

Doctor of Occupational Therapy

STUDENT FIELDWORK MANUAL

Department of Occupational Therapy
UNIVERSITY OF FLORIDA | GAINESVILLE, FL

INTRODUCTION TO FIELDWORK 3

 Contacts 3

 Occupational Therapy Department Offices..... 3

Fieldwork Schedule 3

Department of Occupational Therapy Vision..... 4

Department of Occupational Therapy Mission Statement..... 4

Entry-Level Doctor of Occupational Therapy Degree Program (OTD)..... 4

Program Outcomes and Themes..... 4

FIELDWORK SITE INFORMATION 5

LEVEL I FIELDWORK..... 5

Level I Fieldwork Placements 6

Level I Fieldwork Evaluation and Grading Procedures 6

Grading Student Performance: Level I Fieldwork..... 6

LEVEL II FIELDWORK..... 7

Level II Fieldwork Outcomes..... 7

Level II Fieldwork Placements 8

Level II Fieldwork Evaluation and Grading Procedures 9

Grading Student Performance: Level II Fieldwork..... 9

Student Evaluation of Fieldwork Experience 10

ACCOMMODATIONS FOR STUDENTS WITH DISABILITIES 10

FIELDWORK POLICIES AND PROCEDURES 11

Autoplacement..... 11

Appeals 11

Student Responsibilities 12

 Financial: 12

 Grading Procedures..... 12

 Contact with Sites 12

 Absence Makeup Policy 12

 Withdrawals 13

 Professionalism: 13

STUDENT REQUIREMENTS..... 13

Course Completion13

Liability Insurance:13

Medical Insurance:13

Site Requirements14

Immunizations:14

 MMR..... 14

 Workshops/Certifications and Trainings:..... 14

 Background Checks, Fingerprinting and Drug Screening 14

 Fieldwork Documentation and Records 15

APPENDIX 16

Level II Fieldwork Objectives17

 Data Gathering 17

 Treatment Planning..... 18

 Treatment Implementation 18

AOTA FIELDWORK DATA FORM23

 Introduction 23

 AOTA FIELDWORK DATA FORM 24

 ACOTE Standards Documentation for Fieldwork 28

References30

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:
Heidi Horwitz, MEd, OTD, OTR/L
352-273-9671
hhorwitz@p.php.ufl.edu

Clinical Education Assistant
Taylor Atkins

Fieldwork Web address: <https://ot.p.php.ufl.edu/current-students/fieldwork/>

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: <https://ot.p.php.ufl.edu/>

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 34-40 hours)
Pediatric Level I Fieldwork	Year 2	Spring	(1 week/approximately 34-40 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 at clinical sites 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, Suite 200, North Bethesda, MD 20852-4929; tel. (301) 652-AOTA; web address www.acoteonline.org.

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, apply knowledge to practice, and 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

The Academic Fieldwork Coordinator will place students for Psychosocial Level I Fieldwork. For Adult and Pediatric Level I fieldwork, 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. Level I Fieldwork assignments are made approximately three months prior to the Level I Experience 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.

If one of the sites becomes unavailable, the student will be given two site choices from the slots remaining in the database system.

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: <http://elearning.ufl.edu/>

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 in 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.

If one of the sites becomes unavailable, the student will be given two site choices from the slots remaining in the database system.

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.

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.

When students are having difficulty meeting their Level II fieldwork expectations while at their fieldwork site, collaboration with the site fieldwork educator and student will occur to address these concerns. This may result in creation of a learning plan to address fieldwork expectations. If the expectations of the learning plan are not met, this will result in removal from the Level II fieldwork site and referral to the Occupational Therapy Department Progression and Review Committee.

Unsatisfactory performance at any point during the Level II fieldwork may result in removal from the Level II fieldwork site. This decision will be made in collaboration with the site Fieldwork Educator, the AFWC and the OTD Program Director. The Progression and Review Committee will then convene, and the student may be: 1) removed from the OTD program, 2) offered a remediation and given an *Unsatisfactory* for that fieldwork placement, 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 Academic Performance and Review Committee and could mean removal from the OTD program.

Students who receive an *unsatisfactory* on any Level II fieldwork will be required to do a remediation. The specifics of the Remediation Plan will be determined by the AFWC, Program Director and Progression and Review Committee. The remediation needs to be completed before the student can participate in another fieldwork experience. The plan will typically include completing a new 12-week fieldwork experience after receiving a *satisfactory* on the remediation.

