

# NEOTEC

NEW ENGLAND OT EDUCATION COUNCIL

## **OT Fieldwork Site Profile**

Adapted from AOTA Commission on Education and Education Special Interest Section Fieldwork -

Subsection fieldwork data form. : AOTA, 2008

Thank you for your participation in the fieldwork education process. The Fieldwork Site Profile form helps maximize efficiency by using a standard format that can be shared among the NEOTEC academic programs.

**The purpose of the Fieldwork Site Profile is to:**

- Facilitate communication between fieldwork sites, academic programs, and students.
- Ensure students have access to information to help prepare for fieldwork placements.
- Ensure that the occupational therapy student coming to your program has a clear understanding of the expectations and learning objectives of OT practice in your program.
- Create a tool to help our OT/OTA program document the criteria and process for 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.
- Meet accreditation standards for Accreditation Council for Occupational Therapy (ACOTE).

Information Sharing Authorization – OT educational programs regionally share this information with each other to reduce the burden of asking fieldwork sites to provide the same data to multiple OT educational programs. If you do not wish to have the above information shared amongst other OT educational programs, please indicate your preference by checking the box below.

I do not agree to authorize sharing of the above information with other OT educational programs.

**Part 1 - Site Demographics**

Date: State: Multiple Locations, please attach list.  
Name of Facility: City: Zip code:  
Address:

**Title of Parent Corporation** (if different from facility name):

**Address** (if different from facility):

**Street: City: State: Zip:**

**LEVEL ONE FIELDWORK COORDINATOR**

Contact Person:  
Phone:  
Credentials:  
E-mail:

**Director**

Contact name:  
Phone:  
Credentials:  
E-mail:  
Website:

**LEVEL TWO FIELDWORK COORDINATOR**

Contact Person:  
Phone:  
Credentials:  
E-mail:

**Placement Sequence Preferences**

No Preference  
2nd Placement  
Only Full time  
Part Time  
OTR only  
OTA only

**OT FIELDWORK PRACTICE SETTINGS (ACOTE Form A #s noted)**

|  |                                      |                        |
|--|--------------------------------------|------------------------|
| In-Patient Acute 1.1                   | Peds Community 2.1                   | Early Intervention 3.1 |
| In-Patient Rehab 1.2                   | Behavioral Health Community 2.2      | School 3.2             |
| SNF/Sub-Acute/Acute Long-Term Care 1.3 | Older Adult Community Living 2.3     |                        |
| General Rehab Outpatient 1.4           | Older Adult Day Program 2.4          |                        |
| Outpatient Hands 1.5                   | Outpatient/hand private practice 2.5 |                        |
| Pediatric Hospital/Unit 1.6            | Adult Day Program for DD 2.6         |                        |
| Pediatric Hospital Outpatient 1.7      | Home Health 2.7                      |                        |
| In-Patient Psych 1.8                   | Peds Outpatient Clinic 2.8           |                        |

Faculty Size - # of beds:  
Population Age Range:

**SITE REQUIREMENTS FOR STUDENTS** (check all that apply):

Primary Contact for Onboarding:

**Vaccines/Medical Requirements**

|      |                   |            |             |          |
|------|-------------------|------------|-------------|----------|
| HepB | Physical Check Up | TB/Mantoux | Chest X-ray | Tetanus  |
| MMR  | Varicella titer   | 2 step PPD | Influenza   | COVID-19 |

**Type of Background Check:**

|                               |                               |                   |
|-------------------------------|-------------------------------|-------------------|
| Medicare/Medicaid Fraud Check | Child Protection/Abuse Check  | Drug Screening    |
| Prof. Liability Ins.          | Sexual Offense Record Inquiry | Number of Panels: |
| Fingerprinting                |                               |                   |

**Certifications:**

|                            |                |                          |
|----------------------------|----------------|--------------------------|
| First Aid                  | BLS            | OSHA Bloodborne Pathogen |
| Infection Control Training | AED            | CPR (Specify type):      |
| Health Provider            | HIPAA Training |                          |

**Other:**

Site established student orientation program/procedure (please describe):  
 Own transportation  
 Additional Comments:

**STUDENTS WILL PARTICIPATE IN** (check all that apply):

| <b><u>Direct service</u></b> | <b><u>Indirect Services</u></b>     | <b><u>Other Approaches</u></b> |
|------------------------------|-------------------------------------|--------------------------------|
| One-to-one                   | In-service training                 | Presenting                     |
| Concurrent                   | Attending                           |                                |
| Co-treat                     | Consultation                        |                                |
| Small groups (s)             | Meetings (team, department, family) |                                |
| Large group (s)              | Billing                             |                                |
| Telehealth                   | Documentation                       |                                |
| Client/Caregiver education   |                                     |                                |
| Discharge planning           |                                     |                                |
| Evaluation/Screening         |                                     |                                |

