

# Doctor of Occupational Therapy

FIELDWORK EDUCATOR MANUAL

Department of Occupational Therapy UNIVERSITY OF FLORIDA | GAINESVILLE, FL

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### Introductory Letter

Welcome to the occupational therapy fieldwork program at the University of Florida (UF). Thank you for your dedication to the education of a new generation of occupational therapists.

Remember how excited, frightened and challenged you were by the prospect of your fieldwork experience? The students in the University of Florida Doctor of Occupational Therapy (OTD) program are looking forward to their fieldwork experience in the same way; doubting if they know enough but eager to try their wings. You are very important to these students. As their professional role model, you are the person who helps to bring to life all of those pages of words and laboratory practices.

We hope that this fieldwork educator manual will be a resource about the UF OTD program. The manual provides information about the UF OTD program and resources to assist the fieldwork educator (FWE).

Consistent with ACOTE accreditation standards, UF requires both Level I and Level II fieldwork experiences, and a Doctoral Capstone Experience (see Doctoral Capstone Experience manual). The goal of Level I fieldwork is to introduce students to the fieldwork experience, to apply knowledge to practice, and to develop a basic comfort level and understanding of the needs of clients. Experiences are designed to enrich didactic coursework through directed observation and supervised participation in the occupational therapy process. One-week Level I fieldwork provides students with exposure to pediatric and adult populations. Weekly Level I site visits provide students with exposure to a 12-week psychosocial Level I fieldwork experience.

The goal of Level II fieldwork is to develop competent, entry-level generalist occupational therapists. This involves an in-depth experience in occupational therapy service delivery to clients over a 24-week time period (12 weeks each experience) in physical rehabilitative, pediatric or psychosocial settings. Most Level II students are supervised by one full-time professional level OT, but occasionally students experience a group model where one supervisor (an experienced registered therapist) is responsible for two students, or two therapists work together in providing a full-time 12-week experience for one student.

Students have the opportunity to meet with the academic fieldwork coordinator prior to making their fieldwork selections. Multiple resources are provided, including information from former students, materials from fieldwork sites, and information from field site visits by the academic fieldwork coordinator. The academic fieldwork coordinator maintains regular contact with fieldwork sites through e-mail or phone, as well as site visits. Sites are selected based on the variety of factors: treatment conditions available, evaluations and interventions used, opportunities for client participation in the therapy process, facility expectations, student resources for learning, and consistency of the learning experience with UF OTD curriculum design and learning objectives.

Our fieldwork educators provide an essential educational element for our OTD students. The students benefit greatly from your expertise and knowledge as they build their critical thinking, refine their communication skills and build their professional identity. This experience will prepare them to lead the profession and community through their contributions in leadership, community and professional service, life-long learning and scholarship.

#### Benefits for Fieldwork Educators

The University of Florida (UF) Department of Occupational Therapy is committed to establishing collaborative relationships with Occupational Therapy Fieldwork Educators and agencies wishing to partner with us. Each of you reading this has mentored or will mentor an OTD student from UF. You have offered your knowledge and challenges to these eager minds, and I hope that they have stimulated yours in return. Please know how much respect we have for your expertise and the integral part you play in each student's careers. The following benefits are offered to our Fieldwork Educators (FWEs) to foster these relationships:

Professional Development Certificates will be provided as a token of appreciation to fieldwork educators who undertake fieldwork education in addition to their already busy work schedule. These will be mailed to you upon completion of the fieldwork and serve as documentation for your Professional Development Units for NBCOT certification and CEUs for licensure. A licensee may earn up to six (6) continuing education hours per biennium for supervision of a Level II Occupational Therapy or Occupational Therapy Assistant fieldwork student at the rate of no more than three (3) hours per student. Please refer to rule 64B11-5.001, Requirements for license renewal of an active license, item #11. You may access the complete rule at the Florida State Licensure website https://www.flrules.org/gateway/RuleNo.asp?ID=64B11-5.001

Certificates of Participation entitle you to free tuition at any Florida state university. An application for the certificates is included in the packets that will be sent to you prior to the student's arrival for Level II fieldwork.

#### **Job Postings**

Free online job postings are provided to all our fieldwork sites. Post job openings at https://ot.phhp.ufl.edu/current-students/#gcl or https://career.ufl.edu/recruiting/job-postings/.

#### Professional Development Workshops

Periodically the AFWC and/or the Program Director provide professional development workshops to fieldwork educators and capstone site mentors accepting UF students. Please contact Dr. Horwitz if you would like to set up a lunch & learn.

#### Introduction to Fieldwork

The fieldwork experience is designed to promote clinical reasoning and reflective practice, transmit the values and beliefs that enable ethical practice, and develop professionalism and competence in career responsibilities. Fieldwork experiences should be implemented and evaluated for their effectiveness by the educational institution. The experience should provide the student with the opportunity to carry out professional responsibilities under the supervision of qualified personnel serving as a role model (ACOTE C.1.0).

Fieldwork can be defined as practice-based learning experiences that integrate a student's academic knowledge into clinical practice. The occupational therapy profession uses fieldwork, instead of internship or clinical rotation, to describe the diverse settings where occupational therapists work. These settings include hospitals, community sites, private practice, outpatient clinics, school systems, long term care and senior living facilities, work sites and homes.

The Accreditation Council for Occupational Therapy Education (ACOTE) determines the requirements for fieldwork. Fieldwork is divided into two classifications: Level I and Level II experiences.

#### Contacts:

Academic Fieldwork Coordinator: Clinical Education Assistant

Heidi Horwitz, MEd, OTD, OTR/L Peggy Ford 352-273-9671 352-294-6874

hhorwitz@phhp.ufl.edu ford.m@phhp.ufl.edu

Fieldwork Web address: <a href="https://ot.phhp.ufl.edu/current-students/fieldwork/">https://ot.phhp.ufl.edu/current-students/fieldwork/</a>

#### Occupational Therapy Department Offices:

Are located on the 2nd Floor of the Public Health and Health Professions wing of the HPNP building. The main

office is located in Suite 2101.

Office hours: 8:00 am to 5:00 pm, Monday-Friday.

Telephone number: (352) 273-6817

Fax number: (352) 273-6042

Web address: <a href="https://ot.phhp.ufl.edu/">https://ot.phhp.ufl.edu/</a>

#### Fieldwork Schedule

Psychosocial Level I Fieldwork	Year 1	Summer	(3-4 hours per week/12 weeks)
Adult Level I Fieldwork	Year 2	Fall	(1 week/approximately 40 hours)
Pediatric Level I Fieldwork	Year 2	Spring	(1 week/approximately 40 hours)
Level IIA Fieldwork	Year 2	Summer	(12 weeks Full Time)
Level IIB Fieldwork	Year 3	Fall	(12 weeks Full Time)

Prerequisites for the Fieldwork Experience Level II are successful completion of all didactic/academic work through the fifth semester of the OTD Program.

#### Department of Occupational Therapy Vision

By 2025, the UF OT Department will be a vibrant, preeminent research and educational entity in the USA.

#### Department of Occupational Therapy Mission Statement

We will lead research innovations, present thriving and varied educational programs, embrace a clinician—scientist model, be fiscally healthy, and serve the occupational needs of people, organizations and populations.

#### Entry-Level Doctor of Occupational Therapy Degree Program (OTD)

The entry-level Doctor of Occupational Therapy Degree Program provides students with a holistic perspective, including an understanding of the philosophical and theoretical basis for practice in the current health care environment. This program is ten semesters of full-time professional coursework currently being evaluated for accreditation by the Accreditation Council for Occupational Therapy Education of the American Occupational Therapy Association. It includes off-campus fieldwork and a capstone experience, as assigned by the

Department in Florida and other states (see Appendix A for OTD Program Course Sequences). Upon graduating from the program, students receive a Doctor of Occupational Therapy (OTD) degree.

Accreditation: The entry-level OTD degree program has applied for accreditation and has been granted Candidacy Status by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA), 6116 Executive Boulevard, Suite200, North Bethesda, MD 20852-4929; tel. (301) 652-AOTA; web address www.acoteonline.org.

#### Doctor of Occupational Therapy Curriculum Framework

#### Program Philosophy

Occupational therapy is a profession dedicated to habilitation, rehabilitation and health promotion as articulated by the American Occupational Therapy Association (AOTA, 2014), the World Health Organization's International Classification of Functioning, Disability and Health (2013), and the National Center for Medical Rehabilitation Research of the National Institutes of Health. The major goal of Occupational Therapy, as defined by the scope of practice, is to optimize occupational performance within the client's roles, contexts, and environments (AOTA, 2014). Occupational therapists focus on improving performance in all areas of occupation to facilitate health and promote growth, change, and/or adaptation. The ultimate goal of this focus is the achievement of health, well-being, and participation in life through engagement in occupation (AOTA, 2014). We envision that effective intervention delivered through meaningful occupations must take into account multiple levels of functioning, as reflected by the models cited above. This document reflects the philosophical foundation of our professional occupational therapy doctoral program, which serves as the basis for our current curriculum framework.

#### A View of Humanity

The University at Florida Doctor of Occupational Therapy professional program is based on the philosophical belief that people have a need and right to participate in occupations that they choose, need, or desire. Occupations are activities that have meaning and value for the daily lives of individuals, families, groups, communities and populations. Participation in meaningful occupations is viewed as a determinant of health and wellbeing (AOTA, 2011; AOTA, 2014).

Occupational performance evolves in response to the interaction of the clients (e.g., individuals, communities, and populations), occupation and context or environment (Christiansen, Baum & Bass, 2015). Occupations vary according to life roles which have a developmental perspective, and may change over the course of a lifetime. Each role has its associated developmentally-appropriate and role-appropriate tasks that influence the nature of one's occupations. Human learning occurs via the dynamic interaction between a person and a task in the context of the relevant environment. Occupational therapy strives to facilitate this process through active collaboration between the client and the therapist.

Occupation may be used to prevent or mediate the effects of disability and to facilitate independence and maximum adaptation (AOTA, 2011). When individuals are threatened by stress, deprivation, disease, illness or injury, occupational therapy interventions address (1) the individual's physical, psychological, and social capacities to achieve occupational competence, (2) the skills and habits of effective role performance and (3) environmental modification to support participation.

#### **Educational Philosophy**

The professional program fosters culturally sensitive and evidence-based clinical competence through the learner's active engagement in a collaborative process (student, client and educator) that builds on prior knowledge and experience. Learners integrate academic knowledge, active learning, clinical reasoning, and self-reflection through experiences in and beyond the classroom (AOTA, 2015; Schaber, 2014). Engagement in advanced practice opportunities in health systems and communities supports professional development, opportunities for leadership and advocacy for clients and the profession. The promotion of lifelong learning, collaboration and professional judgment reinforces continual contributions to critical inquiry in evidence-based practice. Completion of a culminating project and an in-depth doctoral capstone experience integrates learner understanding of advanced theory with practice and scholarship. The program facilitates understanding of the connections between philosophical, theoretical and practical knowledge, values, beliefs, ethics, and technical skills for broad application toward engagement in occupation to improve health, participation and quality of life.