If a student receives an *unsatisfactory* on the remediation or receives more than one unsatisfactory on a Level II fieldwork, they will be removed from the program.

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 a 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 <https://disability.ufl.edu/> and www.disability.ufl.edu/students/get-started. Contact the DRC at 352-392-8565, by e-mail at DRCAccessUF@ufsa.ufl.edu 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 Specialistis 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 (i.e. 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.

Petitions for appeal are not to be made lightly. Students should consider the gravity of their appeal and submit an appeal only if they feel they could not continue in the program and complete their training if the appeal were denied.

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, the student at the end of the experience will complete an evaluation of the fieldwork experience and the evaluation of the fieldwork educator (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 satisfactory/unsatisfactory 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. Students also must obtain a

blanket liability insurance policy available at a nominal fee through the Department. Proof of both types of insurance may be requested by fieldwork sites

Site Requirements: Students are 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.

Immunizations:

MMR: As a prerequisite to matriculation or registration, the State University System of Florida requires all students born after 1956 to present documented proof of **immunity to measles**. All students, regardless of age, shall present documented proof of immunization against rubella. Proof of immunity should be presented according to the standards students received from the Registrar's Office. All students are required to verify immunization against diphtheria, rubella (German measles) and tetanus to the university Student Health Care Center.

Hepatitis B and Chicken Pox: Students in the Health Science Center colleges (including, Occupational Therapy students) are required to be immunized against the **Hepatitis B Virus**, and also provide proof of **immunity to the chicken pox virus**. Please keep in mind that Hepatitis B vaccinations take approximately six months to complete. It is the policy of the Health Science Center that Hepatitis B vaccinations and chicken pox titer tests are paid for by the student.

TB/PPD: Students in the Health Science Center colleges (including, Occupational Therapy students) are required to be tested annually for **Tuberculosis** (or present documentation from physician that this test is contraindicated). Some fieldwork sites require the 2 step TB/PPD test.

Flu Shot: All HSC students (including, Occupational Therapy students) are required to have a yearly flu shot.

Workshops/Certifications and Trainings:

UF Trainings: (completed in class or online). Copy of HIPAA, OSHA/Infection control, HIV/Blood Borne Pathogens, and personal safety course completion certificates are required. When completing online, logon to myTraining: <http://mytraining.hr.ufl.edu/>

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 must be through the American Heart Association. For students' convenience, CPR courses are offered at the CPR and Safety Training Center. Proof of current CPR certification may be requested by fieldwork sites.

Background Checks, Fingerprinting and Drug Screening

Fieldwork facilities often require a variety of different types of background checks. A student who is aware of a legal or conduct issue that may present a problem for fieldwork placement should contact the Program Director upon entering the program or as soon as possible for a confidential discussion of the implications. All

students are expected to inquire of both Level I and Level II site placements concerning the specific background information required. The student is responsible to comply with the request in a timely manner and furnish the required documentation to the site.

Students should also note that applicants for the NBCOT exam are required to answer Character Review Questions and submit a background check. For more information on NBCOT's policies see: <https://www.nbcot.org/en/Students/Services>

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 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.

Fieldwork Documentation and Records

It is the student's responsibility to ensure that all appropriate health information is completed and kept up to date. Students are required 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 as required for drug testing, fingerprinting and background checks.

Students are responsible for keeping copies of the documentation and for supplying it to their fieldwork sites as required. Immunization and CPR Certification copies will not be maintained in the student's OT department file. OT Students are responsible for verifying submission of all the health science center requirements and fieldwork records documentation.

Fieldwork Requirements must be completed by the assigned due dates. Failure to meet these dates may result in a referral to the UF OT Progression and Review Committee, unless you have written permission for an extension from Ms. Atkins or Dr. Horwitz. Students who do not complete requirements by due dates are at risk for not starting fieldwork on time and/or the cancellation of their fieldwork placement.