**ADMINISTRATIVE**

| <b><u>Parking</u></b>                    | <b><u>Work Schedule</u></b> | <b><u>Dress Code</u></b> |
|--|-----------------------------|--------------------------|
| Free                                     | Hours Required:             | Please describe:         |
| Paid                                     | Weekends Required:          |                          |
| Shuttle from offsite                     | Evenings Required:          |                          |
| Public Transit access (yes /no )         | Flex/Alternate Schedules:   |                          |
| Student must have own vehicle (yes /no ) | Part-time:                  |                          |

oy) - Vu° ∞@VU - Vu° VD ACTIVITIES

- Research Literature review
- Attending in-services/grand rounds
- Case study
- Provide in-services
- Program development
- Fieldwork project
- Off-site learning experiences
- Observation of other units/disciplines
- Other assignments (please list):

oyh-k†@@Vhk\ #-∞

|  |                  |               |
|--|------------------|---------------|
| Frequency of formal supervision meetings:      | Daily            | /Weekly       |
| Frequency of information supervision meetings: | Daily            | /Weekly       |
| Supervision Model (therapist:student):         | 1:1<br>2:1/group | 1:2<br>other: |
| Is student learning style considered?          | yes              | / no          |
| Are supervision meetings documented?           | yes              | / no          |

oy) - Vu°k- 70 #u@VU - u= \) o

- Journaling
- Processing verbally
- Student self-assessment & self-appraisal Written Activity
- Analysis
- Reflective questions
- Written submission of intervention plans
- Rational role-playing & simulation
- Video feedback
- Other:

**FIELDWORK EDUCATOR PREPARATION TOOLS**

- Facility's Student manual
- Facility Training in supervision
- AOTA Certificate in Fieldwork Education Workshop
- Mentorship opportunities (e.g., in 1:1 or Group Format) Other:
- Use of online resources such as:

- AOTA <https://www.aota.org/education/fieldwork>
- NEOTEC: [www.neotecouncil.org](http://www.neotecouncil.org)
- State Associations
- Individual Academic Programs

## **Part 2 - Site Specific Objectives**

The purpose of this section is to ensure that the occupational therapy student coming to your program has a clear understanding of the expectations and learning objectives of OT practice in your fieldwork location. This helps our program document the criteria and process for 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.

### **Instructions**

Please check any boxes below that apply to fieldwork in your practice. Once completed, our OT program will retain this document for future student fieldwork placements with your organization.

### **FUNDAMENTALS OF PRACTICE**

**FWPE item #1:** Adheres to the American Occupational Therapy Association's Code of Ethics and all federal, state, and facility regulations. Student:

- Adheres to AOTA Code of Ethics (Principles of Beneficence, Nonmaleficence, Autonomy, Justice, Veracity, and Fidelity)
  - Adheres to all federal, state and facility regulations
- 

**FWPE item #2:** Adheres to safety regulations and reports & documents incidents appropriately. The student is responsible understanding and/or completing:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Record review   | <input type="checkbox"/> 1:1 for personal safety or suicide precautions                 | <input type="checkbox"/> Wheelchair locks, bedrails & call button placement |
| <input type="checkbox"/> Medication side effects   | <input type="checkbox"/> Sharps count   | <input type="checkbox"/> Vital signs  |
| <input type="checkbox"/> Post-surgical   | <input type="checkbox"/> Environmental factors (no clutter, spills, unsafe items, etc.) | <input type="checkbox"/> Trach & ventilator monitoring                      |
| <input type="checkbox"/> Infection control   | <input type="checkbox"/> OSHA & Bloodborne Pathogens                                    | <input type="checkbox"/> Fire, evacuation & lockdown                        |
| <input type="checkbox"/> Fall prevention   | <input type="checkbox"/> IV, lines & tubes  | <input type="checkbox"/> CPR certification                                  |
| <input type="checkbox"/> Eating & Swallowing   | <input type="checkbox"/> ER codes & protocols   | <input type="checkbox"/> Communication of client change in status           |
| <input type="checkbox"/> Food allergies  | <input type="checkbox"/> Restraint reduction  | <input type="checkbox"/> Other:   |
| <input type="checkbox"/> Functional ambulation and functional mobility                           | <input type="checkbox"/> HIPAA, FERPA and confidentiality                               |   |
| <input type="checkbox"/> Behavior system & privilege level (e.g. locked area & unit, on grounds) |   |   |
- 

**FWPE item #3:** Ensures the safety of self and others during all fieldwork related activities by anticipating potentially unsafe situations and taking steps to prevent accidents. Student:

- |  |   |
|--|---|
| <input type="checkbox"/> Adheres to facility policies & procedures                             | <input type="checkbox"/> Consistently analyzes context for potential hazards based on client risk factors   |
| <input type="checkbox"/> Completes thorough chart reviews and checks MD orders                 | <input type="checkbox"/> Anticipates and addresses client safety factors  |
| <input type="checkbox"/> Provides appropriate supervision of client based on client status     | <input type="checkbox"/> Demonstrates proper splinting techniques such as correct selection of type, correct selection of materials, & making adjustments as needed |
| <input type="checkbox"/> Accurately identifies ambulation needs and functional mobility status |   |

