Developing site-specific learning objectives



Caryn Johnson, MS, OTR/L, FAOTA Thomas Jefferson University Department of Occupational Therapy Used by permission, Johnson, 2014

Why Site-Specific Objectives?

The FWPE can be used across all practice settings.....

......however, site specific objectives will *operationalize* & clarify expectations for student's performance of items within the practice setting. (Costa, 2004)

Operationalizing expectations

- Should correspond to FWPE
- Resources on AOTA web site
- Reflect unique competencies required to provide OT services
- Structure learning experience
- Facilitate ongoing monitoring & evaluation of progress

How? When? Where?

- Staff meetings
- Small service groups
- Current students
- AOTA website
- Similar facilities
- Others?

Objectifying FW Expectations

- Performance (observable behavior)
- Condition (specifics of situation)
- Criteria (level of independence, timeline)

Following assignment of each new patient, student will, within 24 hours, independently perform a complete Initial Evaluation within one hour to at least 6 patients by week 12.

Example: Safety Objective

- Item #2: Adheres consistently to safety regulations. Anticipates potentially hazardous situations and takes steps to prevent accidents.
- Site specific objectives (incomplete?):
 - Uses transfer belts during all transfers
 - Keeps sharps secure at all times
 - Consistently monitors residents during community outings
 - Sets limits to prevent undesirable student behavior

Example: Basic Tenet Objective

Item #6: Clearly, confidently and accurately communicates the roles of the OT and OTA to clients, families, significant others, colleagues, service providers, and the public.

What if no OTA in facility?

Possible Solution

The student will present an in-service to the rehab staff on the potential role of the COTA.

Better yet.....

■ When there is no COTA on staff, student will research the role of COTA's in like settings and present a 30 minute in-service on the potential role of the COTA in evaluation and treatment to staff by week 9.

Example: Intervention Objective

- Item #21: Selects relevant occupations to facilitate clients meeting established goals.
- Site specific objective: Based on evaluation results of patients with a variety of diagnoses, student consistently selects activities, and introduces them into the treatment plan, that demonstrate a purposeful, goal-oriented outcome. The selected activities consider the individual patient's values, interests and abilities.

Example: Professional Behavior Objective

- Item #42- Demonstrates respect for diversity factors of others including but not limited to sociocultural, socioeconomic, spiritual and life style choices
- When assigned patients from cultural backgrounds unfamiliar to the student, student investigates diversity factors and appropriately modifies behavior or interaction style 95% of the time.

	pecific Objectives for Fieldwork Level II y:
1.	Student Goal: Adheres to the American Occupational Therapy Association's Code of Ethics and all federal, state, and facility regulations. Examples: Medicare, Medicaid, client privacy, social media, human subject research
	Site Specific Objectives:
	verbalizes the importance of the Occupational Therapy Code of Ethics verbalizes the implication of non-adherence to the Occupational Therapy Code of Ethics
	follows all principles of the Occupational Therapy Code of Ethics follows all legal codes and laws regarding payers and scope of practice follows all HIPAA and FERPA guidelines
	follows all rules of the facility advocates as needed for clients and clients' families other:
2.	Student Goal: Adheres to safety regulations and reports/documents incidents appropriately. Examples: fire safety, OSHA regulations, body substance precautions, emergency procedures Site Specific Objectives:
	aware of facility safety standards follows all safety precautions and procedures perceptive to safety situations resolves environmental safety issues is consistent with safety standard compliance other:
3.	Student Goal: Ensures safety of self and others during all fieldwork related activities by anticipating potentially unsafe situations and taking steps to prevent accidents.
	Site Specific Objectives:
	 use equipment appropriately and properly initiates safety regarding individual client needs alert to client's needs puts client's needs first recognize potential hazards and works to reduce them prevents injuries

expects the unexpected adheres to intervention and client condition contraindication and precautions grades and modifies intervention safely aware of consequences if poor safety judgement occurs plans interventions with safety in mind a consistent with safety standard compliance as self-aware and asks for help as needed dentifies client information related to safety issues able to correctly assess safety situations and identify resolutions other:
Goal: Articulates the values, beliefs, and distinct perspectives of the all therapy profession to clients and other relevant parties clearly, and accurately. Examples: families, caregivers, colleagues, service administration, the public
c Objectives:
correctly define areas associated with occupational therapy values, beliefs, nature awareness of occupational therapy philosophy and its impact with clients usiastic about sharing information about the philosophy of occupational es occupational therapy values, beliefs, and distinct nature into intervention strates an awareness and understanding of Occupational Therapy Practice Domain and Process (current version)
Goal: Articulates the value of occupation as a method and desired foccupational therapy to clients and other relevant parties clearly, and accurately. Examples: families, caregivers, colleagues, service administration, the public
o Objectives:
explain the value, purpose of, and rational for occupational therapy services buse, family, significant other, colleagues, team members, and community ces self and occupational therapy information confidently es others about occupational therapy strates ability to incorporate occupation into all intervention

families, caregivers, colleagues, service providers, administration, the public
Site Specific Objectives:
has awareness of occupational therapist/occupational therapy assistant roles explains occupational therapy practitioners' role delineation clearly and correctly (identifying similarities and differences) to client, spouse, family, significant other, colleagues, team members, and community members demonstrates an awareness and understanding of when to seek knowledge of occupational therapist other:
7. Student Goal: Obtains sufficient and necessary information about factors that supports and hinder occupational performance from relevant sources throughout the evaluation process. Examples: record or chart reviews, client, family, caregivers, service providers
Site Specific Objectives:
reviews client chart and gleans appropriate information separates relevant from irrelevant client information identifies client's interests, beliefs, values is consistent with daily or weekly data collection of clients gathers all needed data from all appropriate sources reports gathered data accurately, timely, and in an organized manner to supervisor other:
8. Student Goal: Establishes services competency in assessment methods, in accordance with setting procedures and applicable laws, by administering assessments accurately and efficiently to ensure findings are valid, reliable, and timely. Examples: record or chart reviews, observations, interviews, standardized and non-standardized assessments
Site Specific Objectives:
reviews client record or chart observe all areas of client behavior recognizes which assessment tools are appropriate for which clients (based on client factors, abilities, and needs) correctly administers assessments as appropriate other:

6. Student Goal: Articulates the role of occupational therapy practitioners to clients and other relevant parties clearly, confidently, and accurately. Examples:

9. Student Goal: Administers delegated assessments using appropriate procedures and protocols. Examples: standardized and non-standardized assessments, interviews, and observations
Site Specific Objectives:
become familiar, in a timely manner, with facility given assessments follows all assessment procedures and protocols correctly and safely be responsible for utilizing these specific assessments:
other:
10. Student Goal: Assists with interpreting information in relation to the client's needs, factors, and performance. Examples: record or chart reviews, observations, interviews, standardized and non-standardized assessments. Includes the consideration of psychosocial factors.
Site Specific Objectives:
 initiates collaboration with supervisor correctly identify client's needs and abilities be able to relate client observations to supervisor asks supervisor questions when in doubt understands the need to utilize standardized analysis procedures (when applicable) assists in scoring these specific assessments:
other:
11. Student Goal: Reports results clearly, accurately, and concisely, reflecting the client's occupational performance.
Site Specific Objectives:
reports clearly reports concisely reports relevant data identifies not to report irrelevant data provide complete details of client's assessments written reports legible and forms fully completed other:

12. Articulates a clear and logical rationale for the intervention process based on the evaluation results and other relevant considerations. Examples: contexts, theories, frames of references, practice models, and evidence

Site Specific Objectives:
 initiate collaboration with supervisor intervention process based on evaluation results and contexts of client client needs connected to evaluation results interventions reflect evaluation data able to rationalize use of frames of references, practice models, and evidence for interventions other:
13. Student Goal: Under the supervision of and in cooperation with an occupational therapy practitioner, uses professional literature to make informed intervention decisions. Examples: textbooks, journal articles, other relevant and reliable informational resources
Site Specific Objectives:
utilizes Evidence Based Practice when choosing interventionsactively seeks knowledge from professional literature to guide intervention sessionsother:
14. Student Goal: Selects client-centered and occupation-based interventions tha motivate and challenge the client to achieve established goals.
Site Specific Objectives:
activities are determined based on client's needs time frames for intervention session and overall duration of service appropriate for setting and client needs interventions are client-centered interventions are client driven interventions are occupation based interventions are chosen to provide appropriate challenge for client success
15. Student Goal: Implements client-centered and occupation-based intervention plans.
Site Specific Objectives
plan demonstrates appropriate scheduling of clients plan is client centered and client driven

plan reflects assessment data
plan identified priorities determined by client
plan demonstrates input from family or significant other or other professional, as
appropriate
plan written in acceptable facility format
daily session plans identified and approved prior to client session, as appropriate,
and in a timely manner
service delivery area readied prior to client arrival, as appropriate, and in a timely
manner
provide safe and effective client centered and occupation based intervention other:
otner
16. Student Goal: Modifies the task and/or environment to maximize the client's
performance. Examples: upgrades/downgrades task; arranges client's workspace for optimal performance
Site Specific Objectives:
correctly identify changes in client's needs and abilities to ensure correct
modifications are provided
grades activities to motivate and challenge clients in order to facilitate progress
prepares materials and environment before interventions, as appropriate
other:
grade activities based on various client conditions
resolve client concerns regarding activity performance
identify various intervention activity options on analysis findings
modifies activities with variety of client conditions
flexible with changing planned activities
initiates with supervisor discussion regarding modifying plan
modifies equipment for activities
utilizes standard equipment for activities
modifies goals appropriately and timely
changes activities if client is unsuccessful
progresses client activities when appropriate
identifies behaviors or situations that warrant modification

17. Student Goal: Recommends modification or termination of intervention plan based on the client's status.

Site Specific Objectives:
recognizes client fatigue, distress, or condition problems identifies transition within continuum of care knows when to seek changes or when to cease service provision to meet client's ongoing needs Aware of other settings appropriate to continue provision of occupational therapy services other:
18. Student Goal: Documents the client's response to services in a manner that demonstrates the effectiveness of interventions.
Site Specific Objectives:
has strong rapport (use of therapeutic use of self) with clients, which is used in identifying client's needs correctly reads and interprets client's family's, spouse's, and caregiver's cues recognizes client fatigue, distress, or condition problems and documents accordingly other:
19. Student Goal: Demonstrates through practice or discussion the ability to collaborate with and assign appropriate tasks to, as indicated, the occupational therapy aide or others whom responsibilities might be assigned. Examples: paraprofessionals, nurses' aides, volunteers
Site Specific Objectives:
understands and is able to distinguish role of occupational therapy practitioner, occupational therapy aide, and volunteers for practice setting/facility understands what tasks are appropriate to delegate to others understands supervision requirements for occupational therapy aide and volunteers for practice setting/facility other:

20. Student Goal: Demonstrates through practice or discussion an understanding of costs and funding systems related to occupational therapy services, such as federal, state, third party, and private payers. Examples: billing for OT services, inventory and ordering of supplies for OT services, and options for client procurement of adaptive equipment

23. Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, services providers, administration, the public