Appendix

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:

1. 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 rationale 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 goals
18. 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 conducive 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 City State Zip:

FW I Contact Person: Phone:	FW II Contact Person: Phone:
E-mail:	E-mail:
Credentials:	Credentials:

Director: Phone: Fax: Web site address:	Initiation Source: <input type="checkbox"/> FW Office <input type="checkbox"/> FW Site <input type="checkbox"/> Student	Corporate Status: <input type="checkbox"/> For Profit <input type="checkbox"/> Non-Profit <input type="checkbox"/> State Gov't <input type="checkbox"/> Federal Gov't
Preferred Sequence of FW: ACOTE Standards B.10.6 <input type="checkbox"/> Any <input type="checkbox"/> Second/Third only; 1 st must be in: <input type="checkbox"/> Full-time only <input type="checkbox"/> Part-time option <input type="checkbox"/> Prefer Full-time		

OT Fieldwork Practice Settings (ACOTE Form A #s noted)
:

Hospital-based settings <input type="checkbox"/> In-Patient Acute 1.1 <input type="checkbox"/> In-Patient Rehab 1.2 <input type="checkbox"/> SNF/ Sub-Acute/ Acute Long-Term Care 1.3 <input type="checkbox"/> General Rehab Outpatient 1.4 <input type="checkbox"/> Outpatient Hands 1.5 <input type="checkbox"/> Pediatric Hospital/Unit 1.6 <input type="checkbox"/> Peds Hospital Outpatient 1.7 <input type="checkbox"/> In-Patient Psych 1.8	Community-based settings <input type="checkbox"/> Peds Community 2.1 <input type="checkbox"/> Behavioral Health Community 2.2 <input type="checkbox"/> Older Adult Community Living 2.3 <input type="checkbox"/> Older Adult Day Program 2.4 <input type="checkbox"/> Outpatient/hand private practice 2.5 <input type="checkbox"/> Adult Day Program for DD 2.6 <input type="checkbox"/> Home Health 2.7 <input type="checkbox"/> Peds Outpatient Clinic 2.8	School-based settings <input type="checkbox"/> Early Intervention 3.1 <input type="checkbox"/> School 3.2 Other area(s) please specify:	Age Groups: <input type="checkbox"/> 0-5 <input type="checkbox"/> 6-12 <input type="checkbox"/> 13-21 <input type="checkbox"/> 22-64 <input type="checkbox"/> 65+	Number of Staff: OTRs: COTAs: Aides: PT: Speech: Resource Teacher: Counselor/Psychologist: Other:
---	--	---	---	--

Student Prerequisites (check all that apply) ACOTE Standard B.10.6 <input type="checkbox"/> CPR <input type="checkbox"/> Medicare / Medicaid Fraud Check <input type="checkbox"/> Criminal Background Check <input type="checkbox"/> Child Protection/abuse check <input type="checkbox"/> Adult abuse check <input type="checkbox"/> Fingerprinting	Health requirements: <input type="checkbox"/> First Aid <input type="checkbox"/> Infection Control training <input type="checkbox"/> HIPAA Training <input type="checkbox"/> Prof. Liability Ins. <input type="checkbox"/> Own transportation <input type="checkbox"/> Interview <input type="checkbox"/> HepB <input type="checkbox"/> MMR <input type="checkbox"/> Tetanus <input type="checkbox"/> Chest x-ray <input type="checkbox"/> Drug screening <input type="checkbox"/> TB/Mantoux <input type="checkbox"/> Physical Check up <input type="checkbox"/> Varicella <input type="checkbox"/> Influenza Please list any other requirements:
---	---

Performance skills, patterns, contexts and client factors addressed in this setting (check all that apply)

Performance Skills: Motor Skills <input type="checkbox"/> Posture <input type="checkbox"/> Mobility <input type="checkbox"/> Coordination <input type="checkbox"/> Strength & effort <input type="checkbox"/> Energy Process Skills <input type="checkbox"/> Energy <input type="checkbox"/> Knowledge <input type="checkbox"/> Temporal organization <input type="checkbox"/> Organizing space & objects <input type="checkbox"/> Adaptation Communication/ Interaction Skills <input type="checkbox"/> Physicality- non verbal <input type="checkbox"/> Information exchange <input type="checkbox"/> Relations	Client Factors: Body functions/structures <input type="checkbox"/> Mental functions- affective <input type="checkbox"/> Mental functions-cognitive <input type="checkbox"/> Mental functions- perceptual <input type="checkbox"/> Sensory functions & pain <input type="checkbox"/> Voice & speech functions <input type="checkbox"/> Major organ systems: heart, lungs, blood, immune <input type="checkbox"/> Digestion/ metabolic/ endocrine systems <input type="checkbox"/> Reproductive functions <input type="checkbox"/> Neuromusculoskeletal & movement functions <input type="checkbox"/> Skin	Context(s): <input type="checkbox"/> Cultural- ethnic beliefs & values <input type="checkbox"/> Physical environment <input type="checkbox"/> Social Relationships <input type="checkbox"/> Personal- age, gender, etc. <input type="checkbox"/> Spiritual <input type="checkbox"/> Temporal- life stages, etc. <input type="checkbox"/> Virtual- simulation of env, chat room, etc. Performance Patterns/Habits <input type="checkbox"/> Impoverished habits <input type="checkbox"/> Useful habits <input type="checkbox"/> Dominating habits <input type="checkbox"/> Routine sequences <input type="checkbox"/> Roles
---	---	--