- Uses safe transfer techniques and equipment according to protocols
- Determines wheelchair positioning needs (e.g., footrests, cushions, trays & supports, etc.)
- Correctly positions client (e.g., in chair & bed; at desk, for feeding, etc.)
- Provides supervision of client based on client status to ensure safety
- Operates equipment according to facility protocols
- Attends to professional boundaries in therapeutic use of self-disclosure
- Effectively limit sets & redirects client(s)
- Establishes safe group climate (reinforce expectations, group rules or contract)
- Other:

## **BASIC TENANTS**

**FWPE items #4-6:** Clearly, confidently, & accurately articulates to clients and other relevant parties: 1) the values, beliefs, and distinct perspective of the occupational therapy profession 2) the value of occupation as a method and desired outcome of occupational therapy & 3) the role of occupational therapy practitioners.

### **Student communicates via:**

- Verbal communication
- Via written material (e.g., handout, article, sample job description, etc.)
- Other:

### **Student communicates about these 3 tenets with:**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Client  | <input type="checkbox"/> Aides and paraprofessionals | <input type="checkbox"/> Athletic trainer                                       |
| <input type="checkbox"/> Families and support network                    | <input type="checkbox"/> Physicians                  | <input type="checkbox"/> Music therapy  |
| <input type="checkbox"/> Occupational Therapy Assistant                  | <input type="checkbox"/> Nursing                     | <input type="checkbox"/> 3 <sup>rd</sup> party payers                           |
| <input type="checkbox"/> Physical Therapy and Physical Therapy Assistant | <input type="checkbox"/> Social Worker               | <input type="checkbox"/> Regulatory bodies                                      |
| <input type="checkbox"/> Speech Language Pathologist                     | <input type="checkbox"/> Psychologist                | <input type="checkbox"/> General public (e.g. promotion materials, in-services) |
| <input type="checkbox"/> Teacher   | <input type="checkbox"/> Rehab Technology Specialist | <input type="checkbox"/> Others:  |
|  | <input type="checkbox"/> Recreational Therapist      |   |

### **Student communicates about these 3 tenets in:**

- |  |   |
|--|---|
| <input type="checkbox"/> Client intervention & education | <input type="checkbox"/> In-services, brochures, bulletin boards, media announcements, etc. |
| <input type="checkbox"/> Meetings                        | <input type="checkbox"/> Other:   |
| <input type="checkbox"/> Documentation                   |   |
| <input type="checkbox"/> Correspondence                  |   |

### **Student communicates the value of occupations using:**

- Examples of occupation-based assessment tools
- Citations of literature and evidence base for use of occupation relative to person and context
- Terms & examples specific to person, organization, population (facility mission, level of care, service delivery)
- OTPF language
- Current AOTA official documents and fact sheets
- Other:

### **Student Communicates role of occupational therapy using:**

- Current AOTA official documents
- Federal & state laws, practice acts governing evaluation and intervention
- State laws and practice arts
- Definition language appropriate for audience
- Other:

**FWPE item # 7:** Articulates clear & logical rationale for evaluation process. Student:

- Describes reasoning based on client, condition, context, frame of reference and evidence
  - Discusses psychometric properties (validity & reliability) of assessment tool
  - Other:
- 

**FWPE item #8:** Obtains sufficient and necessary information from relevant resources such as client, families, significant others, service providers, & records prior to & during evaluation process. Student obtains this information via:

- Thorough record & chart review
  - Client interview
  - Observation of client occupational performance, performance skills (motor & praxis, emotional regulation, cognitive, communication & social, sensory-perceptual), and performance patterns
  - Assessment instruments addressing client factors (including psychosocial factors), occupational performance, performance skills, and performance patterns (see assessment chart)
  - Gathering input from family, significant others & service providers
  - Occupational Profile addresses
    - Who is client?
    - Why seeking services, and what are the client's current concerns relative to engaging in occupations in daily life activities?
    - Priorities
    - Client problems and desired targeted outcomes related to occupational performance, regarding prevention, health and wellness, quality of life, participation, role competence, well-being, and occupational justice
    - Occupational history
    - What aspects of the context (environmental & personal) are seen as supportive or inhibitory to engagement
    - Client values, interests & needs
    - Client successes & barriers affecting desired outcomes?
    - What are the client's patterns of engagement in occupations and how have they changed over time?
  - Other:
- 

