State University. 1 ½ hour presentation.

Mankey, T. (2010). The Role of Occupational Therapy Services in Secondary Transition

Planning, Accepted for presentation for a 1 hour presentation for the Transition Summit, sponsored by Arkansas Transition Team, Hot Springs, AR.

Mankey, T. (2010). Secondary Transition & Occupational Therapy: Making the Grade, Accepted for presentation for a 1 hour presentation for the Arkansas Council for Exceptional Children, Hot Springs, AR.

SERVICE

PROFESSIONAL COMMUNITY

Journal of Occupational Therapy Education (JOTE), reviewer, 2016 - present
American Journal of Occupational Therapy (AJOT), reviewer, 2016 - present
American Occupational Therapy Association EK Wise Scholarship, Reviewer, 2016
American Occupational Therapy Association Transition Task Group 2010 – 2013, 2015 - present
Facilitator, Arkansas Transition Summit, 2008 – present
American Occupational Therapy Association, Representative Assembly (RA), Arkansas Delegate, 2007 – 2010

EDUCATION COMMUNITY

University Committees

Sabbatical Review 2016 – 2017
Faculty Emeritus/Emerita 2015 – 2018
Faculty Grievance Committee 2011 – 2014
Faculty Tenure Appeal (called by Provost) (Barbara Clancy - chair)
UCA Child Study Center Advisory Board 2008 – 2011
Scholarship Committee 2008 - 2011
Faculty Development Committee 2008 - 2010
Academic Planning and Assessment 2008 - 2011

College Committees

CHBS Promotion and Tenure Committee 2015 – 2018
CHBS Curriculum and Assessment Committee Chair 2008-2011
Department of Health & Behavioral Sciences College Curriculum Committee Member 2007-2015

Departmental Committees

Occupational Therapy Chairperson Search Committee 2018 – present
Occupational Therapy Public Relations Committee 2016 - 2018
Occupational Therapy Advancement Committee Chairperson 2016 - 2017

Occupational Therapy Faculty Search Committee 2014 – 2018
Occupational Therapy Chairperson Search Committee 2014 – 2015, 2018
Kinesiology & Physical Education Promotion and Tenure Committee 2013, 2014
Occupational Therapy Promotion and Tenure Committee 2011, 2012, 2014, 2017
Occupational Therapy Curriculum Committee Chairperson 2015 – 2017
Occupational Therapy Curriculum Committee Member 2006 – present
Occupational Therapy Admissions Committee Member 2005 - 2012
Advisor – Students for Pre-Occupational Therapy Association 2004 – 2012
Occupational Therapy Accreditation Committee Member 2003 – present

Student Service

Faculty Advisor, Best Buddies, Spring 2015 - 2017

Faculty Advisor, Students for Pre-Occupational Therapy Student Association, Fall 2004 to 2012

Beard-Raymond, M. (2015). *Exploring family outcomes from participation in the Leadership Education in Neurodevelopmental (LEND) program*, student thesis [Thesis Chairperson]

Jones, A. (2015). *Occupational Therapy and Secondary Transition Services: Making a Difference*, student research project [Chairperson]

Hansen, N. (2009) *Aligning Frameworks and Legislation Concerning Transition Services*, student honors paper [Faculty Advisor]

Hansen, N. (2010). *Occupational Therapy and Secondary Transition Services: Making a Difference*, student thesis [Thesis Chairperson]

PROFESSIONAL DEVELOPMENT

July 2018 Educationally Relevant Occupational and Physical Therapy: Our Role as Related Service Providers. Lauren Holahan, Occupational Therapy and Medicaid Consultant to the North Carolina Department of Public Instruction, sponsored by Arkansas Easter Seal, Little Rock, AR

April 2018 American Occupational Therapy Association Annual Conference, Salt Lake City, UT

October 2017 DEC's 33rd Annual International Conference on Young Children with Special Needs and Their Families, Portland, OR

April 2017 American Occupational Therapy Association Annual Conference, Philadelphia, PA

October 2016 DEC's 32nd Annual International Conference on Young Children with Special Needs and Their Families, Louisville, KY.