Most common services priorities (check all that apply)			
<input type="checkbox"/> Direct service	<input type="checkbox"/> Meetings(team, department, family)	<input type="checkbox"/> Consultation	<input type="checkbox"/> Billing
<input type="checkbox"/> Discharge planning	<input type="checkbox"/> Client education	<input type="checkbox"/> In-service training	<input type="checkbox"/> Documentation
<input type="checkbox"/> Evaluation	<input type="checkbox"/> 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): <i>*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</i>		
Activities of Daily Living (ADL) <input type="checkbox"/> Bathing/showering <input type="checkbox"/> Bowel and bladder mgmt <input type="checkbox"/> Dressing <input type="checkbox"/> Eating <input type="checkbox"/> Feeding <input type="checkbox"/> Functional mobility <input type="checkbox"/> Personal device care <input type="checkbox"/> Personal hygiene & grooming <input type="checkbox"/> Sexual activity <input type="checkbox"/> Sleep/rest <input type="checkbox"/> Toilet hygiene Play <input type="checkbox"/> Play exploration <input type="checkbox"/> Play participation Purposeful Activity- therapeutic context leading to occupation, practice in preparation for natural context <input type="checkbox"/> Practicing an activity <input type="checkbox"/> Simulation of activity <input type="checkbox"/> Role Play Examples:	Instrumental Activities of Daily Living (IADL) <input type="checkbox"/> Care of others/pets <input type="checkbox"/> Child rearing <input type="checkbox"/> Communication device use <input type="checkbox"/> Community mobility <input type="checkbox"/> Financial management <input type="checkbox"/> Health management & maintenance <input type="checkbox"/> Home establishment & management <input type="checkbox"/> Meal preparation & clean up <input type="checkbox"/> Safety procedures & emergency responses <input type="checkbox"/> Shopping Leisure <input type="checkbox"/> Leisure exploration <input type="checkbox"/> Leisure participation Preparatory Methods- preparation for purposeful & occupation-based activity <input type="checkbox"/> Sensory-Stimulation <input type="checkbox"/> Physical agent modalities <input type="checkbox"/> Splinting <input type="checkbox"/> Exercise Examples:	Education <input type="checkbox"/> Formal education participation <input type="checkbox"/> Exploration of informal personal education needs or interests <input type="checkbox"/> Informal personal education participation Work <input type="checkbox"/> Employment interests & pursuits <input type="checkbox"/> Employment seeking and acquisition <input type="checkbox"/> Job performance <input type="checkbox"/> Retirement preparation & adjustment <input type="checkbox"/> Volunteer exploration / participation Social Participation <input type="checkbox"/> Community <input type="checkbox"/> Family <input type="checkbox"/> Peer/friend Therapeutic Use-of-Self- describe Consultation Process- describe Education Process- describe

<p>Method of Intervention Direct Services/case load for entry-level OT <input type="checkbox"/> One-to-one: <input type="checkbox"/> Small group(s): <input type="checkbox"/> Large group:</p> <p>Discharge Outcomes of clients (% clients) <input type="checkbox"/> Home <input type="checkbox"/> Another medical facility <input type="checkbox"/> Home Health</p>	<p>Outcomes of Intervention * <input type="checkbox"/> Occupational performance- improve &/ or enhance <input type="checkbox"/> Client Satisfaction <input type="checkbox"/> Role Competence <input type="checkbox"/> Adaptation <input type="checkbox"/> Health & Wellness <input type="checkbox"/> Prevention <input type="checkbox"/> Quality of Life</p> <p>OT Intervention Approaches <input type="checkbox"/> Create, promote (health promotion) <input type="checkbox"/> Establish, restore, remediation <input type="checkbox"/> Maintain <input type="checkbox"/> Modify, compensation, adaptation <input type="checkbox"/> Prevent, disability prevention</p>	<p>Theory/ Frames of Reference/ Models of Practice <input type="checkbox"/> Acquisitional <input type="checkbox"/> Biomechanical <input type="checkbox"/> Cognitive- Behavioral <input type="checkbox"/> Coping <input type="checkbox"/> Developmental <input type="checkbox"/> Ecology of Human Performance <input type="checkbox"/> Model of Human Occupation (MOHO) <input type="checkbox"/> Occupational Adaptation <input type="checkbox"/> Occupational Performance Model <input type="checkbox"/> Person/ Environment/ Occupation (P-E-O) <input type="checkbox"/> Person-Environment-Occupational Performance <input type="checkbox"/> Psychosocial <input type="checkbox"/> Rehabilitation frames of reference <input type="checkbox"/> Sensory Integration <input type="checkbox"/> Other (please list):</p>										
<p>Please list most common screenings and evaluations used in your setting:</p>												
<p>Identify safety precautions important at your FW site</p> <table border="0"> <tr> <td><input type="checkbox"/> Medications</td> <td><input type="checkbox"/> Swallowing/ choking risks</td> </tr> <tr> <td><input type="checkbox"/> Post-surgical (list procedures)</td> <td><input type="checkbox"/> Behavioral system/ privilege level (locked areas, grounds)</td> </tr> <tr> <td><input type="checkbox"/> Contact guard for ambulation</td> <td><input type="checkbox"/> Sharps count</td> </tr> <tr> <td><input type="checkbox"/> Fall risk</td> <td><input type="checkbox"/> 1:1 safety/ suicide precautions</td> </tr> <tr> <td><input type="checkbox"/> Other (describe):</td> <td></td> </tr> </table>			<input type="checkbox"/> Medications	<input type="checkbox"/> Swallowing/ choking risks	<input type="checkbox"/> Post-surgical (list procedures)	<input type="checkbox"/> Behavioral system/ privilege level (locked areas, grounds)	<input type="checkbox"/> Contact guard for ambulation	<input type="checkbox"/> Sharps count	<input type="checkbox"/> Fall risk	<input type="checkbox"/> 1:1 safety/ suicide precautions	<input type="checkbox"/> Other (describe):	
<input type="checkbox"/> Medications	<input type="checkbox"/> Swallowing/ choking risks											
<input type="checkbox"/> Post-surgical (list procedures)	<input type="checkbox"/> Behavioral system/ privilege level (locked areas, grounds)											
<input type="checkbox"/> Contact guard for ambulation	<input type="checkbox"/> Sharps count											
<input type="checkbox"/> Fall risk	<input type="checkbox"/> 1:1 safety/ suicide precautions											
<input type="checkbox"/> Other (describe):												
<p>Please list how students should prepare for a FW II placement such as doing readings, learn specific evaluations and interventions used in your setting:</p>												

<p>Target caseload/ productivity for fieldwork students:</p> <p>Productivity % per 40 hour work week:</p> <p>Caseload expectation at end of FW:</p> <p>Productivity % per 8 hour day:</p> <p># Groups per day expectation at end of FW:</p>	<p>Documentation: Frequency/ Format (briefly describe) :</p> <p><input type="checkbox"/> Hand-written documentation:</p> <p><input type="checkbox"/> Computerized Medical Records:</p> <p>Time frame requirements to complete documentation:</p>
--	---

<p>Administrative/ Management duties or responsibilities of the OT/ OTA student:</p> <p><input type="checkbox"/> Schedule own clients</p> <p><input type="checkbox"/> Supervision of others (Level I students, aides, OTA, volunteers)</p> <p><input type="checkbox"/> Budgeting</p> <p><input type="checkbox"/> Procuring supplies (shopping for cooking groups, client/ intervention related items)</p> <p><input type="checkbox"/> Participating in supply or environmental maintenance</p> <p><input type="checkbox"/> Other:</p>	<p>Student Assignments. Students will be expected to successfully complete:</p> <p><input type="checkbox"/> Research/ EBP/ Literature review</p> <p><input type="checkbox"/> In-service</p> <p><input type="checkbox"/> Case study</p> <p><input type="checkbox"/> Participate in in-services/ grand rounds</p> <p><input type="checkbox"/> Fieldwork Project (describe):</p> <p><input type="checkbox"/> Field visits/ rotations to other areas of service</p> <p><input type="checkbox"/> Observation of other units/ disciplines</p> <p><input type="checkbox"/> Other assignments (please list):</p>
--	--