**FWPE item #9:** Selects relevant screening & assessment methods (see assessment chart). Student:

**Selects assessment according to:**

- Client's belief systems and underlying assumptions regarding desired occupational performance
- Psychosocial factors
- Client needs & goals
- Practitioner's theoretical model of practice
- Concerns about occupational performance and participation
- Evidence
- Practice context
- Funding sources
- Practitioner understanding of rationale and protocol of the psychometric properties of standardized measures including assessment validity & reliability
- Cultural relevance
- Other:

**Selects assessment based on theories, models & frames of reference pertinent to setting such as:**

- |   |   |
|---|---|
| <input type="checkbox"/> Person- Environment-Occupation (PEO) | <input type="checkbox"/> Biomechanical                |
| <input type="checkbox"/> Behavioral                           | <input type="checkbox"/> Ecology of Human Performance |



- |   |   |
|---|---|
| <input type="checkbox"/> Acquisitional                        | <input type="checkbox"/> Rehabilitation   |
| <input type="checkbox"/> Psychodynamic                        | <input type="checkbox"/> Clinical Reasoning   |
| <input type="checkbox"/> Cognitive Behavioral                 | <input type="checkbox"/> Cognitive & Cognitive Disability                                   |
| <input type="checkbox"/> Dialectical Behavioral Therapy (DBT) | <input type="checkbox"/> Person-Environment-Occupational Performance (PEOP)                 |
| <input type="checkbox"/> Sensory Processing                   | <input type="checkbox"/> Canadian Model of Occupational Performance and Engagement (CMOP-E) |
| <input type="checkbox"/> Developmental                        | <input type="checkbox"/> Transtheoretical Model of Change                                   |
| <input type="checkbox"/> Motor Learning                       | <input type="checkbox"/> Kawa   |
| <input type="checkbox"/> Sensory Integrative                  | <input type="checkbox"/> Education and Learning theories such as:                           |
| <input type="checkbox"/> Neurodevelopmental Treatment (NDT)   | <input type="checkbox"/> Other:   |
| <input type="checkbox"/> Functional Group Model               |   |
| <input type="checkbox"/> Model of Human Occupational (MOHO)   |   |
| <input type="checkbox"/> Occupational Adaptation              |   |

**FWPE item #10:** Determines occupational profile & performance through interview and other appropriate evaluation methods (see assessment chart for specific tools & competency expectations).

**FWPE item # 11:** Evaluates and analyzes client factors and contexts that support or inhibit occupational performance (see assessment chart for specific tools & competency expectations).

**FWPE item #12:** Administers standardized and non-standardized assessments and surveys accurately and efficiently to ensure findings are valid and reliable (see assessment chart for specific tools & competency expectations).

**FWPE item #13:** Modifies evaluation procedures based on client factors and contexts. Student modifies evaluation based on the following:

- |  |  |
|--|--|
| <input type="checkbox"/> Fatigue   | <input type="checkbox"/> Cognitive status  |
| <input type="checkbox"/> Psychological factors including anxiety, depressive symptoms, etc.              | <input type="checkbox"/> Global mental functions (energy, consciousness, psychosocial, personality, etc.)  |
| <input type="checkbox"/> Cultural and societal beliefs, values, customs, expectations                    | <input type="checkbox"/> Client willingness to participate   |
| <input type="checkbox"/> Primary language  | <input type="checkbox"/> Frustration tolerance   |
| <input type="checkbox"/> Respiratory and cardiac status  | <input type="checkbox"/> Sensory functions (pain, visual, proprioceptive, hearing, etc.)   |
| <input type="checkbox"/> Medical acuity  | <input type="checkbox"/> Environmental factors (products and technology, natural environment and human made changes to the environment, attitudes, etc.) |
| <input type="checkbox"/> Concerns re: safety (please specify):   | <input type="checkbox"/> Other:  |
| <input type="checkbox"/> Inability to perform task   |  |
| <input type="checkbox"/> Mental functions (higher level cognitive, attention, memory, impulsivity, etc.) |  |

**FWPE item #14:** Interprets evaluation results to determine client's occupational performance, strengths, & challenges. Student uses information including:

- |  |  |
|--|--|
| <input type="checkbox"/> Standardized assessment results                           | <input type="checkbox"/> Observations of client's performance          |
| <input type="checkbox"/> Information including client condition & diagnosis        | <input type="checkbox"/> Client's stated values, beliefs & motivations |
| <input type="checkbox"/> Subjective & objective impressions                        | <input type="checkbox"/> Identified concerns & needs                   |
| <input type="checkbox"/> Verbal reports of others (team, family & caretaker, etc.) | <input type="checkbox"/> Other:  |

**FWPE item #15:** Synthesizes and documents the results of the evaluation process clearly, accurately, and concisely, using systematic methods to record the client's occupational performance. Student:

- Records observed performance in areas of occupation (ADL & IADL, Health management, Education, Work, Play, Leisure, Social Participation, Rest & Sleep) as per setting's policies, procedures & scope of practice
- Accurately reports standardized assessment data (raw scores & results) as applicable