October 2016 UCA Department of Occupational Therapy/AROTA Fall Conference, Conway, AR

July 2016 ArkStart, The Center for START Services, Clinical Education Team (CET) Case Presentation, Diagnostic Overshadowing in ID Population, Little Rock, AR

April 2016 American Occupational Therapy Association Annual Conference, Chicago, IL

April 2015 American Occupational Therapy Association Annual Conference, Nashville, TN

March 2015 Early Intervention for Social-Emotional Development: Cutting Edge Treatment for Birth to 5 Years, Little Rock, AR

November 2014 Promoting Relationships and Learning through Peer-Mediated Interventions and Equipping Adolescents with Disabilities for the World of Work, North Little Rock, AR

October 2014 Transition Summit, AR Transition Services, Hot Springs, AR

September 2014 Arkansas' 2nd Annual Conference on Fetal Alcohol Spectrum Disorders, Little Rock, AR

April 2014 American Occupational Therapy Association Annual Conference, Baltimore, MA

July 2013 Visual Processing Therapy: Strategies for Helping Children with Learning Disabilities, Sensory Processing Disorder, ADHD, Autism and Acquired Brain Injury, Little Rock, AR

April 2013 American Occupational Therapy Association Annual Conference, San Diego, CA

August, 2012. Self-Regulation for Children: Keeping the Body, Mind & Emotions on Tasks in Children with Autism, ADHD or Sensory Disorders, Little Rock, AR.

December, 2011. AOTA Specialty Conference on Autism, Baltimore, MA.

April, 2010. Role of Occupational Therapy in Transitions, American Occupational Therapy Association pre-conference, Orlando, FL.

April, 2010. Poster sessions on occupational therapy practice and education (2 hours), American Occupational Therapy Association, Orlando, FL.

April, 2010. Team Up for Autism Conference, Arkansas Children's Hospital, Little Rock,
AR



ARKANSAS STATE MEDICAL BOARD

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www.armedicalboard.org

Detailed License Verification

Queried on: Monday, April 08, 2019 at: 3:40 PM

General Information

Name: Alicia Moran, OT
Specialty:

Address Information

Mailing Address: 1025 Knights Dr
City/State/Zip: Conway, AR 72034
Phone: (501) 472-3630
Fax:

License Information

License Number: OTR2389
Original Issue Date: 10/11/2010
Expiration Date: 5/31/2019
Basis: Exam
License Status: Active
License Category: Unlimited

License Number: O-T1068
Original Issue Date: 8/19/2010
Expiration Date: 11/27/2010
Basis: Exam
License Status: Inactive
License Category: Temporary

ALICIA MORAN

1025 Knights Dr Conway, AR 72034 · 501.472.3630
aliciacai_05@msn.com

Occupational therapist well versed in the treatment and care of individuals with a variety of diagnoses. Throughout my career I have dedicated myself to enriching the lives of those in my care by helping them improve their motor, sensory processing, and executive functioning skills. I am seeking a position that will allow me to continue to help others achieve while continuing to challenge me and grow my own skill set.

EXPERIENCE

NOVEMBER 2012 – CURRENT

OCCUPATIONAL THERAPIST, OCCUPATIONAL THERAPY OF CONWAY

In this position I am responsible for the evaluation, scheduling, and treatment of individuals ages six years to 75+. I also stock, repair, and fabricate splints, helmets, and adaptive eating equipment; manage the daily activities of occupational therapy aides; and treat orthopedic injuries under the direction of doctors.

JANUARY 2011 – NOVEMBER 2012

OCCUPATIONAL THERAPIST, PEDIATRICS PLUS THERAPY SERVICES

Evaluated, scheduled, and treated children ages birth to 18 years with a variety of diagnoses and abilities.

SEPTEMBER 2010 – JANUARY 2011

OCCUPATIONAL THERAPIST, PEDIATRIC THERAPY ASSOCIATES

Evaluated, scheduled, and treated children ages birth of five years with a variety of diagnoses and abilities.

EDUCATION

AUGUST 2010

MASTER OF SCIENCE IN OCCUPATIONAL THERAPY

UNIVERSITY OF CENTRAL ARKANSAS

DECEMBER 2008

BACHELOR OF SCIENCE OCCUPATIONAL THERAPY EMPHASIS

UNIVERSITY OF CENTRAL ARKANSAS

SKILLS

- Experience working with individuals of all ages with many diagnoses including but not limited to: Autism Spectrum disorders, Down's Syndrome, Angelman Syndrome, Intellectual disability, Cornelia de Lange Syndrome, Adam's Oliver Syndrome, Developmental Delay, Sensory Processing disorder and Cerebral Palsy.
- Experience working with clients with dual or multiple diagnoses including multiple combinations of Intellectual disorders and mental health diagnoses.
- Management experience
- Assisted in the design and implementation of an accessible playground and park
- Experience supervising occupational therapy students
- Completed continuing education in Toomey approach for Picky Eaters and Problem feeders and implemented in practice
- Sewing; by hand and machine
- Splint repair, modification, and fabrication
- Adaptive eating equipment repair and customization
- Experience in the evaluation and treatment of upper extremity orthopedic injuries
- Management of use of onsite sensory room
- Wheelchair accessibility modification
- Knowledge of residential care facility operations
- Experience working as part of an interdisciplinary team
- Experience serving on dysphagia committee reviewing cases and making recommendations
- Experience in educating and instructing direct care givers in the purpose of occupational therapy as well as how to perform specific OT related tasks and programs during new employee training

ACTIVITIES

Throughout my professional career I have been passionate about helping the individuals I treat succeed in all aspects of life. During my college career I was able to volunteer with a local program that facilitated acting and stage activities for children with and without disabilities; upon graduation I was given the opportunity to direct a subset of that program in another community.