<p>Student work schedule & outside study expected:</p> <p>Schedule hrs/ week/ day:</p> <p>Do students work weekends? <input type="checkbox"/>yes <input type="checkbox"/>no</p> <p>Do students work evenings? <input type="checkbox"/>yes <input type="checkbox"/>no</p>	<p>Other</p> <p>Room provided <input type="checkbox"/>yes <input type="checkbox"/>no</p> <p>Meals <input type="checkbox"/>yes <input type="checkbox"/>no</p> <p>Stipend amount:</p>	<p>Describe level of structure for student?</p> <p><input type="checkbox"/> High</p> <p><input type="checkbox"/> Moderate</p> <p><input type="checkbox"/> Low</p>	<p>Describe level of supervisory support for student?</p> <p><input type="checkbox"/> High</p> <p><input type="checkbox"/> Moderate</p> <p><input type="checkbox"/> Low</p>
---	--	--	--

Describe the FW environment/ atmosphere for student learning:

Describe public transportation available:

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): *ACOTE Standards B.10.1, B.10.2, B.10.3, B.10.4, B.10.11, B.10.15*
 - 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? *ACOTE Standards B.10.1, B.10.3, B.10.4, B.10.11, B.10.15*
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. *ACOTE Standards B.10.2, B.10.3, B.10.5, B.10.7, B.10.13, B.10.19, B.10.20, b.10.21*
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) *ACOTE Standards B.7.10, B.10.12, B.10.17* (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:

8. Please describe the process for record keeping supervisory sessions with a student, and the student orientation process to the agency, OT services and the fieldwork experience. *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 patterns–Description (respond to all that apply)

- 1:1 Supervision Model:
 Multiple students supervised by one supervisor:
 Collaborative Supervision Model:
 Multiple supervisors share supervision of one student, # supervisors per student:
 Non-OT supervisors:

9. Describe funding and reimbursement sources and their impact on student supervision. *ACOTE Standards B.10.3, B.10.5, B.10.7, B.10.14, B.10.17, B.10.19*

Status/Tracking Information Sent to Facility

To be used by OT Academic Program

ACOTE Standards B.10.4, B.10.8, B.10.9, B.10.10

Date:

Which Documentation Does The Fieldwork Site Need?

A Fieldwork Agreement/ Contract?

OR

A Memorandum of Understanding?

Which FW Agreement will be used: OT Academic Program Fieldwork Agreement Fieldwork Site Agreement/ Contract

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

Type of Business Organization (Corporation, partnership, sole proprietor, etc.):

State of Incorporation:

Fieldwork Site agreement negotiator:

Phone:

Email:

Address (if different from facility):

Street:

City:

State:

Zip:

Name of student: **Potential start date for fieldwork:**

Any notation or changes that you want to include in the initial contact letter:

Information 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:

Amer

References

- ACOTE (2018). Accreditation Council for Occupational Therapy Education: Standards and Interpretive Guide.
- American Occupational Therapy Association. (2020). Occupational therapy practice framework: Domain and process (4th edition). *American Journal of Occupational Therapy*, 74(Supplement 2), 7412410010p1–7412410010p87. doi: <https://doi.org/10.5014/ajot.2020.74S2001>
- American Occupational Therapy Association. (2015). Philosophy of occupational therapy education. *American Journal of Occupational Therapy*, 69, 6913410052p1-6913410052p2. <https://doi.org/10.5014/ajot.2015.696S17>.
- American Occupational Therapy Association. (2017). Vision 2025. *American Journal of Occupational Therapy*, 71, 7103420010. <https://doi.org/10.5014/ajot.2017.713002>
- Christiansen, C. H., Baum, C. M., and Bass, J. B. (2015). Health, occupational performance, and occupational therapy. In C. H. Christiansen, C. M. Baum & J. B. Bass (Eds.), *Occupational therapy: Performance, participation and well-being* (pp. 7-21). Thorofare, NJ: SLACK Incorporated.
- Schaber, P. (2014). Conference Proceedings—Keynote address: Searching for and identifying signature pedagogies in occupational therapy education. *American Journal of Occupational Therapy*, 68, S40–S44. <https://doi.org/10.5014/ajot.2014.685S08>
- World Health Organization. How to use the ICF: A practical manual for using the International Classification of Functioning, Disability and Health (ICF). Exposure draft for comment. October 2013. Geneva: WHO.