Site Specific Objectives:		
demonstrates confidence with communication to all others is assertive with other occupational therapy and rehabilitation staff is assertive with clients participates in family teaching participates in rehabilitation meetings demonstrates sensitivity when speaking to clients, families, and others commands the attention of the client communicates appropriately with other disciplines and families at team meetings information presented is accurate, clear, and concise states rationale for all aspects of occupational therapy to client, family, and others communicates thoughts on client and care plan to supervisor in a timely manner regularly initiates reports to supervisor adheres to confidentiality policies during reporting contacts other services providers as needed recognizes client fatigue, distress, or condition problems and documents accordingly other:		
other:		
24. Produces clear and accurate documentation. Examples: legibility, spelling, punctuation, grammar, adherence to electronic health documentation requirements		
punctuation, grammar, adherence to electronic health documentation		
punctuation, grammar, adherence to electronic health documentation		
punctuation, grammar, adherence to electronic health documentation requirements		
punctuation, grammar, adherence to electronic health documentation requirements Site Specific Objectives: use of clinical reasoning is evident in notes correct identification of intervention toward progress document per payer source guidelines concise, clear, accurate correct grammar and spelling follows facility format includes all needed content completes case meeting reports accurately, fully, and concisely document all subjective and observable data		
punctuation, grammar, adherence to electronic health documentation requirements Site Specific Objectives: use of clinical reasoning is evident in notes correct identification of intervention toward progress document per payer source guidelines concise, clear, accurate correct grammar and spelling follows facility format includes all needed content completes case meeting reports accurately, fully, and concisely		
punctuation, grammar, adherence to electronic health documentation requirements Site Specific Objectives: use of clinical reasoning is evident in notes correct identification of intervention toward progress document per payer source guidelines concise, clear, accurate correct grammar and spelling follows facility format includes all needed content completes case meeting reports accurately, fully, and concisely document all subjective and observable data by midterm can write notes with minimal revisions all applicable identification information in note (date, name, intervention code, time in/time out, doctor's name, etc)		
punctuation, grammar, adherence to electronic health documentation requirements Site Specific Objectives: use of clinical reasoning is evident in notes correct identification of intervention toward progress document per payer source guidelines concise, clear, accurate correct grammar and spelling follows facility format includes all needed content completes case meeting reports accurately, fully, and concisely document all subjective and observable data by midterm can write notes with minimal revisions all applicable identification information in note (date, name, intervention code, time		

writes cohesively forms fully completed adheres to confidentiality standards in notes other:				
25. Student Goal: Collaborates with fieldwork educator(s) to maximize the learning experience. Examples: initiates communication, asks for feedback about performance, identifies own strengths and challenges				
Site Specific Objectives:				
 not shy with interactions goes with flow of fieldwork educator and facility observes professional boundaries with all others is self-aware to ask for assistance when needed seeks feedback on performance and records as necessary to correctly perform duties 				
is able to identify skill areas that need improvement is able to identify skill areas that are strengths other:				
26. Student Goal: Takes responsibility for attaining professional competence by seeking out learning opportunities and interactions with fieldwork educator(s) and others.				
Site Specific Objectives:				
interacts appropriate with support staff and others seeks further information about populations, interventions, family needs, and conditions integrates into rehabilitation team or department initiates reading charts initiates asking questions demonstrates reflection on new learning identifies possible solutions to problem situations demonstrates awareness and participates in total quality management demonstrates awareness for and supports local, state, and national association activities consistently and appropriately participates in fieldwork educator-student relationship other:				

27. Student Goal: Responds constructively to feedback in a timely manner.		
Site Specific Objectives:		
incorporates feedback into client interactions and all other duties as appropriate initiates discussion regarding self-modification with fieldwork educator is not defensive when discussing fieldwork educator feedback other:		
28. Student Goal: Demonstrates consistent and acceptable work behaviors. Examples: punctuality, initiative, preparedness, flexibility, dependability, professional appearance		
Site Specific Objectives:		
verbalizes the importance of the Occupational Therapy Code of Ethics willing to stay late and come early assists other without being asked to assist is a team member is self-disciplined is prepared for assignments, activities, and duties has a professional appearance, per facility and Program regulations is goal oriented with thinking and actions attends to personal matters without interfering with Fieldwork Level II duties is organized with all actions and duties moves well within and between practice settings and facilities appears enthusiastic appears eager to learn is dependable assumes duties for department upkeep follows through on assigned duties other:		
29. Student Goal: Demonstrates effective time management. Examples: plans ahead, adheres to schedules, completes work in expected timeframe		
Site Specific Objectives:		
<pre> arrives on time completes intervention sessions timely completes non-client duties times (documentation, scheduling of clients, department upkeep, client billing, etc) ready and prepared to provide client service at scheduled times ready and prepared for meetings</pre>		

adapts well to other's and the facility's schedules reports for all scheduled days of Fieldwork Level II rotation, unless excused (and seeks approval in a timely manner) adjusts priorities based on demands of facility and daily schedule able to monitor and prioritize own duty load other:		
30. Student Goal: Manages relationships effectively through therapeutic use of self and adjusts approach to meet the needs of clients and others.		
Site Specific Objectives:		
has strong rapport with clients correctly reads and interprets client's and family's cues, verbal language, and non- verbal language is accepted by clients, peers, and others is respected by clients appears 'at ease' with clients has client's attention prior to speaking to client responds well to client's multiple concerns empathy toward client is apparent has a good rapport with families, significant others, team members, and community members consistently utilizes own person assets in interaction with clients consistently establishes and maintains therapeutic relationships provide adequate explanation and instruction to client, family, significant others, team members, colleagues, and community members supports and reinforces appropriate and desired client behaviors assures the comfort and safety of each client other:		
31. Demonstrates respect for diversity factors of others. Examples: culture, socioeconomic status, beliefs, identity Site Specific Objectives:		
does not demonstrate any bias toward client or staff		
demonstrate enthusiasm for diversity with others		
demonstrates acceptance of others demonstrates respect for all		
demonstrates tolerance for differences with others		
incorporates cultural context into all aspects of occupational therapy process in all		
interactions		
demonstrates ability to use equitable interactions with others		

Mayo Clinic: General Student Information

OT Student Fieldwork Objectives

FUNDAMENTALS OF PRACTICE

- 1. Adheres consistently to the American Occupational Therapy code of ethics and sites policies and procedures including when relevant, those related to human subjects research:
 - Demonstrates a concern for the well being of the patients of their services (beneficence).
 - Fulfills professional obligation of acting out of beneficence in dealing with all patients. Takes reasonable precautions to prevent imposing or inflicting harm upon the patient of their services or to his/her property (nonmaleficence).
 - Respects the patient or his/her surrogates, as well as the patient's rights (autonomy, privacy, and confidentiality).
 - Achieves and maintains high standards of competence (duties).
 - Takes the initiative to complete all assignments and responsibilities to provide the best patient care.
 - Complies with laws and student policies guiding the profession of occupational therapy as stated in the AOTA code of ethics (2010) and Mayo policies and procedures (procedural justice).
 - Treats patients, colleagues and other professionals with fairness, discretion and integrity (social justice, fidelity).
 - Maintains patient privacy, confidentiality and security of medical record information observing federal, state and facility regulations. Information can not be shared verbally, electronically, or in writing without the appropriate consent. Information must be shared on a need-to-know basis only with those having primary responsibilities for decision making.
 - Provides comprehensive, accurate, and objective information when representing profession (verbally).
 - Seeks out the clinical instructor if there are any questions regarding conflict of interest as it is imperative to maintaining the integrity of interactions.
 - Will not have any personal or sexual relationships that occur during any professional interaction, as it is a form of misconduct.
 - If a student is not able to perform the necessary critical job demands as outlined in the Mayo PM&R Rochester OT job description, and he/she is not able to competently perform his/her duties after given reasonable accommodations, the student will be terminated from this fieldwork.

2. Adheres consistently to safety regulations, anticipates potentially hazardous situations and takes steps to prevent accidents:

- Follows HIPAA, universal precautions and hospital safety policies for all patients.
- Review chart and/or seek to understand information from appropriate sources, i.e. asks questions
 when needed for clarification.

2. Uses judgment in safety. Uses sound judgment in regard to safety of self and others during all fieldwork related activities:

 Awareness of, will identify, and will follow through with precautions and contraindications to carry out a patient's plan of care.

- Justify the use of selected activities within the limits of established precautions and lab values/vitals in relation to safety with function.
- Make appropriate decisions regarding the need for assistance during evaluation and treatment sessions.
- Maintain the work area and supplies that are conducive to safety.
- Understand and be able to manage the lines and equipment in the Intensive care unit.

BASIC TENETS

4. Articulates the values and beliefs of the OT profession:

- Explains the rationale for patient's care plan related to occupational therapy intervention.
- Demonstrates an awareness of when it is appropriate to initiate contact with the above people to articulate the role of OT related to a patient's care.
- Adjusts terminology according to the audience addressed.

5. Articulates the value of occupation:

 Consistently communicates how treatment activities and care plan will affect occupational performance and outcomes for patients and medical professionals.

6. Communicates the roles of occupational therapist and occupational therapy assistant:

• Clearly recognizes and can verbalize the role delineation between the OT and the COTA.

7. Collaborates with patient, family and significant others throughout the occupational therapy process:

- Consistently involves the patient, family and/or significant others in the goal setting process.
- Makes appropriate decisions regarding sharing information with the above people.
- Provide professional, timely, objective and clear consultation with all health care providers, vendors, school systems, etc.

EVALUATION AND SCREENING

8. Articulates a clear and logical rationale for the evaluation process:

- Understands the theoretical basis or frame of reference for administered evaluations.
- Identifies appropriate options for assessments for specific patient situations.

9. Selects relevant screening and assessment methods while considering such factors as patient's priorities,

context(s), theories, and evidence-based practice:

- Demonstrates the ability to select and prioritize relevant areas to assess and OT theories/philosophies to be utilized.
- Seek out the assistance of staff and other resources when in doubt about accurate administration.
- Make appropriate decisions regarding when to utilize standardized vs. non standardized assessments.

10. Determines the patient's occupational profile and performance through appropriate assessment methods:

• Demonstrates the ability to gather appropriate information, including a thorough interview, from the patient, family, significant others, medical staff and medical records.

11. Assess patient factors and context(s) that support or hinder occupational performance:

Reviews the medical history and precautions prior to assessing the patient.

12. Obtains sufficient and necessary information from relevant resources:

• Select and filter pertinent information to provide ethical and quality patient care.

13. Administers assessments in a uniform manner to ensure that findings are valid and reliable:

- Assessment tools
- Screening tools

14. Adjusts/modifies the assessment procedures based on patient's needs, behaviors and culture:

• Demonstrates and rationales using critical thinking and flexibility in adapting assessments to meet the patient's individual needs.

15. Interprets evaluation results to determine patient's occupational performance strengths and challenges:

 Utilize evaluation results to determine patient's limitations and strengths to assist in reaching the best possible outcomes.

16. Establishes an accurate and appropriate plan based on evaluation results:

- Identifies the appropriate time to re-evaluate the patient's program and documents the reassessment information.
- Establishes relevant and attainable short and long-term goals that reflect the assessment data and the occupational performance of the patient and his/her individual and family goals.
- Evaluate a patient's functional status and make the optimal clinical judgment to decide if a patient can function safely at home or the type of supervision that is warranted.
- Appreciates the importance of having a goal-directed plan.

17. Documents the results of the evaluations:

 Records the results of assessments accurately, concisely, and selects relevant information to report and document.

INTERVENTION

18. Articulates a clear and logical rationale for the intervention:

• Uses clinical reasoning to explain patients, fieldwork educator, and medical professionals the rationale for the OT intervention and plan of care.

19. Utilizes evidence from published research and relevant resources to make informed decisions:

- Utilize multiple resources to provide rationale and support for treatment plans (EBM, EBP).
- Access and utilize the AOTA's Evidence based practice web site for evidence based practice during this affiliation.

20. Chooses occupations that motivate and challenge patients:

- Obtain an occupational profile to direct intervention that facilitates the "just right challenge" for the patients to optimize functional independence.
- Recognize and adapt to the rapeutic age and the rapeutic moments in patient care.

21. Selects relevant occupations to facilitate patients meeting established goals:

- Able to break a given occupation into a sequence of steps according to the patient's level of functioning and cognitive abilities.
- Demonstrates creativity and flexibility in choosing treatment activities.
- Works to expand own repertoire of known activities.
- Seeks out new activities from the staff and other available resources.

22. Implements intervention plans that are patient centered:

- Makes appropriate decisions regarding reviewing progress with patient throughout the intervention process.
- Consistently communicates treatment program, updates and dismissal plans to the patient and/or their families/significant others.

23. Implements intervention plans that are occupation based:

• Consistently seeks out and utilizes activities that are purposeful and meaningful for the patient.

24. Modifies task approach, occupations and the environment to maximize the patient's performance:

- Understands the concepts of "graded" activity.
- Determines logical sequence of treatment activities to attain the established goals.
- Chooses and modifies the environment appropriate for the patient's needs.
- Demonstrates flexibility and resourcefulness in adapting the treatment activities, area and care plan as the patient's needs change.

25. Updates, modifies or terminates the intervention plan based upon careful monitoring of the patient's status:

- Understands and revises goals in an appropriate and realistic manner.
- Appreciates the need for patient involvement in goal modification.
- Coordinates discharge planning with other disciplines so that continuity of care exists.
- Consistently has adaptive equipment and home environmental recommendations in place prior to patient dismissal.
- Awareness of options for resources that are available to patients upon dismissal.
- Demonstrates an awareness of when to discontinue treatment and the ethical implications of patient dismissal from OT services.

26. Documents patient's response to serve in a manner that demonstrates the efficacy of interventions:

 Complete daily and weekly documentation in a timely manner and utilize skilled terminology for documentation.

MANAGEMENT OF OT SERVICES

27. Demonstrates through practice or discussion the ability to assign appropriate responsibilities to the COTA or the OT aid:

- Demonstrate leadership and mentoring of support staff.
- Be respectful in all communication and professional dialogue with all staff.

28. Demonstrates through practice or discussion the ability to actively collaborate with a COTA:

- Collaborate with COTA to write appropriate treatment plan and goals for patients.
- Verbalize an awareness of the role of the OT in the facilitation of COTA competencies.

29. Demonstrates an understanding of the costs and funding related to OT services at this site:

- Verbalize understanding of DRGs, PPS system, insurance premiums, co-pay, private funding, govt. funding PPS, FIM, CPT codes, ICD-9 codes.
- Will have working knowledge of CPT codes.

30. Accomplishes organizational goals by establishing priorities, developing strategies and meeting deadlines:

- Consistently meets deadlines assigned by fieldwork educator.
- Adjust pace and prioritize daily responsibilities.

31. Produces the volume of work required in the expected time frame:

- Manage a caseload and meet productivity expectations outlined by the department, i.e. 60% billable time.
- Calculate the amount of time needed to complete a task and use time outside of the clinic for task completion as needed.

COMMUNICATION

32. Clearly and effectively communicates verbally and nonverbally with patients, families, significant others, colleagues, service providers, and the public:

- Provides the above with professional and self-confident, honest and verbal feedback regarding the results of assessments, treatment interventions and goal status.
- Is able to discern which families may need additional instruction and demonstration; provides this information in a way that is not demeaning to the family.
- Listen attentively to what is being said by others and integrate this information into the treatment plan immediately.
- Deliver an articulate message verbally, via phone or e-mail and in written form.
- Identify and build strategies to handle critical and crucial conversations with family members and patients.

33. Produces clear and accurate documentation according to site requirements:

- Selects relevant information to report and document.
- Completes all assigned daily documentation.
- Creates written, electronic and verbal reports that accurately reflect the patient's status.

34. All written communication is legible using proper spelling, punctuation, and grammar:

• Provides accurate information about OT services in written, electronic and verbal communication. The OT student will always provide accurate documentation in any patient care record.

35. Uses language appropriate to the patient of the information, including but not limited to funding agencies and regulatory agencies:

- Adjusts terminology according to the audience addressed.
- Will not use abbreviations according to department/institution policy.

PROFESSIONAL BEHAVIORS

36. Collaborates with supervisors to maximize learning experience:

- Accepts responsibility for initiating and communicating desires/optimal learning experiences with fieldwork educator.
- Be self-directed in determining learning strengths and challenges.

37. Takes responsibility for obtaining professional competence:

- Demonstrates clinical reasoning, critical thinking, and self reflection on a daily basis.
- Appreciates the balance between independent problem solving and seeking out assistance from others.
- Independently seeks experiences and information to supplement learning and professional growth.

38. Responds constructively to feedback:

 Accepts feedback from the fieldwork educator in a non-defensive manner and adjusts professional behaviors accordingly.

39. Demonstrates consistent work behaviors:

- Arrive on time and consistently is prepared to start the day upon arrival.
- Complies with Mayo Dress Code Policies.

40. Demonstrates effective time management:

Organizes schedule to allow for the timely completion of assignments and patient related duties.

41. Demonstrates positive interpersonal skills:

- Demonstrates mutual respect for all individuals in the work environment.
- Develop and maintain a rapport with patients that enhances the therapeutic relationship.

42. Demonstrates respect for diversity:

- Considers cultural and economic background when establishing goals and care plans.
- Deals effectively with a variety of disabilities, age groups, socioeconomic and cultural backgrounds.
- Respects diversity in the work place.

OTS Weekly Objectives & Goals

WEEK 1
Student will meet with, CCCE, PT
Student will attend orientation sessions (transfer training, FIM etc).
Student will review student manual contents with CEC and comprehend included
information. Student is expected to refer to and utilize manual as a reference during
internship
Student will demonstrate competency in use of pager and telephone systems
Student will become familiar with MICS, Synthesis, documentation procedures, and e-billing
Student will participate in "group effort" (chart/history review, evaluation,
intervention, document) with one- two patients
Student will shadow assigned staff therapist when not in orientation or lectures
Student may be assigned one (1) patient by the end of the week
Student will get photo ID taken
Students are responsible for information in OT student manual.
WEEK 2
Student will identify a system to organize and maintain patient workload while
recalling safety precautions, etc
Student will individually perform chart/history review, evaluation, intervention,
document with 1-2 patients per day with supervision of CEC/FWED. Student
assigned to patients via CEC/FWED
Student will individually perform chart/history review, evaluation, intervention,
document with one (1) patient with direct supervision of CEC/FWED
Student will be billing correctly for their patients and recording their treatment
statistics at the end of the day
Student will begin to fill out weekly self-assessment sheets and will complete them
PRIOR to future weekly meetings with clinical education coordinator
Student will be familiar with department equipment, activities, and evaluations that
are available to them
Student will shadow staff therapist when not in lectures or involved with own patient
care
Student will have completed a literature search to find evidence to apply to at least
one (1) of their patients
Students will have attended one patient progress assessment (IPOC) and have
attended off-floor patient care discussions and Morning Rounds
Students will maintain treatment coverage cards.
Students will have completed FIM competency training.
Students will have complete diagnosis worksheet and plan of care on each patient
they are assigned

WEEK 3
Student will begin to meet weekly with the clinical education coordinator as needed
Students arrange weekly meeting/group discussion.
Student will individually perform chart/history review, evaluation, intervention,
document with assigned patients everyday; with direct to moderate supervision of
CEC/FWED. Student will be assigned to patients via CEC/FWED; approximately two-three
patients
Student will demonstrate the ability to safely transfer their patients from one surface to another and/or will be able to recognize when additional assistance is needed. Student will be familiar with and begin practicing department evaluations that are available to them (i.e. CPT, ACL, Mayo Functional Cognitive Evaluation, Mayo Geriatric Evaluation, CAM, cognitive evaluation, and upper extremity evaluation including ROM and manual muscle testing, ADL evaluation, adaptive equipment, home & safety evaluation etc.) Students will have complete diagnosis worksheet and plan of care on each patient they are assigned
WEEK 4
Student will meet weekly with the CEC/FWED
Students arrange weekly meeting/group discussion.
Student will individually perform chart/history review, evaluation, intervention,
document with 3-4 patients per day with moderate to minimal supervision of
CEC/FWED.
Student will discuss possible topics for final project with the clinical education
coordinator
Students will have complete diagnosis worksheet and plan of care on each patient the are assigned
are assigned
WEEK 5
Student will meet weekly with the CEC/FWED
Students arrange weekly meeting/group discussion.
Student will individually perform chart/history review, evaluation, intervention,
document with 3-5 patients per day with minimal supervision to indirect supervision
of CEC/FWED. Students assigned to patients via CEC/FWED; approximately
three- four patients per day
Student will continue to practice demonstrating their ability to facilitate department
evaluations using the following: CPT, ACL, Mayo Functional Cognitive Evaluation,
Mayo Geriatric Evaluation, CAM, upper extremity evaluation, including ROM and
manual muscle testing, ADL evaluation, adaptive equipment, home & safety
evaluation by mid-term Student will identify tonic for final project
Student will identify topic for final project
Students will have complete diagnosis worksheet and plan of care on each patient
they are assigned

WEEK 6
Student will individually perform chart/history review, evaluation, intervention,
document with 4-5 patients per day with indirect supervision of CEC/FWED.
Students will begin to rationalize caseload amongst them.
Student will complete a midterm self-assessment using the AOTA evaluation
Student will be able to demonstrate the ability to facilitate department evaluation for
the following: CPT, ACL, Mayo Functional Cognitive Evaluation, Mayo Geriatric
Evaluation, CAM, and upper extremity evaluation, including ROM and manual muscle testing, ADL evaluation, adaptive equipment, home & safety evaluation.
Student to demonstrate competency to the CEC/FWED while performing the
evaluations with another student or with a patient, depending on patient population
Students arrange weekly meeting/group discussion.
Students will have complete diagnosis worksheet and plan of care on each patient
they are assigned
,
WEEK 7
Student will individually perform chart/history review, evaluation, intervention,
document with 4-5 patients per day with indirect supervision of CEC/FWED.
Students will rationalize caseload amongst themselves.
Student will have collaborated with the COTA for at least one patient
Student will have observed at least one physical therapy, one speech therapy, and one
recreational therapy sessionStudents arrange weekly meeting/group discussion.
Students arrange weekly meeting/group discussionStudents will have complete diagnosis worksheet and plan of care on each patient
they are assigned
and, and seeing.
WEEK 8
Student will individually perform chart/history review, evaluation, intervention,
document with 4-5 patients per day with indirect supervision of CEC/FWED.
Students will rationalize caseload amongst themselves.
Student will have collaborated with the COTA for at least one patient
Student will have observed at least one physical therapy, one speech therapy, and one
recreational therapy session
Students arrange weekly meeting/group discussionStudents will have complete diagnosis worksheet and plan of care on each patient
they are assigned
Student will provide clinical education coordinator with a rough draft of their final
project
WEEK 9 & WEEK 10
Student will maintain 4-5patients per day with indirect supervision of CEC/FWED.
Students will rationalize caseload amongst themselves; approximately six to seven (6-
7) hours of direct patient care per day
Student will have collaborated with the COTA for at least one patient
Students arrange weekly meeting/group discussionStudents will have complete diagnosis worksheet and plan of care on each patient
they are assigned

WEEK 11 Student will maintain 4-5 patients per day with indirect supervision of CEC/FWED. Students will rationalize caseload amongst themselves; approximately six to seven (6-7) hours of direct patient care per day Student will present final project to staff or students Student will start planning for closure with their patients Students arrange weekly meeting/group discussion. Students will have complete diagnosis worksheet and plan of care on each patient they are assigned	
WEEK 12 Student will maintain 4-5 patients per day with indirect supervision of CEC/FWED. Students will rationalize caseload amongst themselves; approximately six to seven (6-7) hours of direct patient care per day Final Evaluation Student will complete the AOTA Student Evaluation of Fieldwork Experience Students arrange weekly meeting/group discussion. Students will have complete diagnosis worksheet and plan of care on each patient they are assigned	

12 week Calendar/Outline

January 7th- 11th

Day 1

WELCOME! Orientation to Mayo & Tour 1-D area

Receive OT student manual for 1-D

Review over objectives and expectations

- a. Work hours
- b. Absence Policy Mayo and colleges
- c. Fieldwork objectives
- d. Dress code
- e. Professional behaviors

Review over assignments for fieldwork:

- a. Assigned date to facilitate a journal club discussion.
- Assigned date/evaluations to facilitate in-service.

Learn pager system

- a. Be able to send/reply to all pages.
- b. Text page through intranet.
- c. Display page if computer is not available.
- d. Verbalize/demonstrate understanding of 4 digit page versus 5 digit page during patient care, if assistance is needed ASAP.
- e. All pages are recorded and can be traced to the original sender.

E-mail

- a. Be able to send, reply, forward e-mails.
- b. Review Mayo Policy to check e-mails first thing in the morning, before or after lunch, and prior to going home at night.
- c. Add personal signature. Review over Mayo Policy that personal signature needs to be attached to every e-mail message sent.
- d. All e-mails are recorded and can be recalled, as indicated.
- e. Verbalize/demonstrate use of calendar.

Share contact numbers/cell phone numbers

Facebook policy

Door codes (5504) / Key location to unlock student office

Location of Dan Abraham Healthy Living Center in Generose

Location of Cafeteria/staff break room

Day 2

Complete list from Day 1, if time did not permit on Day 1

Tour Ortho

- a. OT/PT office area
 - a. Orient to office and resources
- b. Nursing stations
- c. Restrooms
- d. Par Stock areas
 - a. Learn how to check items out with Par Stock
- e. Linen closets
- f. Storage rooms

- g. Shampoo rooms
- h. Dietary areas

Review over MMT, ROM, Transfers

Hospital rooms

- a. How to operate the bed
- b. How to monitor vitals, O2 sat levels, HR
- c. Be able to operate/locate lights in room, TV, nursing buttons, bed alarms, etc.

Learn lift system

- a. Walking sling
- b. Bed Sling to reposition in bed

Complete MSHS competency

ADL communication sheet

Patient room/provider board

Ortho Rounds

Days 3 – 5

Day 3

FOM/FIM training - see student manual for details -

January 9th Old Marion Hall OL 3-116 from 12 – 3 with rehab RN

Shadow staff – as time allows

Introduction to shorthand templates/verbiage

- a. Activate shorthand/open correct dictionary
- b. Practice using shorthand
- c. Review over each template

Documentation

- a. Learn to find chart and history information in Synthesis.
- b. Learn how to/where to document in MICS
 - a. OT Flowsheets
 - b. Ptotv to review over previous notes
 - c. PMRCO to review over order details
 - d. PMRCO to change status of order
- c. Understand the difference between Synthesis and MICS

Group evaluations/interventions on Ortho

- a. Review over "cheat sheets" to gather information from chart and history review. Create your own cheat sheet, if desired
- b. Chart and history review completed together as a team.
- c. Discuss Lab Values/refer to pocket size guidance.
- d. Complete evaluation/documentation as a team.

Review over/be able to administer these common cognitive screens:

- a. Short Blessed
- b. MoCA
- c. Personal Information form
- d. SLUMS

Verbalize understanding of Lab values/precautions/ortho protocols Billing

- a. PMRBILL
- b. Time associated with billing units

- c. Need to add contact time in MICS flowsheet
- d. Need to add all contact time for the day together prior to billing out.

Billing competency

Inpatient Documentation competency

January 14th - February 1st

Trauma Ortho –

Intensive care units -

January 18th, 21st

T. off – S. E. (127-03432) to mentor

<u>January 23rd</u> - OT Student Journal Club from 12-1 (Ortho related topic)

January 28th - 31st

Prepare to transition to Gen Med/Internal Med.

Preparation includes reviewing over/in-service on the following:

- Independent Living Scales (ILS)
 - o 1:30 to 2:30
- Texas Functional Living Scales (TFLS)
 - o 2:30 to 3:30
- Allen Cognitive Levels Screen
 - o 1:30 to 2:30
- Home Assessment Cognitive Performance
 - o 2:30 to 3:30
- Mayo Functional Cognitive
 - o 1:30 to 2:30
- Executive Function Performance Test
 - o 2:30 to 3:30
- Cognitive of Assessment of Minnesota
 - o 2:30 to 3:30

February 4th - March 1st

Domitilla 2, 3, 4, 5, 6

General Medicine/Internal Medicine

February 4th – First Day on Domitilla (General Medicine/Internal Medicine)

February 12th – 14th - AOTA Mid-term Evaluations

February 20th - OT Student Journal Club from 12-1 (Applied Cognition topic) Domitilla Main Floor, room 132

February 26th, 27th, March 1st: T. off – S. E. (127-03432) to mentor

February 25th – March 1st - Prepare to transition to Cardiac/Pulmonary floors. Preparation includes reviewing over cardiac/pulmonary information and group discussion. Completion of staff competencies Modules 1-8

March 4th - March 29th

Cardiac/Pulmonary Floors

March 4th – First Day on Cardiac/Pulmonary

March 8^{th} , 15^{th} : T. off – S. E. (127-03432) to mentor

March 20th- OT Student Journal Club from 12-1 (Cardiac/Pulmonary related topic)

March 25th – 27th – AOTA FW Evaluation Finals!

March 28th and 29th - T. off. A. K. (127-00681) to mentor

March 29th - Last Day!

Pager Numbers

Student Project

• Social Media Drop Box OT student Manual

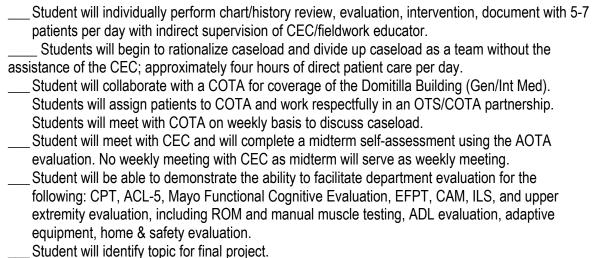
Mayo Clinic Occupational Therapy Department, Used with Permission, 2014

PM&R ST. MARYS ACUTE CARE: WEEKLY OUTLINE/GOALS

WEEK 1	
Student will meet with Heidi Dunfee, PT, DScPT, CCCE	
Student will get photo ID taken.	
Student will attend orientation sessions, review over Mayo policies/procedures, and complete	9
institution competencies as outlined by fieldwork educator/ CEC and CCCE.	
Student will review student manual contents and comprehend included information. Student	is
expected to refer to and utilize manual as a reference throughout the internship.	
Student will demonstrate competency in use of pager, telephone systems, and e-mail.	
Student will become familiar with electronic documentation and billing protocol.	
Student will collaborate with other students while intervening with patients, i.e. chart/history	
review, evaluation, intervention, document. CEC will assign patients to student team.	
Student will individually perform chart/history review, evaluation, intervention, document with	
assigned patient(s) with direct supervision of clinical education coordinator (CEC)/fieldwork	
educator.	
Student will shadow assigned staff therapist when they are not participating in direct patient	
care.	
WEEK	
WEEK 2	
Student will identify a system to organize and maintain patient workload while recalling safety precautions, etc. (i.e. index card per patient, clipboard, etc.)	1
Student will individually perform chart/history review, evaluation, intervention, documentation	I
with 1-3 patients per day with direct supervision to moderate supervision of the CEC/fieldwor	k
educator. Student will be assigned to patients via CEC/fieldwork educator.	
Student will bill correctly and ethically for patient evaluations/interventions with moderate assistance from CEC.	
Student will begin to fill out weekly self-assessment sheets and will complete them PRIOR to	
weekly meetings with clinical education coordinator (CEC).	,
Student will be familiar with department equipment, activities, and evaluations that are availa	hla
to them.	NIC
Student will shadow a staff therapist as assigned by CEC/fieldwork educator.	
Student will demonstrate the ability to safely transfer their patients from one surface to anot	her
and/or will be able to recognize when additional assistance is needed.	,1101

WEEK	3
	udent will begin to meet weekly with the clinical education coordinator.
	udent will individually perform chart/history review, evaluation, intervention,
	cumentation with 2-4 patients per day; with moderate to minimal supervision of C/fieldwork educator.
_	udent will be assigned to patients via CEC/fieldwork educator; approximately two-three hours
	direct patient care per day.
lea ed Ea gro	be student in the group will have completed a literature search to find evidence to apply to at lest one of his/her patients and will share the literature with his/her peers and fieldwork sucator early in the week. There will be a group discussion on the literature later in the week. It is to read the information and come prepared for discussion at the pup meeting. The responsibility of the literature search will be rotated through the student pup on a weekly basis.
WEEK	4
	udent will meet weekly with the CEC/fieldwork educator to discuss progress and individual als.
Stı	udent will individually perform chart/history review, evaluation, intervention, document with 3-5 tients per day with minimal to indirect supervision of CEC/fieldwork educator.
	udent assigned to patients via CEC/fieldwork educator; approximately three hours of direct tients care per day.
to	udent will receive information via CEC/fieldwork educator and will read information and begin prepare for transition to Gen Med unit next week. At the end of the week, students will be able discuss and verbalize understanding of transition and expectations.
Stu the eva eva	udent will be familiar with and begin practicing department evaluations that are available to em (i.e. CPT, ACL-5, Mayo Functional Cognitive Evaluation, CAM, EFPT, ILS, cognitive aluations, and upper extremity evaluation including ROM and manual muscle testing, ADL aluation, adaptive equipment, home & safety evaluation) and as opportunities arise with tient care.
WEEK	5
Stu Stu pa Stu	udent will meet weekly with CEC/fieldwork educator to discuss progress & individual goals. udent will discuss possible topics for final project with the clinical education coordinator. udent will individually perform chart/history review, evaluation, intervention, document with 4-6 tients per day with minimal supervision to indirect supervision of CEC/fieldwork educator. udents assigned to patients via CEC/fieldwork educator; approximately four hours of direct tient care per day.
	ident will continue to practice demonstrating their ability to facilitate department evaluations
using t	he following: CPT, ACL-5, Mayo Functional Cognitive Evaluation, CAM, EFPT, upper
	ity evaluation, including ROM and manual muscle testing, ADL evaluation, adaptive
	nent, home & safety evaluation by mid-term as opportunities present with patient care. Judent will collaborate with a COTA and develop a partnership (OT/OTA) while on the Gen
Me	ed/Internal Med floors. Students will assign patients to COTA and work respectfully in an COTA partnership. Students will meet with COTA on weekly basis.

WEEK 6



WEEK 7 ____ Student will meet weekly with the CEC/fieldwork educator to discuss progress and individual goals. ____ Student will individually perform chart/history review, evaluation, intervention, document with 5-7 patients per day with indirect supervision of CEC/fieldwork educator. ____ Students will begin to rationalize caseload and divide up caseload as a team without the assistance of the CEC; approximately five hours of direct patient care per day. ___ Student will have observed in at least one area of interest with another discipline, i.e. physical therapy session, speech therapy session, surgical procedure, etc. ___ One student in the group will have completed a literature search to find evidence to apply to at least one of his/her patients and will share the literature with his/her peers and fieldwork educator early in the week. There will be a group discussion on the literature later in the week. Each student is responsible to read the information and come prepared for discussion at the

group meeting. The responsibility of the literature search will be rotated through the student

WEEK 8

group on a weekly basis.

	_Student will meet weekly with the CEC/fieldwork educator to discuss progress and individual
	goals.
	_Student will individually perform chart/history review, evaluation, intervention, document with 7-9
	patients per day with indirect supervision of CEC/fieldwork educator.
	Students will begin to rationalize caseload and divide up caseload as a team without the
ass	sistance of the CEC; approximately five hours of direct patient care per day.
	_Student will receive and are expected to read cardiac information in preparation for transition to
	cardiac unit.
	_Student will provide clinical education coordinator with a rough draft of his/her final project or the
	group project.
	Student will prepare for transition to cardiac/pulmonary floors next week. Each student will
	communicate his/her caseload to the OT/OTA who will be assigned to the gen med floor. Each
	student will prepare individually for transition according to his/her fieldwork goals.

OTS/COTA Partnership

- Weeks 4-8 (possible weeks 9-12 as well) students will be given an opportunity to collaborate with a COTA. OTS will appropriately assign patients to COTA and will demonstrate respectful behavior in the partnership.
- OTS evaluates the patient, documents evaluation and plan of care.
- OTS discussed evaluation results and plan of care with the COTA.
- OTS discusses patient progress with the COTA and advises COTA appropriately.
- OTS doubles with the COTA for treatments as indicated.
- OTS rewrites plan of care goals as indicated.
- OTS writes a supervisory note for COTA and fieldwork educator co-signs.
- The note justifies current plan of care and continued COTA treatment.

٧	VEEK 9 & WEEK 10
_	Student will meet weekly with CEC/fieldwork educator to discuss progress &individual
	goals.
_	Student will verbalize understanding of all cardiac/pulmonary precautions pertaining to patient
	safety during OT evaluations/interventions.
-	Student will maintain 7-9 patients per day with indirect supervision of CEC/fieldwork educatorStudents will begin to rationalize caseload and divide up caseload as a team without the
	assistance of the CEC; approximately six hours of direct patient care per day.
١	VEEK 11
_	No weekly meeting with the CEC/fieldwork educator unless requested by student.
-	Student will maintain 8-10 patients per day with indirect supervision of CEC/fieldwork educator.
	Students will begin to rationalize caseload and divide up caseload as a team without the
а	ssistance of the CEC; approximately six/seven hours of direct patient care per day.
_	Student will present final project to staff or students
_	One student in the group will have completed a literature search to find evidence to apply to at least one of his/her patients and will share the literature with his/her peers and fieldwork educator early in the week. There will be a group discussion on the literature later in the week Each student is responsible to read the information and come prepared for discussion at the group meeting. The responsibility of the literature search will be rotated through the student group on a weekly basis.
_	Student will start planning for closure with his/her patients.
EE	K 12
_	No weekly meeting with the CEC/fieldwork educator unless requested by student.
_	No weekly literature discussion unless requested by OT student group.
-	Student will maintain 8-10 patients per day with indirect supervision of CEC/fieldwork educator.
_	Students will begin to rationalize caseload and divide up caseload as a team without the
8	ssistance of the CEC; approximately six-seven hours of direct patient care per day.
_	Final AOTA Evaluation with CEC.
_	Student will complete the AOTA Student Evaluation of Fieldwork Experience.

LAST DAY CHECK-OFF LIST

- Evaluations, daily notes, and discharge summaries in documents browser have been co-signed. It is your responsibility to check your patient list and notify the CEC/fieldwork educator if co-signatures are needed.
- Discharge summaries are all updated as the therapist taking over can make an addendum.
- AOTA Fieldwork Site Evaluation Forms are completed & brought to final evaluation.
- Pager, Name Tags, & Library Cards have been returned!
- Old evaluations or anything you have saved from the H or M Drive (your personal drive) are DELETED.
- Forwarding e-mail & physical address has been given to your CEC/fieldwork educator.

Philadelphia Region Fieldwork Consortium

LEVEL I FIELDWORK STUDENT EVALUATION University of Wisconsin La Crosse Occupational Therapy Program

Dates of fieldwork:

Student name:

Site name:		Course Number:	
Semester:		Year:	
In	dicate the student	's level of performance using the scale below.	
1=Well Below Standards: 2=Below Standards: 3=Meets Standards: 4=Exceeds Standards: 5=Far Exceeds Standards:		Performance is weak in most required tasks and activities. Work is frequently unacceptable Opportunities for improvement exist however student has not demonstrated adequate responsively. Carries out required tasks and activities. This rating represents good, solid performance are be used more than all the others. Frequently carries out tasks and activities that surpass requirements. At times, performance Carries out tasks and activities in consistently outstanding fashion. Performance is the best expected from any student.	onse to feedback. ad should e is exceptional.
1.	Time manageme Consider ability to Comments:	o be prompt, arrive on time, completes assignments on time.	1 2 3 4 5
2.	Organization Consider ability to through with response Comments:	o plan and set priorities, be dependable, be organized, follow onsibilities	1 2 3 4 5
3.	3. Engagement in the fieldwork experience Consider student's apparent level of interest, level of active participation while on site; investment in individuals and treatment outcomes. Comments:		
4.	Consider ability to Comments: this in Consider ability to questions, synthes	arning/Reasoning/Problem Solving to take responsibility for learning; demonstrate motivation. Includes use of down time, enthusiasm, interest to use self- reflection, willingness to ask dize/interpret info, understand OT process. Inding and processing of information	1 2 3 4 5
5.	Practice in pract Consider interacti	Code of Ethics and Ethics Standards and Standards of ice setting. (ACOTE B.9.1) ons with both clients and staff, awareness of confidentiality on making practices.	1 2 3 4 5

Organization and Time Use: 1,2

Initiative: 4, 7 Cognition: 5,6,8,12

Communication: 3,9,10,11

6.	6. Written Communication Consider grammar, spelling, legibility, successful completion of written assignments, documentation skills. Comments: must be complete, accurate, and on-time				4	5
7.	Initiative Consider initiative, ability to seek and acquire information from a variety of sources; demonstrates flexibility as needed. Comments: takes action and demonstrates flexibility	1	2	3	4	5
8.	Observation skills Consider ability to observe relevant behaviors for performance areas and performance components and to verbalize perceptions and observations. Comments:	1	2	3	4	5
9.	Participation in the Supervisory Process Consider ability to give, receive and respond to feedback; seek guidance when Necessary, follows proper channels. Comments: asks for, accepts, and integrates feedback	1	2	3	4	5
10.	Verbal communication and Interpersonal skills with patients/clients/staff/caregivers Consider ability to interact appropriately with individuals such as eye contact, empathy, limit setting, respectfulness, use of authority, etc; degree/quality of verbal interactions; use of body language and non-verbal communication; exhibits confidence. Comments: content, frequency, volume, tone	1	2	3	4	5
11.	Consider ability to recognize/handle personal/professional frustrations; balance personal/professional obligations; handle responsibilities; work w/others cooperatively, considerately, and effectively. Shows responsiveness to social cues. Comments: recognizes boundaries with patients, supervisors, staff, family members	1	2	3	4	5
12.	Use of professional terminology Consider ability to respect confidentiality; appropriately apply professional terminology (such as uniform terminology, acronyms, abbreviations, etc) in written and oral communication. Comments: Communicates about patient's treatment, outcomes, plans	1	2	3	4	5
	nal score: [] Pass [] Fail Student signature No more than one item below a "2", OR No more than two items below a "3". Supervisor signature					
	No more than two items below a "3". Supervisor signature					

FW I Debriefing Form OT 573: Mental Illness, OT 790: Physical Dysfunction, & OT 791: Pediatrics

Name:	
Student needed	TS will describe the setting (context) in which they completed FW I and respond to the following questions. It is will also be given an opportunity to meet with the instructor or Academic Fieldwork Coordinator individually if to discuss the questions privately. What was the context of your fieldwork experience? How did the context facilitate and limit the experience that you had?
2.	Did you feel supported by your FWE and within the site setting?
3.	Did you feel prepared for this experience? Please explain.
4.	Were you able to ask questions and complete assignments in a timely fashion?
5.	Did this FW I experience support your learning style?
6.	Did you see evidence of use of AOTA's Standards of Practice and Code of Ethics during client-centered and professional interventions? Explain how you personally were involved in such practices during your FW I experience. (ACOTE B.9.1.)
7.	Comments and/or concerns:

Level One Fieldwork Site Evaluation Form						
SiteSemester:						
Student's Name Coun	rse:					
1=Not Agree 3=Agree 5=Strongly Agree						
This experience provided an opportunity:						
to develop a therapeutic relationship with clients	1	2	3	4	5	NA
to use time management skills	1	2	3	4	5	NA
to practice skills learned in the classroom	1	2	3	4	5	NA
to practice a treatment activity with a population	1	2	3	4	5	NA
This fieldwork experience provided an opportunity to gthrough:	gath	er inf	form	ation	on c	lients
Observation	1	2	3	4	5	NA
Interview	1	2	3	4	5	NA
The objectives of this fieldwork experience were clear:						
Through class assignments	1	2	3	4	5	NA
The supervisor of this experience was:						
Shared resources and knowledge	1	2	3	4	5	NA
Provided timely feedback	1	2	3	4	5	NA
Did you enjoy this fieldwork experience?	1	2	3	4	5	NA
Please provide any additional information:						

Signature of student______ Date_____

FW I - Fieldwork Educator's Feedback

Dear Fieldwork Educators:
To help the UWL faculty provide quality education and prepare students for fieldwork, please

an	swer the following questions.
1.	What are the three most important student abilities/qualities for FW I success?
2.	What knowledge to you expect students to bring to the FW I experience?
3.	Knowing a bit about of curriculum here at UWL, do you feel that our students are a good "fit" for training at your facility?
4.	Other: Please provide any other useful information to help us prepare students for clinical practice.
Sig	ned: Facility:
Nο	te: Please return this form with the FW I Student Evaluation (attached) This information wi

Note: Please return this form with the FW I Student Evaluation. (attached) This information will be shared with OT faculty. Thanks again for your continued support of our program. Fondly, Polly Berra, MS, OTR/L, CLT

2020 Summer/Fall UWL Occupational Therapy Program Facility Mid Term Site Visit Completed with the FWE and OTS

Note: Have a copy of the Date:	Mid-term before thi	is meeting
Name of Facility/Type of FV	V II:	
Student:		
FWE Educator: Clinical Experience:		
Main Contact Person: Telephone: E-mail:		
Type of Facility		Dodiatrica
Physical DisabilityPsych-Social		Pediatrics Geriatrics:
Other:		Oeriatrics_
Population:		
Diagnostic Groups:		
Assignments from FW Ed	ucator:	
7.00.g011.0 11.011.1 77 _u	uoutori	
Physical Environment:		
Parking		TX Areas
Décor:		Bathrooms
Eating Area		Noise
Activity Area		Lighting
Accessibility		Smell
		t/environmental factors for OT Practice?
Physical Layout		
Craft tools		
Play equipment		
Work Supplies		
Bathrooms		
School supplies		
Eating equipment		
Therapy equipment		
Other		
		•

Fieldwork Objectives

- y/n Reviewed program general objects (in Fieldwork Manual.
- y/n Suggested modifications if any
- y/n Site has specific objectives: yes/no Note: Explain this to FWE if needed.

Mid-te Score:	erm Results: Discuss mid-term results and areas of strength/change needed/more experience.
Streng	yths:
Growt	h/Goal Areas:
Open	discussion regarding the following: (C.1.1) Preparedness of OTS:
	Pro behaviors:
	Outcome Measures:
	Occupations:
	New markets and Practice:
	Cognitive Training:
	Other:
	vork site provides the student with the opportunity to experience a facility that is: Person-centered Occupation-based— Can students use occupation in interventions as deemed appropriate, How defined at this site? Promotes participation in meaningful activity. Explain. Science Foundation: Evidence Based/Best Practice: examples of Culture Competencies: UWL Goals and Objectives: (refer to Syllabus, Program Goals)
Doos	the student have the opportunity to:
y/n	Review a program manual at the beginning of their fieldwork, indicating learning objectives Has manual
y/n	Discuss supervisor expectations:
y/n	Attend an organized orientation/packets, HIPPA, etc.
y/n	Observe other services:
y/n	Sees a variety of clients:
y/n	Communicate during team meetings/rounds: Access resources within FW site (e.g., site fieldwork manual, library, other staff).
y/n y/n	Observe a variety of intervention approaches (e.g., preparatory methods, purposeful activity, & occupation based)
y/n	End the fieldwork with end competencies equivalent to those of an entry level therapist?
The fi	eldwork educator:
y/n	Uses a variety of supervisory approaches with students (e.g., written, supportive, constructive, multiple supervisors, etc.)
y/n	Is aware that the academic site should be notified as soon as a student develops difficulty (reinforce this

Provides _____ per week or _____ per day supervision to meet students' educational needs, in

point if needed for this FW and future)

beginning then weans off as needed. Other:

y/n

- y/n Ask about current OTS Person Data Base and site-specific objectives for the student.
- y/n Provides the student with the opportunity to look at the person within a system as well as individually
- y/n Encourages the student to understand how psychosocial factors influence client engagement in occupation

The fieldwork site:

- y/n Would consider modifying the more traditional workweek to accommodate part time students or different schedules? If Indicated
- y/n Offers an environment that accommodates student with unique learning needs. If indicated

Talking Points for FWEs: Other Items for discussion. NOT mandatory

- 1. FWECP Program
- 2. Distinguished Lecturer—Spring Semester
- 3. Ask if need for any cont. education, topics?
- 4. Ask what specific needs they might have or facility to take students
- 5. What can University do?
- 6. Get FWE email to add to contact list for various notifications
- 7. Reinforce adult and peds lab
- 8. Reinforce leadership thread and the OTS assignment from Encouraging the Heart
- 9. OT Program Web site
- 10. Strengths of program
- 11. Double check if using Site Specific Objectives
- 12. Emerging markets/Other FW Opportunities:

Talking Points for OTS: Things to bring up: In meeting, or separate phone call or email with student.

- 1. Supervision good fit?
- 2. What learning?
- 3. Pace comfortable?
- 4. Able to ask questions? yes
- 5. Active in learning process?
- 6. Areas to improve.
- 7. Strengths/weakness?
- 8. Recommend this site?

Date of Visit or Phone Interview: _	
Name:	
Interview Conducted by: Polly Be	rra, Academic Fieldwork Coordinator



Fieldwork Performance Evaluation (FWPE) for the Occupational Therapy Student (Revised in 2020)

FUN	IDAMENTALS OF PRACTICE			
1	Adheres to the American Occupational Therapy Association's Code of Ethics and all federal, state, and facility regulations. Examples: Medicare, Medicaid, client privacy, social media, human subject research			
2	Adheres to safety regulations and reports/documents incidents appropriately. Examples: fire safety, OSHA regulations, body substance precautions, emergency procedures			
3	Ensures the safety of self and others during all fieldwork related activities by anticipating potentially unsafe situations and taking steps to prevent accidents. Examples: body mechanics, medical safety, equipment safety, client-specific precautions, contraindications, community safety			
BAS	SIC TENETS			
4	Articulates the values, beliefs, and distinct perspective of the occupational therapy profession to clients and other relevant parties clearly, confidently, and accurately. Examples: families, caregivers, colleagues, service providers, administration, the public			
5	Articulates the value of occupation as a method and desired outcome of occupational therapy to clients and other relevant parties clearly, confidently, and accurately. Examples: families, caregivers, colleagues, service providers, administration, the public			
6	Articulates the role of occupational therapy practitioners to clients and other relevant parties clearly, confidently, and accurately. Examples: families, caregivers, colleagues, service providers, administration, the public			
SCF	REENING AND EVALUATION			
7	Articulates a clear and logical rationale for the evaluation process based on client information, contexts, theories, frames of reference, and/or practice models.			
8	Obtains sufficient and necessary information from relevant sources throughout the evaluation process. Examples: record or chart review, client, family, caregivers, service providers			
9	Selects relevant screening and assessment tools based on various factors. Examples: Psychosocial factors, client priorities, needs, and concerns about occupational performance and participation, theoretical support, evidence, practice context, funding sources, cultural relevance			
10	Determines the client's occupational profile and occupational performance through interview and other appropriate evaluation methods.			
	Occupational profile: Summary of the client's occupational history and experiences, patterns			



of daily living, interests, values, and needs. Occupational performance: Act of doing and accomplishing a selected action (performance skill), activity, or occupation that results from the dynamic transaction among the client, the context, and the activity. Improving or enabling skills and patterns in occupational performance leads to engagement in occupations or activities. 11 Evaluates and analyzes client factors and contexts that support or hinder occupational performance. Client factors: Specific capacities, characteristics, or beliefs that reside within the person and that influence performance in occupations. Client factors include values, beliefs, and spirituality; body functions (includes psychological functions); and body structures. Contexts: Variety of interrelated conditions within and surrounding the client that influence performance, including cultural, personal, physical, social, temporal, and virtual contexts. Includes the consideration of all client centered components including psychosocial factors 12 Administers standardized and non-standardized assessments and surveys accurately and efficiently to ensure findings are valid and reliable. Examples: follows assessment protocols, adheres to time guidelines 13 Modifies evaluation procedures based on client factors and contexts. Examples: uses a quiet space, breaks up evaluation into smaller parts, provides multisensory instructions 14 Interprets evaluation results to determine the client's occupational performance strengths and challenges. 15 Synthesizes and documents the results of the evaluation process clearly, accurately, and concisely, using systematic methods to record the client's occupational performance. **INTERVENTION** Articulates a clear and logical rationale for the intervention process based on the evaluation results, contexts, theories, frames of reference, practice models, and evidence. 17 Establishes an accurate and appropriate client-centered plan based on the evaluation results, contexts, theories, frames of reference, and/or practice models. Examples: creates relevant and measurable goals in collaboration with the client and/or family/caregivers; recommends additional consultation and referrals 18 Uses evidence from research and relevant resources to make informed intervention decisions. 19 Selects client-centered and occupation-based interventions that motivate and challenge the client to achieve established goals that support targeted outcomes. Includes the consideration of all client centered components including psychosocial factors Implements client-centered and occupation-based intervention plans.



Includes the consideration of all client centered components including psychosocial fe Chooses and, if needed, modifies intervention approach to achieve established that support targeted outcomes. Examples: prevention, restoration, maintenance, promotion Modifies task and/or environment to maximize the client's performance. Examples: upgrades/downgrades task; arranges client's workspace for optimal performance discontinuation of services based on the client's status. Modifies the intervention plan and determines the need for continual discontinuation of services based on the client's status. Documents the client's response to services in a manner that demonstrate effectiveness of interventions. MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES Demonstrates through practice or discussion the ability to collaborate with an appropriate tasks to the occupational therapy assistant, occupational therapy others to whom responsibilities might be assigned, while remaining responsibilities appropriate tasks to the occupational therapy services, such as federal, state, third purivate payers. Examples: billing for OT services, inventory and ordering of supplies for OT services, options for client procurement of adaptive equipment Demonstrates knowledge about the organization. Examples: billing for OT services, inventory and ordering, specialty certifications at udents. Meets productivity standards or volume of work expected of occupational students. COMMUNICATION AND PROFESSIONAL BEHAVIORS Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to collaborates with fieldwork educator(s) to maximize the learning experience.	
that support targeted outcomes. Examples: prevention, restoration, maintenance, promotion 22 Modifies task and/or environment to maximize the client's performance. Examples: upgrades/downgrades task; arranges client's workspace for optimal performance. Examples: upgrades/downgrades task; arranges client's workspace for optimal performance. 23 Modifies the intervention plan and determines the need for continual discontinuation of services based on the client's status. 24 Documents the client's response to services in a manner that demonstrate effectiveness of interventions. MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES 25 Demonstrates through practice or discussion the ability to collaborate with an appropriate tasks to the occupational therapy assistant, occupational therapy others to whom responsibilities might be assigned, while remaining responsib aspects of treatment. Examples: paraprofessionals, nurses' aides, volunteers 26 Demonstrates through practice or discussion an understanding of costs and systems related to occupational therapy services, such as federal, state, third private payers. Examples: billing for OT services, inventory and ordering of supplies for OT servicential private payers. Examples: billing for OT services, inventory and ordering of supplies for OT servicential private payers. Examples: mission and vision, accreditation status, licensing, specialty certifications 28 Meets productivity standards or volume of work expected of occupational students. 29 Communicates clearly and effectively, both verbally and nonverbally. Examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements	ctors
22 Modifies task and/or environment to maximize the client's performance. Examples: upgrades/downgrades task; arranges client's workspace for optimal performance. 23 Modifies the intervention plan and determines the need for continual discontinuation of services based on the client's status. 24 Documents the client's response to services in a manner that demonstrate effectiveness of interventions. MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES 25 Demonstrates through practice or discussion the ability to collaborate with and appropriate tasks to the occupational therapy assistant, occupational therapy others to whom responsibilities might be assigned, while remaining responsibilities aspects of treatment. Examples: paraprofessionals, nurses' aides, volunteers 26 Demonstrates through practice or discussion an understanding of costs and systems related to occupational therapy services, such as federal, state, third paprivate payers. Examples: billing for OT services, inventory and ordering of supplies for OT servicent options for client procurement of adaptive equipment 27 Demonstrates knowledge about the organization. Examples: mission and vision, accreditation status, licensing, specialty certifications 28 Meets productivity standards or volume of work expected of occupational students. COMMUNICATION AND PROFESSIONAL BEHAVIORS 29 Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements	d goals
Examples: upgrades/downgrades task; arranges client's workspace for optimal performance of the client's task; arranges client's workspace for optimal performance of the client's task. 24 Documents the client's response to services in a manner that demonstrate effectiveness of interventions. MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES 25 Demonstrates through practice or discussion the ability to collaborate with and appropriate tasks to the occupational therapy assistant, occupational therapy others to whom responsibilities might be assigned, while remaining responsibilities aspects of treatment. Examples: paraprofessionals, nurses' aides, volunteers 26 Demonstrates through practice or discussion an understanding of costs and systems related to occupational therapy services, such as federal, state, third paraprivate payers. Examples: billing for OT services, inventory and ordering of supplies for OT services options for client procurement of adaptive equipment 27 Demonstrates knowledge about the organization. Examples: mission and vision, accreditation status, licensing, specialty certifications 28 Meets productivity standards or volume of work expected of occupational students. COMMUNICATION AND PROFESSIONAL BEHAVIORS 29 Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements	
Modifies the intervention plan and determines the need for continual discontinuation of services based on the client's status. Documents the client's response to services in a manner that demonstrate effectiveness of interventions. MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES Demonstrates through practice or discussion the ability to collaborate with and appropriate tasks to the occupational therapy assistant, occupational therapy others to whom responsibilities might be assigned, while remaining responsibilities aspects of treatment. Examples: paraprofessionals, nurses' aides, volunteers Demonstrates through practice or discussion an understanding of costs and systems related to occupational therapy services, such as federal, state, third paraprivate payers. Examples: billing for OT services, inventory and ordering of supplies for OT servicentions for client procurement of adaptive equipment Demonstrates knowledge about the organization. Examples: mission and vision, accreditation status, licensing, specialty certifications Meets productivity standards or volume of work expected of occupational students. COMMUNICATION AND PROFESSIONAL BEHAVIORS Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements	mance
discontinuation of services based on the client's status. Documents the client's response to services in a manner that demonstrate effectiveness of interventions. MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES Demonstrates through practice or discussion the ability to collaborate with an appropriate tasks to the occupational therapy assistant, occupational therapy others to whom responsibilities might be assigned, while remaining responsib aspects of treatment. Examples: paraprofessionals, nurses' aides, volunteers Demonstrates through practice or discussion an understanding of costs and systems related to occupational therapy services, such as federal, state, third paprivate payers. Examples: billing for OT services, inventory and ordering of supplies for OT servicent options for client procurement of adaptive equipment Demonstrates knowledge about the organization. Examples: mission and vision, accreditation status, licensing, specialty certifications Meets productivity standards or volume of work expected of occupational students. COMMUNICATION AND PROFESSIONAL BEHAVIORS Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements	nance
effectiveness of interventions. MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES Demonstrates through practice or discussion the ability to collaborate with and appropriate tasks to the occupational therapy assistant, occupational therapy others to whom responsibilities might be assigned, while remaining responsib aspects of treatment. Examples: paraprofessionals, nurses' aides, volunteers Demonstrates through practice or discussion an understanding of costs and systems related to occupational therapy services, such as federal, state, third paprivate payers. Examples: billing for OT services, inventory and ordering of supplies for OT services, options for client procurement of adaptive equipment Demonstrates knowledge about the organization. Examples: mission and vision, accreditation status, licensing, specialty certifications Meets productivity standards or volume of work expected of occupational students. COMMUNICATION AND PROFESSIONAL BEHAVIORS Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, the examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements	ion or
 Demonstrates through practice or discussion the ability to collaborate with and appropriate tasks to the occupational therapy assistant, occupational therapy others to whom responsibilities might be assigned, while remaining responsib aspects of treatment. Examples: paraprofessionals, nurses' aides, volunteers Demonstrates through practice or discussion an understanding of costs and systems related to occupational therapy services, such as federal, state, third paprivate payers. Examples: billing for OT services, inventory and ordering of supplies for OT servicential options for client procurement of adaptive equipment Demonstrates knowledge about the organization. Examples: mission and vision, accreditation status, licensing, specialty certifications Meets productivity standards or volume of work expected of occupational students. COMMUNICATION AND PROFESSIONAL BEHAVIORS Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements 	tes the
appropriate tasks to the occupational therapy assistant, occupational therapy others to whom responsibilities might be assigned, while remaining responsib aspects of treatment. Examples: paraprofessionals, nurses' aides, volunteers 26 Demonstrates through practice or discussion an understanding of costs and systems related to occupational therapy services, such as federal, state, third paprivate payers. Examples: billing for OT services, inventory and ordering of supplies for OT servicent options for client procurement of adaptive equipment 27 Demonstrates knowledge about the organization. Examples: mission and vision, accreditation status, licensing, specialty certifications 28 Meets productivity standards or volume of work expected of occupational students. COMMUNICATION AND PROFESSIONAL BEHAVIORS 29 Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to the produces clear and accurate documentation. Examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements	
systems related to occupational therapy services, such as federal, state, third parprivate payers. Examples: billing for OT services, inventory and ordering of supplies for OT services options for client procurement of adaptive equipment 27 Demonstrates knowledge about the organization. Examples: mission and vision, accreditation status, licensing, specialty certifications 28 Meets productivity standards or volume of work expected of occupational students. COMMUNICATION AND PROFESSIONAL BEHAVIORS 29 Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to the supplies of the produces clear and accurate documentation. Examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements	aide, or
systems related to occupational therapy services, such as federal, state, third particle payers. Examples: billing for OT services, inventory and ordering of supplies for OT services options for client procurement of adaptive equipment 27 Demonstrates knowledge about the organization. Examples: mission and vision, accreditation status, licensing, specialty certifications 28 Meets productivity standards or volume of work expected of occupational students. COMMUNICATION AND PROFESSIONAL BEHAVIORS 29 Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to the service of the produces clear and accurate documentation. Examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements	fundina
Examples: mission and vision, accreditation status, licensing, specialty certifications Meets productivity standards or volume of work expected of occupational students. COMMUNICATION AND PROFESSIONAL BEHAVIORS Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to Produces clear and accurate documentation. Examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements	rty, and
COMMUNICATION AND PROFESSIONAL BEHAVIORS 29 Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to the service of the service providers, administration, to the service of	
Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to the service providers of the servi	therapy
 Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, to Produces clear and accurate documentation. Examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements 	
Examples: legibility, spelling, punctuation, grammar, adherence to electronic documentation requirements	ıe public
31 Collaborates with fieldwork educator(s) to maximize the learning experience	health
Examples: initiates communication, asks for feedback about performance, identistrengths and challenges	ies own
Takes responsibility for attaining professional competence by seeking out opportunities and interactions with fieldwork educator(s) and others.	earning
33 Responds constructively to feedback in a timely manner.	
34 Demonstrates consistent and acceptable work behaviors.	



	Examples: punctuality, initiative, preparedness, flexibility, dependability, professional appearance
35	Demonstrates effective time management. Examples: plans ahead, adheres to schedules, completes work in expected timeframe
36	Manages relationships effectively through therapeutic use of self and adjusts approach to meet the needs of clients and others.
37	Demonstrates respect for diversity factors of others. Examples: culture, socioeconomic status, beliefs, identity

SITE SEFW

Session:

OT 795 Level II Summer - Class of 2014 (full-time, 12 week rotations)

Site Name:

Test - Site - FOR TESTING ONLY

START DATE:

DURATION:

6/9/2014 8/29/2014 12 WEEK

SETTINGS:

ACUTE CARE ADULT PHYS DIS(OP)

Form not submitted yet. Form once submitted will get locked.

Purpose:

This evaluation serves as a tool for fieldwork sites, academic programs, and students. The main objectives of this evaluation are to:

- · Enable the Level II fieldwork student who is completing a placement at the site to evaluate and provide feedback to the supervisor and fieldwork setting;
- · Enable academic programs, fieldwork sites, and fieldwork educators to benefit from student feedback in order to develop and refine their Level II fieldwork programs;
- · Ensure that all aspects of the fieldwork program reflect the sequence, depth, focus, and scope of content of the curriculum design;
- · Provide objective information to students who are selecting sites for future Level II fieldwork; and
- Provide a means of evaluation to ensure that fieldwork is performed in settings that provide educational experiences applicable to the academic program.

This form is designed to offer each program the opportunity to gather meaningful and useful information. Sections outlined with thick black double borders are designed to be customized by your program as needed. Pages involving evaluation of individual fieldwork educators have been positioned at the end of the form to allow academic programs to easily remove these pages before making them available for student review, if they choose to do so.

Instructions to the Student:

Complete the STUDENT EVALUATION OF THE FIELDWORK EXPERIENCE (SEFWE) form before your final meeting with your fieldwork supervisor(s). It is imperative that you review the form with your supervisor and that both parties sign below. Please upload the signed document to **Signed Signature Form under My Placement section on the Exxat**, so your Academic Fieldwork Coordinator can confirm completion. This information may be reviewed by future students as well. The evaluation of the student (FWPE) should be reviewed first, followed by the student's evaluation of the fieldwork experience (SEFWE), allowing the student to be honest and constructive.

First Previous Next Last

Page 1

Basic Information

Fieldwork Site

Test - Site - FOR TESTING ONLY (/CSPS/Site/SiteOverView/1071)

Address:

615 Washington Ave SE, Minneapolis, Minnesota(MN) - 55414

Placement Dates:

6/9/2014 - 8/29/2014

Order of Placement:

First

Second

Living Accommodations: (include type, cost, location, condition)

Public transportation in the area:

Please indicate if you are willing to talk to future students about your experience at this site

JES NO

SIMES

First Previous Next Last

Save

Form under My Placement section on the Exxat, so your Academic Fieldwork Coordinator can confirm completion. This information may be reviewed by future students as well. The evaluation of the student (FWPE) should be reviewed first, followed by the student's evaluation of the fieldwork experience (SEFWE), allowing the student to be honest and constructive.

First Previous Next Last

Page 2

A. ORIENTATION

Indicate your view of the orientation by selecting "Satisfactory" (S) or "Needs Improvement" (I) Or "Not Applicable" (N/A) regarding the three factors of adequacy, organization, and timeliness.

Sr. No	Topic	Adequat	te	Organize	2	Timely	
1	Site-specific fieldwork objectives	-Sel	*	-Se!	•	-Sel	▼
2	Student supervision process	-Sel	•	-Sel	*	-Sel	*
3	Requirements/assignments for students	-Sel	•	-Sel	•	-Sel	*
4	Student schedule (daily/weekly/monthly)	-Sel	•	-Sel	•	-Sel	•
5	Staff introductions	-Sei	•	-Sel	•	-Sel	•
6	Overview of physical facilities	-Sel	•	-Sel	•	-Sel	•
7	Agency/Department mission	-Sel	*	-Sel	•	-Se∤	•
80	Overview of organizational structure	-Sel	•	-Sel	•	-Sel	•
9	Services provided by the agency	-Sel	*	-Sel	•	-Sel	*
10	Agency/Department policies and procedures	-Sel	*	-Sel	*	-Sel	*

11	Role of other team members	-Sel	•	-Sel	*	-Sel	Y
12	Documentation procedures	-Sel	•	-Sel	•	-Sel	¥
13	Safety and emergency procedures	-Sel	*	-Sel	*	-Sel	*
14	Confidentiality/HIPAA	-Sel	•	-Sel	*	-Sel	∀ .
15	OSHA—Standard precautions	-Sel	▼	-Sel	٧	-Sel	₩
16	Community resources for service recipients	-Sel	*	-Sel	*	-Sel	•
17	Department model of practice	-Sel	*	-Sel	*	-Sel	*
18	Role of occupational therapy services	-Sel	*	-Sel	• •	-Sel	*
19	Methods for evaluating OT services	-Sel	•	-Sel	*	-Sel	•
20	Other	-Sel	•	-Sel	*	-Sel	•

Comments or suggestions regarding your orientation to this fieldwork placement:

1

B. CASELOAD

List approximate number of each age category in your caseload.

Sr. No	Age		Number
--------	-----	--	--------

1 0–3 years old

2 3–5 years old

3	6–12 years old		
4	13–21 years old		
5	22–65 years old		
6	> 65 years old		
List	approximate number of each primai	ry condition/problem/diagnosis	in your caseload
♣ Ac	ld New		
	tion/Problem ecords Found	Number	Action

First Previous Next Last

Save

supervisor and that both parties sign below. Please upload the signed document to **Signed Signature Form under My Placement section on the Exxat**, so your Academic Fieldwork Coordinator can confirm completion. This information may be reviewed by future students as well. The evaluation of the student (FWPE) should be reviewed first, followed by the student's evaluation of the fieldwork experience (SEFWE), allowing the student to be honest and constructive.

First Previou	s Next Last		Page 3
c. occu	IPATIONAL THERAPY PRO	OCESS	
their valu	ne approximate number of scr e to your learning experience t valuable and #5 being the m	eenings/evaluations you did; a by selecting the appropriate no ost valuable.	ulso indicate umber with #1
Sr. No		Required How Many	Educational Value
1 C	lient/patient screening		-Select- 🔽
2 V	/ritten treatment/care plans	<u>✓</u>	-Select- 🔽
3 D	ischarge summary	\checkmark	-Select- 🗸
4 0	lient/Patient Evaluation		
			-Select- ✓
		+ Add New Clie	nt/Patient Evaluations
	RAPEUTIC INTERVENTION		
🥛 🦣 was prov	najor therapeutic intervention ided in group, individually, co- nals involved.Give examples.	ns frequently used please indic treatment, or consultation. Lis	ate whether it st other
#	Individual Gro	oup Co-Treatment	Consultation

#	Individual	Group	Co-Treatment	Consultation
Occupation- based Activity	Give Exan	Give Exan	Give Exan	Give Exan
(i.e., playing, shopping, ADL, IADL, work, school activities, etc. Within clients own context with his or her goals)		: : :		
Purposeful Activity		Give Exan	Give Exan	: Give Exan
(therapeutic context leading to occupation)	Give Exan	GIVE EXAII	Give Cadil	CIVE EXAM
Preparatory		•		
Methods	Give Exan	Give Exan	Give Exan	Give Exan
(i.e., sensory, PAMs, splinting, exercise, etc. (preparation for occupation-based activity))		:		

First Previous Next Last Save

supervisor and that both parties sign below. Please upload the signed document to **Signed Signature Form under My Placement section on the Exxat**, so your Academic Fieldwork Coordinator can confirm completion. This information may be reviewed by future students as well. The evaluation of the student (FWPE) should be reviewed first, followed by the student's evaluation of the fieldwork experience (SEFWE), allowing the student to be honest and constructive.

	First Prev	ious Next Last		Page 4	
1	E. THE	ORY—FRAMES OF REFERENCE—MODELS OF PRA	ACTICE	rage4	
	Indicate	e frequency of theory/frames of reference used			
***************************************	Sr. No T	opic			Nevier
	1	Model of Human Occupation	-Select-		Rayely
	2	Occupational Adaptation	-Select-		Minan n
!	3	Ecology of Human Performance	-Select-	\geq	
	4	Person-Environment-Occupation Model	-Select-		
	5	Biomechanical Frame of Reference	-Select-	<u>></u>	
	6	Rehabilitation Frame of Reference	-Select-	$\overline{\mathbf{v}}$	
	7	Neurodevelopmental Theory	-Select-	\searrow	
	8	Sensory Integration	-Select-	\Box	
	9	Cognitive Behavioral Therapy	-Select-	\subseteq	THE CONTRACT OF THE CONTRACT O
	10	Cognitive Theory	-Select-	\searrow	
	: : : :				

Sr. No	Topic		
11	Cognitive Disability Frame of Reference	-Select-	
12	Motor Learning Frame of Reference	-Select-	
13	Other (list)	-Select-	\succeq
			<u> </u>

EMERGING PRACTICE SETTINGS

Indicate exposure to the following emerging practice settings.

Children and Youth:

- □Psychosocial needs of Children
- Childhood Obesity
- ☐Transition to post high school
- **∑**Builying
- []Driving for Teens with disabilities

Health and Wellness

- □Prevention
- Chronic Disease Management
- □Obesity

Work and Industry

- Aging workforce
- ☐ Ergonomics
- New Technologies at work

<u>Mental Health</u>

- Recovery and Peer Support Models
- D Depression
- \square Sensory Approaches to Mental Health
- \square Wounded Warriors and Veteran's Mental Health

Community Mobility Colder Driver Aging in Place Closign and Accessibility	
Aging in Place Design and Accessibility	
Design and Accessibility	
English Violen	
□Low Vision	
CDementia, Alzheimers	
☐Caregiver Education/support	
Rehabilitation, Disability and Participation	
☐ Technology and Assistive Devices	
Cancer Care/Oncology	
Telehealth	
Hand Transplants/Bionic Limbs	
C Veteran and Wounded Warrior Care	
🗋 Autism in Adults	

First Previous Next Last

supervisor and that both parties sign below. Please upload the signed document to **Signed Signature Form under My Placement section on the Exxat**, so your Academic Fieldwork
Coordinator can confirm completion. This information may be reviewed by future students as well.
The evaluation of the student (FWPE) should be reviewed first, followed by the student's evaluation of the fieldwork experience (SEFWE), allowing the student to be honest and constructive.

First Pre	evious Next Last		Page 5
F. FIE	LDWORK ASSIGNMENTS		4:
List th	ne types of assignments required of you a adicate their educational value (1 = not v	aluable 5 = very valuat	ne;
: ·· 		F 5 /	VA į
Sr. No	Topic		; ₁
1	Case study applying the Practice Framework	-Select-	
2	Evidence-based practice presentation Topic:	-Select-	<u>\</u>
3	Current site-specific fieldwork objectives	-Select-	
4	Program development Topic:	-Select-	
5	In-service/presentation Topic:	-Select-	

Sr. No	Торіс		· C 1
6	Research Topic:	-Select-	
7	Other (List)	-Select-	
į			

G. ASPECTS OF THE ENVIRO

Please rate how frequent the following occurred

Railely Occasionally Frequently Constantly

	Sr. No	Topic		اسسم
	1	Staff and administration demonstrated cultural sensitivity	-Select-	
	2	The Practice Framework was integrated into practice	-Select-	<u>\</u>
!	3	Student work area/supplies/equipment were adequate	-Select-	\
	4	Opportunities to collaborate with and/or supervise OTs, OTAs, and/or aides	-Select-	>
-	5	Opportunities to network with other professionals	-Select-	\
	6	Opportunities to interact with other OT students	-Select-	<u> </u>
	7	Staff used a team approach to care	-Select-	~

Sr. No	Торіс		F. 75 CQ
8	Opportunities to observe role modeling of therapeutic relationships	-Select-	<u>\</u>
9	Opportunities to expand knowledge of community resources	-Select-	V
10	Opportunities to participate in research	-Select-	\subseteq

ADDITIONAL DETAILS ABOUT SITE Please specify on the following. Additional educational opportunities (specify): 2 How would you describe the pace of this setting? -Select-3 Types of documentation used in this setting?: 4 Ending student caseload expectation: # of clients per week or day Ending student productivity expectation: % per day (direct care)

supervisor and that both parties sign below. Please upload the signed document to **Signed Signature Form under My Placement section on the Exxat**, so your Academic Fieldwork
Coordinator can confirm completion. This information may be reviewed by future students as well.
The evaluation of the student (FWPE) should be reviewed first, followed by the student's evaluation of the fieldwork experience (SEFWE), allowing the student to be honest and constructive.

First Previous Next Last	Page 6
I. INTEGRATION OF ACADEMIC THEMES WITHIN THE FIELDWORK EXPERIENCE	
1 How did you address psychosocial issues with your patient population?	
2 How would describe the use of occupations at this setting?	
3 Was evidence based practice integrated into treatment? Were you given opportunities to explore EBP?	
4 How did this fieldwork experience help you develop your clinical reasoning skills and clinical competencies as an entry level therapist?	
5 How did this experience help you develop cultural competency? Explain	

6 Were you able to practice leadership principles during this FW experience? Describe

. SUPERVISION

1 What was the primary model of supervision used? (check one)

one supervisor : one student

one supervisor: group of students

two supervisors : one student

one supervisor : two students

distant supervision (primarily off-site)

three or more supervisors : one student (count person as supervisor if supervision occurred at least weekly)

2 How was student feedback and assessment handled?

Was it adequate for your learning needs?

Please list fieldwork educators other than primary clinical educators who participated in your learning experience.

Add New

3

Name	Credentials	Frequency	Individual	Group	Action
No Records Found			. ·		
	<u></u>			·	

First Previous Next Last Save

supervisor and that both parties sign below. Please upload the signed document to **Signed Signature Form under My Placement section on the Exxat**, so your Academic Fieldwork
Coordinator can confirm completion. This information may be reviewed by future students as well.
The evaluation of the student (FWPE) should be reviewed first, followed by the student's evaluation of the fieldwork experience (SEFWE), allowing the student to be honest and constructive.

First F	Previous Next Last				Page 7
К. А	CADEMIC PREPARATION				
ofT	e the relevance and adequacy o HIS fieldwork placement, circlin	f your academic cong the appropriate	oursework number. (relative to the no Note: may attach	eeds i own
Sr. No	Topic	Adequacy for P	lacement	Relevance for P	lacement
1	Anatomy and Kinesiology	-Select-	\	-Select-	$\overline{\mathbf{v}}$
2	Neurodevelopment	-Select-	∀	-Select-	$\overline{\smile}$
3	Human development	-Select-	$\overline{\vee}$	-Select-	$\overline{\lor}$
4	Evaluation	-Select-	lacksquare	-Select-	∀
5	Intervention planning (Design)	-Select-	$\overline{\mathbf{Y}}$	-Select-	<u>\</u>
6	interventions (individual, group, activities, methods)	-Select-	>	-Select-	Ÿ
7	Theory	-Select-	$\overline{\mathbf{v}}$	-Select-	$\overline{\mathbf{v}}$
8	Documentation skills	-Select-	\	-Select-	lacksquare

9 :	Leadership	-Select-	V	-Select-	igstyle
10	Professional behavior and communication	-Select-	igtriangledown	-Select-	V
11	Therapeutic use of self	-Select-	$\overline{\mathbf{v}}$	-Select-	$\overline{\mathbf{v}}$
 12	Level I fieldwork	-Select-	$\overline{\vee}$	-Select-	Y
13	Program development	-Select-		-Select-	>
14	Human Movement	-Select-	$\mathbf{\nabla}$	-Select-	lacksquare
 15	Psychosocial issues	-Select-	<u> </u>	-Select-	$\overline{\mathbf{Y}}$
16	Wellness	-Select-	$\overline{\mathbf{v}}$	-Select-	\
17	Evidence Based Practice	-Select-	<u>\</u>	-Select-	$\overline{\vee}$
1 Wha to th	t changes would you recomm ie needs of THIS Level II fieldw	end in your acad ork experience?	lemic progr	am relative	

First Previous Next Last

Save

supervisor and that both parties sign below. Please upload the signed document to **Signed Signature Form under My Placement section on the Exxat**, so your Academic Fieldwork

Coordinator can confirm completion. This information may be reviewed by future students as well.

The evaluation of the student (FWPE) should be reviewed first, followed by the student's evaluation of the fieldwork experience (SEFWE), allowing the student to be honest and constructive.

First	Previous Next Last		Page 8
L.	SUMMARY		
	ease indicate your opinion on the following rongly Agree)	topics. (1= Strongly Disag	ree 5 =
	parameter of the second second	and the second s	
Sr. N	No Topic		
1	Expectations of fieldwork experience were clearly defined	-Select-	
2	Expectations were challenging but not overwhelming	-Select-	
	The second secon	and the second second	
3	Experiences supported student's professional development	-Select-	<u> </u>
4	Experiences matched student's expectations	-Select-	<u> </u>
5 What stud	at particular qualities or personal performa dent should have to function successfully or	nce skills do you feel that n this fieldwork placemer	: a ht?
pla /	at advice do you have for future students w cement? \ Study the following evaluations:	vho wish to prepare for th	nis

B Study the following intervention methods:	
C Read up on the following in advance:	
7 Overall, what changes would you recommend in this Level II fieldwork experience?	
8 Please feel free to add any further comments, descriptions, or information concerning your fieldwork at this center.	

First Previous Next Last Save Submit

STUDENT EVALUATION OF THE FIELDWORK EXPERIENCE (SEFWE)

Instructions to the Student:

Complete this STUDENT EVALUATION OF THE FIELDWORK EXPERIENCE (SEFWE) form before your final meeting with your fieldwork supervisor(s). It is imperative that you review the form with your supervisor and that both parties sign on page 1. Copy the form so that a copy remains at the site and a copy is forwarded to your Academic Fieldwork Coordinator at your educational program. This information may be reviewed by future students as well. The evaluation of the student (FWPE) should be reviewed first, followed by the student's evaluation of the fieldwork experience (SEFWE), allowing the student to be honest and constructive.

We have mutually shared and clarified the Experience report.	nis Student Evaluation of the Fieldwork
Student's Signature	FW Educator's Signature
Student's Name (Please Print)	FW Educator's Name and credentials (Please Print) FW Educator's years of experience