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Detailed License Verification

Queried on: Monday, April 08, 2019 at: 3:41 PM

General Information

Name: Emily Seal McCarron, OT
Specialty:

Address Information

Mailing Address: 4450 Tree House Drive
City/State/Zip: Conway, AR 72034
Phone: (501) 205-1570
Fax:

License Information

License Number: OTR1542
Original Issue Date: 5/18/2000
Expiration Date: 6/30/2019
Basis: Exam
License Status: Active
License Category: Unlimited

License Number: O-T0043
Original Issue Date: 2/8/2000
Expiration Date: 6/15/2000
Basis: Exam
License Status: Inactive
License Category: Temporary

EMILY MCCARRON

4450 Tree House Drive, Conway, AR 72034 ♦ (501) 472-9064 ♦ emilym@conwaycorp.net

PROFESSIONAL SUMMARY

Certified Occupational Therapist with 15 plus years of experience providing comprehensive evaluation and treatment for all ages in various multifaceted settings. Skilled at collaborating in team environments, completing occupational therapy protocols and focusing on enabling patients to improve quality of life. Extensive experience with all ages from newborns to geriatrics. History of working with many diagnoses that include but are not limited to: developmental delay, cerebral palsy, autism spectrum disorder, intellectual disability, dementia, ADHD, disruptive behavior disorder, obsessive-compulsive disorder, sensory deficit disorder, Prader Willi Syndrome, traumatic brain injury, oppositional defiant disorder, seizure disorder, pervasive developmental disorder, mood disorder, and bipolar disorder. Licensed Occupational Therapist in the State of Arkansas and Board Certified.

SKILLS

- Direct patient care
- Patient evaluations
- Treatment Planning
- Multidisciplinary team collaboration
- Evaluate use of helmets and make recommendations and modifications as related to falls and/or seizures
- Upper Extremity Splinting and Modification
- Ordering and modifying feeding equipment
- Sensory Processing Consultation
- Wheelchair Adaptation
- First Aid CPR and AED Certified

WORK HISTORY

Occupational Therapist, 01/2016 to Current

Occupational Therapy Of Conway – Conway, AR

- Perform admission evaluations, comprehensive evaluations, annual reviews, and assessments to recommend best treatment for individual clients in residential living center.
- Attend and participate in admission staffings for residential clients to help assess needs and create goals with a multi-disciplinary team of professionals.
- Determine occupational therapy treatment plans for direct and indirect care clients.
- Provide direct one-on-one therapy for clients and assess goals to determine progress annually.
- Assess and write progress reports monthly on each direct client.

- Consulted with direct-care staff and teachers to implement best methods to achieve therapy goals and greatest level of success in current environment.
- Conduct assessments annually for indirect care patients and devise appropriate programming plans. Indirect care includes but is not limited to range of motion and/or therapeutic activity program, helmet program, splint program, and/or hygiene program.
- Supervise occupational therapy aides that carry out the therapeutic activity program.
- Measure upper extremity range of motion annually using a goniometer with all indirect and direct care clients.
- Evaluate for programming of helmets and provide modifications as related to falls and/or seizures.
- Assess and participative in treatment plan for appropriate splinting of the upper extremities and make modifications as necessary.
- Collaborate with speech therapy to provide appropriate adaptive feeding equipment for all residence.
- Order feeding equipment and make modifications when necessary.
- Follow orthopedic upper extremity injuries as recommended by physician and present them at the orthopedic clinic head onsite.
- Evaluate and assess on site injuries as related to the upper extremities under the supervision of a physician.
- Manage and determine appropriate use of sensory room onsite.
- Participate in educating new employees on what occupational therapy roles look like in a residential care facilities during new employee trainings.
- Observation of occupational therapy students and oversee projects conducted through the local university.
- Supervise observation students applying for admission to OT and COTA school.
- Work with a variety of developmentally disabled individuals with dual diagnosis aging from 6 years old to over 70 years.

Occupational Therapist, 08/2012 to 05/2014

Arch Ford – Morrilton, AR

- Performed evaluations and assessments to recommend best treatment for individual patients at early intervention facilities.
- Provided direct treatment to students and consulted with teachers/staff to implement classroom strategies.
- Provided sensory integration consultation to daycares while giving suggestions for changing the environment to accommodate students better.