#### The Clinician-Scholar

The professional doctoral program in Occupational Therapy provides professional training as a discipline within the College to optimize occupational performance of individuals, communities and populations within dynamic contexts and specific environments. The program builds upon a background in the liberal arts and sciences to foster culturally sensitive, reflective, evidence-based and clinically competent scholarly practitioners, whom we refer to as clinician-scholars.

**Definition of the clinician-scholar.** The clinician-scholar graduate of the University of Florida's OTD program has advanced practice and scholarly skills. The clinician-scholar critically, systematically, and reflectively appraises, applies, and implements best practices and best evidence within the client's context and culture. The clinician-scholar articulates the core occupational therapy values, as related to advocacy, education, policy, leadership, or service provision meeting the occupational needs of individuals, organizations, and populations.

#### Curriculum Framework

The curriculum framework of the University of Florida's Doctor of Occupational Therapy (OTD) program is embedded in a broader institutional and societal context and perspective. Our curriculum framework and educational perspective embrace principles of occupational therapy, public health, health science and rehabilitation science. The curriculum is aligned within the Vision 2025 of the American Occupational Therapy Association (AOTA, 2017) and the models of health, disability and rehabilitation of the World Health Organization and National Institutes of Health. Within this professional perspective lie the activities of our Department as they relate to the university's tripartite mission of teaching, research, and service.

#### Overarching Curricular Goal of the OTD Program

The program is guided by an overarching curricular goal:

Graduates of the OTD program will be uniquely prepared by their experiences as part of a large academic health science center and a college of public health and health professions to practice as clinician-scholars who will meet the complex demands of current and emerging occupational therapy practice settings, advocate for the profession and populations, communities and individuals served, and provide leadership for the implementation of evidence-based occupational therapy.

#### **Program Outcomes and Themes**

The University of Florida OTD Program has six Program Outcomes that link to six Curricular Themes.

Upon completion of the program, graduates of the University of Florida OTD program will:

- Develop and implement theoretically-sound, evidence-based occupational therapy programs and practices that incorporate an ecological perspective of human health (*Theme:* Human Occupation and Health)
- Integrate rigorous critical thinking and sound clinical reasoning when implementing best practices for optimal outcomes for individuals, communities, and populations. (*Theme:* Critical Thinking for Practice and Scholarship)
- Commit to ethical reasoning that intrinsically represents the highest ethical standards, values, and attitudes of the profession (*Theme:* Professionalism)
- Champion the occupational performance of individuals, communities, and populations to support health and well-being within culturally diverse contexts (*Theme*: Valuing of Diversity)
- Practice with an interprofessional and collaborative perspective of client care (*Theme:* Collaborative Practice)
- Conduct occupation-based assessments and implement occupation-based interventions to increase participation across contexts for individuals, communities, and populations (Theme: Psychomotor Skills)

#### Fieldwork Site Information

Each fieldwork experience is designed collaboratively between the Academic Fieldwork Coordinator (AFWC) and the Fieldwork Coordinator at the fieldwork site. During the fall and spring semesters of Year 1, fieldwork meetings will be held to:

- Introduce fieldwork settings
- Discuss the fieldwork placement process and choice selection
- Discuss fieldwork requirements
- Discuss fieldwork expectations and responsibilities of the student, Academic Fieldwork Coordinator and Fieldwork Educator.

During the spring semester of Year One, each student will have the opportunity to meet individually with the AFWC prior to making their fieldwork selection. Students are provided with multiple resources to assist them in making their selection, including information from previous students, materials sent from the fieldwork sites in the site folder (located in CANVAS and the online database system) and information obtained from field visits by the Academic Fieldwork Coordinator

The fieldwork file specific to each site includes but is not limited to the following information:

- (1) Fieldwork Data Form with a summary of each facility, population served, type of service available
- (2) Site Specific Objectives
- (3) Past student evaluations of the site
- (4) Additional pertinent data

#### Level I Fieldwork

In addition to course work, the student is required to complete a series of related Level I fieldwork experiences. The goal of Level I fieldwork is to introduce students to the fieldwork experience, to apply knowledge to practice, and to develop understanding of the needs of clients (ACOTE 2018 Standards). Level I fieldwork is integral to the program's curriculum design and includes experiences designed to enrich didactic coursework through directed observation and participation in selected aspects of the occupational therapy process. The focus of these experiences is not intended to be independent performance.

Students are supervised by qualified and licensed competent personnel who are occupational therapy personnel. Through Level I Fieldwork experiences students have the opportunity to observe, evaluate and treat children, adolescents and adults with physical dysfunction, psychosocial dysfunction and/or developmental disabilities. Level I Fieldwork experiences are woven throughout the summer, fall and spring semesters and carry specific academic and clinical requirements. These experiences provide the student with an opportunity to translate theory into practice and to observe or define the roles of occupational therapy in various clinical settings and/or community settings.

Students complete three Level I Fieldwork Experiences: Psychosocial Dysfunction, Adults and Pediatrics. The Psychosocial Level I fieldwork occurs throughout the summer semester at community mental health settings, substance abuse programs and inpatient psychosocial settings. Block assignments of one-week periods of approximately 40 hours have been organized for students to complete the Adult and Pediatric Level I Fieldwork.

Students learn about intervention most effectively by participating in (rather than only observing) the intervention process whenever possible. Some interventions will target preparatory skills such as range of motion, strength, or self-confidence, while others will provide students with opportunities to practice and refine skills in an area of occupation, such as ADL training or leisure skills development. It is often beneficial to students to see some clients consistently over the course of the week so that they can appreciate the process of grading activities with patient improvement. Students also benefit from opportunities to reflect on their experiences, perhaps considering types of clients who might benefit from a particular intervention, as well as contraindications for use.

It is the student's responsibility to provide proof of having met all required health standards and training prior to initiating any fieldwork experience and to have provided proof of OSHA, HIV and HIPAA training. Students are also required to abide by all applicable facility policies and procedures for drug testing, fingerprinting and background checks.

#### Level I Fieldwork Placements

Students will provide the Academic Fieldwork Coordinator with a list of five facility choices from an approved list for Psychosocial Level I Fieldwork. For Adult and Pediatric Level I fieldwork, students will have the opportunity to review and list five preferences in the database system. Level I Fieldwork assignments are made approximately three months prior to the Level I Experience. While the AFWC will attempt to secure a placement at one of these sites, this is not guaranteed.

#### Level I Fieldwork Evaluation and Grading Procedures

Level I Fieldwork is integrated into the courses OTH 6850, OTH 6812 and OTH 6816. The fieldwork educator will complete an evaluation of student performance as part of this course. In addition, the student will complete an evaluation of the fieldwork experience. Review and discussion of the completed evaluation forms will occur at the fieldwork site prior to completion of the experience.

Assignment of the final grade for the fieldwork experience is the responsibility of the Academic Fieldwork Coordinator at the University of Florida.

#### Grading Student Performance: Level I Fieldwork

Level I Fieldwork is graded on a satisfactory/unsatisfactory basis. A copy of this evaluation form will be shared with students before they start Level I Fieldwork and is available on the course website. Review and discussion of the completed evaluation form will occur at the fieldwork site prior to completion of the experience. The completed form will then be submitted to the Academic Fieldwork Coordinator at the next fieldwork class.

Students can access all Level I forms on the course website: <a href="http://elearning.ufl.edu/">http://elearning.ufl.edu/</a>

#### Level II Fieldwork

The goal of Level II Fieldwork is to develop competent, entry-level, generalist occupational therapists. Level II Fieldwork must be integral to the program's curriculum design and must include an in-depth experience in delivering occupational therapy services to clients, focusing on the application of purposeful and meaningful occupation and research, administration, and management of occupational therapy services. It is recommended that the student be exposed to a variety of clients across the lifespan and to a variety of settings. (ACOTE, 2018 Standards)

Level II Fieldwork occurs only after the student satisfies all academic and Level I Fieldwork requirements through the fifth semester of the program. Level II Fieldwork is designed to promote clinical reasoning and reflective practice, to transmit the values and beliefs that enable the application of ethics related to the profession, to communicate and model professionalism as a developmental process and a career responsibility, and to develop and expand a repertoire of occupational therapy assessments and interventions related to human performance.

A minimum of 24 weeks of Level II fieldwork is required. The student is required to spend the equivalent of 12 weeks, full-time, in two significantly different clinical settings. Fieldwork must be completed on at least a half-time basis (ACOTE Standards, C.1.10.), and Level II placements, the capstone, and the capstone project must be successfully completed within one year of completing didactic campus-based coursework. The typical progression is for the student to complete two consecutive 3-month internships, one occurring in May and then one in August. Students are required to select one site primarily oriented towards treatment of adults with physical dysfunction.

The fieldwork supervisor shall be "a currently licensed or otherwise regulated occupational therapist who has a minimum of 1 year full-time (or its equivalent) of practice experience as a licensed or otherwise regulated occupational therapist prior to the onset of the Level II fieldwork" (ACOTE 2018 Standards, C.1.11).

Students are responsible for arranging their own transportation, housing and financing for their fieldwork experiences. Special arrangements are available through some facilities, as noted in fieldwork files, but these arrangements are subject to change.

#### Level II Fieldwork Outcomes

The University of Florida OTD Program has six Level II Fieldwork Outcomes that link to six Curricular Themes.