- Formulates goals that are specific, measurable, realistic, attainable, time-limited
- Utilizes outcome measurement methods when available or per setting policies
- Other:

## **INTERVENTION**

**FWPE item #16:** Student articulates a clear and logical rationale for the intervention process based on the evaluation results, contexts, theories, frames of reference, practice models, and evidence:

- |   |  |
|---|--|
| <input type="checkbox"/> Verbally in supervision sessions                   | <input type="checkbox"/> In client education materials |
| <input type="checkbox"/> Via written assignments (e.g. journal, case study) | <input type="checkbox"/> In written documentation      |
| <input type="checkbox"/> Via sharing research articles and other evidence   | <input type="checkbox"/> Via in-services               |
| <input type="checkbox"/> In rounds & team meetings                          | <input type="checkbox"/> Other:                        |
| <input type="checkbox"/> Verbally in client sessions                        |  |

**FWPE item #17:** Establishes an accurate and appropriate client-centered plan based on the evaluation results, contexts, theories, frames of reference, and/or practice models. Student:

- Recommends additional consultation and referrals
- Creates relevant and measurable goals in collaboration with the client and or family & caregivers
- Integrates information with client priorities to create plan relative to setting & scope of practice
- Incorporates client's present and future context(s) (personal, cultural, temporal, virtual, physical, social) in clinical reasoning & intervention planning
- Uses structured methods to review evidence (journals, case studies, consensus of experts)
- Creates realistic plan reflective of accurate understanding of client abilities and potential
- Sets goals consistent with client priorities, theory, frame of reference, evidence, & setting
- Incorporates client's cultural and spiritual preferences
- Other:

**FWPE item #18:** Uses evidence from research and relevant resources to make informed intervention decisions. Student uses:

- |   |  |
|---|--|
| <input type="checkbox"/> Current research articles and findings | <input type="checkbox"/> Treatment protocols |
| <input type="checkbox"/> AOTA Practice guidelines               | <input type="checkbox"/> Other:              |
| <input type="checkbox"/> Textbooks and other printed materials  |  |

**FWPE item #19:** Selects client-centered and occupation-based interventions that motivate and challenge the client to achieve established goals that support targeted outcomes. Student considers the clients':

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Condition & status | <input type="checkbox"/> Current context & resources | <input type="checkbox"/> Psychosocial needs |
| <input type="checkbox"/> Progress           | <input type="checkbox"/> Culture, beliefs & values   | <input type="checkbox"/> Support network    |
| <input type="checkbox"/> Stated interests   | <input type="checkbox"/> Future context & resources  | <input type="checkbox"/> Other:             |

**FWPE item #20:** Student implements client-centered and occupation-based intervention plans addressing:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Role competence      | <input type="checkbox"/> Education         | <input type="checkbox"/> Occupational justice     |
| <input type="checkbox"/> ADL                  | <input type="checkbox"/> Leisure           | <input type="checkbox"/> Cultural preferences     |
| <input type="checkbox"/> IADL                 | <input type="checkbox"/> Health & wellness | <input type="checkbox"/> Occupational performance |
| <input type="checkbox"/> Play                 | <input type="checkbox"/> Quality of life   | <input type="checkbox"/> Prevention               |
| <input type="checkbox"/> Work                 | <input type="checkbox"/> Self-advocacy     | <input type="checkbox"/> Other:                   |
| <input type="checkbox"/> Sleep & rest         | <input type="checkbox"/> Sexuality         |   |
| <input type="checkbox"/> Social participation | <input type="checkbox"/> Health management |   |

**FWPE item #21:** Chooses and, if needed, modifies intervention approaches to achieve client's desired outcomes, evaluation data and research evidence. Student uses the following approaches:

- |  |  |
|--|--|
| <input type="checkbox"/> Create & promote (health promotion) | <input type="checkbox"/> Establish & restore (remediation & restoration) |
|--|--|

- Maintain
- Prevent (disability prevention)
- Modify (compensation & adaptation)
- Other:

**FWPE Item #22:** Modifies task and/or environment to maximize the client's performance. Student adjusts:

- Sequence of activity
- Object use in activity
- Environmental setup
- Length, frequency, and/or timing of sessions
- Amount of sensory input
- Visual and/or verbal cues
- Physical demand
- Physical assistance provided
- Social demand (1:1 v. group, etc.)
- Emotional & behavioral support provided
- Cognitive demand
- Physical requirements
- Safety awareness demands
- Use of assistive and/or adaptive devices
- Other:

**FWPE item #23:** Modifies the intervention plan and determines the need for continuation or discontinuation of services based on the client's status. Student considers:

- Client expectations relative to desired occupations, role(s), & context including psychosocial factors
- Progress toward desired outcomes
- Support network
- Anticipated functional progress
- Medical status and prognosis
- Client's motivation
- Facility and/or payor requirements
- Other:

**FWPE item # 24:** Documents client's response to services in a manner that demonstrates effectiveness of interventions via:

- Progress reports with quantitative data (goal attainment scaling, excel charts & graphing, re-assessment, assessment score comparison and interpretation, and outcome measurement results)
- Narrative summary with qualitative descriptors according to problems identified & goals achieved
- Accurate identification of client progress
- Daily documentation according to site guidelines
- Verbal report
- Other:

### **MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES**

**FWPE item #25:** Demonstrates through practice or discussion the ability to collaborate with and assign appropriate tasks to the occupational therapy assistant, occupational therapy aide, or others to whom responsibilities might be assigned, while remaining responsible for all aspects of treatment. Student:

- Describes or assigns duties commensurate to educational level, assessed competency, federal & state laws regulating use of supportive personnel
- Considers manageability of caseload, complexity of needs, type of setting, and safety when assigning duties
- Describes and provides type of supervision required (close, direct, line of sight)
- Provides reference to state guidelines governing performance of services
- Engages in tasks with OTA relative to job description and/or scope of practice as defined by state guidelines (e. g., soliciting contributions to evaluation process and/or delegating, implementing & adjusting intervention plan)
- Completes alternate assignment to meet objective (please describe or attach):
- Other:

**FWPE Item #26:** Demonstrates through practice or discussion an understanding of costs and funding systems related to occupational therapy services, such as federal, state, third party, and private payers. Student:

- Participates in or describes billing for OT services
- Manages inventory and/or ordering of supplies for OT services
- Assists with client procurement of adaptive equipment
- Discusses political issues & policy decisions that affect funding

- Outlines how services are regulated and funds allocated pertaining to local and & or federal laws such as IDEA, ADA, Medicare & Medicaid, etc.
  - Describes agency billing & payment system (grant funding, types of insurance, private pay, cost- share, state & federal funding)
  - Describes eligibility criteria for reimbursement and discharge
  - Identifies possible resources available (grants, community partnerships, sources for donations, fundraising ideas, etc.)
  - Demonstrates awareness of risk management and liability as part of costs and quality care
  - Demonstrates awareness of budgetary implications when procuring & using supplies
  - Meets documentation requirements for reimbursement or funding sources
  - Other:
- 

**FWPE item #27:** Demonstrates knowledge about the organization including:

- |   |   |
|---|---|
| <input type="checkbox"/> Mission and vision   | <input type="checkbox"/> Scope                    |
| <input type="checkbox"/> Accreditation status | <input type="checkbox"/> Specialty certifications |
| <input type="checkbox"/> Licensing            | <input type="checkbox"/> Role of organization     |
| <input type="checkbox"/> History              | <input type="checkbox"/> Other:                   |
- 

**FWPE item #28:** Meets productivity standards or volume of work expected of occupational therapy students. Student:

- Self-directs schedule management to meet workload & caseload
  - Gathers necessary evaluation data within allotted amount of time
- Specify:
- Completes evaluation write-up with documentation co-signed & in chart & record within:
 

|                                  |                                   |                                 |                                 |
|----------------------------------|-----------------------------------|---------------------------------|---------------------------------|
| <input type="checkbox"/> 8 hours | <input type="checkbox"/> 24 hours | <input type="checkbox"/> 1 week | <input type="checkbox"/> Other: |
|----------------------------------|-----------------------------------|---------------------------------|---------------------------------|
  - Completes progress note documentation within:
 

|                                  |                                   |                                 |                                 |
|----------------------------------|-----------------------------------|---------------------------------|---------------------------------|
| <input type="checkbox"/> 8 hours | <input type="checkbox"/> 24 hours | <input type="checkbox"/> 1 week | <input type="checkbox"/> Other: |
|----------------------------------|-----------------------------------|---------------------------------|---------------------------------|
  - Conducts \_\_\_\_ (number) of evaluations:
 

|                                  |                                   |                                    |                                 |
|----------------------------------|-----------------------------------|------------------------------------|---------------------------------|
| <input type="checkbox"/> per day | <input type="checkbox"/> per week | <input type="checkbox"/> per month | <input type="checkbox"/> Other: |
|----------------------------------|-----------------------------------|------------------------------------|---------------------------------|
  - Serves caseload commensurate with entry-level therapist:
 

|   |  |
|---|--|
| <input type="checkbox"/> ____ (number) of clients per day   | <input type="checkbox"/> ____ (number) of groups per day   |
| <input type="checkbox"/> ____ (number) of clients per week  | <input type="checkbox"/> ____ (number) of groups per week  |
| <input type="checkbox"/> ____ (number) of clients per month | <input type="checkbox"/> ____ (number) of groups per month |
  - Meets expected productivity level: \_\_\_\_%
  - Other:
- 