Occupational Therapist, 08/2008 to 05/2014

Vilonia Public School – Vilonia

- Provided school based occupational therapy that included evaluation, treatments, and consultation of school age children.
- Participated in evaluation conferences and annual reviews with other professionals.

- Collaborated with teachers and staff to help modify environment for students to succeed in and provide sensory consultation as needed.

Occupational Therapist, 05/2010 to 08/2012

Pediatric Plus – Conway, AR

- Provided summer occupational therapy services for school aged kids to include evaluation, treatment plans, and direct treatment.
- Established relationship and report with parents/caregivers to help caregiver success in the home environment.

Occupational Therapist, 08/2002 to 04/2004

Integrity, Inc. – Little Rock, AR

- Performed evaluations, assessments, and treatment for children in a development daycare.
- Worked with a variety of developmentally disabled children to include but not limited to developmentally delayed, cerebral palsy, autism spectrum disorder, and intellectual disability.

Occupational Therapist, 01/2000 to 08/2002

Integrated Therapy For Kids – North Little Rock, AR

- Performed evaluations, assessments, and treatment to children from infant to 18 years of age in a clinic setting and home setting.

EDUCATION

Bachelor Of Science: Occupational Therapy, 1999

University Of Central Arkansas - Conway, AR

CERTIFICATIONS

NBCOT - Certification Number 1040340

Registered/Licensed Occupational Therapist - OTR 1542

Lisa Hancock
ABLE Therapy and Consultative Services, Inc.
1242 Turnberry Dr.
Conway, AR 72304
March 28, 2019

To whom it may concern:

This letter is a letter of reference for Occupational Therapy of Conway, Inc. I have worked alongside this company since 1999 at Conway Human Development Center (CHDC). CHDC is licensed by the Arkansas Office of Long Term Care as an Intermediate Care Facility/Serving Individuals with Intellectual Disabilities (ICF/IID). There are approximately 500 residents served at CHDC.

Occupational Therapy of Conway, Inc. has provided quality therapists over the years to include admission assessments, development of programs, goals and objectives, splinting to prevent contractures and stabilize fractures, active treatment of school aged residents, special projects, etc.

Over the years Occupational Therapy of Conway, Inc. has provided consistent, long term therapists that have taken a vested interest in the residents served. This has allowed the continuity of care that is a necessity in serving our residents with superb care. Over the years this company has helped with numerous extra projects and helped us during some very difficult situations.

Feel free to contact me at any time if further information is needed.

Sincerely,

A handwritten signature in cursive script that reads "Lisa Hancock".

Lisa Hancock
President

501-733-1971
lisa.hancock@hotmail.com

RGT, Inc.
3055 Robert Ott Circle
Conway, AR 72034

March 28, 2019

Letter of Recommendation:

It is with pleasure that I recommend the services of Occupational Therapy of Conway, Inc. I have worked alongside and consulted with many of their therapists from 1999 through 2016 at the Conway Human Development Center in Conway, Arkansas.

The Conway Human Development Center is an Intermediate Care Facility serving almost five hundred individuals with intellectual disabilities. The individuals served at CHDC range in age from the pediatric to the geriatric individual. As such, critical skills are necessary to meet the unique challenges of each age population. Therapists from Occupational Therapy of Conway consistently provided such skills including the patience and empathy needed to work with any, and all, individuals needing occupation therapy services including, but not limited to, splinting, range-of-motion activities for the prevention of contractures as well as active programs to working on activities of daily living to improve an individual's quality of life.

Overall, the therapists working for Occupational Therapy of Conway can be counted on to provide exceptional services and I would happily recommend them! Please contact me if I can be of further assistance.

Sincerely,



Rhonda Thompson

RGT, Inc. President

501-730-2041

rgtmessages@hotmail.com

Lisa Hancock
The Shaffer Co., Inc.
1242 Turnberry Dr.
Conway, AR 72304
March 27, 2019

To whom it may concern:

Occupational Therapy of Conway, Inc. has provided services under my supervision at the Conway Human Development Center for almost 20 years. Conway Human Development Center is licensed by the Arkansas Office of Long Term Care as an Intermediate Care Facility/Serving Individuals with Intellectual Disabilities (ICF/IID). There are approximately 500 residents served at CHDC.

Occupational Therapy of Conway, Inc. has provided quality therapists over the years to include admission assessments, development of programs, goals and objectives, splinting to prevent contractures and stabilize fractures, active treatment of school aged residents, and a host of other services too many to mention.

It has been a pleasure to work with such talented and creative therapists!

Feel free to contact me at any time if further information is needed.

Sincerely,



Lisa Hancock
President

501-733-1971
lisa.hancock@hotmail.com