- 1) Apply theoretical and scientific concepts across a variety of real-world contexts for individuals across the lifespan. (*Theme*: Human Occupation and Health)
- 2) Demonstrate clinical competence through conducting screening, comprehensive assessment, hypothesis generation, goal development, and implementation of evidence-based practices. (*Theme*: Critical Thinking for Practice and Scholarship)
- 3) Discriminate safety risks and violations in a real-world setting and respond appropriately. (*Theme*: Practice and Scholarship)
- 4) Characterize and analyze the behaviors of role models so that those behaviors can be incorporated into students' own practices. (*Theme*: Professionalism)
- 5) Apply and demonstrate effective professional behaviors on a day-to-day basis when working with clients, patients, multi-disciplinary team members and peers. (*Theme*: Professionalism)
- 6) Embrace constructive feedback to improve or further develop professional behaviors. (*Theme*: Professionalism)
- 7) Participate in a self-reflection activity to gain insight into competencies, areas for growth and areas of challenge related to professional behaviors. (*Theme*: Professionalism)
- 8) Provide culturally appropriate, ethical, and client centered assessment and intervention services. (*Theme*: Valuing of Diversity)
- 9) Differentiate the skills, knowledge, responsibilities, and roles of other healthcare providers on a client's team. (*Theme:* Collaborative Practice)
- 10) Initiate interprofessional referrals to address clients' needs that are outside of OT scope of practice. (*Theme:* Collaborative Practice)
- 11) Assess individual strengths and weaknesses in skillsets and knowledge for the purpose of integrating skills and knowledge from others on the healthcare team to meet client needs. (*Theme:* Collaborative Practice)
- 12) Utilize models and frameworks (Ecological Model, ICF Model, etc.) to gather information that informs a holistic understanding of client needs. (*Theme:* Collaborative Practice)
- 13) Advocate for the contributions of other healthcare and community providers on the team. (*Theme:* Collaborative Practice)

14) Conduct a comprehensive client evaluation and carry out occupation-based interventions efficiently and safely. (*Theme:* Psychomotor Skills)

#### Level II Fieldwork Placements

Students may list fieldwork site preferences from sites located throughout the United States that have returned reservation forms indicating slots available for University of Florida occupational therapy students. Fieldwork may take place outside the US for the second internship rotation, but must be supervised by a graduate of a WFOT-approved occupational therapy program with a minimum of one year of clinical experience. There are a limited number of international fieldwork sites available.

Students will have the opportunity to review the list of fieldwork reservations and list 10 preferences in the database system. Level II Fieldwork assignments are made in the summer of Year 1 using an algorithm to find the best case scenario (autoplacement) in the online database system overseen by the Academic Fieldwork Coordinator. Assignments are based on availability, student preferences, type of experience offered, and when indicated, the student's specific needs. While every attempt will be made to consider preferences, students are not guaranteed their preference of locations or settings. An appeal process is available for students who need to be placed outside of the preference system and must be submitted and approved by the Academic Performance Review committee prior to preference due date. Examples of reasons for approval are dependent care or medical needs.

#### Level II Fieldwork Evaluation and Grading Procedures

Each fieldwork experience will be evaluated by the student and Fieldwork Educator. The fieldwork educator will complete an evaluation of student performance (FWPE). In addition, the student will complete an evaluation of the fieldwork experience (SEFWE). Review, discussion and signing of the completed evaluation forms will occur at the fieldwork site prior to completion of the experience.

Assignment of the final grade for the fieldwork experience is the responsibility of the Academic Fieldwork Coordinator at the University of Florida.

#### Grading Student Performance: Level II Fieldwork

Level II Fieldwork is graded on a satisfactory/unsatisfactory basis. AOTA's Fieldwork Performance Evaluation for the Occupational Therapy Student (FWPE) form is used, and the minimum passing score of 111 points must be attained for satisfactory performance. In addition, all "Fundamentals of Practice" items must be passed with a minimum score of three to achieve a satisfactory grade, and all remaining items must be passed with a minimum score of two.

A copy of this evaluation form will be shared with students before they start Level II Fieldwork and is available on the course website. A link to the FWPE will be sent to the Fieldwork Educator at the site in the fifth and eleventh weeks of each Level II fieldwork experience.

Using this evaluation at midterm and final, it is suggested that the student complete a self-evaluation of his/her own performance. A midterm and final evaluation of the student's progress in a fieldwork placement are provided by the Fieldwork Educator to the student in writing and verbally.

At midterm, strengths and weakness are identified and suggestions are made so that the student will reach the goal of "entry level practitioner" by the end of the internship. The student and/or the Fieldwork Educator will report unsatisfactory student progress in the fieldwork midterm evaluation immediately to the UF OT Academic Fieldwork Coordinator. Problem areas will be identified, suggestions for improved performance will be outlined, and alternative solutions will be explored towards the goal of improved performance during the second half of the internship.

An evaluation of student performance during the final week of fieldwork is required by the UF Department of Occupational Therapy. The final FWPE will be signed electronically by the Fieldwork Educator and the student, and provided to the AFWC at the completion of the experience. It is requested that the grading page of the FWPE is uploaded to the learning management system so that the deadline for grade entry can be met.

A grade of satisfactory/unsatisfactory is recorded on a student's official transcript for each Level II fieldwork experience. A grade will not be recorded until the signed AOTA evaluation form is received by the AFWC.

In order to determine if a student has successfully completed each Level II fieldwork experience, the AFWC will review the FWPE completed by the Fieldwork Educator. A grade for the Level II fieldwork experience will be determined by using the score a student received from his/her fieldwork supervisor on the FWPE.

Please note that no areas assessed on the FWPE may be marked "Not Observed". It is the responsibility of the Fieldwork Educator to provide opportunities for participation and/or discussion as appropriate for each identified area. Students are responsible for completing all of the tasks and duties assigned by the Fieldwork Educator prior to receiving the final evaluation from their supervisor. If a student has not completed all of the assigned tasks and duties, the supervisor is not obligated to complete the FWPE until the student has completed all of the requirements designated by the facility.

Unsatisfactory performance at midterm may result in removal from the Level II fieldwork site. This decision will be made in collaboration with the site Fieldwork Educator, the Academic Fieldwork Coordinator and the OTD Program Director. The Academic Performance Review committee will then convene and the student may be: 1) removed from the OTD program, 2) offered a remediation, or 3) offered the opportunity to remain at the site with a learning plan in place.

Unsatisfactory performance at the end of the Level II Fieldwork experience will result in a meeting with the Occupational Therapy Department Academic Performance Review Committee and could mean removal from the OTD program.

Students who do not pass their fieldwork will be required to do a remediation. The specifics of the Remediation Plan will be determined by the AFWC, Program Director and Academic Performance Committee. The remediation needs to be completed before the student can participate in another fieldwork experience.

#### Student Evaluation of Fieldwork Experience

Students are required to complete an evaluation of each Level II Fieldwork experience. This Student Evaluation of the Fieldwork Experience (SEFWE) affords students the opportunity to provide feedback to the facility, Fieldwork Educator and the University Of Florida Department of Occupational Therapy. This must be discussed between the student and Fieldwork Educator and then an electronic copy is to be returned to the Academic Fieldwork Coordinator at the University of Florida with signatures.

#### Accommodations for Students with Disabilities

Students requesting classroom, academic or fieldwork accommodations must first register with the Dean of Students Office/Disabilities Resource Center (DRC). The Dean of Students Office will provide documentation to the student who must then provide this documentation to the Instructor when requesting accommodation. For information about the policies and procedures for accommodations see <a href="https://disability.ufl.edu/">https://disability.ufl.edu/</a> and <a href="https://disability.ufl.edu/">www.disability.ufl.edu/</a> students/get-started. Contact the DRC at 352-392-8565, by e-mail at <a href="https://disability.ufl.edu">DRCAccessUF@ufsa.ufl.edu</a> or the DRC office at 001 Building Reid Hall.

Students in UF Health Sciences programs should be mindful that unique course accommodations may not be applicable in a clinical, fieldwork or practicum setting. Thus, planning a semester in advance with the DRC Health Sciences Learning Specialist, Lisa Diekow <u>Idiekow@ufsa.ufl.edu</u>, is highly encouraged.

#### Fieldwork Policies and Procedures

Fieldwork sites are at a premium and are a valuable resource of the Occupational Therapy Department. The department has established fieldwork policies (e.g., Appeals, Placement by choice matching) designed to serve the largest good in the fairest possible manner. Attempts are made to accommodate individual students' needs and preferences as much as possible, however, this is done in the context of attempting to equally meet the needs of other students and fieldwork sites.

Students are informed at the time of acceptance into the program that they are responsible for the financial aspects of this part of their training, that this training may take place anywhere in the United States (and possibly internationally), and that the student is responsible for planning and preparing for this part of their education in advance. Expenses may include but are not limited to: transportation, housing, background checks, fingerprinting, N95 fit mask testing, personal health insurance, and other requirements as determined by the site.

Students are required to complete Level I and Level II experiences in different settings. Additional policies can and will be added to this list to guarantee a fair and equitable distribution of fieldwork sites.

#### Autoplacement

For Level II fieldwork, in order to fairly distribute fieldwork sites among the students, they will have the opportunity to list 10 sites in order of preference. Fieldwork sites will be assigned through a computer-generated algorithm to find the best-case scenario according to student preferences and site availability and overseen by the Academic Fieldwork Coordinator. A database system is used for managing the placements. Students may not switch sites once they have been confirmed with the facility.

#### **Appeals**

The appeal process is designed to meet the occasional need of a student for whom the assignment process would prove disruptive to family responsibilities and would result in the student's probable discontinuation of their schooling.

Appeals for special consideration in placement are based on demonstrated need for one of the following reasons: dependent care, extreme personal issues, and students with disabilities who have registered with the Office of Students with Disabilities and have a documented need for placement accommodations. Students

will be informed of the dates of the appeal process, generally during the second semester of the first year of the program.

Appeal decisions are made subject to the availability of fieldwork sites. All decisions of the committee will be final. Appeals cannot be made for financial reasons. Appeals found to be made on false claims will be overturned and denied, and the student may be dismissed from the program for this unethical behavior. If not dismissed, students who falsify appeal claims will be placed in any remaining site at the conclusion of the assignment process.

#### Student Responsibilities

Financial: Students are responsible for independently arranging for and financing their housing and transportation for internships. Changes in marital status, financial considerations, or changed housing arrangements are not considered adequate grounds for changing fieldwork assignment. In rare instances, housing or other forms of support are provided by the facilities. However, these benefits are subject to change at any time.

Grading Procedures: Each fieldwork experience will be evaluated by the student and fieldwork educator. Level I fieldworks are graded using the Fieldwork Performance Evaluation of the Occupational Therapy Student Level I and are completed by the Level I Fieldwork Educator. The Level II Fieldwork Educator will complete the Fieldwork Performance Evaluation of the Occupational Therapy Student Level II at midterm and at the completion of the experience. In addition, at the end of the fieldwork experience the student will complete an evaluation of the fieldwork experience (SEFWE). Review and discussion of the completed evaluation forms will occur at the fieldwork site prior to completion of the experience. Level I and Level II fieldwork experiences are graded on a pass/fail basis. Assignment of final grades for all fieldwork experiences are the responsibility of the Academic Fieldwork Coordinator at the University of Florida.

Contact with Sites: All prospective and contracted fieldwork sites are considered a resource of the OT Department, not the individual student. Therefore, students shall not contact fieldwork sites, currently or prospectively contracted with the university, with the intent to establish personal fieldwork placement. Students who discover or generate new fieldwork sites must recognize that all sites used by the Department of Occupational Therapy become part of the department's pool of fieldwork sites, and as such, are open to all students through the lottery.

If a student becomes aware of the possibility of a new fieldwork site, they are to inform the Academic Fieldwork Coordinator who will make the appropriate contacts and contracts with the site as the designated representative of the Department of Occupational Therapy. If contracts with the University are arranged, this site will be available to all students through the lottery. No exceptions to this policy will be made.

Absence Makeup Policy: All students are required to complete the equivalent of 12 weeks per Level II placement. Students are required to maintain the same schedule as their Fieldwork Educator. If a holiday falls within the fieldwork dates and the Fieldwork Educator has the day off, the student is also permitted the day off. Students are allowed a maximum of two sick days per fieldwork experience. Any additional days missed (hurricanes, natural disasters, epidemics) may be made up by extending the regularly scheduled fieldwork so that the student has completed the required fieldwork length. If the fieldwork site has more stringent makeup policies, the student is required to adhere to those. No vacation-type absences are permitted during fieldwork. The student must complete the Fieldwork Absence Form within 30 days prior if absence is due to a planned event or as soon as possible if absence is due to illness or emergency.

Withdrawals: Leaving an internship site without notifying **and** receiving a written or direct telephone response from the Academic Fieldwork Coordinator or the Program Director is viewed as a serious infraction of professional ethics and is considered abandonment of one's professional responsibilities to the patients and facility. The student will receive a failing grade in the internship and need to withdraw from the program.

#### Professionalism:

- 1. Students learn and practice professional behavior beginning in the classroom. Students will demonstrate professional judgement in the class and on fieldwork by:
  - a. Being prepared, paying attention and participating with relevant material, and asking pertinent questions.
  - b. Showing respect for the instructor, guest lecturers, fieldwork coordinator, fieldwork educator, patient, family and other members of the health care team. The student's professional behavior reflects on the credibility of the occupational therapy profession.
- 2. Students are expected to adhere to the Occupational Therapy Code of Ethics as adopted by the American Occupational Therapy Association.
- 3. Students should be knowledgeable and adhere to the regulations of their assigned fieldwork facilities. They are to follow the facilities' regulations for dress, behavior and attendance.
- 4. Students are expected to demonstrate honest, respectful and harmonious working relationships in the classroom and on fieldwork.
- 5. Students should maintain good health habits and regular physical examinations during academic and fieldwork experiences. Students are expected to maintain appropriate health insurance during academic and fieldwork education.
- 6. Students are expected to only engage in those treatments and procedures in which they have achieved an appropriate level of competence.
- 7. Students are expected to take initiative for their own learning in the classroom and on fieldwork.
- 8. Students are expected to analyze information in fieldwork manuals and to review appropriate material necessary for their assigned fieldwork placement.

## **Student Requirements**

Prior to departing to fieldwork sites, it is necessary that each student shall have at a minimum:

Course Completion: Satisfactorily completed courses through the fifth semester of the occupational therapy curriculum.

Liability Insurance: Enrolled in a liability insurance program under the blanket student policy.

Medical Insurance: Have personal or family medical insurance, which will provide coverage in the geographic areas to which the student will be going. Fieldwork sites are not responsible for health care needs that arise during the internship experience. All UF students are required to have health and hospitalization insurance. The insurance must be applicable while out of the Gainesville area on fieldwork. Proof of both types of insurance may be requested by fieldwork sites.

Site Requirements: Student is required to have complied with all site requirements. This may include but is not limited to background check, fingerprinting and drug screening as required by sites.

Some fieldwork sites require testing for use of illicit drugs, and if the testing is positive for drug use the student will be unable to continue in that placement. Students are advised that any evidence of use of illegal drugs will jeopardize their ability in the future to obtain a state license to practice occupational therapy. Students are responsible for knowing and following all policies and procedures pertinent to them at fieldwork sites. Some sites do not allow the use of medical marijuana. Be advised - medical marijuana and CBD will show up as THC in drug tests.

Immunizations: Proof of having received a negative TB test or chest X-ray within the last year is required. A current influenza vaccination is required. A record of all immunizations, including MMR, Hepatitis B, Chicken Pox (varicella), and influenza, is also required by UF.

Workshops/Certifications and Trainings: Copy of HIPAA, OSHA/Infection control, HIV/Blood Borne Pathogens, and personal safety course completion certificates are required by UF.

CPR: Prior to beginning any type of fieldwork or site visits, students are required to provide proof of current CPR for Health Care Providers certification. CPR certification may be through either the Heart Association or the Red Cross. Some sites require a specific certification. For student's convenience, CPR courses are offered at the CPR and Safety Training Center. Proof of current CPR certification may be requested by fieldwork sites.

Documentation of these requirements is the student's responsibility to upload into the database and maintain hard copies in their personal fieldwork folder.

# **Appendix**

## OTD Curriculum

# (updated 3/4/2020)

Year 1	
Fall OTH 6722 Professional Development in Occupational Therapy OTH 6008 Neuroscience of Human Occupation OTH 6419 Pathophysiological Conditions in OT Practice OTH 6002 Foundations of Occupational Therapy	1 5 3 3 12
Spring OTH 6209 Applied Lifespan Human Development OTH 6423 Clinical Musculoskeletal Anatomy OTH 6242 Clinical and Functional Kinesiology OTH 6539 Occupational Therapy Theory	3 5 3 3 14
Summer OTH 6435 OT Clinical Skills I OTH 6324 Psychosocial OT Evaluation and Intervention OTH 6850 Psychosocial Level I Fieldwork OTH 6763 Research 1: Evidence Based Practice	2 3 2 3 10
Year 2 Fall OTH 6115 OT Clinical Skills 2 OTH 6437: Occupation-based Practice and Rehabilitation: Physical Domain OTH 6437L: Occupation-based Practice and Rehabilitation Lab: Physical Domain	3 2 2
OTH 6620C: Occupation-based Practice and Rehabilitation: Cognitive, Perceptual, Social Domains	3
OTH 6622C: Occupation-based Practice, Participation, and Health OTH 6816 Adult Level I Fieldwork	3 2 15
Spring OTH 6526C OT Clinical Skills 3 OTH 6527C Occupation-based Practice and Rehabilitation: Children & Youth OTH 6525C Occupation-based Practice, Participation, and Health OTH 6812 Pediatric Level I Fieldwork OTH 6726 OT Service Delivery and Organization OTH 6906 Doctoral Mentorship 1	2 3 3 2 2 1 13
Summer OTH 6848 Level II Fieldwork I OTH 6904 Doctoral Mentorship 2	6 1 7

Year 3	
Fall	
OTH 6849 Level II Fieldwork II	6
OTH 6818 Clinical Competence Seminar	2
OTH 6819 Competency	1
	9
Spring	
OTH 6700 Advocacy and Interprofessional Skills	2
OTH 6016 Advanced Occupational Therapy Theory	3
OTH 6724 Program Evaluation and Development	3
OTH 6908 Doctoral Mentorship 3	2
	10
Summer	
OTH 6705 Leadership and Professional Development	3
OTH 6765 Research: Methods and Design	3
OTH 6909 Doctoral Mentorship 4	2
PHC 6937 Introduction to Public Health	0
	8
Year 4	
Fall	
OTH 6985 Residency: Doctoral Experiential	7
OTH 6911 Capstone	2
	9
TOTAL CREDIT HOURS	107

### ACOTE Fieldwork Standards 2018

Standard	Description
C.1.1.	Fieldwork Program Reflects the Curriculum Design  Ensure that the fieldwork program reflects the sequence and scope of content in the curriculum design, in collaboration with faculty, so that fieldwork experiences in traditional, nontraditional, and emerging settings strengthen the ties between didactic and fieldwork education.
C.1.2.	Criteria and Process for Selecting Fieldwork Sites  Document the criteria and process for selecting fieldwork sites, to include maintaining memoranda of understanding, complying with all site requirements, maintaining site objectives and site data, and communicating this information to students prior to the start of the fieldwork experience.
C.1.3.	Fieldwork Objectives  Document that academic and fieldwork educators agree on established fieldwork objectives prior to the start of the fieldwork experience, and communicate with the student and fieldwork educator about progress and performance throughout the fieldwork experience.  Ensure that fieldwork objectives for all experiences include a psychosocial objective.
C.1.4.	Level I and II Fieldwork MOUs  Ensure that the ratio of fieldwork educators to students enables proper supervision, and provides protection of consumers, opportunities for appropriate role modeling of occupational therapy practice, and the ability to provide frequent assessment of student progress in achieving stated fieldwork objectives.
C.1.5.	Fieldwork in Behavioral Health or Psychological and Social Factors Ensure that fieldwork agreements are sufficient in scope and number to allow completion of graduation requirements in a timely manner, in accordance with the policy adopted by the program as required by Standard A.4.7.
C.1.6.	Level I and II Fieldwork MOUs  The program must have evidence of valid memoranda of understanding in effect and signed by both parties from the onset to conclusion of the Level I fieldwork and the Level II fieldwork if it involves an entity outside of the academic program. (Electronic memoranda of understanding and signatures are acceptable.) Responsibilities of the sponsoring institution(s) and each fieldwork site must be clearly documented in the memorandum of understanding.
C.1.7.	Fieldwork in Behavioral Health or Psychological and Social Factors At least one fieldwork experience (either Level I or Level II) must address practice in behavioral health, or psychological and social factors influencing engagement in occupation.
C.1.8.	Qualified Level I Fieldwork Supervisors  Ensure that personnel who supervise Level I fieldwork are informed of the curriculum and fieldwork program design and affirm their ability to support the fieldwork experience. This must occur prior to the onset of the Level I fieldwork. Examples include, but are not limited to, currently licensed or otherwise regulated occupational therapists and occupational therapy assistants, psychologists, physician assistants, teachers, social workers, physicians, speechlanguage pathologists, nurses, and physical therapists.

Standard	Description
C.1.9.	Level I Fieldwork  Document that Level I fieldwork is provided to students and is not substituted for any part of the Level II fieldwork. Ensure that Level I fieldwork enriches didactic coursework through directed observation and participation in selected aspects of the occupational therapy process, and include mechanisms for formal evaluation of student performance.  The program must have clearly documented student learning objectives expected of the Level I fieldwork.  Level I fieldwork may be met through one or more of the following instructional methods:  □ Simulated environments  □ Standardized patients  □ Faculty practice  □ Faculty-led site visits  □ Supervision by a fieldwork educator in a practice environment  All Level I fieldwork must be comparable in rigor.
C.1.10.	Length of Level II Fieldwork Require a minimum of 24 weeks' full-time Level II fieldwork. This may be completed on a part-time basis, as defined by the fieldwork placement in accordance with the fieldwork placement's usual and customary personnel policies, as long as it is at least 50% of an FTE at that site.  The student can complete Level II fieldwork in a minimum of one setting if it is reflective of more than one practice area, or in a maximum of four different settings.
C.1.11.	Qualified Level II Fieldwork Supervisors  Document and verify that the student is supervised by a currently licensed or otherwise regulated occupational therapist who has a minimum of 1 year full-time (or its equivalent) of practice experience as a licensed or otherwise regulated occupational therapist prior to the onset of the Level II fieldwork.  Ensure that the student supervisor is adequately prepared to serve as a fieldwork educator prior to the Level II fieldwork. The supervising therapist may be engaged by the fieldwork site or by the educational program.
C.1.12.	Evaluating the Effectiveness of Supervision  Document a mechanism for evaluating the effectiveness of supervision (e.g., student evaluation of fieldwork) and for providing resources for enhancing supervision (e.g., materials on supervisory skills, continuing education opportunities, articles on theory and practice).
C.1.13.	Level II Fieldwork Supervision  Ensure that Level II fieldwork supervision is direct and then decreases to less direct supervision as appropriate for the setting, the severity of the client's condition, and the ability of the student to support progression toward entry-level competence.

Standard	Description
C.1.14.	Fieldwork Supervision Where No OT Services Exist  Document and verify that supervision provided in a setting where no occupational therapy services exist includes a documented plan for provision of occupational therapy services and supervision by a currently licensed or otherwise regulated occupational therapist with at least 3 years' full-time or its equivalent of professional experience prior to the Level II fieldwork. Supervision must include a minimum of 8 hours of direct supervision each week of the fieldwork experience. An occupational therapy supervisor must be available, via a variety of contact measures, to the student during all working hours. An on-site supervisor designee of another profession must be assigned while the occupational therapy supervisor is off site.
C.1.15.	Evaluation of Student Performance on Level II Fieldwork  Document mechanisms for requiring formal evaluation of student performance on Level II fieldwork (e.g., the AOTA Fieldwork Performance Evaluation for the Occupational Therapy Student or equivalent).
C.1.16.	Fieldwork Supervision Outside the U.S.  Document and verify that students attending Level II fieldwork outside the United States are supervised by an occupational therapist who graduated from a program approved by the World Federation of Occupational Therapists and has at least 1 year of experience in practice prior to the onset of Level II fieldwork.

#### Level II Fieldwork Objectives

# University of Florida College of Public Health & Health Professions Syllabus Department of Occupational Therapy

These objectives correspond to the assessment areas of the "AOTA Fieldwork Performance Evaluation for the Occupational Therapy Student" (FWPE) and may be used as a guide. The fieldwork educator may modify the specific behavioral objectives to provide for the student's individual needs and peculiarities of the placement site.

#### Data Gathering:

- Gathers necessary pre-test information or materials before interviewing or testing patient/client.
  - a. Identifies necessary pre-test information
  - b. Identifies sources of pertinent information
  - c. Records pertinent information gathered
- 2. Selects evaluation and/or tools which are appropriate to the patient/client.
  - a. Recognizes evaluative needs of patient/client
  - b. Identifies available evaluation procedures/instruments that will elicit desired information
  - c. Selects most appropriate evaluative technique/instrument
  - d. Discusses rational for selection with supervisor
- 3. Administers test/interview evaluation in a climate appropriate to the patient's/client's disability, age and personality.
  - a. States environmental factors and/or patient-related behaviors likely to affect the evaluation
  - b. Selects testing area conducive to eliciting the best response.
- 4. Administers test/interview evaluation in a climate appropriate to the patient's/client's disability, age and personality.
  - a. Discusses evaluation procedures with supervisor.
  - b. Conducts occupational profile evaluation with client/patient according to recommended technique
  - c. Explains purpose of evaluation procedures to patient
  - d. Records results of evaluation accurately
- 5. Demonstrates competence in evaluation techniques/instruments by adapting method to elicit data when standardized or recommended technique is not possible.
  - a. Identifies need to adapt evaluation
  - b. States possible alternatives to standardized procedures
  - c. Modifies approach based on patient's response to situation
  - d. States in report any possible influence of adaptation on results
- 6. Obtains additional or supplementary information from appropriate persons and available records.
  - a. Determines needed supplementary information
  - b. Identifies resource persons/records
  - c. Consults with resource persons
  - d. Records obtained data

- 7. Assesses patient's/client's physical, social, and emotional needs.
  - a. Recognizes the importance of assessment of the patient as a whole
  - b. Records information gained from interview/evaluation
  - c. Identifies and prioritizes patient's strengths/weaknesses
  - d. Identify the psychosocial factors that influence engagement in occupation.

#### Treatment Planning:

- 8. Defines problem areas for treatment using information from interviews and observations as well as data from appropriate tests.
  - a. Analyzes information obtained from evaluations, interviews, and observations of patient
  - b. Ranks problems according to priority and time frame
  - c. Records and reports defined problem area
  - d. Discusses problem areas with patient and records feedback
  - e. Re-evaluates problem list at appropriate intervals
  - f. Integrates patient's psychosocial factors that influence engagement in occupation
- 9. Determine long-term treatment goals in accordance with probable discharge situation.
  - a. Communicates with team regarding possible length of hospitalization
  - b. Identifies and lists available resources that are appropriate to the social, economic, and functional level of the patient
  - c. Participates with interdisciplinary team in discharge planning
  - d. Differentiates between long-term and short-term goals appropriate to the treatment setting
- 10. Develops treatment plan with patient.
  - a. Discusses treatment goals and techniques with patient and family if present
  - b. Contracts with patient for treatment
- 11. Guides patient's/client's selection of appropriate activities to lead achievement.
  - a. States the purpose of the selected activity to the supervisor and patient
  - b. Presents patient a list of selected activities which will lead to goal achievement
- 12. Demonstrates ability to establish treatment priorities.
  - a. Lists goals in order of importance
- 13. Proposes several alternatives or solutions to problems
  - a. Redefines problem areas
  - b. Lists alternative solutions
  - c. Presents treatment alternatives to patient

#### Treatment Implementation:

- 14. Coordinates schedule with patient/client, other staff, and agencies.
  - a. Utilizes available information to schedule treatment time
  - b. Resolves schedule conflict
- 15. Adheres to precautions
  - a. Recognizes patient's current health status and needs
  - b. Recognizes side effects of medication
  - c. Reports unusual occurrences to appropriate personnel, following necessary documentation

- d. Verbalizes knowledge of appropriate emergency procedures
- e. Takes appropriate action in emergencies
- f. Adheres to safety regulations maintaining OSHA Standards
- g. Identifies risks related to diagnosis and treatment
- h. Recognizes physical limitations and practices proper body mechanics
- 16. Arranges equipment and materials according to treatment purpose.
  - a. Prepares area in advance, if necessary
  - b. Returns equipment to designated storage area
- 17. Positions patient/client comfortably and appropriately.
  - a. Assesses treatment environment according to patient's physical needs
  - b. Applies knowledge of body mechanics
  - c. Positions patient appropriately according to treatment session goals18. Explains to patient/client what he/she will be doing and why, modifying plan as indicated.
- 19. Intervenes at signs of fatigue or frustration, if appropriate.
  - a. Differentiates between true fatigue and manipulation
  - b. Recognizes appropriate level of fatigue or frustration for individual patient
  - c. Demonstrates awareness of precautions when monitoring signs of fatigue
- 20. Sets appropriate limits in response to undesirable physical or social behavior
  - a. Recognizes which behaviors are appropriate and inappropriate within a given setting
  - b. Assists patient in differentiating appropriate and inappropriate behavior
  - c. Sets effective limits on behavior
- 21. Selects or modifies available treatment environment to support patient's/client/s best performance
  - a. Identifies possible distracting factors in environment and removes factors before treatment when possible
  - b. Adapts treatment to variables in environment
- 22. Establishes and maintains therapeutic relationship with patient/client.
  - a. Defines therapeutic relationship with supervisor
  - b. Adjust approach to patient's needs
  - c. Interacts with patient in a manner which facilitates the treatment process
- 23. Takes initiative to re-evaluate patient's/client's status at appropriate intervals
  - a. Records changes in status indicative of need for program or environmental changes
- 24. Demonstrates awareness of the patient's/client's status by making program modifications in response to changes in the patient/client or his environment
- 25. Informs and/or prepares the patient/client for programs or treatment change.
- 26. Plans for patient's/client's discharge in adequate time
  - a. Consults with others to determine date of discharge
  - b. Conducts pre-discharge evaluation if indicated
  - c. Plans for home program if necessary
  - d. Explains home programs to patient's family member or significant other
- 27. Demonstrates ability to terminate treatment appropriately.
  - a. Recognizes when treatment goals have been met

- b. Recommends appropriate action to supervisor
- c. Prepares patient for termination of treatment
- d. Informs other disciplines and referring physician of impending termination
- 28. Evaluates the effectiveness of treatment procedures used.
  - a. Evaluates treatment progress weekly
  - b. Determines if treatment procedures are meeting goals
- 29. Is alert to the needs of the total patient/client group.
  - a. Chooses media not likely to disrupt other treatments taking place
  - b. Acquaints self with treatment goals and precautions for all patients being seen
  - c. Assists other staff members when need arises
  - d. Implements group activities compatible with individual needs
- 30. Collaborates with others in promoting an atmosphere that will support the health and independent functioning of the patient/client.
- 31. Considers the patient's/client's post-discharge program in relation to the treatment center and/or community resources
  - a. Identifies need for follow-up treatment and/or referrals
  - b. Acquaints self with available community resources
- 32. Deals effectively with a variety of disability and age groups
  - a. Approaches each individual patient according to their needs
- 33. Uses professional judgment, in selecting, interpreting, and reporting data.
  - a. Chooses appropriate data for reporting
  - b. Identifiers appropriate staff to be informed of patient's status
  - c. Protects patient's right to privacy
  - d. Reports data in an objective manner
- 34. Substantiates statements with data from evaluation, observations and interviews.
  - a. Justifies subjective statements with qualifying objective information
  - b. Verifies observations with staff
- 35. Communicates effectively with staff and other persons.
  - a. Identifies communication methods and channels available
  - b. Provides feedback to staff on an ongoing basis
  - c. Establishes and maintains appropriate interdisciplinary dialogues
- 36. Communicates effectively with patients/clients.
  - a. Identifies available communication methods and channels
  - b. Provides feedback to staff on an ongoing basis
  - c. Establishes and maintains appropriate interdisciplinary dialogues
- 37. Presents oral reports in appropriate form, content, and manner.
  - a. Presents oral reports in an organized manner
  - b. Selects information that has value to the listener
- 38. Produces written reports according to requirements of the facility.
  - a. Follows established format for initial contact note, daily notes, evaluation summary, discharge summary, rounds reports, and out-patient reports
  - b. Submits legible reports

- c. Completes work in a timely fashion
- 39. Recognizes and uses nonverbal communication
  - a. Demonstrates knowledge of body language and other forms of nonverbal communication
  - b. Responds to nonverbal communication
- 40. Adheres consistently to the American Occupational Therapy Association Code of Ethics.
  - a. Adheres to Site's policies and procedures
  - b. When relevant, adheres to ethics related to human subject research
- 41. Prepares daily work program for self, scheduling appropriate amount of time for preparation and completion of tasks.
  - a. Identifies meetings, activities, and tasks to be attended to each day
  - b. Sets realistic priorities for responsibilities
  - c. Allots time for all activities on a daily schedule, to be reviewed at supervisor's discretion
- 42. Maintains working area in a manner conductive to efficiency and safety.
  - a. Follows written safety precautions
  - b. Reports potential safety hazards to supervisor
  - c. Clears/cleans area after each treatment
  - d. Contributes to cleanliness of total work area
  - e. Uses tools and materials appropriately
- 43. Shares responsibility in maintaining proper level of supply inventory
  - a. Reports to supervisor when supplies are low.
  - b. Assists, as requested, in ordering supplies, equipment
- 44. Assumes authority appropriately.
  - a. Recognizes which decisions require approval before implemented
  - b. Initiates contacts with other professionals in order to clarify patient's treatment program
  - c. Acts in an authoritative manner when necessary
- 45. Adjusts pace to program requirements.
  - a. Schedules work day to get things accomplished in order of priority
  - b. Adjust daily schedule to allow for last-minute changes in plans
  - c. Utilizes non-treatment time for patient related activities and professional development (education, reading)
- 46. Asks appropriate questions when in doubt.
  - a. Seeks guidance prior to performing unfamiliar procedures
  - b. Seeks opinions of staff for "on-the-spot" problems
  - c. Initiates discussions with supervisor about unfamiliar areas
- 47. Modifies behavior accordingly in response to supervision.
  - a. Listens to constructive criticism
  - b. Offers own viewpoint about behavior without adopting a defensive attitude
  - c. Responds with appropriate action to supervisor's suggestions
  - d. Requests information, suggestions, resources from supervisor to modify behavior
- 48. Works appropriately with persons of varied racial, ethnic, and sociological backgrounds.
  - a. Recognizes and respects differences in personal life style and value systems and those of the patient/staff

- b. Designs treatment respecting the life style and values of the patient/client
- c. Elicits the participation of the patient in designing treatment to fit background
- d. Discusses with supervisor, frustrations or apprehensions related to working patients/staff with a different racial, ethnic, or sociological background
- 49. Handles frustrations appropriately.
  - a. Conducts work without the interference of personal or professional frustrations
  - b. Requests assistance from supervisor to handle personal frustration if indicated
  - c. Acknowledges supervisor's indication if personal or professional frustrations are interfering with student's work
- 50. Recognizes own strengths and weaknesses.
  - a. Identifies own strengths and weaknesses in communications with supervisor
  - b. Requests feedback concerning own strengths and weaknesses when in doubt
- 51. Demonstrates active interest in areas other than occupational therapy.
  - a. Consults other health care services in relation to assigned patients
  - b. Seeks information about function and organization of their health care services
  - c. Attends relevant lectures/seminars as responsibilities allow
- 52. Improves level of skills and knowledge by independently participating in learning experiences.
  - a. Attends available lectures/seminars/workshops as responsibilities permit
  - b. Reads occupational therapy literature and/or literature related to field work
  - c. Asks questions about observations, demonstrations, and lectures
  - d. Practices new skills
- 53. Interprets occupational therapy to others according to their level of interest and understanding.
  - a. Assesses level of interest and understanding of others
  - b. Answers questions clearly and concisely
- 54. Demonstrates ability to collaborate with OT assistant and OT aide.
  - a. Assigns tasks/responsibilities to appropriate persons
  - b. Presents information clearly and concisely at an appropriate level of understanding

#### Introduction:

The purpose of the Fieldwork Data Form is to facilitate communication between occupational therapy (OT) and occupational therapy assistant (OTA) academic programs, OT/ OTA students, and fieldwork educators. Fieldwork Educators and Academic Fieldwork Coordinators (AFWC) jointly complete the Fieldwork Data Form to describe the fieldwork setting where students may have placements. While much of the information may be completed by the Fieldwork Educator, there will be additional information best obtained through AFWC interview of the fieldwork education coordinator at the site. The AFWC will find opportunity to document fieldwork related Accreditation Council for Occupational Therapy (ACOTE) Standards that support the ACOTE on-site accreditation review process. In addition, OT/ OTA students will find valuable information describing the characteristics of the fieldwork setting, the client population, commonly used assessments, interventions, and expectations and opportunities for students. The Fieldwork Data Form has been developed to reflect the Occupational Therapy Practice Framework terminology and best practice in occupational therapy to promote quality fieldwork experiences. It was developed through the joint efforts of the Commission on Education (COE) and Education Special Interest Section (EDSIS) Fieldwork Subsection with input from many dedicated AFWCs and fieldwork educators.

### AOTA FIELDWORK DATA FORM

Date:					
Name of Facility:					
Address: Street	Cit	:у	State	Zip:	
<u>FW I</u>			FW II		
Contact Person:	C	redentials:	Contact Person:		Credentials:
Phone: E-ma	ail:		Phone:	E-mail:	
Director:		Initiation Source:	<b>Corporate Status:</b>	Preferred Sequence	e of FW: ACOTE
Phone:		FW Office	For Profit	Standards B.10.6	
Fax:		FW Site	☐ Non-Profit	Any Any	
Web site address:		Student	State Gov't	Second/Third o	nly; 1 <sup>st</sup> must be in:
			Federal Gov't		_
				Full-time only	Part-time option
				Prefer Full-time	<u> </u>
OT Fieldwork Practice Settings (AG	COTE Form A #s	noted) :			
Hospital-based settings	Community-ba		School-based setti	ngs Age Groups:	Number of Staff:
In-Patient Acute 1.1	Peds Comn	•	Early Intervent	=	OTRs:
In-Patient Rehab 1.2		Health Community 2.2		<u></u> 6-12	COTAs:
SNF/ Sub-Acute/ Acute Long-		t Community Living 2.3	School 3.2	∐ 13-21	Aides:
Term Care 1.3  General Rehab Outpatient		t Day Program 2.4 /hand private practice	Other area(s)	<u> </u>	PT: Speech:
1.4	Outpatient	/ Hariu private practice	please specify:	□ 03+	Resource Teacher:
Outpatient Hands 1.5		Program for DD 2.6	piease specify.		Counselor/Psychologist:
Pediatric Hospital/Unit 1.6	Home Heal	_			counscion/1 sychologisti
Peds Hospital Outpatient 1.7	☐ Peds Outpa				Other:
In-Patient Psych 1.8					
Student Prerequisites (check a	ll that apply) 🗸	ACOTE	Health requirements:		
Standard B.10.6					
☐ CPR	Fir	rst Aid	HepB	Physical	l Check up
☐ Medicare / Medicaid Fraud	☐ In	fection Control	MMR	☐ Varicella	a
Check	trainiı	ng	☐ Tetanus	☐ Influenz	a
Criminal Background Check	□ ні	PAA Training	Chest x-ray		
Child Protection/abuse che	ck 🔲 Pr	of. Liability Ins.	Drug screening	Please list a	ny other requirements:
Adult abuse check	□ 0\	wn transportation	TB/Mantoux		
Fingerprinting		terview .			

Performance skills, patterns, contexts and client factors addressed in this setting (check all that apply)           Performance Skills:         Client Factors:         Context(s):           Motor Skills         Body functions/structures         Cultural- ethnic beliefs & values           Posture         Mental functions- affective         Physical environment           Mobility         Mental functions- cognitive         Social Relationships           Coordination         Mental functions- perceptual         Personal- age, gender, etc.           Strength & effort         Sensory functions & pain         Spiritual           Energy         Voice & speech functions         Temporal- life stages, etc.           Process Skills         Major organ systems: heart, lungs, blood, immune         Virtual- simulation of env, chat room, etc.           Knowledge         Digestion/ metabolic/ endocrine systems         Performance Patterns/Habits           Temporal organization         Reproductive functions         Impoverished habits           Organizing space & objects         Neuromusculoskeletal & movement functions         Useful habits           Dominating habits         Dominating habits
Motor Skills       Body functions/structures       □ Cultural- ethnic beliefs & values         □ Posture       □ Mental functions- affective       □ Physical environment         □ Mobility       □ Mental functions- cognitive       □ Social Relationships         □ Coordination       □ Mental functions- perceptual       □ Personal- age, gender, etc.         □ Strength & effort       □ Sensory functions & pain       □ Spiritual         □ Energy       □ Voice & speech functions       □ Temporal- life stages, etc.         Process Skills       □ Major organ systems: heart, lungs, blood, immune       □ Virtual- simulation of env, chat         □ Energy       □ Digestion/ metabolic/ endocrine systems       □ Performance Patterns/Habits         □ Temporal organization       □ Reproductive functions       □ Impoverished habits         □ Organizing space & objects       □ Neuromusculoskeletal & movement functions       □ Useful habits         □ Adaptation       □ Dominating habits
☐ Posture       ☐ Mental functions- affective       ☐ Physical environment         ☐ Mobility       ☐ Mental functions-cognitive       ☐ Social Relationships         ☐ Coordination       ☐ Mental functions- perceptual       ☐ Personal- age, gender, etc.         ☐ Strength & effort       ☐ Sensory functions & pain       ☐ Spiritual         ☐ Energy       ☐ Voice & speech functions       ☐ Temporal- life stages, etc.         ☐ Wirtual- simulation of env, chat room, etc.       ☐ Virtual- simulation of env, chat room, etc.         ☐ Energy       ☐ Digestion/ metabolic/ endocrine systems       ☐ Performance Patterns/Habits         ☐ Temporal organization       ☐ Reproductive functions       ☐ Impoverished habits         ☐ Organizing space & objects       ☐ Neuromusculoskeletal & movement functions       ☐ Useful habits         ☐ Adaptation       ☐ Dominating habits
☐ Mobility       ☐ Mental functions-cognitive       ☐ Social Relationships         ☐ Coordination       ☐ Mental functions- perceptual       ☐ Personal- age, gender, etc.         ☐ Strength & effort       ☐ Sensory functions & pain       ☐ Spiritual         ☐ Energy       ☐ Voice & speech functions       ☐ Temporal- life stages, etc.         ☐ Major organ systems: heart, lungs, blood, immune       ☐ Virtual- simulation of env, chat room, etc.         ☐ Knowledge       ☐ Digestion/ metabolic/ endocrine systems       ☐ Performance Patterns/Habits         ☐ Temporal organization       ☐ Reproductive functions       ☐ Impoverished habits         ☐ Organizing space & objects       ☐ Neuromusculoskeletal & movement functions       ☐ Useful habits         ☐ Adaptation       ☐ Dominating habits
□ Coordination       □ Mental functions- perceptual       □ Personal- age, gender, etc.         □ Strength & effort       □ Sensory functions & pain       □ Spiritual         □ Energy       □ Voice & speech functions       □ Temporal- life stages, etc.         □ Process Skills       □ Major organ systems: heart, lungs, blood, immune       □ Virtual- simulation of env, chat room, etc.         □ Energy       □ Digestion/ metabolic/ endocrine systems       □ Performance Patterns/Habits         □ Temporal organization       □ Reproductive functions       □ Impoverished habits         □ Organizing space & objects       □ Neuromusculoskeletal & movement functions       □ Useful habits         □ Adaptation       □ Dominating habits
Strength & effort       Sensory functions & pain       Spiritual         Energy       Voice & speech functions       Temporal- life stages, etc.         Process Skills       Major organ systems: heart, lungs, blood, immune       Virtual- simulation of env, chat         Energy       immune       room, etc.         Knowledge       Digestion/ metabolic/ endocrine systems       Performance Patterns/Habits         Temporal organization       Reproductive functions       Impoverished habits         Organizing space & objects       Neuromusculoskeletal & movement functions       Useful habits         Adaptation       Skin       Dominating habits
□ Energy       □ Voice & speech functions       □ Temporal- life stages, etc.         □ Process Skills       □ Major organ systems: heart, lungs, blood, immune       □ Virtual- simulation of env, chat         □ Energy       immune       room, etc.         □ Knowledge       □ Digestion/ metabolic/ endocrine systems       □ Performance Patterns/Habits         □ Temporal organization       □ Reproductive functions       □ Impoverished habits         □ Organizing space & objects       □ Neuromusculoskeletal & movement functions       □ Useful habits         □ Adaptation       □ Dominating habits
Process Skills       Major organ systems: heart, lungs, blood, immune       Virtual- simulation of env, chat room, etc.         Knowledge       Digestion/ metabolic/ endocrine systems       Performance Patterns/Habits         Temporal organization       Reproductive functions       Impoverished habits         Organizing space & objects       Neuromusculoskeletal & movement functions       Useful habits         Adaptation       Skin       Dominating habits
☐ Energy       immune       room, etc.         ☐ Knowledge       ☐ Digestion/ metabolic/ endocrine systems       Performance Patterns/Habits         ☐ Temporal organization       ☐ Reproductive functions       ☐ Impoverished habits         ☐ Organizing space & objects       ☐ Neuromusculoskeletal & movement functions       ☐ Useful habits         ☐ Adaptation       ☐ Skin       ☐ Dominating habits
☐ Knowledge       ☐ Digestion/ metabolic/ endocrine systems       Performance Patterns/Habits         ☐ Temporal organization       ☐ Reproductive functions       ☐ Impoverished habits         ☐ Organizing space & objects       ☐ Neuromusculoskeletal & movement functions       ☐ Useful habits         ☐ Adaptation       ☐ Dominating habits
☐ Temporal organization       ☐ Reproductive functions       ☐ Impoverished habits         ☐ Organizing space & objects       ☐ Neuromusculoskeletal & movement functions       ☐ Useful habits         ☐ Adaptation       ☐ Dominating habits
☐ Organizing space & objects ☐ Neuromusculoskeletal & movement functions ☐ Useful habits ☐ Dominating habits
Adaptation Skin Dominating habits
Physicality- non verbal
☐ Information exchange
Relations
Treations
Most common services priorities (check all that apply)
☐ Direct service ☐ Meetings(team, department, family) ☐ Consultation ☐ Billing
Discharge planning Client education In-service training Documentation
Evaluation Intervention
Types of OT Interventions addressed in this setting (check all that apply): * ACOTE Standards A.5.3, B.10.1, B.10.3, B.10.11, B.10.13, B.10.15, B.10.19, B.10.20  Occupation-based activity- within client's own environmental context; based on their goals addressed in this setting (check all that
apply):
*ACOTE Standards A.5.3, B.10.1, B.10.3, B.10.11, B.10.13, B.10.15, B.10.19, B.10.20
Activities of Daily Living (ADL) Instrumental Activities of Daily Living Education
(IADL)
☐ Bathing/showering ☐ Care of others/pets ☐ Formal education participation
Bowel and bladder mgmt Child rearing Exploration of informal personal education
Dressing Communication device use needs or interests
☐ Eating ☐ Community mobility ☐ Informal personal education participation
Feeding Financial management
Functional mobility
Personal device care Home establishment & management Employment seeking and acquisition
Personal hygiene & grooming
Sexual activity  Safety procedures & emergency  Retirement preparation & adjustment
Sleep/rest responses Volunteer exploration / participation
Toilet hygiene Shopping
Play Leisure Social Participation
☐ Play exploration ☐ Leisure exploration ☐ Community
☐ Play exploration       ☐ Leisure exploration       ☐ Community         ☐ Play participation       ☐ Family
Play participation Leisure participation Family
☐ Play participation ☐ Leisure participation ☐ Family ☐ Peer/friend
☐ Play participation       ☐ Leisure participation       ☐ Family         ☐ Peer/friend       ☐ Peer/friend         Purposeful Activity- therapeutic       Preparatory Methods- preparation for       Therapeutic Use-of-Self- describe
Play participation  Leisure participation  Purposeful Activity- therapeutic context leading to occupation,  Leisure participation  Peer/friend  Therapeutic Use-of-Self- describe  Therapeutic Use-of-Self- describe
Play participation  Leisure participation  Purposeful Activity- therapeutic context leading to occupation, practice in preparation for  Sensory-Stimulation  Family  Peer/friend  Therapeutic Use-of-Self- describe  Therapeutic Use-of-Self- describe
Play participation  Leisure participation  Purposeful Activity- therapeutic context leading to occupation, practice in preparation for natural context  Preparatory Methods- preparation for purposeful & occupation-based activity  Sensory-Stimulation  Physical agent modalities  Pamily  Peer/friend  Therapeutic Use-of-Self- describe
Play participation  Leisure participation  Peer/friend  Purposeful Activity- therapeutic context leading to occupation, practice in preparation for natural context  Physical agent modalities  Sensory-Stimulation  Practicing an activity  Practicing an activity  Family  Peer/friend  Therapeutic Use-of-Self- describe  Consultation Process- describe  Consultation Process- describe

Method of Intervention	Outcomes of Intervention *		Theory/ Frames of Reference/ Models of	
Direct Services/case load for	Occupational performa	nce- improve &/	Practice	
entry-level OT	or enhance		Acquisitional	
One-to-one:	Client Satisfaction		Biomechanical	
Small group(s):	Role Competence		Cognitive- Behavioral	
Large group:	Adaptation		Coping	
	Health & Wellness		Developmental	
Discharge Outcomes of clients (%	Prevention		Ecology of Human Performance	
clients)	Quality of Life		Model of Human Occupation (MOHO)	
Home	Quanty of Line		Occupational Adaptation	
Another medical facility	OT Intervention Approach	105	Occupational Performance Model	
Home Health	l		Person/ Environment/ Occupation (P-E-O)	
	Create, promote (health promotion)  Establish, restore, remediation			
			Person-Environment-Occupational	
	Maintain		Performance	
	Modify, compensation,		Psychosocial	
	Prevent, disability prev	rention	Rehabilitation frames of reference	
			Sensory Integration	
			Other (please list):	
Please list most common screening	gs and evaluations used in y	our setting:		
Identify safety precautions imports	ant at your FW			
site				
Medications	☐ Swa	allowing/ choking ri	sks	
Post-surgical (list procedures)	☐ Beh	navioral system/ pri	vilege level (locked areas, grounds)	
Contact guard for ambulation Sharp		arps count		
Fall risk 1:1 safety/ suicide precautions			cautions	
Other (describe):				
Please list how students should prepare for a FW II placement su		such as doing read	ings, learn specific evaluations and interventions	
used in your setting:		J	•	
, ,				
Target caseload/ productivity for f	ieldwork students:	Documentation:	Frequency/ Format (briefly describe):	
Productivity % per 40 hour work we	eek:	Hand-written	documentation:	
,		l <b>=</b>	Medical Records:	
Caseload expectation at end of FW:				
casciona expectation at the off w.		Time frame requir	rements to complete documentation:	
Productivity % per 8 hour day:		Time name requi	rements to complete documentation.	
Troductivity 70 per 6 flour day.				
# Groups per day expectation at en	d of FW:			
in Groups per day expectation at end of two.				
Administrative/ Management duties or responsibilities of Student Assigni			ents. Students will be expected to successfully	
the OT/ OTA student:		complete:	enter ocuacino trin de expedica to successium,	
		Research/ EBP/ Literature review		
Schedule own clients		l <b>=</b>	/ Literature review	
Supervision of others (Level I students, aides, OTA,		In-service		
volunteers)		Case study		
Budgeting			in-services/ grand rounds	
Procuring supplies (shopping for cooking groups, client/			ject ( describe):	
intervention related items)		Field visits/ rotations to other areas of service		
Participating in supply or environmental maintenance		Observation of other units/ disciplines		
Other:		Other assignm	nents (please list):	

Student work schedule & outside study expected:	Other	Describe level of structure for student?	Describe level of supervisory support for student?
Schedule hrs/ week/ day:	Room provided ☐yes ☐no	High	High
Do students work weekends? ☐yes ☐no	Meals  yes  no	Moderate	Moderate
Do students work evenings? ☐yes ☐no	Stipend amount:	Low	Low
Describe the FW environment/ atmos	sphere for student learning:	:	
Describe public transportation availa	ble:		

## ACOTE Standards Documentation for Fieldwork (may be completed by AFWC interview of FW Educator)

1.	The fieldwork agency must be in compliance with standards by external review bodies. Please identify external review agencies				
	involved with this FW setting and year of accreditation (JCAHO, CARF, Department of Health, etc.). ACOTE on-site review  Name of Agency for External Review:  Year of most recent review:				
	Summary of outcomes of OT Department review:				
2.	Describe the fieldwork site agency stated mission or purpose (can be attached). ACOTE Standards B.10.1, B.10.2, B.10.3, B.10.4, B.10.14, B.10.15				
3.	OT Curriculum Design integrated with Fieldwork Site (insert key OT academic curricular themes here): <i>ACOTE Standards B.10.1, B.10.2, B.10.3, B.10.4, B.10.11, B.10.15</i>				
	a. How are occupation-based needs evaluated and addressed in your OT program? How do you incorporate the client's 'meaningful' doing in this setting?				
	b. Describe how you seek to include client-centered OT practice? How do clients participate in goal setting and intervention activities?				
	c. Describe how psychosocial factors influence engagement in occupational therapy services?				
	d. Describe how you address clients' community-based needs in your setting?				
4.	How do you incorporate evidence-based practice into interventions and decision-making? Are FW students encouraged to provide evidence for their practice? <i>ACOTE Standards B.10.1, B.10.3, B.10.4, B.10.11, B.10.15</i>				
5.	Please describe FW Program & how students fit into the program. Describe the progression of student supervision from novice to entry-level practitioner using direct supervision, co-treatment, monitoring, as well as regular formal and informal supervisory meetings. Describe the fieldwork objectives, weekly fieldwork expectations, and record keeping of supervisory sessions conducted with student. Please mail a copy of the FW student objectives, weekly expectations for the Level II FW placement, dress code, and copy of entry-level job description with essential job functions to the AFWC. <i>ACOTE Standards B10.2</i> , <i>B.10.3</i> , <i>B.10.5</i> , <i>B.10.7</i> , <i>B.10.13</i> , <i>B.10.19</i> , <i>B.10.20</i> , <i>b.10.21</i>				
6.	Please describe the background of supervisors (please attach list of practitioners who are FW Educators including academic program, degree, years of experience since initial certification, years of experience supervising students) <i>ACOTE Standards B.7.10, B10.12, B.10.17</i> (provide a template)				
7.	Describe the training provided for OT staff for effective supervision of students (check all that apply). ACOTE Standards B.7.10, B.10.1, B.10.3, B.10.12,B.10.13, B.10.17, B.10.18, B.10.19, B.10.20, B.10.21				
	☐ Supervisory models				
	☐ Training on use of FW assessment tools (such as the AOTA Fieldwork Performance Evaluation- FWPE, Student Evaluation of Fieldwork Experience–SEFWE, and the Fieldwork Experience Assessment Tool–FEAT)				
	☐ Clinical reasoning				
	Reflective practice				
	Comments:				

о.	agency, OT services and the fieldwork experience. <i>B.10.19</i> , <i>B.10.20</i> , <i>B.10.21</i>	•			
	Supervisory patterns-Description (respond to all	that apply)			
	1:1 Supervision Model:	11 0/			
	☐ Multiple students supervised by one supervisor:				
		•			
	Collaborative Supervision Model:	. 1	. 1		
	Multiple supervisors share supervision of one st	tudent, # supervisor	s per student:		
	☐ Non-OT supervisors:				
9.	Describe funding and reimbursement sources and to B,10.14, B.10.17, B.10.19	heir impact on stude	ent supervision.	ACOTE Standards B.10.3,	B.10.5, B.10.7,
Sta	atus/Tracking Information Sent to Facility				
	be used by OT Academic Program OTE Standards B.10.4, B.10.8, B.10.9, B.10.10				
Dat	te:				
Wh	nich Documentation Does The Fieldwork Site Need?	<b>,</b>			
	A Fieldwork Agreement/ Contract?				
OR					
_	A Memorandum of Understanding?				
Wh	nich FW Agreement will be used:	ademic Program Fie	ldwork Agreem	ent	Agreement/
	ntract				. 18. 000
Тур	le of Parent Corporation (if different from facility na se of Business Organization (Corporation, partnersh te of Incorporation:	•	etc.):		
	Idwork Site agreement negotiator:	Pho	one:	Email:	
	dress (if different from facility):				
	eet: City:	State:	Zip:		
Naı	me of student: Potential start date for field	dwork:			
Any	y notation or changes that you want to include in th	e initial contact lett	er:		
Info	ormation Status:				
	New general facility letter sent:				
	Level I Information Packet sent:				
	Level II Information Packet sent:				
	Mail contract with intro letter (sent):				
	Confirmation sent:				
	Model Behavioral Objectives:				
	Week-by-Week Outline:				
	Other Information:				
	Database entry:				
	Facility Information:				
	Student fieldwork information:				
	Make facility folder:				
	Print facility sheet:				

#### Frequently Asked Questions for Fieldwork Educators (FWEs)

# I have lost or never received copies of the required evaluation and data forms for my student. Where can I get copies?

Please call or email the department for an original copy of the FWPE if you did not receive one. *The University of Florida must have the original AOTA form at completion of the rotation.* 

In addition, students can access all these forms through the CANVAS course and provide you with a copy.

#### How much experience do I need to be a supervisor?

The standard C 1.14 says ... "has a minimum of one year of practice experience subsequent to initial certification and is adequately prepared to serve as a fieldwork educator."

# How many Continuing Education Units (CEUs) does a Fieldwork Educator receive for Level II Fieldwork in the State of Florida?

CEUs are earned by occupational therapy FWEs for Level II Fieldwork only and may be applied to Florida licensure requirements. A licensee may earn up to 6 continuing education hours per biennium for supervision of Level II occupational therapy students at the rate of no more than 3 hours per student. To be eligible for the credit, the licensee must participate as the primary FWE for the student. Upon completion of the Level II fieldwork a certificate will be mailed to you by the UF program which can serve as documentation of CEUs for Florida state licensure.

# How many Professional Development Units (PDUs) does a Fieldwork Educator receive for Level II Fieldwork for NBCOT certification?

PDUs are earned by occupational therapy FWEs based upon the number of weeks they provide supervision for a Level II student. For example, a FWE may earn one PDU for each week of supervision of an occupational therapy student. Upon completion of the Level II fieldwork a certificate will be mailed to you by the program which can serve as documentation of your PDU"s for NBCOT certification.

PDU"s are also earned by the supervision of Level I students based upon the number of students. A FWE may earn one PDU for each Level I student they supervise, regardless of the hours required.

#### Do students have professional liability insurance? Who provides it?

University of Florida students carry student liability insurance at the rate of \$1,000,000/3,000,000. A copy of this insurance policy's declaration page will be mailed or emailed to you prior to the student's start date. In addition, your student can access this form for you through the course website.

#### How many Level II hours do OTR students need?

ACOTE "requires a minimum of the equivalent of 24 weeks full -time Level II fieldwork." UF Students complete Level II fieldwork on a full-time basis unless otherwise arranged. Generally students are scheduled 5 days per week (or 4 10 hour days). However this can be altered according to the needs of the facility, supervisor and student. At the University of Florida our students must complete two 12-week Level II internships. Fieldwork must be completed on at least a half-time basis and must be concluded within one year of completion of OT on-campus coursework.

#### What happens if a student misses a day?

Students are required to maintain the same schedule as their FWE. If a holiday falls within the fieldwork dates and the FWE has this day off, the student is also permitted the day off. If the FWE is scheduled to work a holiday the student is expected to work the holiday.

Students are allowed a maximum of two sick days per fieldwork experience. Any additional sick or natural disaster days missed may be made up by extending the fieldwork hours so that the student has completed the required fieldwork length. A time log may be required to document make up time. If the fieldwork site has more stringent makeup policies, the student is required to adhere to those. The student must have the FWE sign an absentee form for any days missed and must then submit this to the Academic Fieldwork Coordinator. No vacation type days are permitted during fieldwork.

#### What happens if the Fieldwork Educator misses a day or there is a holiday?

At the discretion of the FWE, the time can be made up by being mentored by another occupational therapist at the facility, staying later on regularly scheduled days or additional days at the end of the rotation. An additional project may be assigned. Some examples of projects may include; designing an activity or piece of equipment for the clinic, putting together home programs, researching treatment methods or activities.

#### What do I do if I think the student is not performing as expected on the fieldwork?

If you have a student at your facility that is not passing the specific tasks listed on the Fieldwork Performance Evaluation and is not fulfilling the requirement of the specific goals set up by your fieldwork site, contact the Academic Fieldwork Coordinator immediately.

#### What paperwork is required of the Fieldwork Educator?

Copy of site specific fieldwork objectives. You may submit specific objectives from your facility or complete
the Level II Fieldwork Site Specific Objectives Checklist included in the Fieldwork Manual Companion
Forms on the OT website and included in the packet mailed to you.
Fieldwork Data Form
Fieldwork Performance Evaluation (FWPE) – evaluation of the student completed at midterm and final. The
University of Florida must have the signed original AOTA form at completion of the rotation.
Please notify the Academic Fieldwork Coordinator if there is a problem identified at midterm or anytime
during the fieldwork.

#### Can a COTA supervise an OT student?

A certified assistant can supervise an occupational therapy student only during Level I Fieldwork and on an occasional day off of the OT during Level II. An occupational therapist with one year full time equivalent experience and must be the primary supervisor during Level II Fieldwork. State licensure guidelines for supervision must be adhered to.

#### Whom do I contact at the University of Florida to setup a fieldwork site?

You should contact the Academic Fieldwork Coordinator to discuss this and begin the fieldwork contract process.

#### Resources

Self-Assessment of Fieldwork Educator Competency (SAFECOM)

http://www.aota.org/~/media/Corporate/Files/EducationCareers/Educators/Fieldwork/Supervisor/Forms/Self-Assessment%20Tool%20FW%20Ed%20Competency%20(2009).ashx

Fieldwork Experience Assessment Tool (FEAT)

https://www.aota.org/~/media/Corporate/Files/EducationCareers/Accredit/FEATCHARTMidterm.pdf

Commission on Education Guidelines for an Occupational Therapy Fieldwork Experience Level I <a href="https://www.aota.org/Education-Careers/Fieldwork/Levell/COEGuidelines.aspx">https://www.aota.org/Education-Careers/Fieldwork/Levell/COEGuidelines.aspx</a>

Commission on Education Guidelines for an Occupational Therapy Fieldwork Experience Level II <a href="https://www.aota.org/~/media/Corporate/Files/EducationCareers/Educators/Fieldwork/LevelII/COE%20Guidelines%20f">https://www.aota.org/~/media/Corporate/Files/EducationCareers/Educators/Fieldwork/LevelII/COE%20Guidelines%20f</a> or%20an%20Occupational%20Therapy%20Fieldwork%20Experience%20--%20Level%20II--Final.pdf

HIPAA Guidelines for Fieldwork: https://www.aota.org/Education-Careers/Fieldwork/Supervisor/HIPAA.aspx

Understanding the OT/OTA Fieldwork Performance Evaluation: <a href="https://www.aota.org/Education-careers/Fieldwork/Supervisor/Inservice.aspx">https://www.aota.org/Education-careers/Fieldwork/Supervisor/Inservice.aspx</a>

Occupational Therapy Practice Framework: Domain & Process (3<sup>rd</sup> edition): Available for AOTA members or ask your student. <a href="https://www.aota.org/Publications-News/AmericanJournalOfOccupationalTherapy/access-framework-domain-otpf-download.aspx">https://www.aota.org/Publications-News/AmericanJournalOfOccupationalTherapy/access-framework-domain-otpf-download.aspx</a>

Occupational Therapy Profile: <a href="https://www.aota.org/~/media/Corporate/Files/Practice/Manage/Documentation/AOTA-Occupational-Profile-Template.pdf">https://www.aota.org/~/media/Corporate/Files/Practice/Manage/Documentation/AOTA-Occupational-Profile-Template.pdf</a>

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