**COMMUNICATION**

**FWPE item #29:** Communicates clearly and effectively, both verbally and nonverbally. Student uses:

- Language appropriate to the recipient of information
- Terminology and content aligned with the level of understanding of person with whom communicating
- Examples to illustrate meaning & intent
- Active listening strategies (restates & paraphrases) to ensure both parties have shared understanding of information & plan
- Multiple modes of communication (verbal, written, nonverbal)
- Appropriate eye contact
- Attention to physical boundaries & body space
- Attention to best practice in technology and communication (i.e. video-conferencing)

- Professional presentation & demeanor in facial expression, posture, grooming affect, & attire
- Translation services
  - via phone
  - via video
  - via written services
  - in person
- Consideration of cultural differences
- Provision of clear & concise instructions for intended recipient
- Provision of supporting materials as needed
- Adapting communication style or method in response to recipient comprehension and receptivity
- Other:

**Student communicates with/to:**

- |                                     |  |                                     |
|-------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Clients    | <input type="checkbox"/> Colleagues        | <input type="checkbox"/> The public |
| <input type="checkbox"/> Families   | <input type="checkbox"/> Service providers | <input type="checkbox"/> Other:     |
| <input type="checkbox"/> Caregivers | <input type="checkbox"/> Administration    |                                     |

**FWPE item # 30:** Student produces clear and accurate documentation:

- Per setting protocols & formats
- Using approved institutional terminology & abbreviations
- Using technology when available to review documentation (grammar, spelling)
- Using strategies such as proof reading, reading aloud, checking against template, asking colleague & peer to proofread if appropriate
- Conducive to being read by recipients of services & other disciplines
- Using language consistent with the current Occupational Therapy Practice Framework
- Using language appropriate for the intended audience
- Other:

**Documentation**

- |   |   |                                     |
|---|---|-------------------------------------|
| <input type="checkbox"/> EMR platform (type): | <input type="checkbox"/> Checklist        | <input type="checkbox"/> SOAP notes |
| <input type="checkbox"/> Handwritten notes    | <input type="checkbox"/> Policy specifics |                                     |

**PROFESSIONAL BEHAVIORS**

**FWPE item #31:** Collaborates with fieldwork educator(s) to maximize the learning experience. Student:

- Asks fieldwork educator for both positive and constructive feedback
- Adjusts approach in response to feedback
- Consistently checks in to clarify expectations
- Shares information about learning style with fieldwork educator and asks for help as needed to adjust
- Utilizes structures in setting to support learning (e.g., student manual, reviews expectations, tracks own caseload & workload)
- Asserts need to schedule supervision meetings
- Discusses concerns & identifies possible avenues for changes or improvements
- Discusses &/or negotiates need for adjustments to supervisory relationship, performance expectations, caseload, & learning environment to improve quality of experience (e.g. reviews AOTA Fieldwork Experience Assessment Tool)
- Other:

**FWPE item # 32:** Takes responsibility for attaining professional competence by seeking out learning opportunities & interactions with fieldwork educator(s) & others. Student:

- Approaches fieldwork educator and other personnel with a list of questions, concerns & possible options for how to address them
- Takes initiative to meet with other members of team to understand their role & perspective
- Reviews testing materials & manuals on own prior to observing or administering
- Reviews and shares relevant resources
- Pilots new program ideas & improvements (e.g., assessment tools, outcome measures, groups, new forms or procedures etc.) when feasible & available
- Collaborates in research design or data collection with others (per IRB approval)
- Exercises good judgment when choosing to attend in-services or other continuing education opportunities (e.g. based on workload management, caseload focus, scope of practice)
- Other:

---

**FWPE item #33:** Responds constructively to feedback in a timely manner. Student:

- Engages in mutual feedback exchange (e.g., listen, clarify, acknowledge feedback and/or redirection provide examples, ask "How can I improve?"; discuss ways to make active changes, identify what would be helpful, discuss options)
- Demonstrates commitment to learning by identifying specific goals & actions to improve behavior & performance in collaboration with supervisor
- Processes feedback & seeks support from supervisor appropriate to context of supervisory relationship & learning opportunity
- Utilizes tools to reflect on own performance or variables affecting performance (e.g., self-assessment on Fieldwork Performance Evaluation, journaling and collaboration with peers, AOTA Fieldwork Experience Assessment Tool)
- Takes initiative to contact academic program resource persons for support if needed
- Other:

---

**FWPE item #34:** Demonstrates consistent work behaviors. Student consistently demonstrates:

- Initiative to address workload management
- Punctuality
- Professional behaviors in both task & interpersonal interactions
- Demonstrate the ability to adapt to unanticipated changes (e.g., conflicts)
- Attention to site cleanliness, safety & maintenance of supplies as appropriate to role
- Proper preparation for all meetings & sessions
- Responsibility to address areas of personal & professional growth
- Adherence with site guidelines on professional appearance
- Proactive behavior by planning for & requesting appropriate supports or accommodations in manner consistent with federal law & site resources (e.g. open in communication, provides appropriate documentation, requests reasonable accommodation if indicated)
- Other:

---

**FWPE item #35:** Demonstrates effective time management. Student:

- Monitors, maintains & adapts schedule in accordance with fieldwork responsibilities
- Organizes agenda or materials in advance for meetings & sessions
- Conducts evaluation and intervention sessions within allotted time, inclusive of set-up & clean-up
- Arrives on time to work, meetings, & client sessions
- Completes documentation and projects in a timely manner
- Completes learning activities by due dates
- Other:

**FWPE item #36:** Manages relationships effectively through therapeutic use of self and adjusts approach to meet the needs of clients and others. Student:

- Communicates concerns in 1st person manner (e.g. "I statements")
  - Demonstrates strong emotional intelligence when conveying point of view when conflict arises Compromises as needed when negotiating workload
  - Demonstrates flexibility to support own learning or department mission (e.g. extra effort, stay late if needed)
  - Demonstrates ongoing awareness of impact of own behavior on others
  - Displays positive regard for others
  - Demonstrates effective use of self-disclosure & therapeutic use of self to build rapport, establish relationships & motivate others (peers, colleagues & clients)
  - Provides genuine encouragement to maximize client participation & performance
  - Provides timely & specific feedback
  - Sets limits to maintain safety & support positive behavior & performance improvement
- 

**FWPE item #37:** Demonstrates respect for diversity factors of others. Student

- Demonstrates awareness of own background and sensitivity to worldviews of others
- Refrains from imposing own beliefs & values on others
- Maintains clients' dignity
- Gathers information about client's cultural values, identity, and/or spiritual beliefs
- Incorporates clients' values & beliefs into therapeutic interactions & interventions
- Considers clients' resources, culture, and lifestyle when designing intervention plans & discharge planning
- Considers social determinants of health throughout the occupational therapy process
- Demonstrates tolerance for differences in others & willingness to work with all clients
- Other:

**Other expectations not noted above:**

**Appendix A – Assessment List**

| <b>Formal Assessment Tools</b>   | <b>Expected to gain Proficiency</b> | <b>Expected to gain familiarity</b> | <b>Expected to gain awareness/observe</b> |
|--|-------------------------------------|-------------------------------------|---|
| Allen Cognitive Level Screening  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Allen Diagnostic Modules   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Activity Measure for Post-Acute Care (AM-PAC)  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Action Research Arm Test (ARAT)  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Assessment of Motor & Perceptual Skills  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Beery Visual Motor Integration test  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Behavior Rating Inventory of Executive Function -2                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Box and Block  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Bruininks-Oseretsky Test -2  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Canadian Occupational Performance Measure (COPM)   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Children’s Assessment of Participation & Enjoyment/Preference for Activities of Children | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Children’s Kitchen Task Assessment   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Children’s Occupational Self Assessment  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Cognistat  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Cognitive Assessment of Minnesota  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Coping Inventory   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Disabilities of the Arm, Shoulder, and Hand (DASH)                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Dynamic Lowenstein Occupational Therapy Cognitive Assessment (D-LOTCA)                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Dynamometer  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Early Coping Inventory   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Figure of 8 measurement (hand)   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Fugl-Meyer   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Functional Independence Measure:   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Gardner DVPT: Motor/Non-Motor  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Goal-Oriented Assessment of Lifeskills   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Goniometry   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Harter Self Perception Profile   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Hawaii Early Learning Profile  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Jepson Hand Function Test  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Kitchen Task Assessment  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Kohlman Evaluation of Living Skills  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Manual Muscle Testing  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Michigan   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Middlesex Elderly Assessment of Mental State   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Miller Function and Participation Scales   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Mini Mental Status Exam (MMSE)   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Moberg Pick Up Test:   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Montreal Cognitive Assessment (MoCA)   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Modified Ashworth Scale (Tone)   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Motor-Free Visual Perception Test (MVPT-3)   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Nine Hole Peg Test   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Occupational Performance History Interview   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |
| Occupational Self-Assessment   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                  |



|  |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|
| Occupational Therapy Assessment of Performance and Support (OTAPS) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Peabody Developmental Motor Scale:                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Pediatric Evaluation of Disability (PEDI)/PEDI-CAT                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Patient Health Questionnaire-2 (PHQ-2)                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Piers Harris Self Concept Scale                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Pinch Meter  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Routine Task Inventory   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| School Function Assessment (SFA)                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Self-Assessment of Occupational Functioning                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Semmes-Weinstein Monofilament:                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sensory Processing Measure   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sensory Profile  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Short Blessed  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| St. Louis University Mental Status Examination (SLUMS)             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Social Skills Rating System  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Timed Up and Go (TUG)  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tinetti Balance Assessment   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Volumeter  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| WeeFIM   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Weekly Calendar Planning Activity                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other (list below):  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |