



*Occupational
Therapy Program*

Level I & II Manual for Fieldwork
2016 - 2018

LEVEL I & II MANUAL FOR FIELDWORK

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Milligan College
Graduate Program in Occupational Therapy

Section I

General Information
Regarding Fieldwork

The Purpose of Fieldwork Experiences

According to the AOTA document “The Purpose and Value of Fieldwork Education,” adopted by the Representative Assembly in 2003, the purpose and value of fieldwork education is to give students the chance to integrate classroom knowledge with practical knowledge and skills through observation of professional role models and participation in the occupational therapy process. Development of competent entry level generalists is the objective of fieldwork experiences.

Supervised fieldwork experience has been recognized as a valuable and integral part of the occupational therapy education process throughout the development of the profession. It is intended to compliment academic preparation by offering students additional opportunities to grow, learn to apply knowledge, develop and test clinical skills, and validate and consolidate those functions that comprise professional competence, including service management and research.

Upon successfully completing course work and Level II fieldwork, students are eligible to take the examination administered by the National Board for Certification in Occupational Therapy. Mutual understanding of the meaning of the minimum entry-level competence defined in AOTA’s official Entry-Level Role Delineation of OTRs and COTAs is necessary among the students, academicians and clinical educators involved. Such understanding will help students value the relevance of the learning experiences offered in both the academic setting and the clinical settings as opportunities to develop the skills and abilities identified in the role delineation report.

Like other basic professional education programs, this program provides a sequence of instruction that emphasizes the knowledge, skills, and values required to practice occupational therapy at entry-level proficiency. The professional master’s degree program in occupational therapy at Milligan College is accredited by the Commission on Colleges, the Southern Association of Colleges and Schools, and the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association, Inc. ACOTE accreditation decisions are based on *The 2011 Accreditation Council for Occupational Therapy Education Standards for the Occupational Therapist*.

Each fieldwork education center is expected to formulate clinical education objectives consistent with the outcome objectives measured by the fieldwork performance report or the fieldwork evaluation form and the entry-level competence identified in the role delineation report.

Introduction to Fieldwork

An integral part of an educational program is fieldwork experiences as noted by the hierarchical progression from student exposure with practicing therapists to active student participation in clinical settings. It is through this progression of educational experiences that the student becomes familiar with the clinic and its operations. A preliminary level occurs during the first semester of the first year. As part of the Fundamentals of Occupational Therapy course, students have the opportunity to listen to presentations given by clinicians from a variety of fieldwork settings throughout the area and state. During the second, third and fourth semesters, students are involved in Level I fieldwork placements. These placements are designed to enhance the didactic courses and to provide initial and basic experiences in directed observation and participation in selected settings.

Level II fieldwork placements occur at the end of the second year after all course work is completed. Two supervised placements which emphasize the application of an academically acquired body of knowledge provide in-depth experience in the responsibilities of delivering healthcare services through occupation based, client centered interventions..

Level I Fieldwork

You are required to complete all Level I fieldwork placements by the start of your Level II fieldwork placements. Level I fieldwork involves placement in three different facilities. Objectives have been established for these placements and can be found in the fieldwork manual. In the second semester (spring) you will go out on your first placement which will be in pediatrics. The second placement will be in psychosocial or community based settings. This will occur during your third semester (fall). Your third placement will be in your fourth semester (spring) and will emphasize physical dysfunction.

The purpose of Level I fieldwork is to give students directed observation and participation in selected fieldwork settings. Placements may include experiences directly related to occupational therapy as well as other situations to enhance an understanding of the developmental stages, tasks, and roles of individuals throughout the life span. In addition, the placements may involve incapacitated or well populations and age-specific or diagnosis-specific clients. The fieldwork settings can be utilized to enhance the student's beginning skills in observation, interviewing and task analysis.

Level I fieldwork placements can be supervised by academic or clinical occupational therapy personnel. In some circumstances, supervision may also be provided by professionals, such as teachers, nurses, social workers, etc., who are knowledgeable about occupational therapy and who are cognizant of the goals and objectives of the Level I fieldwork placement.

First year placements are based on the availability of reservations. Level I fieldwork will be assigned and scheduled at the discretion of the fieldwork coordinator and the Occupational Therapy Faculty Council. Students' requests for particular sites, dates or geographic locations cannot be guaranteed. The fieldwork coordinator makes all placements to assure that students receive the various clinical experiences needed. Once the student has been notified of the facility and dates, changes can occur in one of three ways: 1) The facility may cancel the reservation; 2) The student may petition the faculty (see Student Manual, Appeal Form); 3) The academic fieldwork coordinator may make an administrative decision to withdraw the student.

At the end of each Level 1 rotation you are required to send a hand written thank you note to your fieldwork supervisor the week after your rotation.

Level I Fieldwork Experience Sequence

Level I-A Fieldwork Practicum Experience (Pediatrics)

During the second semester (spring), students participate in a formal fieldwork placement in a pediatric occupational therapy setting. We have pediatric fieldwork sites available in various locations across the country. This practicum traditionally consists of a one week rotation, with the students attending clinic every day for one week or one day a week for five consecutive weeks.

Level I-B Fieldwork Practicum Experience (Psychosocial/ Non-Traditional)

During the third semester (fall), students will participate in a fieldwork placement in a psychosocial or community-based occupational therapy setting. These sites are available in various locations across the country. This practicum traditionally consists of a one week rotation, with the students attending clinic every day for one week or one day a week for five consecutive weeks.

Level I-C Fieldwork Practicum Experience (Adult Physical Dysfunction)

During the fourth semester (spring), students will participate in a fieldwork placement in a physical dysfunction occupational setting. These sites are available in various locations across the country. This practicum traditionally consists of a one week rotation, with the students attending clinic every day for one week or one day a week for five consecutive weeks.

Milligan College
Graduate Program in Occupational Therapy
Level II Fieldwork

Level II fieldwork involves a minimum of 24 weeks' full-time (approximately six months) of Level II fieldwork. Normally students are placed in two different facilities for three months each. Students are required to do at least one rotation in physical dysfunction and may choose pediatrics, psychosocial or a second physical dysfunction experience. There is also an optional third Level II fieldwork placement that is 6-12 weeks in duration and is in an approved setting of the student's choice. The Occupational Therapy Faculty Council meets to approve all Level II fieldwork placements to assure the placements fit the needs of the student. Students will not be allowed to be placed in a facility where they have previously worked, are under contractual agreement or where they completed their Level I fieldwork rotation. It is the policy of the graduate program in occupational therapy to require full-time students to complete fieldwork in six months. In extenuating circumstances requiring approval from the Fieldwork Coordinator, the Level II fieldwork may be completed on a part-time basis as defined by the fieldwork placement in accordance with the placements usual and customary personnel policies as long as it is at least 50% of a full-time equivalent at that site. Please note that if the facility typically works a nine or ten hour day, then the student's total hours will be greater than 940 hours). **All occupational therapy students must complete Level II fieldwork within 24 months following completion of academic preparation (didactic portion). To meet degree requirements, students must successfully complete two Level II fieldwork experiences within a maximum of three attempts.** Clinical sites determine the way in which clinical hours are scheduled. The fieldwork coordinator makes all placements to assure students receive the various clinical experiences needed. Final approval of all fieldwork placements is determined by the Occupational Therapy Faculty Council. **Students' requests for particular sites, dates or geographic locations cannot be guaranteed.** Once the student has been notified of the facility and dates, changes can occur in one of three ways: 1) The facility may cancel the reservation; 2) The student may petition the faculty (see Student Manual, Appeal Form); 3) The academic fieldwork coordinator may make an administrative decision to withdraw the student. Supervision of students on Level II fieldwork is provided by a certified occupational therapist with a minimum of one year of experience in a practice setting.

We strive to provide a beneficial Level II fieldwork experience through a number of means. Written, telephone, e-mail, online (course platform) and on-site communication methods used for dialogue between the fieldwork coordinator, the student, and the fieldwork site. Fieldwork evaluation forms are completed by fieldwork educator and then reviewed by the fieldwork coordinator. The evaluations are used to help determine the projected academic needs of students to meet the requirements of the fieldwork setting in the future. The student evaluations of the fieldwork site aid in determining areas of strength or weakness in academic preparation, as well as in appropriateness of the fieldwork site for future placements.

Milligan College
Graduate Program in Occupational Therapy
Policies and Procedures for Fieldwork Levels I & II

Policies are set in accordance with the standards set forth by the American Council for Occupational Therapy Education (ACOTE) and the policies of the Milligan College Graduate Program in Occupational Therapy in conjunction with the clinical facilities that provide Level I and Level II fieldwork placements. Fieldwork is coordinated by the academic fieldwork coordinator.

1. Students are required to complete a minimum of 105 hours of Level I fieldwork; usually during the second, third, and fourth semesters. Normally these 35-40 hour clinical experiences involve placement in three different facilities for a total of 105 to 120 hours.
2. Conducting yourself in a professional manner is of utmost importance during fieldwork. Any action not deemed appropriate will be addressed by the AFWC and Faculty Council if necessary. Adhering to the policies outlined in the professional behavior, academic integrity, Occupational Therapy Code of Ethics and Occupational Therapy Honor Code are required during all fieldwork rotations. Failure to adhere to the program policies and professional code of ethics during Level I or II fieldwork placements may result in failure of the rotation and dismissal from the program.
3. Students must successfully complete all Level I fieldwork placements prior to starting any Level II fieldwork.
4. Level II fieldwork involves a minimum of 24 weeks (six months) full-time. Normally students are placed in two different facilities for three months each. It is the policy of the Graduate Program in Occupational Therapy to require full-time students to complete fieldwork in six months. A minimum of 24 weeks totaling 940 hours is acceptable to meet this six-month requirement. Clinical sites determine the way in which clinical hours are finally scheduled. All occupational therapy students must complete Level II fieldwork within 24 months following completion of academic preparation. **To meet degree requirements student must successfully complete two Level II fieldwork placements within a maximum of three attempts.**
5. The Occupational Therapy Faculty Council meets to approve all Level I and II fieldwork placements to ensure the placements fit the needs of the student.
6. Clinical placements are made only to those contracted facilities in which a reservation is available. Students may be given an opportunity to provide input regarding placement, but the fieldwork coordinator (in consultation with the Occupational Therapy Faculty Council) reserves the right to make final decisions regarding all fieldwork placements. Placements are made to ensure students receive a variety of experiences with groups across the life span, persons with various psychosocial and physical performance deficits, and diversity in service delivery models reflective of current practice in the profession. Student requests for a particular site, date of placement, or geographic location cannot be guaranteed.
7. Clinical sites reserve the right to make final decisions regarding acceptance of students for placement in their fieldwork program. However, Milligan College only obtains letters of understanding from facilities with nondiscriminatory policies.
8. Level I fieldwork is supervised by qualified personnel including, but not limited to, certified occupational therapists, certified occupational therapy assistants, teachers, social workers, nurses, physical therapists, etc. Supervision of students on Level II fieldwork is provided by a certified occupational therapist with a minimum of one year of experience.
9. All fieldwork placements are final unless canceled by the fieldwork facility or by the academic fieldwork coordinator. **If a change in placement is needed due to extenuating circumstances (e.g., death in family, personal illness), the student may petition the program at least three months prior to the start of the**

fieldwork. Petitions not submitted in a timely fashion, at least one week before a scheduled faculty meeting, may not be reviewed. The faculty council and/or program director reserves the right to deny the student's petition for fieldwork change, and will provide the rationale for all petition decisions to the student in writing. In the event the fieldwork placement of the student has been canceled, the college will place the student in another facility where the college has a letter of understanding meeting the guidelines and educational needs of the student. Depending on the timeliness of the cancellation by the site involved, the college cannot guarantee the following: ability to start at the originally scheduled time, placement in a facility in the same geographic location or in a placement that provides a similar experience. Cancellations with short notice may also limit the student's involvement in the site selection process.

10. **Independently contacting facilities to make one's own arrangements for a fieldwork placement or to make unauthorized changes in the scheduling of an assigned placement is prohibited. Students acting on their own in this manner may be subject to the disciplinary procedures for academic misconduct. Making unauthorized arrangements include, but are not limited to, the student or student's family or friends contacting sites without permission from the academic fieldwork coordinator regarding the ability of the site to take and/or start the student on a specified date, or negotiate or facilitate the letter of understanding between the facility and the college. Unauthorized changes in scheduling include, but are not limited to, calling the clinical fieldwork supervisor without the academic fieldwork coordinator's knowledge to change the college-negotiated starting and ending dates, schedule vacations or requesting time off for other commitments, etc. Unless due to unforeseen circumstances, students are required to complete all fieldwork placements as scheduled by the college with the facility.**
11. Students are responsible for arranging their own transportation and housing arrangements during fieldwork. If housing is available for the location the student is assigned, it is up to the student to contact the facility regarding interest in the housing arrangements described by the facility. Facilities indicating housing is available are not under obligation to provide the housing. In no instance should the facility be expected to provide transportation and/or assist with transportation arrangements. Problems with transportation and housing are not acceptable reasons for requesting a change in fieldwork assignment as students are given placement information well in advance. Students are able to indicate their fieldwork site preferences prior to the fieldwork selection process. However, no fieldwork request can be guaranteed.
12. Absences due to illness are handled between the student and fieldwork educator and **WILL** necessitate making up days missed. All absences for Level I fieldwork are made up at the convenience of the site. Days off due to facility-recognized holidays need to be deducted from the total time scheduled at the site as well to ensure completion of the minimum 940 hours (470 hours for each 12 week rotation). Consequently, students schedule at their own risk any trips or vacations planned immediately after scheduled fieldwork due to the potential need to make up any time lost due to unforeseen circumstances, e.g., illnesses, unexpected fieldwork cancellations, and fieldwork failures requiring the scheduling of additional fieldwork experiences.
13. Prior to all clinical placements, students are required to disclose information pertaining to any criminal convictions involving abuse, neglect, or mistreatment of an individual. An answer of "yes" does not necessarily disqualify the student, but does require additional explanation. In addition, **a criminal history background check and drug screening will be required.** The FW Coordinator will provide students with specific instructions to fulfill this requirement.
14. Students requiring reasonable accommodations at the clinical site for an ADA documented disability are responsible for providing this request in writing to the academic fieldwork coordinator at least six months before the placement, when possible. The academic fieldwork coordinator, in conjunction with the clinical facility, reserves the right to determine whether the requested accommodations are reasonable, do not present undue hardship to the facility, and do not place patients in jeopardy. The clinical site also reserves the right to make alternative suggestions for reasonable accommodations. Students unable to perform, even with reasonable accommodations, the essential functions of the occupational therapist as defined by the clinical site and/or the OT Student Performance Essentials and Critical Demands as outlined in the OT student manual are administratively withdrawn from the placement. Facilities are not required to offer reasonable accommodations to students who do not elect to disclose this information to the fieldwork site prior to their fieldwork rotations.

15. Once placement is confirmed it is the responsibility of the student to review the facility files for additional site information. You may want to review this information prior to asking for a certain facility.
16. Based on current recommendations from the Centers For Disease Control and Prevention, students are required to provide proof of immunity to Rubella/Rubeolla, Varicella, Measles, Mumps and Hepatitis B prior to entering fieldwork. Additionally, students must receive an annual flu vaccine and complete December Health Screenings (including physicals, labs, drug screenings and TB tests) through Wellmont WellWorks annually by January (specific dates determined by AFWC) of each year. Students must also supply proof of current health insurance; American Heart Association approved CPR & First Aid training. Each student will be provided information related to online document housing accounts. All appropriate documentation must be uploaded to the designated account. The AFWC will review all required documentation. It is the responsibility of the student to upload current health records to the approved account by the stated deadline each academic year. Students must also keep copies of all fieldwork documents for their personal file. Students failing to complete and upload appropriate documentation by the stated deadline **will not** be eligible to attend classes or proceed to their clinical placements until requirements are met. Any absence resulting from failure to submit required documentation will be deemed unexcused.
17. All students must follow universal precautions in the care of **ALL** clients. Following Center for Disease Control guidelines, universal precautions apply to blood, all body fluids, and tissue (e.g., wound eschar). Body fluids which occupational therapy students may come in contact with include synovial fluid, wound fluids, nasal secretions, sputum, saliva, sweat, tears, urine, feces, and vomitus. Students must assume responsibility, when appropriate, for wearing protective barriers, i.e., gloves, gowns, masks, and protective eye wear, to reduce the risk of exposure to potentially infective materials. Additionally, students must assume medical, legal, and financial responsibility for the follow-up care associated with any unprotected exposure.
18. Students must assume responsibility for reporting all accidental exposures to blood or body fluids to their fieldwork educator. The fieldwork educator will assist the student in following facility procedures, e.g., obtaining first aid for any wound and completing an incident report. The fieldwork coordinator and the fieldwork educator will provide the student with a Student Blood borne Pathogen Exposure form, of which a copy of the completed form will be maintained in the student's health record. A copy of the exposure form is also in the fieldwork section of this student manual and is included in this agreement.
19. Students are required to satisfactorily complete the course requirements for Universal Precautions Training and Confidentiality Training and submit the signed forms prior to any fieldwork experiences.
20. Students are required to review, sign and submit the Rights and Responsibilities of Student form before beginning any fieldwork.

At least six weeks before fieldwork begins, the student is expected to contact the clinical supervisor in order to confirm the reservation dates, formally introduce themselves, and ask any site specific questions. Students are required to create and maintain an online account for the purpose of housing required documentation as outlined by the program. Students are responsible for ensuring fieldwork sites and supervisors receive all necessary documentation in a timely manner prior to the beginning of the rotation.

21. **Students are required to have a Milligan College e-mail account and check it regularly throughout the summer (at least once per week) and during Level I and II Fieldworks (at least once per week).**

22. Administrative withdrawal from Level I or II fieldwork may occur for the following reasons:

- a) Academic standing
- b) Misconduct
- c) Failure to comply with facility and/or college policies and procedures
- d) Failure to complete required student information for student file folders (i.e.: health record, CPR, First Aid, etc.)
- e) Placing patients or clients in physical or emotional jeopardy
- f) Failure to pay for the five hours of tuition prior to the beginning of the fall semester
- g) Failure to turn in required assignments
- h) Failure to comply with:
 - (1) Insurance and health record requirements
 - (2) Successful completion of Universal Precautions Training
 - (3) Completing “Rights and Responsibilities of Student” form and “Personal Data” form
 - (4) Uploading required documents to online database as determined by AFWC
 - (5) Failure to submit required documentation to fieldwork supervisors and/or sites in a timely manner.

24. Student failure (Unable to complete due to student/supervisor incompatibility or receives insufficient grade to pass.)

- a) The facility informs the academic fieldwork coordinator and the student when a student is failing a Level I or Level II fieldwork.
- b) The academic fieldwork coordinator will consult with both the facilities’ clinical supervisors and the student as to what actions need to occur in order to improve student performance. This will include a time frame for anticipated results.
- c) In the event that a student does not successfully complete a Level I or Level II fieldwork the coordinator, places the student at another available site for a time commitment that meets ACOTE requirements, the requirements of the academic program, and the requirements of the proposed site. The fieldwork coordinator will consult with the program director, faculty, and the student regarding those behaviors or actions that were identified as problem areas on the failed fieldwork experience.
- d) Failure of a Level I or Level II fieldwork may require the student to complete specified course work before a placement can be made at another fieldwork site.
- e) To meet degree requirements, students must successfully complete three Level I fieldwork placements (e.g., pediatrics, psychosocial, and adult physical dysfunction) within a **maximum** of **four** attempts.
- f) To meet degree requirements, students must successfully complete two Level II fieldwork placements within a **maximum** of **three** attempts and 24 months from end of coursework.

25. Appeal: The student has the right to appeal all fieldwork failures or other decisions that may adversely affect the student's completion of fieldwork.
- a) The student must first contact the academic fieldwork coordinator about his or her belief that he or she was graded unfairly. If the student is not satisfied with the outcome,, he or she may then bring the issue to the program director. The director may wish to discuss the issue further with the occupational therapy faculty before meeting again with the student. If the issue is still not resolved in the student's mind, he or she may then continue his or her appeal to the vice president of academic affairs and academic dean. The chief academic officer may choose to resolve the issue or to constitute a review board.
26. Students must successfully complete both Level II fieldwork assignments in the required timeframe to be eligible for graduation and the NBCOT examination.
27. Fieldwork settings vary greatly as do the physical demands associated with each setting. Each placement has essential functions specific to the site. Please refer to your student manual for the OT Student Performance Essentials and Critical Demands for a list of minimum activity requirements. You will need your physician to review this list during your physical and make any necessary comments if you anticipate any needed accommodations.

Milligan College provides reasonable accommodations for students with disabilities. To receive accommodations, students must make a formal request according to the policy outlined on pages 30-31 of the current college catalog. Once your request has been evaluated, a list of accommodations will be prepared for distribution to your professors. If you have additional questions, please contact the Director of Student Success and Disability Services at 461-8981.

Level II Fieldwork Placement

1. The Fieldwork Coordinator will provide the students with a list of available options for each Level II rotation. Students will be required to respond by the deadline given with a list of their choices in order of preference based on instructions given by the AFWC.
2. Placement will occur according to the Milligan College rotation dates. Some sites use AOTA suggested Level II fieldwork rotation dates resulting in students completing their rotations after Milligan College's graduation date. If this happens, students may not be able to graduate with their class. Students must have completed all of their fieldwork before they can be hooded and walk across the stage.

Procedure for Requesting a New Level 2 Fieldwork Contract

1. Before making a request, check with the fieldwork coordinator to see if Milligan already has an existing contract with the facility you are interested in. Remember, if Milligan College has an existing contract with the facility, you are **not permitted** to contact the facility under any circumstances unless given permission to do so by the fieldwork coordinator.
2. If Milligan does not have a contract with the facility, you may schedule a meeting with the AFWC to present the request and logical rationale. At that point, the AFWC will consult the Director of the program and use their discretion to make a determination regarding the request. Once the student has been notified of approval to pursue a new contract, the student can then contact the facility to obtain the information needed to complete the application requesting a new fieldwork contract. This form can be found in the forms portion of the manual. Incomplete application forms will not be considered.
3. Return the completed form to the fieldwork coordinator by the Tuesday following Thanksgiving Break of your first year for Level II fieldwork contracts.

**Milligan College
Graduate Program in Occupational Therapy**

Section II

Objectives & Forms

Milligan College
Graduate Program in Occupational Therapy
Objectives for Level I Fieldwork Experiences

Please refer to the following documents for specific assignments related to the Level I FW Objectives: , SOAP Note, Chart Review, and Intervention Plan.

A. Screening, Evaluation, and Referral

The process of screening, evaluation, and referral as related to occupational performance and participation must be culturally relevant, based on theoretical perspectives, utilize models of practice, contain frames of reference, and available evidence. The student will be able to:

1. In collaboration with the clinical fieldwork educator, select and use when appropriate, standardized and non-standardized screening and assessment tools to determine the need for occupational therapy intervention. These may include, but are not limited to, specific screening tools; assessment; skilled observation; checklists; histories; consultations with other professionals; and interviews with client, family, and significant others.
2. Observe and use appropriate procedures and protocols (including standardized formats) when administering assessments.
3. Observe and assist clinical fieldwork educator when appropriate in the evaluation of client(s)' occupational performance (i.e., ADLs, IADLs, education, work, play/leisure, and social participation). Assessment may include, but is not limited to:
 - a. The occupational profile, including participation in activities that are meaningful, and necessary for the client to carry out roles in home, work, and community environments
 - b. Client factors including body functions (e.g., neuromuscular, sensory, visual, perceptual, cognitive, mental) and body structures (e.g., cardiovascular, digestive, integumentary systems).
 - c. Performance patterns (e.g., habits, routines, roles) and behavior patterns
 - d. Cultural, physical, social, personal, spiritual, temporal, virtual contexts and activity demands that affect performance
 - e. Performance skills including motor (e.g., posture, mobility, coordination, strength, energy), process (e.g., energy, knowledge, temporal organization, organizing space and objects, adaptation), and communication and interaction skills (e.g., physicality, information exchange, relations).
4. Compare and contrast the role of the OT and OTA in the screening and evaluation process along with the importance of and rationale for supervision and collaborative work between the OT and OTA in that process.
5. Consider factors that bias assessment results, such as culture, disability status, and situational variables related to the individual and context.
6. Document occupational therapy services to ensure accountability of service provision and to meet standards for reimbursement of services, adhering to applicable facility, local, state, federal, and reimbursement agencies. Documentation must effectively communicate the need and rationale for occupational therapy services.
7. Discuss the appropriateness and mechanisms for referring clients for additional evaluation to specialists who are internal and external to the profession.

A. Intervention Plan: Formulation and Implementation.

The process of formulation and implementation of the therapeutic intervention plan to facilitate occupational performance and participation must be culturally relevant; based on available evidence; and based on theoretical perspectives, models of practice, and frames of references. The student will be able to:

1. Discuss and use when appropriate evaluation findings based on suitable theoretical approaches, models of practice, and frames of reference to develop occupation-based, client-centered intervention plans and strategies (including goals and methods to achieve them) based on the stated needs and desires of the client. Intervention plans and strategies must be culturally relevant and reflective of current evidence based occupational therapy practice. Interventions may address the following:
 - a. The occupational profile, including participation in activities that are meaningful, and necessary for the client to carry out roles in home, work, and community environments
 - b. Client factors including body functions (e.g., neuromuscular, sensory, visual, perceptual, cognitive, mental) and body structures (e.g., cardiovascular, digestive, integumentary systems).
 - c. Performance patterns (e.g., habits, routines, roles) and behavior patterns
 - d. Cultural, physical, social, personal, spiritual, temporal, virtual contexts and activity demands that affect performance
 - e. Performance skills including motor (e.g., posture, mobility, coordination, strength, energy), process (e.g., energy, knowledge, temporal organization, organizing space and objects, adaptation), and communication and interaction skills (e.g., physicality, information exchange, relations).
2. Observe and when appropriate select and provide direct occupational therapy interventions and procedures to enhance occupational performance (e.g., ADLs, IADLs, education, work, play, leisure, and social participation)
3. Demonstrate therapeutic use of self, including one's personality, insights, perceptions, and judgments as part of the therapeutic process in both individual and group interaction.
4. Describe the role of the occupational therapist in care coordination, case management, and transition services in traditional and emerging practice environments.
5. Observe and demonstrate when appropriate, the ability to educate the client, caregiver, family, and significant others to facilitate skills in areas of occupation as well as prevention, health maintenance, and safety.
6. Effectively interact through written, oral, and non-verbal communication with the client, family, significant others, colleagues, other health providers, and the public in a professionally acceptable manner.

B. Professional Ethics, Values, and Responsibilities

Professional ethics, values, and responsibilities include an understanding and appreciation of ethics and values of the profession of occupational therapy. The student will be able to:

1. Demonstrate a knowledge and understanding of the American Occupational Therapy Association (AOTA) Occupational Therapy *Code of Ethics, Core Values, and Attitudes of Occupational Therapy Practice*, and AOTA *Standards of Practice* and use them as a guide for ethical decision-making and professional interactions, client interventions, and fieldwork settings.

Site Specific Information

The Student is Responsible for Independently Obtaining the Following Information Regarding their FW Sites:

Some specific site information may be available to students upon request. Students are encouraged to research fieldwork sites for additional information.

- a) Special requirements prior to acceptance, i.e. interview
- b) Philosophy of facility
- c) Description of facility
- d) Transportation services – to and within city; bus maps
- e) Baggage – where it should be sent
- f) Housing – types, cost, laundry facilities, linens furnished
- g) Parking at center – whether a car is essential at the placement, cost, location
- h) Student health – location and extent of health services, amount and type of health insurance required
- i) Liability insurance – amount required and source
- j) Stipends, grants, and scholarships offered; amount and type of student discounts offered
- k) Meals – location, type, cost
- l) Recreational programs available to the student at the facility or within the community
- m) Other student services and programs offered
- n) Further learning experiences available – surgery observations, self-paced media
- o) Dress code for center
- p) Working hours and procedures for tardiness and absences
- q) Promotional material from the center

Student Objectives and Assignments for Level 1A Pediatric Fieldwork OT 691

The specific objectives of this pediatric experience are to have the student:

1. Demonstrate oral and written communication skills in documentation and interaction with clients, other healthcare professionals and family.
2. Use clinical reasoning skills and critical analysis to explain the types of occupational therapy interventions within the pediatric population and justification for these services.
3. Develop occupationally relevant treatments and strategies including goals and necessary methods for achieving goals.
4. Utilize critical thinking skills to determine appropriateness and relevance of occupational therapy interventions provided to client.

Level 1 Pediatric Fieldwork Assignments

You will need to refer to your observation notes in order to produce quality work for these assignments. Therefore, it is imperative that you take quality observation notes during the rotation. For your chart review and intervention plan you should choose a child that you observe early in the week. It would be great if you could see this child a few times during the week, but many children are scheduled only once so multiple observations may not be possible.

Assignment Format Requirements: Typed, 12 Arial font, double spaced, your name listed in header space top right of page. Staple Chart Review/Intervention Plan together. Reflective response will be a separate document and not attached to the Chart Review/Intervention Plan.

Due Tuesday after fieldwork:

1. Chart Review and Intervention Plan completed on same child
 - a. Brief chart review should include:
 - Name of clinical site
 - Name of supervisor(s)
 - Diagnosis of child
 - Child's age/DOB
 - Child's first name or initials ONLY (remember to protect their confidentiality)
 - b. Intervention Plan
 - Include a list of the child's problems and strengths
 - List the site's Intervention Plan/Goals as stated in the child's chart of medical record
 - NOTE: If your child's chart/medical record does not have these listed, you may interview the supervising OT to help you collect info. If your site does not document this information, you MUST note this in your Intervention Plan. Then, you should write the intervention plan yourself and report it as YOUR OWN
2. Reflective Response A-Reflect on the entire fieldwork experience. This should be in narrative form. **NO MORE** than 2 pages in length. Consider these questions;
 - a. Would I have worked with the clients in the manner that I observed at the site? Why or why not? Give examples.
 - b. Were interventions occupationally relevant and developmentally appropriate? Explain and give examples.
 - c. Did the interventions work toward stated goals for the clients? Explain and give examples.
 - d. What would I do differently than the OT I observed?

3 Reflective Response B-DUE FINALS WEEK IN PEDS CLASS (specific date and time TBA) NO MORE than 2 pages in length. Reflect on your FW Experience again. By this time you have been exposed to additional intervention methods and gained more knowledge related to pediatric practice. You should be able to more thoroughly describe your thoughts regarding this learning experience. Attach this response to the TOP of your first response when you submit this assignment.

Student Assignments for Level IC Fieldwork:

Practicum Experience –OT 691C

Fieldwork I Guidelines for Practicum Experiences

Professors may elect to change assignments at their discretion Please refer to your 691 course syllabus for further instructions and information.

The student is responsible for:

1. Contacting the supervising therapist if unable to attend the practicum as scheduled.
2. Making arrangements with the supervising therapist to make up missed practicums, if it is amenable to the clinic director.
3. Completing requirements as stated by the assigned site.
4. May be required to write intervention notes while on your (the student is encouraged to write them in SOAP format). **The students must have notes critiqued, corrected and signed off by the clinical supervisor prior to the end of each rotation.** Students should resubmit corrected notes to clinical supervisor for approval and then return these to your class professor or fieldwork coordinator when they are due (see OT 691 or supporting course syllabus for due dates). The criteria for note feedback are: 1) would you as a clinician place that note as a legal document in the chart, 2) if not, what needs to be done differently?
5. Selecting a patient to write one evidenced based intervention plan and one chart review. The supervisor is to review the treatment plan and chart review only for accuracy of patient data. Please note, that in some settings, patient information will not be available, i.e.: school, non-traditional, and some psychiatric settings. Return these to your class professor or fieldwork coordinator when they are due (see OT 691 or supporting course syllabus for due dates).
6. Assisting in the assessment of a patient, if possible (please see list of assessment tools). Student will not be graded on the assessment.
7. Using great care in handling identifiable patient/client information; initials should be used on written material. At the end of the practicum, students should destroy any material they do not wish to keep, and should carefully blacken out any identifying data in material, which they wish to keep for reference.
8. Appearance being in accordance with policies established by the faculty and as suggested by the assigned clinic. You will need to have your name badge on at all times (see fieldwork data form in the PRC file).
9. Contacting the appropriate person for help with a problem that occurs in relation to the practicum. An appropriate person to contact would be the supervising clinical educator, the O.T. program fieldwork coordinator, or the seminar instructor.

Method of Course Evaluation:

Level I fieldwork assignments (A, B, C) are graded using letter grades (A, B, etc.) and the grades are based upon:

- a. The grade given to you by your clinical instructor on your fieldwork evaluation form
- b. Completion of required assignments per your OT 691 or supporting course syllabus.
- c. Completion and return of the Student Evaluation of Fieldwork Experience form on the facility where you did your fieldwork

The above will be different for non-traditional FW Sites. Please refer to the student requirements for non-traditional fieldwork Sites. These requirements may change in order to better accompany the supporting course(s) each semester.

Milligan College
Graduate Program in Occupational Therapy
Criteria for SOAP NOTE

Content

A. Subjective

- | | | |
|---|---|---|
| 1. Appropriate comments made by patient included | Y | N |
| 2. If not included explains why (patient aphasic, etc.) | Y | N |

Total points in area: 2

B. Objective

- | | | |
|---|---|---|
| 1. Describes treatment session in sufficient detail | Y | N |
| 2. Statements made were objective and quantifiable | Y | N |

Total points in area: 2

C. Assessment (Interpretation of Performance)

- | | | |
|---|---|---|
| 1. Stated conclusions regarding performance/potential for change or improvement | Y | N |
| 2. Describes factors that will affect patient's ability to meet therapeutic goals | Y | N |
| 3. Proves/justifies continuation, change or D/C of services | Y | N |

Total points in area: 3

D. Plan (goals)

- | | | |
|--|---|---|
| 1. Stated goals for next visit | Y | N |
| 2. Goals relate to present level of function | Y | N |
| 3. Goals are within scope of O.T. | Y | N |

Total points in area: 3

For a total of 10 points

Total points for Assignment _____

Milligan College
Graduate Program in Occupational Therapy
Chart Review Assignment

OBJECTIVES:

The student will:

- a) investigate a diagnostic category from the textbook and clinical perspective
- b) identify correlations and discrepancies between the clinical and classical information
- c) review current O.T. treatment plans

FORMAT: *Chart review assignment **must be completed on a computer**, using the outline below. The same patient **must** be used for both the chart review, the treatment plan and SOAP notes. All documents must be turned in together.*

DUE TUESDAY AFTER FIELDWORK

CHART REVIEW OUTLINE

I. CLASSICAL CASE: (from tests/references)

Diagnosis and definition
Etiology
Symptoms
Treatment (medical, surgical, therapy)
Prognosis

II. ACTUAL CASE:

A. Patient Information (from chart)

1. Initials Sex Race Age
2. Diagnosis
3. Date of admission to health-care facility
4. Date referred to OT
5. Date of discharge

B. Social History (from chart or OT/facility staff)

1. Marital status
2. Religion
3. Family background
4. Occupational history
5. Educational history
6. Social/cultural factors (any social/cultural factors having possible bearing on condition, prognosis, or treatment)

C. Medical History (from chart or OT/facility staff)

1. Previous illness (pertinent to current diagnosis or of importance)
2. History of present illness
3. Symptoms
4. Treatment – Medical
 - a. Type medical, surgical, psychiatric
 - b. Physical or emotional status of patient at this time
 - c. Prognosis (per physician)

5. Treatment – Occupational Therapy (from chart or OT staff)
 - a. Referral statement
 - b. Type of program (ward, clinic, inpatient, or outpatient) and number of treatments/weeks
 - c. Observations done/evaluations given/data collected
 - d. Problems identified based on data analysis (patient’s needs and limitations)
 - e. Treatment goals/objectives (long and short term); include treatment media/activities/interpersonal approaches to be used

III. CONCLUSIONS:

- A. Identify areas in which the clinical case follows text book criteria (i.e. symptoms, treatment, age of onset, severity, etc.)
- B. Identify areas that make this case atypical

IV. REFERENCE LIST:

A minimum of two citations are required following APA guidelines. References can include texts, journals, or other APA approved sources. Please refer to your APA style manual.

V. SIGNATURE:

Signature of clinical supervisor verifies patient data only

May be handwritten at time of clinical rotation with therapist’s signature at bottom of assignments, but must be typed when turning it into your fieldwork coordinator or supporting course instructor.

Please note:

- Do not use abbreviations in the text of the chart review. It is not medical documentation.
- Be sure to cite your reference sources in the text of the assignment as well as the reference list using correct APA style.

Milligan College
Graduate Program in Occupational Therapy
Intervention Plan and Reflection Assignment

Objectives:

Through direct observation and review of patient records, the student will:

- a) Identify treatment principles and treatment approaches to use for the problems identified.
- b) Demonstrate oral and written communication skills in documentation, interactions with healthcare professionals and family.
- c) Develop **purposeful, occupationally relevant activities** that address the treatment goals and principles for each client..
- d) Understand the roles, requirements and functions related to supervision of COTAs and therapy staff

Format: Typed, 12 Arial Font, your name listed in header space top right of page. The intervention plan must be done on the same patient as the chart review and SOAP. All documents are to be turned in together. Be **creative, purposeful, and functional.**

Intervention Plan Outline

Please follow this format:

LTG1
 STG 1
 OT Activity 1
 OT Activity 2
 STG 2
 OT Activity 1
 OT Activity 2
LTG 2
 STG 1
 OT Activity 1
 OT Activity 2
 STG 2
 OT Activity 1
 OT Activity 2

List the site's goals as stated in the client's medical record/evaluation on a separate page attached to your intervention plan.

Evidence-based practice is a **MUST** to justify this intervention plan and its supporting activities. You are **REQUIRED** to provide three researched references to support your intervention plan. A minimum of three citations are required following APA guidelines. References can include texts, journals, or other APA approved sources. Please refer to your APA style manual and attach your reference list to the end of your intervention plan.

Reflective Response

This is a reflection covering your entire fieldwork experience. **NO MORE** than 2 pages. This assignment should not be given to your supervising therapist and should be completed upon completion of rotation. Consider these questions:

- a) Were the interventions occupationally relevant? Explain and provide examples
- b) Did the treatment session work towards the stated goals? Explain and provide examples
- c) What would I do differently?

You **must** have the supervising therapist sign the rough draft of your chart review, SOAP notes and intervention plan. This may be hand written at time of clinical rotation with therapist's signature at the bottom of the assignments. **DO NOT** include the reflective response as a document to be signed by supervising therapist.

Milligan College
Graduate Program in Occupational Therapy
Samples of OT Assessment Tools

Below are examples of OT assessment tools that students may observe or administer. If possible each student will do one evaluation at each Level I fieldwork rotation. Copies of evaluations marked with an asterisk (*) are stored in the PRC.

A. INTERVIEW

B. ADLS

1. Scoreable Self-Care Evaluation*
2. Kenny Evaluation
3. Driver Evaluation

C. WORK

1. Blankenship Functional Capacity Assessment
2. Pre-Vocational Test
3. Social and Pre-Vocational Information Battery

D. PLAY/LEISURE

E. SENSORIMOTOR

1. Sensation
 - 2 point discrimination*
 - Semmes Weinstein Monofilaments*
2. Neuromuscular
 - Purdue Pegboard*
 - Minnesota Rate of Manipulation Test*
 - 9 hole peg test*
 - Erhardt*
 - Functional Evaluation
3. SI
 - Sensorimotor Performance Analysis*
 - Berry Visual Motor Evaluation
 - Motor Free Perceptual Test*
 - Frostig

F. COGNITIVE

1. Vineland Adaptive Behavioral Skills*
2. Mental Status Exam
3. Saint Louis University Mental Status Exam

G. PSYCHOSOCIAL

1. COTE*
2. BAFPE*
3. Adolescent Role Assessment
4. Bender-Gestalt WE HAVE
5. Culture Free Self-Esteem Inventory
6. Good enough "Draw a Person"

H. DEVELOPMENTAL

1. Gesell
2. Bayley*
3. Miller Assessment for Preschoolers*
4. Denver Developmental Screening*
5. Oregon Scale of Developmental Motor Progression
6. Peabody Developmental Motor Scale*
7. Bruniks-Oseretsky*
8. M.V.P.T.*
9. LAP/Early LAP
10. Battelle Developmental Inventory
11. School-based assessment
12. T.V.M.S.*

I. OTHER

1. Hooverwood Geriatric Evaluation

Milligan College
Graduate Program in Occupational Therapy
Description of Non-Traditional Level I Fieldwork Sites

As the profession of occupational therapy moves toward community based practice and tries to keep its influence in psychosocial clinical settings, educational programs must balance the preparation of students for both traditional hospital practice and community-based or psychosocial health roles. An educational opportunity for developing skill in community health or psychosocial health services has been established for Level I fieldwork in the MSOT program at Milligan College.

The specific objectives of this alternative experience are to have the student:

1. Develop an awareness of psychosocial issues and/or community health concerns
2. Identify the various community agencies providing services to meet those health needs
3. Take an active role in the agency's programming for clients
4. Recognize the value of an interdisciplinary approach in the community health network
5. Be a responsible and independent problem-solving agent
6. Identify the potential for occupational therapy services in the community and/or psychosocial health care settings

The ultimate goal is to develop therapists who feel more confident working in a psychosocial or non-traditional setting, more skillful in program development, and who are more mature in assuming responsibility for the complex and varied demands of community health service. You, the fieldwork coordinator, and instructor of the class linked with the fieldwork rotation will need to formulate goals that you wish to accomplish during your fieldwork rotation.

The student is required to spend 40 hours per week per rotation at a specific setting. Assignments include:

1. Occupation-Box write up. This project will be explained in class.
2. Occupational narrative assignment
3. One short experience paper (maximum length five typed pages –Arial font size 12 with 1½ line spacing) on the following areas:
 - a) Brief narrative of the student's expectations, responsibilities, and impression of a non-traditional or psychosocial site
 - b) Description of the facility: gather information about the facility, its organizational structure, sources of funding, and data about the clients and nature of the problems
 - c) Intervention strategies: evaluate the facility and the effectiveness of its intervention approach upon the clients
 - d) Occupational therapy potential: project the potential contribution of O.T. within the setting. You might need to describe how occupational therapy services could benefit the clients.
4. The facility may require additional assignments. The student is responsible to complete the assignments and submit a final copy to the academic fieldwork coordinator.

Spend no more than two pages total on sections A and B. At least three pages of this paper should be devoted to sections C and D listed above. THIS PAPER CAN BE COMPLETED AT HOME FOLLOWING THE COMPLETION OF THE FIELDWORK ROTATION; HOWEVER SOME RESEARCH WILL NEED TO BE DONE AT THE FACILITY SO YOU CAN ADEQUATELY RESPOND TO SECTIONS A AND B OF THIS PAPER.

At the end of the practicum rotation, a student evaluation is completed by the supervisor and a feedback site form by the student.

Reference: "An Educational Strategy for O.T. Community Service", Cromwell & Kielhofner, AJOT, Nov-Dec, 1976, Vol. 30-10pp. 629-633

General Information on Fieldwork I Assessment Tools

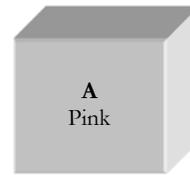
Part of the purpose of this manual is to introduce the student to **Level I A, B, and C Fieldwork** clinical experiences. The FWI A, B, and C are based on a letter grade system. (See Grading System for Fieldwork I A, B & C.)

There are 2 assessment tools that need to be returned to the fieldwork coordinator:

1. **STUDENT EVALUATION FORM:** this form gives the clinical instructor the opportunity to assess the student's performance in the clinic.
2. **STUDENT EVALUATION OF THE FIELDWORK EXPERIENCE FORM:** this form is to be completed by the student, providing feedback to the clinical instructor about the kind of clinical experience received in that facility.

The student evaluation and the facility form are discussed on the last day of the practicum with the clinical instructor. (See Section IV – Forms)

Milligan College
Graduate Program in Occupational Therapy
Level I Practicum A - Pediatrics



STUDENT NAME: _____

UNIVERSITY NAME & ADDRESS: Milligan College, P. O. Box 130,
 Milligan College, TN 37682 _____

FACILITY NAME: _____

FACILITY ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE #: _____ FAX #: _____

TYPE OF SETTING: _____

DATES OF PLACEMENT: _____

TOTAL NUMBER OF HOURS COMPLETED: _____

Please respond to items 1-27 by placing checks in the appropriate columns:

3 points= [**Satisfactory (S)**: student demonstrates skills adequate for educational background];

2 points= [**Emerging skills (E)**: student just starting to demonstrate these skills for educational level];

1 point= [**Needs improvement (NI)**: student needs improvement for educational background level]; or

0 points= [**Unsatisfactory (U)**: did not even meet the basic skill requirements].

Designate **N/A (worth 3 points)** if the items are not applicable or not addressed.

Please add clarifying statements and /or examples in the comment column.

Must have clarifying statements and/or examples for NI, U, and N/A.

TASK OR PROFESSIONAL BEHAVIOR	3 S	2 E	1 NI	0 U	COMMENTS: Required for needs improvement (NI), unsatisfactory ratings (U), and not addressed (N/A)
ASSESSMENT					
1. Gathers necessary information on the assigned patient/client(s) by record review or interview (i.e., occupational profile).					
2. Performs or assists with one evaluation or identifies possible evaluations and discusses with supervisor.					
3. Identifies and documents deficits in occupational performance areas and components across the lifespan.					
4. Able to demonstrate/administer one standardized and/or nonstandardized screening/evaluation/assessment tool.					
PLANNING					
5. Educates patient/client, family and/or healthcare team member(s) concerning the services occupational therapy can offer using language appropriate to their level of understanding.					
6. Documents the plan of care in a clear and concise manner according to facility requirements.					
7. Selects and implements at least one therapeutic activity/modality for at least one patient/client or group.					

TASK OR PROFESSIONAL BEHAVIOR	3 S	2 E	1 NI	0 U	COMMENTS: Required for needs improvement (NI), unsatisfactory ratings (U), and not addressed (N/A)
<u>INTERVENTION</u>					
8. Initiates therapeutic interactions with patients/clients and/or family-(ies) and focuses on plan of care.					
9. Demonstrates active listening in treatment situations.					
10. Identifies and adheres to precautions, potential safety problems or situations, and describes to supervisor.					
11. Explains the steps of at least one therapeutic activity/modality at the level of understanding of the patient/client and implements that activity/modality for an individual or group.					
12. Demonstrates several ways to grade or adapt therapeutic activities/modalities.					
<u>ADMINISTRATION/PROFESSIONALISM</u>					
13. Presents professional appearance and attitude.					
14. Manages emotions professionally.					
15. Respects/maintains professional ethics and patient/client rights and confidentiality.					
16. Responds appropriately to supervisory feedback.					
17. Takes initiative to ask questions at appropriate times.					
18. Communicates effectively with supervisor and other staff.					
19. Demonstrates responsibility in scheduling practicum hours, attendance, and turning in assignments.					
20. Takes advantage of learning opportunities, and demonstrates time management skills.					
21. Demonstrates tolerance for interruptions and unexpected schedule changes.					
22. Verbalizes awareness of self (personal strengths and weaknesses) and demonstrates therapeutic use of self with patients/clients.					
23. Recognizes the impact of occupational performance contexts (including: plan of care and environmental, cultural, and socioeconomic aspects).					
24. Demonstrates awareness and use of universal precautions.					
25. Writes legibly, uses acceptable grammar, correct punctuation and spelling.					
26. Uses appropriate terminology and abbreviations approved by facility.					
27. Demonstrates appropriate ethical decision making during professional interactions and client interventions.					

Comments(When completing this section, you may include diagnosis, age ranges, optional experiences, remedied problems, strengths, and weaknesses.):

RECOMMENDED OVERALL RATING (Total Points Earned _____ / 81)

Fieldwork IA

A	77 – 81 points
A-	76 points
B +	74 – 75 points
B	69 – 73 points
B-	67 – 68 points
C+	66 points
C	61 – 65 points
C-	59 – 60 points
D+	58 points
D	53 – 57 points
D-	51 – 52 points
F	50 points and below

*Please circle the appropriate grade as it correlates with the above table. At Milligan College’s Occupational Therapy Program **ANYTHING LESS THAN A ‘B’ IS NOT PASSING.** Milligan College’s OT Fieldwork Coordinator will have the final say on all the fieldwork grades.*

A A- B+ B B- C+ C C- D+ D F

Supervisor’s Signature

Date

Student’s Signature

Date

Supervisor, Please complete and make two copies; one for the student and one to keep at your facility. Please return the original evaluations within one week after the student’s completion of this rotation. Please mail this back to Milligan along with the student’s evaluation of your facility.

Please do not have the student hand carry the evaluation back to the school.

Please return to:

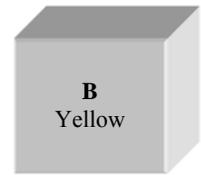
Occupational Therapy Fieldwork Coordinator

Milligan College

P.O. Box 130

Milligan College, TN37682

Milligan College
Graduate Program in Occupational Therapy
Level I Practicum B



Mental Health, Psychosocial, & Non-Traditional Settings

STUDENT NAME: _____ **DATE:** _____

AGENCY NAME: _____

AGENCY ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE #: _____ **FAX #:** _____ **EMAIL:** _____

Clinical Supervisor: _____

Number of times attended: _____ **Number of absences not made up:** _____

Dates of Placement: _____ **Number of Hours:** _____

Over All Quality of Experience: _____ Excellent _____ Good _____ Fair _____ Poor

Please respond to items 1-25 by placing checks in the appropriate columns:

3 points = [**Satisfactory (S)**: student demonstrates skills adequate for educational background]

2 points = [**Emerging skills (E)**: student just starting to demonstrate these skills for educational level];

1 points = [**Needs improvement (NI)**: student needs improvement for educational background level]; or

0 points = [**Unsatisfactory (U)**: student did not even meet the basic skill requirements].

Designate **N/A (worth 3 points)** if the items are not applicable or not addressed.

Please add clarifying statements and /or examples in the comment column.

Must have clarifying statements and/or examples for NI, U, and N/A.

TASK OR PROFESSIONAL BEHAVIOR	3 S	2 E	1 NI	0 U	COMMENTS: Required for needs improvement (NI), unsatisfactory ratings (U), and not addressed (N/A)
COMMUNICATION SKILLS					
1. Can the student communicate effectively with clients both on a verbal and non-verbal level (e.g. posture, body language, respect for personal space)?					
2. Can the student communicate effectively with staff and other people (disciplines-social work, nursing, etc.; family members)?					
3. Does the student establish rapport with selected clients?					
4. Do clients favorably relate to and accept the student?					
5. Does the student show empathy toward the client?					
6. Does the student interpret occupational therapy to others according to their level of interest and understanding?					
7. Does the student produce written reports according to the requirements of the facility (reports reflect organization, clarity, pertinence, accuracy, and thoroughness)?					

Subtotal I : _____

TASK OR PROFESSIONAL BEHAVIOR	3 S	2 E	1 NI	0 U	COMMENTS: Required for needs improvement (NI), unsatisfactory ratings (U), and not addressed (N/A)
PROFESSIONAL BEHAVIOR/ATTITUDE					
8. Is the student punctual, and does the student notify the supervisor when he/she is going to be late or absent and investigate make-up time if that is appropriate?					
9. Does the student handle client formation with discretion?					
10. Is the student's appearance acceptable?					
11. Does the student handle personal or professional frustrations appropriately?					
12. Does the student assist with program set-up or clean up?					
13. Does the student modify behavior in response to supervision?					
14. Does the student demonstrate and take interest in opportunities available at the facility (planned or impromptu situations)?					
15. Does the student utilize free or unscheduled time constructively?					

Subtotal II: — — — —

TASK OR PROFESSIONAL BEHAVIOR	3 S	2 E	1 NI	0 U	COMMENTS: Required for needs improvement (NI), unsatisfactory ratings (U), and not addressed (N/A)
DATA GATHERING					
16. Is the student able to select pertinent information regarding the client from available resources (i.e. charts, textbooks/references, discussion with other disciplines, family comments)?					
17. Does the student effectively use information gained from observations of verbal and non-verbal behavior to enhance client performance?					
18. Does the student take responsibility for investigating any part of observed activities, program formats, or procedures that are not readily understood?					

Subtotal III: — — — —

TASK OR PROFESSIONAL BEHAVIOR	3 S	2 E	1 NI	0 U	COMMENTS: Required for needs improvement (NI), unsatisfactory ratings (U), and not addressed (N/A)
PROGRAM PLANNING/IMPLEMENTATION					
19. Can the student identify client needs?					
20. Can the student describe the major intervention strategies used by the facility to enhance client performance?					
21. Does the student take an active role in the program of the agency?					
22. Is the student able to offer constructive suggestions and/or problem-solve in new situations?					
23. Can the student identify and/or utilize precautions taken with clients whom they are observing and/or treating?					
24. Following a program session, is the student able to select at least one appropriate client-oriented goal?					

25. Following the setting of goals, can the student select at least one appropriate therapeutic activity?					
---	--	--	--	--	--

Subtotal IV: — — — —

COMMENTS

RECOMMENDED OVERALL RATING (Total Points Earned _____ / 75)

Fieldwork IB – Psychosocial or Non-Traditional Setting

A	72 – 75 max points
A-	70-71 points
B +	68 – 69 points
B	64 – 67 points
B-	62 – 63 points
C+	61 points
C	56 – 60 points
C-	55 points
D+	53 - 54 points
D	49 – 52 points
D-	47 – 48 points
F	46 points and below

*Please circle the appropriate grade as it correlates with the above table. At Milligan College’s Occupational Therapy Program **ANYTHING LESS THAN A ‘B’ IS NOT PASSING.** Milligan College’s OT Fieldwork Coordinator will have the final say on all the fieldwork grades.*

A A- B+ B B- C+ C C- D+ D F

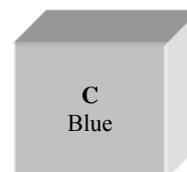
Supervisor’s Signature Date

Student’s Signature Date

*Supervisor, Please complete and make two copies; one for the student and one to keep at your facility. Please return the original evaluations within one week after the student’s completion of this rotation. Please mail this back to Milligan along with the student’s evaluation of your facility. **Please do not have the student hand carry the evaluation back to the school.***

Please return to:
Occupational Therapy Fieldwork Coordinator
Milligan College
P.O. Box 130
Milligan College, TN37682

Milligan College
Graduate Program in Occupational Therapy
Level I Practicum C – Adult Physical Dysfunction



STUDENT NAME: _____
UNIVERSITY NAME & ADDRESS: Milligan College, P. O. Box 130,

 Milligan College, TN 37682
FACILITY NAME: _____
FACILITY ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP:** _____
PHONE #: _____ **FAX #:** _____
TYPE OF SETTING: _____
DATES OF PLACEMENT: _____
TOTAL NUMBER OF HOURS COMPLETED: _____

Please respond to items 1-27 by placing checks in the appropriate columns:
 3 points= [**Satisfactory (S)**: student demonstrates skills adequate for educational background];
 2 points= [**Emerging skills (E)**: student just starting to demonstrate these skills for educational level];
 1 point= [**Needs improvement (NI)**: student needs improvement]; or
 0 points= [**Unsatisfactory (U)**: did not even meet the basic skill requirements].
 Designate **N/A (worth 3 points)** if the items are not applicable or not addressed.
 Please add clarifying statements and /or examples in the comment column.
Must have clarifying statements and/or examples for NI, U, and N/A.

TASK OR PROFESSIONAL BEHAVIOR	3 S	2 E	1 NI	0 U	COMMENTS: Required for needs improvement (NI), unsatisfactory ratings (U), and not addressed (N/A)
ASSESSMENT					
1. Gathers necessary information on the assigned patient/client(s) by record review or interview.					
2. Performs or assists with one evaluation or identifies possible evaluations and discusses with supervisor.					
3. Identifies and documents deficits in occupational performance areas and components across the lifespan.					
4. Able to demonstrate/administer one evaluation tool.					
PLANNING					
5. Educates patient/client, family and/or healthcare team member(s) concerning the services occupational therapy can offer using language appropriate to their level of understanding.					
6. Documents the plan of care in a clear and concise manner according to facility requirements.					
7. Selects and implements at least one therapeutic activity/modality for at least one patient/client or group.					
TASK OR PROFESSIONAL BEHAVIOR	3 S	2 E	1 NI	0 U	COMMENTS: Required for needs improvement (NI), unsatisfactory ratings (U), and not addressed (N/A)

INTERVENTION					
8. Initiates therapeutic interactions with patients/clients and/or family-(ies) and focuses on plan of care.					
9. Demonstrates active listening in treatment situations.					
10. Identifies and adheres to precautions, potential safety problems or situations, and describes to supervisor.					
11. Explains the steps of at least one therapeutic activity/modality at the level of understanding of the patient/client and implements that activity/modality for and individual or group.					
12. Demonstrates several ways to grade or adapt therapeutic activities/modalities.					
ADMINISTRATION/PROFESSIONALISM					
13. Presents professional appearance and attitude.					
14. Manages emotions professionally.					
15. Respects/maintains professional ethics and patient/client rights and confidentiality.					
16. Responds appropriately to supervisory feedback.					
17. Takes initiative to ask questions at appropriate times.					
18. Communicates effectively with supervisor and other staff.					
19. Demonstrates responsibility in scheduling practicum hours, attendance, and turning in assignments.					
20. Takes advantage of learning opportunities, and demonstrates time management skills.					
21. Demonstrates tolerance for interruptions and unexpected schedule changes.					
22. Verbalizes awareness of self (personal strengths and weaknesses) and demonstrates therapeutic use of self with patients/clients.					
23. Recognizes the impact of occupational performance contexts (including: plan of care and environmental, cultural, and socioeconomic aspects).					
24. Demonstrates awareness and use of universal precautions.					
25. Writes legibly, uses acceptable grammar, correct punctuation and spelling.					
26. Uses appropriate terminology and abbreviations approved by facility.					
27. Demonstrates appropriate ethical decision-making during professional interactions and client interventions.					

Comments(When completing this section, you may include diagnosis, age ranges, optional experiences, remedied problems, strengths, and weaknesses.):

RECOMMENDED OVERALL RATING (Total Points Earned _____ / 81)

Fieldwork IC

A	77 – 81 points
A-	76 points
B +	74 – 75 points
B	69 – 73 points
B-	67 – 68 points
C+	66 points
C	61 – 65 points
C-	59 – 60 points
D+	58 points
D	53 – 57 points
D-	51 – 52 points
F	50 points and below

*Please circle the appropriate grade as it correlates with the above table. At Milligan College’s Occupational Therapy Program **ANYTHING LESS THAN A ‘B’ IS NOT PASSING.** Milligan College’s OT Fieldwork Coordinator will have the final say on all the fieldwork grades.*

A A- B+ B B- C+ C C- D+ D F

Supervisor’s Signature

Date

Student’s Signature

Date

*Supervisor, Please complete and make two copies; one for the student and one to keep at your facility. Please return the original evaluations within one week after the student’s completion of this rotation. Please mail this back to Milligan along with the student’s evaluation of your facility. **Please do not have the student hand carry the evaluation back to the school.***

Please return to:

Occupational Therapy Fieldwork Coordinator
Milligan College
P.O. Box 130
Milligan College, TN37682

Milligan College
Graduate Program in Occupational Therapy
The Student's Evaluation of the Fieldwork Experience

Level I Practicum A - Pediatrics

STUDENT NAME: _____
COLLEGE NAME & ADDRESS: Milligan College, P. O. Box 130, Milligan College, TN37682
FACILITY NAME: _____
FACILITY ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP:** _____
PHONE #: _____ **FAX #:** _____ **EMAIL:** _____
Clinical Supervisor: _____
Type of Setting: Psychosocial _____ Physical Disabilities _____
Dates of Placement: _____ **Number of Hours:** _____
Over All Quality of Experience: _____ Excellent _____ Good _____ Fair _____ Poor

This form is to be used to provide feedback to your supervisor and the school concerning various aspects of supervision and characteristics of the clinical setting in an objective manner. However, it is hoped that you will feel free to communicate your feelings and needs to your supervisor throughout the experience and not wait until you fill out this assessment to let them know. This is your opportunity to share your comments about the learning experience that was provided. The completed form should be given to your supervisor on your last clinical day, when the supervisor does your evaluation.

Rater: Please check appropriate column for each item below:

P = Poor (<25%) F = Fair (25-50%) G = Good (50-75%) EX = Excellent (>75%) NA = Not Applicable

SA = Strongly Agree A= Agree N= Neutral D = Disagree SD = Strongly disagree

Opportunity given to:	P	F	G	EX	NA
Obtain data/learn assist for test, records, staff, others					
Observe and assist with evaluations					
Become familiar with goal setting					
Assist with or observe treatment procedures					
Refine observation skills					
Intervene therapeutically					
Problem solve and make decisions					
Take initiative/accept responsibility					
Explore OT's role at facility					
Observe interdisciplinary collaboration					
Supervision and Feedback Given Regarding:					
Evaluation administration and scoring skills					
Communication/professionalism					
Confidentiality/ HIPPA standards enforced					
Treatment skills					
Note writing skills					
Indirect services skills					
Student evaluation discussed: Yes No					
Characteristics of supervisor:	SA	A	N	D	SD
Was accessible to the student					
Encouraged active student participation					
Provided structure and guidance for development of clinical skills					
Provided professional support and encouragement					

	SA	A	N	D	SD
Demonstrated effectiveness as a role model in:					
Establishing rapport with patients/clients					
Defining patient/client problems					
Performing treatment					
Working with other professionals					
Exhibiting professional attitudes and values					

OTHER:	P	F	G	EX	NA

Characteristics of the Clinical Setting:

1. Describe the patient caseload (diagnosis, age, etc.). Did it provide an adequate number of patients/clients?

2. Is the setting organized for effective student learning? Explain why or why not.

3. What aspects of the facility did you think were especially good?

4. What changes could be made to improve the experience?

ADDITIONAL COMMENTS:

Signature of Supervisor Date
I have read this report.

Signature of Student Date

Please return to: Occupational Therapy Fieldwork Coordinator, Milligan College, P. O. Box 130, Milligan College, TN37682 as soon as practicum is completed.

**Milligan College
Graduate Program in Occupational Therapy**

**Fieldwork Level I Practicum B
STUDENT'S FEEDBACK FORM FOR MENTAL HEALTH, PSYCHOSOCIAL,
or NON-TRADITIONAL SETTINGS**

This evaluation form is an important tool for your field work supervisor, faculty, and other students. It provides information to change and/or commend the fieldwork and academic programs. Please make concrete suggestions and constructive criticism when requested.

1. **Name and Address of Facility:** _____

2. **Dates of Assignment:** From _____ To _____

3. **Type of Facility:** _____

4. **Characteristics of Setting:** Using the following scale, rate the items below [from **POOR (1)** to **EXCELLENT (5)**]. Please utilize **NP** for "not provided". Make comments where applicable:

POOR- - - - - EXCELLENT

1. Physical facilities 1 2 3 4 5 NP
Comments:

2. Organization and administration of the facility (staffing patterns, interdisciplinary approach) 1 2 3 4 5 NP
Comments:

3. Quality of the program services offered 1 2 3 4 5 NP
Comments:

4. Setting effective for student learning 1 2 3 4 5 NP
Comments:

5. Describe the client population which you observed and/or were assigned (diagnoses and ages).
Comments:

POOR- - - - - EXCELLENT

6. Was there sufficient supervision (formal/informal)? 1 2 3 4 5 NP
Was it effective? Why or why not? (feedback, support)
Comments:

7. Rank your personal experience (what you got out of it). 1 2 3 4 5
Please explain:

8. Rate this field work experience by circling the appropriate number. 1 2 3 4 5
Please explain:

9. How do you feel this non-traditional practicum experience compares with the traditional ones you have had?
Strengths? Weaknesses?

10. In summary, what changes would you like to see made to improve the experience?

Student's Signature

Supervisor's Signature

Date

Date

Please return to:
Occupational Therapy Fieldwork Coordinator
Milligan College
P.O. Box 130
Milligan College, TN37682

Milligan College
Graduate Program in Occupational Therapy
The Student's Evaluation of the Fieldwork Experience

Level I Practicum C – Adult Physical Dysfunction

STUDENT NAME: _____
COLLEGE NAME & ADDRESS: Milligan College, P. O. Box 130, Milligan College, TN37682
FACILITY NAME: _____
FACILITY ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP:** _____
PHONE #: _____ **FAX #:** _____ **EMAIL:** _____
Clinical Supervisor: _____
Type of Setting: Psychosocial _____ Physical Disabilities _____
Dates of Placement: _____ **Number of Hours:** _____
Over All Quality of Experience: _____ Excellent _____ Good _____ Fair _____ Poor

This form is to be used to provide feedback to your supervisor and the school concerning various aspects of supervision and characteristics of the clinical setting in an objective manner. However, it is hoped that you will feel free to communicate your feelings and needs to your supervisor throughout the experience and not wait until you fill out this assessment to let them know. This is your opportunity to share your comments about the learning experience that was provided. The completed form should be given to your supervisor on your last clinical day, when the supervisor does your evaluation.

Rater: Please check appropriate column for each item below:

P = Poor (<25%) F = Fair (25-50%) G = Good (50-75%) EX = Excellent (>75%) NA = Not Applicable.

SA = Strongly Agree A = Agree N = Neutral D = Disagree SD = Strongly disagree

Opportunity given to:	P	F	G	EX	NA
Obtain data/learn assist for test, records, staff, others					
Observe and assist with evaluations					
Become familiar with goal setting					
Assist with or observe treatment procedures					
Refine observation skills					
Intervene therapeutically					
Problem solve and make decisions					
Take initiative/accept responsibility					
Explore OT's role at facility					
Observe interdisciplinary collaboration					
Supervision and Feedback Given Regarding:					
Evaluation administration and scoring skills					
Communication/professionalism					
Confidentiality/ HIPPA standards enforced					
Treatment skills					
Note writing skills					
Indirect services skills					
Student evaluation discussed: Yes No					
Characteristics of supervisor:	SA	A	N	D	SD
Was accessible to the student					
Encouraged active student participation					
Provided structure and guidance for development of clinical skills					
Provided professional support and encouragement					

	SA	A	N	D	SD
Demonstrated effectiveness as a role model in:					
Establishing rapport with patients/clients					
Defining patient/client problems					
Performing treatment					
Working with other professionals					
Exhibiting professional attitudes and values					

OTHER:	P	F	G	EX	NA

Characteristics of the Clinical Setting:

5. Describe the patient caseload (diagnosis, age, etc.). Did it provide an adequate number of patients/clients?

6. Is the setting organized for effective student learning? Explain why or why not.

7. What aspects of the facility did you think were especially good?

8. What changes could be made to improve the experience?

ADDITIONAL COMMENTS:

Signature of Supervisor Date
I have read this report.

Signature of Student Date

Please return to: Occupational Therapy Fieldwork Coordinator, Milligan College,
P. O. Box 130, Milligan College, TN37682 as soon as practicum is completed.

Level II Fieldwork

Objectives & Forms

Occupational Therapy Level 2 Fieldwork Objectives

I. FUNDAMENTALS OF PRACTICE

1. **Adheres to ethics:** Consistently adheres to the American Occupational Therapy Association Code of Ethics and site's policies and procedures
 - a. Maintains confidentiality as it relates to patients, patient records, and patient situations.
 - b. Establishes and maintains therapeutic relationship with client displaying respect, and sensitivity to patient's values.
 - c. Respects all team members and displays professional interactions with team members, clients, and caregivers.
 - d. Follows organizational policies and procedures of the facility.

2. **Adheres to safety regulations:** Anticipates potential safety hazards, uses sound judgment regarding client safety and personal safety during all fieldwork related activities.
 - a. Consistently analyzes environmental factors for potentially hazardous situations and takes necessary steps to prevent accidents.
 - b. Follow universal precautions for infection control and cleans equipment after each use.
 - c. Report potential safety hazards to clinical supervisor.
 - d. Follow facility procedure for reporting incidents.

3. **Uses judgment in safety: Demonstrates and uses sound judgment in regard to safety of self and others during all fieldwork related activities.**
 - a. Provides safe supervision of clients during all activities.
 - b. Thoroughly reviews client records observing precautions and researches conditions in which he/she is unfamiliar.
 - c. Follows procedures for safe handling and transfers of clients.
 - d. Follows proper technique for body mechanics as it relates to personal and client safety.
 - e. Demonstrates proper technique regarding equipment use, set-up, and cleaning.
 - f. Assess own ability to provide safe treatment recognizing situations that require additional knowledge and/or assistance.

II. BASIC TENETS OF OCCUPATIONAL THERAPY

Clearly and confidently articulate the values and beliefs of the occupational therapy profession to clients, significant others, families, colleagues, service providers, and the public.

- a. Demonstrates the ability to effectively explain the role of OT within the practice setting and client's treatment plan in terms and language the client, family, significant others, colleagues, service providers, and the general public are able to understand.
- b. Explains how and why preparatory and occupationally relevant interventions are used as a means to an end.
- c. Utilize activities that reflect an understanding of the client's interests and occupational values.
- d. Communicates the role of occupational therapists and occupational therapy assistants to client, family, significant others, colleagues, service providers, and the general public.
- e. Collaborates with client and family throughout the occupational therapy process.
- f. Explain to client and family, in a level of understanding, the importance of returning to valued roles and responsibilities.

III. EVALUATION AND SCREENING

- 1. Articulate a clear and logical rationale for the evaluation process.**
 - a. Explain focus and purpose of evaluation process.
 - b. Demonstrate knowledge of the evaluation process within the context of the clinical setting.
- 2. Select relevant screening and assessment methods while considering such factors as client's priorities, context(s), theories, and evidence-based practice.**
 - a. Demonstrates knowledge of various assessments available for use.
 - b. Select appropriate assessments for a specific situation or individual.
 - c. Understand and administer the most appropriate assessment or screening tool for each client.
- 3. Determines client's occupational profile and performance through appropriate assessment methods.**
 - a. Identifies areas of concern, patterns of daily living, interests, values, and needs.
 - b. Ensures client-centered outcomes by incorporating all performance areas of clients into evaluation process.
 - c. Utilizes and demonstrates use of therapeutic use of self during interviewing process.
- 4. Assesses client factors and context(s) that support or hinder occupational performance.**
 - a. Demonstrates ability to effectively assess individual performance areas through use of screening tools, assessments, task groups, and occupational engagement.
 - b. If appropriate, utilize time during family and caregiver interactions to learn about client's interests, goals, and discharge environment.
- 5. Obtains sufficient and necessary information from relevant resources such as clients, families, significant others, and service providers, and records prior to and during the evaluation process.**
 - a. Review client records and perform patient interview without reminders from clinical supervisor(s)
 - b. Identifies contraindications and precautions prior to client engagement.
 - c. Obtains relevant information from various team members.
 - d. Demonstrate ability to filter pertinent information from all data collected.
- 6. Administers assessments in a uniform manner to ensure findings are valid and reliable.**
 - a. Demonstrate standardized techniques in using standardized assessment tools.
 - b. Accurately records evaluation information.
 - c. Observations are accurate and objective during evaluation process.
- 7. Adjusts/modifies the assessment procedures based on client's needs, behaviors, and culture.**
 - a. Adapt the assessment according to the needs of the client.
 - b. Modifies approach and environment as deemed necessary in response to emotional, psychosocial, cognitive, and physical needs of the client.
- 8. Interprets evaluation results to determine client's occupational performance strengths and challenges.**
 - a. Interpret data correctly and objectively.
 - b. Convert assessment findings into meaningful information where applicable.
 - c. Relate assessment findings to functional performance and occupational engagement.

9. **Establishes an accurate and appropriate plan based on the evaluation results by integrating multiple factors.**
 - a. Exhibit an understanding of client's deficits are reflected based on identified strategies for addressing performance through the use of occupationally and contextually relevant tasks.
 - b. Identifies ways to incorporate strategies into daily routines.
 - c. Defines and establishes priorities for realistic goals based on synthesis of assessments, observations, and client interviews.
10. **Documents the results of evaluation process that demonstrate objective measurement of client's performance.**
 - a. Demonstrate use of sound clinical reasoning in documenting and/or verbally articulating results of assessments with regard to current and future functional outcomes.
 - b. Documentation of assessments contains all relevant OT performance areas and is objectively reported.

IV. INTERVENTION

1. **Articulate a clear and logical rationale for the intervention process.**
 - a. Articulate how activities selected relate to occupational performance of the client.
 - b. Vary language depending on audience.
 - c. Demonstrate flexibility in utilizing alternative educational methods when standard methods are ineffective.
2. **Utilizes evidence from published research and relevant sources to make informed treatment decisions.**
 - a. Reads, interprets, and applies scholarly information to justify selected interventions.
3. **Chooses occupations that motivate and relate to client goals.**
 - a. Selects and modifies activities which are meaningful and appropriately challenging to the client.
 - b. Demonstrates the ability to utilize occupation based activities.
4. **Modifies task approach, occupations, and environment.**
 - a. Varies approach given the client's needs, diagnosis, age, and home/work situation.
 - b. Alters environment according to client's needs.
5. **Update, modifies, or terminates intervention plan based upon careful monitoring of client performance.**
 - a. Recognizes signs of frustration, fatigue, and/or other behaviors that indicate an adjustment or termination of treatment activity to maximize/maintain client performance.
 - b. Consults with client, family, and/or caregivers regarding progress and discontinuation of services.
6. **Documents client's response to services in a manner that demonstrates the efficacy of interventions.**
 - a. Completes therapy notes clearly indicating measureable response to therapy'
 - b. Effectively distinguish between clinically relevant vs irrelevant information.
 - c. Completes required documentation in a timely manner following policies and procedures of the facility.

V. MANAGEMENT OF OT SERVICES

1. **Demonstrates through practice or discussion the ability to monitor and assign necessary responsibilities to the occupational therapy session.**
 - a. Verbalizes the OTR/OTA similarities and differences in job responsibilities in current setting.
 - b. Identifies state practice requirements for performance and supervision of OT personnel.
 - c. If site does not employ or utilize COTAs, the student should be able to identify and articulate how an OTA might be utilized and what duties could be assigned within the practice setting.

2. **Demonstrates through practice or discussion the ability to actively collaborate with COTAs.**
 - a. Identifies appropriate supervision parameters based on skills of therapist, complexity and needs of client and facility.
 - b. Identifies appropriate documentation of supervision process including frequency and method of supervision.
3. **Demonstrates understanding of costs and funding related to occupational therapy services at specific site.**
 - a. Demonstrates understanding of reimbursement systems relevant to site.
 - b. Effectively identifies reimbursement sources and client eligibility.
 - c. Accurately completes OT documentation utilizing correct billing codes.
 - d. Exhibits fiduciary responsibility when requesting equipment for clients
4. **Accomplishes organizational goals by establishing priorities, developing strategies, and meeting deadlines.**
 - a. Demonstrates effective time management skills and flexibility in adjusting priorities to meet departmental goals.
 - b. Effectively prioritizes daily responsibilities.
5. **Produces volume of work required in the expected time frame.**
 - a. Organizes daily schedule to meet productivity requirements commiserate of an entry-level practitioner.
 - b. Effectively organize treatment and non-treatment responsibilities to ensure tasks are completed in a timely and professional manner.
 - c. Completes all assignments within expected timeframe.

VI. COMMUNICATION

1. **Clearly and effectively communicate verbally and nonverbally with clients, families, significant others, colleagues, service providers, and the public**
 - a. Demonstrate effective verbal and non-verbal skills when interacting clients, other professionals, caregivers, family members, and public.
 - b. Develop and maintain rapport with clients, families, significant others, caregivers, professionals, and public to enhance therapeutic relationships.
 - c. Implements appropriate instruction method for client/family education.
2. **Produces clear and accurate documentation according to site requirements.**
 - a. Complete accurate documentation for reimbursement purposes.
 - b. Write progress notes that are concise and accurately reflect information related to occupational performance and progress.
3. **All written communication is legible, using proper grammar, punctuation, and spelling.**
 - a. Documentation is complete, understandable, well organized, and neat.
4. **Use language appropriate to the recipient of the information, including but not limited to funding agencies and regulatory agencies.**
 - a. Incorporates appropriate terminology to convey functional progress and outcomes.

VII. PROFESSIONAL BEHAVIORS

1. **Collaborates with supervisor(s) to maximize the learning experience.**
 - a. Demonstrates ability to collaborate with supervisor to structure optimal learning experience.
 - b. Asks relevant questions in professional manner.
 - c. Demonstrates initiative in finding possible solutions to problems prior to seeking input.

- 2. Take responsibility for attaining professional competence by seeking out learning opportunities and interactions with supervisors and others.**
 - a. Independently seek and participate in opportunities for improving skills.
 - b. Demonstrates the ability for professional growth and development in the areas of performance skills, clinical reasoning, professional knowledge, interpersonal skills, ethics and social justice.
 - c. Performs weekly self-assessment of areas of strength and areas needing improvement and collaborates with supervisor to establish a plan to improve upon identified areas.

- 3. Responds constructively to feedback.**
 - a. Assumes responsibilities for actions and behaviors.
 - b. Recognizes and appropriately responds to personal and professional frustrations in a non-disruptive and constructive manner.

- 4. Demonstrates consistent work behaviors including initiative, preparedness, dependability, and work site maintenance.**
 - a. Arrive prepared and on time daily.
 - b. Demonstrate dependability in meeting deadlines and following through with commitments.
 - c. Consistently maintain professional behaviors and appearance.
 - d. Maintains work area, equipment, and supplies in an efficient and safe manner.

- 5. Demonstrate positive interpersonal skills but not limited to cooperation, flexibility, tact, and empathy.**
 - a. Show respect for others.
 - b. Maintain a positive attitude, be a contributing team member, and compromise with others when appropriate.

- 6. Demonstrate respect for diversity including but not limited to sociocultural, socioeconomic, spiritual, and lifestyle choices.**
 - a. Be respectful, open, and tolerant of diverse backgrounds and ideas.
 - b. Seek to understand the client's perspective when collaborating in treatment.
 - c. Be careful to not impose one's own beliefs and values on clients.
 - d. Demonstrate willingness to work with all clients.

Milligan College Graduate Program in Occupational Therapy Performance Requirements for Level II Fieldwork Experience

The Milligan College Graduate Program in Occupational Therapy expects students to meet standards of performance necessary to satisfy requirements of the American Occupational Therapy Association's *Fieldwork Performance Report* and to develop entry-level competence at the OTR level as identified in the American Occupational Therapy Association's *Entry-Level Role Delineation for OTRs and COTAs*.

The Standards for an Accredited Educational Program for the Occupational Therapist (adopted 2007 by ACOTE) and were used along with other materials to develop the following general objectives for Milligan College students for Level II fieldwork education.

The contract that has been established between the facility and the college details specific responsibilities of the clinical site. The facility will select clinical education faculty who have the qualifications necessary to perform clinical teaching responsibilities, including the following: competence in the area of clinical practice in which they teach; demonstrated effective teaching and evaluation of students; demonstrated effective communication skills; and a record of ethical behavior and involvement in professional development opportunities. The facility will inform the student and the college of the individual(s) responsible for the direct supervision and evaluation of each student. Level II fieldwork supervision shall be provided by a certified occupational therapist with a minimum of one year experience in a practice setting.

Level II fieldwork students may provide occupational therapy services under the supervision of a qualified occupational therapist or occupational therapy assistant in compliance with state and federal regulations. The Milligan College MSOT Program follows AOTA's document titled, *Practice Advisory: Services Provided by Students in Fieldwork Level II Setting* as the guideline for the provision of direct and indirect supervision of Level II Fieldwork students (AOTA's Commission on Practice and Commission on Education Joint Task Force, 2010). When adhering to the principles stated in this document, along with other regulatory and payer requirements, the Milligan MSOT Program considers that students at this level of education are providing skilled occupational therapy intervention.

Over 20% of the curriculum is dedicated to Level II fieldwork. The fieldwork experience is a crucial part of your professional preparation. The experience should provide you with the opportunity to carry out professional responsibilities under supervision and for professional role modeling.

The Level II fieldwork experiences are the culminating portion of the program. At the conclusion of Level II fieldwork experiences, the student will:

- Demonstrate professional-level knowledge and competencies necessary for practice as an occupational therapist in health care and human service delivery systems particularly in underserved areas.
- Engage in critical evaluation and application of research, resourceful thinking, and problem-solving skills in practice.
- Exhibit the administrative skills necessary for the service delivery of occupational therapy.
- Model excellence in social, personal and professional ethics.
- Participate as a servant-leader in the field of occupational therapy.

Please refer to *Fieldwork Performance Evaluation for the Occupational Therapy Student* (AOTA, 2002), which serves as the assessment for competence for entry-level practice.

Fieldwork Performance Evaluation For The Occupational Therapy Student

This evaluation is a revision of the 1987 American Occupational Therapy Association, Inc. Fieldwork Evaluation Form for the Occupational Therapist and was produced by a committee of the Commission on Education.

PURPOSE

The primary purpose of the Fieldwork Performance Evaluation for the Occupational Therapy Student is to measure entry-level competence of the occupational therapy student. The evaluation is designed to differentiate the competent student from the incompetent student and is not designed to differentiate levels above entry level competence. For further clarification on entry-level competency refer to the Standards of Practice for Occupational Therapy (1).

The evaluation is designed to measure the performance of the occupational therapy process and was not designed to measure the specific occupational therapy tasks in isolation. This evaluation reflects the 1998 Accreditation Council for Occupational Therapy Education Standards (2) and the National Board for Certification in Occupational Therapy, Inc. Practice Analysis results (3). In addition, this evaluation allows students to evaluate their own strengths and challenges in relation to their performance as an occupational therapist.

USE OF THE FIELDWORK PERFORMANCE EVALUATION FOR THE OCCUPATIONAL THERAPY STUDENT

The Fieldwork Performance Evaluation is intended to provide the student with an accurate assessment of his/her competence for entry-level practice. Both the student and fieldwork educator should recognize that growth occurs over time. **The midterm and final evaluation scores will reflect development of student competency and growth.** In order to effectively use this evaluation to assess student competence, site-specific objectives need to be developed. Utilize this evaluation as a framework to assist in ensuring that all key performance areas are reflected in the site-specific objectives.

Using this evaluation at midterm and final, it is suggested that the student complete a self-evaluation of his/her own performance. During the midterm review process, the student and fieldwork educator should collaboratively develop a plan, which would enable the student to achieve entry-level competence by the end of the fieldwork experience. This plan should include specific objectives and enabling activities to be used by the student and fieldwork educator in order to achieve the desired competence.

The Fieldwork Educator must contact the Academic Fieldwork Coordinator when: 1) a student exhibits unsatisfactory behavior in a substantial number of tasks or 2) a student's potential for achieving entry-level competence by the end of the affiliation is in question.

DIRECTIONS FOR RATING STUDENT PERFORMANCE

- There are 42 performance items.
- Every item must be scored, using the one to four point rating scale (see below).
- **The rating scales should be carefully studied prior to using this evaluation.** Definitions of the scales are given at the top of each page.
- Circle the number that corresponds to the description that best describes the student's performance.
- **The ratings for the Ethics and Safety items must be scored at 3 or above on the final evaluation for the student to pass the fieldwork experience.** If the ratings are below 3, continue to complete the Fieldwork Performance Evaluation to provide feedback to the student on her/his performance.
- Record midterm and final ratings on the Performance Rating Summary Sheet.
- Compare overall midterm and final score to the scale below.

OVERALL MIDTERM SCORE

Satisfactory Performance. 90 and above
Unsatisfactory Performance. 89 and below

OVERALL FINAL SCORE

Pass 122 points and above
No Pass 121 points and below

RATING SCALE FOR STUDENT PERFORMANCE

- 4 — **Exceeds Standards:** Performance is highly skilled and self-initiated. This rating is **rarely given** and **would represent the top 5% of all the students** you have supervised.
- 3 — **Meets Standards:** Performance is consistent with **entry-level practice.** This rating is **infrequently given at midterm** and is a **strong rating at final.**
- 2 — **Needs improvement:** Performance is **progressing but** still needs improvement for entry-level practice. This is a **realistic rating of performance at midterm**, and some ratings of 2 may be reasonable at the final.
- 1 — **Unsatisfactory:** Performance is **below standards** and requires development for entry-level practice. This rating is given when **there is a concern about performance.**

RATING SCALE FOR STUDENT PERFORMANCE

- 4 — **Exceeds Standards:** Performance is highly skilled and self-initiated. This rating is **rarely given** and **would represent the top 5% of all the students** you have supervised.
- 3 — **Meets Standards:** Performance is consistent with **entry-level** practice. This rating is **infrequently given at midterm** and is a **strong rating at final**.
- 2 — **Needs improvement:** Performance is **progressing but** still needs improvement for entry-level practice. This is a **realistic rating of performance at midterm**, and some ratings of 2 may be reasonable at the final.
- 1 — **Unsatisfactory:** Performance is **below standards** and requires development for entry-level practice. This rating is given when **there is a concern about performance**.

I. FUNDAMENTALS OF PRACTICE:

All items in this area must be scored at a #3 or above on the final evaluation in order to pass fieldwork.

1. **Adheres to ethics:** Adheres consistently to the American Occupational Therapy Association Code of Ethics (4) and site's policies and procedures including when relevant, those related to human subject research.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |
2. **Adheres to safety regulations:** Adheres consistently to safety regulations. Anticipates potentially hazardous situations and takes steps to prevent accidents.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |
3. **Uses judgment in safety:** Uses sound judgment in regard to safety of self and others during all fieldwork-related activities.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |

Comments on strengths and areas for improvement:

• Midterm

• Final

II. BASIC TENETS:

4. Clearly and confidently **articulates the values and beliefs** of the occupational therapy profession to clients, families, significant others, colleagues, service providers, and the public.

Midterm	1	2	3	4
Final	1	2	3	4

5. Clearly, confidently, and accurately **articulates the value of occupation** as a method and desired outcome of occupational therapy to clients, families, significant others, colleagues, service providers, and the public.

Midterm	1	2	3	4
Final	1	2	3	4

6. Clearly, confidently, and accurately **communicates the roles of the occupational therapist and occupational therapy assistant** to clients, families, significant others, colleagues, service providers, and the public.

Midterm	1	2	3	4
Final	1	2	3	4

7. **Collaborates with** client, family, and significant others throughout the occupational therapy process.

Midterm	1	2	3	4
Final	1	2	3	4

Comments on strengths and areas for improvement:

• Midterm

• Final

RATING SCALE FOR STUDENT PERFORMANCE

- 4— **Exceeds Standards:** Performance is highly skilled and self-initiated. This rating is **rarely given** and **would represent the top 5% of all the students** you have supervised.
- 3— **Meets Standards:** Performance is consistent with **entry-level practice**. This rating is **infrequently given at midterm** and is a **strong rating at final**.
- 2— **Needs improvement:** Performance is **progressing but** still needs improvement for entry-level practice. This is a **realistic rating of performance at midterm**, and some ratings of 2 may be reasonable at the final.
- 1— **Unsatisfactory:** Performance is **below standards** and requires development for entry-level practice. This rating is given when **there is a concern about performance**.

III. EVALUATION AND SCREENING:

8. **Articulates a clear and logical rationale** for the evaluation process.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |
9. **Selects relevant screening and assessment methods** while considering such factors as client's priorities, context(s), theories, and evidence-based practice.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |
10. **Determines client's occupational profile** and performance through appropriate assessment methods.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |
11. **Assesses client factors and context(s)** that support or hinder occupational performance.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |
12. **Obtains sufficient and necessary information** from relevant resources such as client, families, significant others, service providers, and records prior to and during the evaluation process.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |
13. **Administers assessments** in a uniform manner to ensure findings are valid and reliable.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |
14. **Adjusts/modifies the assessment procedures** based on client's needs, behaviors, and culture.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |

15. **Interprets evaluation results** to determine client's occupational performance strengths and challenges.

Midterm	1	2	3	4
Final	1	2	3	4

16. **Establishes an accurate and appropriate plan** based on the evaluation results, through integrating multiple factors such as client's priorities, context(s), theories, and evidence-based practice.

Midterm	1	2	3	4
Final	1	2	3	4

17. **Documents the results of the evaluation** process that demonstrates objective measurement of client's occupational performance.

Midterm	1	2	3	4
Final	1	2	3	4

Comments on strengths and areas for improvement:

- Midterm

- Final

COOPY

IV. INTERVENTION:

18. **Articulates a clear and logical rationale** for the intervention process.

Midterm	1	2	3	4
Final	1	2	3	4

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

Midterm	1	2	3	4
Final	1	2	3	4

20. **Chooses occupations** that motivate and challenge clients.

Midterm 1 2 3 4

Final 1 2 3 4

21. **Selects relevant occupations** to facilitate clients meeting established goals.

Midterm 1 2 3 4

Final 1 2 3 4

22. **Implements intervention plans that are client-centered.**

Midterm 1 2 3 4

Final 1 2 3 4

23. **Implements intervention plans that are occupation-based.**

Midterm 1 2 3 4

Final 1 2 3 4

24. **Modifies task approach, occupations, and the environment** to maximize client performance.

Midterm 1 2 3 4

Final 1 2 3 4

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

Midterm 1 2 3 4

Final 1 2 3 4

26. **Documents client's response** to services in a manner that demonstrates the efficacy of interventions.

Midterm 1 2 3 4

Final 1 2 3 4

Comments on strengths and areas for improvement:

- Midterm

- Final

V. MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES:

27. **Demonstrates through practice or discussion the ability to assign** appropriate responsibilities to the occupational therapy assistant and occupational therapy aide.

Midterm 1 2 3 4

Final 1 2 3 4

28. **Demonstrates through practice or discussion the ability to actively collaborate** with the occupational therapy assistant.

Midterm 1 2 3 4

Final 1 2 3 4

29. **Demonstrates understanding of the costs and funding** related to occupational therapy services at this site.

Midterm 1 2 3 4

Final 1 2 3 4

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

Midterm 1 2 3 4

Final 1 2 3 4

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

Midterm 1 2 3 4

Final 1 2 3 4

Comments on strengths and areas for improvement:

- Midterm

- Final

RATING SCALE FOR STUDENT PERFORMANCE

- 4 — **Exceeds Standards:** Performance is highly skilled and self-initiated. This rating is **rarely given** and **would represent the top 5% of all the students** you have supervised.
- 3 — **Meets Standards:** Performance is consistent with **entry-level** practice. This rating is **infrequently given at midterm** and is a **strong rating at final**.
- 2 — **Needs improvement:** Performance is **progressing but** still needs improvement for entry-level practice. This is a **realistic rating of performance at midterm**, and some ratings of 2 may be reasonable at the final.
- 1 — **Unsatisfactory:** Performance is **below standards** and requires development for entry-level practice. This rating is given when **there is a concern about performance**.

VI. COMMUNICATION:

32. **Clearly and effectively communicates verbally and nonverbally** with clients, families, significant others, colleagues, service providers, and the public.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |
33. **Produces clear and accurate documentation** according to site requirements.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |
34. **All written communication is legible**, using proper spelling, punctuation, and grammar.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |
35. **Uses language appropriate to the recipient** of the information, including but not limited to funding agencies and regulatory agencies.
- | | | | | |
|---------|---|---|---|---|
| Midterm | 1 | 2 | 3 | 4 |
| Final | 1 | 2 | 3 | 4 |

Comments on strengths and areas for improvement:

• Midterm

• Final

VII. PROFESSIONAL BEHAVIORS:

36. **Collaborates with supervisor(s)** to maximize the learning experience.

Midterm	1	2	3	4
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Final	1	2	3	4
-------	---	---	---	---

37. **Takes responsibility for attaining professional competence** by seeking out learning opportunities and interactions with supervisor(s) and others.

Midterm	1	2	3	4
---------	---	---	---	---

Final	1	2	3	4
-------	---	---	---	---

38. **Responds constructively to feedback.**

Midterm	1	2	3	4
---------	---	---	---	---

Final	1	2	3	4
-------	---	---	---	---

39. **Demonstrates consistent work behaviors** including initiative, preparedness, dependability, and work site maintenance.

Midterm	1	2	3	4
---------	---	---	---	---

Final	1	2	3	4
-------	---	---	---	---

40. **Demonstrates effective time management.**

Midterm	1	2	3	4
---------	---	---	---	---

Final	1	2	3	4
-------	---	---	---	---

41. **Demonstrates positive interpersonal skills** including but not limited to cooperation, flexibility, tact, and empathy.

Midterm	1	2	3	4
---------	---	---	---	---

Final	1	2	3	4
-------	---	---	---	---

42. **Demonstrates respect for diversity** factors of others including but not limited to socio-cultural, socioeconomic, spiritual, and lifestyle choices.

Midterm	1	2	3	4
---------	---	---	---	---

Final	1	2	3	4
-------	---	---	---	---

Comments on strengths and areas for improvement:

• Midterm

• Final

PERFORMANCE RATING SUMMARY SHEET

Performance Items	Midterm Ratings	Final Ratings
I. FUNDAMENTALS OF PRACTICE		
1. Adheres to ethics		
2. Adheres to safety regulations		
3. Uses judgment in safety		
II. BASIC TENETS OF OCCUPATIONAL THERAPY		
4. Articulates values and beliefs		
5. Articulates value of occupation		
6. Communicates role of occupational therapist		
7. Collaborates with clients		
III. EVALUATION AND SCREENING		
8. Articulates clear rationale for evaluation		
9. Selects relevant methods		
10. Determines occupational profile		
11. Assesses client and contextual factors		
12. Obtains sufficient and necessary information		
13. Administers assessments		
14. Adjusts/modifies assessment procedures		
15. Interprets evaluation results		
16. Establishes accurate plan		
17. Documents results of evaluation		
IV. INTERVENTION		
18. Articulates clear rationale for intervention		
19. Utilizes evidence to make informed decisions		
20. Chooses occupations that motivate and challenge		
21. Selects relevant occupations		
22. Implements client-centered interventions		
23. Implements occupation based interventions		
24. Modifies approach, occupation, and environment		
25. Updates, modifies, or terminates intervention plan		
26. Documents client's response		
V. MANAGEMENT OF OT SERVICES		
27. Demonstrates ability to assign through practice or discussion		
28. Demonstrates ability to collaborate through practice or discussion		
29. Understands costs and funding		
30. Accomplishes organizational goals		
31. Produces work in expected time frame		
VI. COMMUNICATION		
32. Communicates verbally and nonverbally		
33. Produces clear documentation		
34. Written communication is legible		
35. Uses language appropriate to recipient		
VII. PROFESSIONAL BEHAVIORS		
36. Collaborates with supervisor		
37. Takes responsibility for professional competence		
38. Responds constructively to feedback		
39. Demonstrates consistent work behaviors		
40. Demonstrates time management		
41. Demonstrates positive interpersonal skills		
42. Demonstrates respect for diversity		
TOTAL SCORE		

COPY

MIDTERM:

Satisfactory Performance 90 and above

Unsatisfactory Performance 89 and below

FINAL:

Pass 122 points and above

No Pass 121 points and below

REFERENCES

1. American Occupational Therapy Association. (1998). Standards of practice for occupational therapy. *American Journal of Occupational Therapy, 52*, 866–869.
2. Accreditation Council for Occupational Therapy Education. (1999). Standards for an accredited educational program for the occupational therapist. *American Journal of Occupational Therapy, 53*, 575–582.
3. National Board for Certification in Occupational Therapy. (1997). *National Study of Occupational Therapy Practice, Executive Summary*.
4. American Occupational Therapy Association. (2000). Occupational therapy code of ethics (2000). *American Journal of Occupational Therapy, 54*, 614–616.
5. American Occupational Therapy Association (2002). Occupational therapy practice framework: Domain and process. *American Journal of Occupational Therapy, 56*, 606–639.

GLOSSARY

Client Factors: Those factors that reside within the client and that may affect performance in areas of occupation. Client factors include body functions and body structures

- body functions (a client factor, including physical, cognitive, psychosocial aspects)—“the physiological function of body systems (including psychological functions)” (WHO, 2001, p.10)
- body structures—“anatomical parts of the body such as organs, limbs and their components [that support body function]” (WHO, 2001, p.10)

(Occupational therapy practice framework: Domain and process. *American Journal of Occupational Therapy, 56*, 606–639.) (5)

Code of Ethics: refer to www.aota.org/general/coe.asp

Collaborate: To work together with a mutual sharing of thoughts and ideas. (ACOTE Glossary)

Competency: adequate skills and abilities to practice as an entry level occupational therapist or occupational therapy assistant

Context: refers to a variety of interrelated conditions within and surrounding the client that influence performance. Contexts include cultural, physical, social, personal, spiritual, temporal and virtual. (Occupational therapy practice framework: Domain and process. *American Journal of Occupational Therapy, 56*, 606–639.) (5)

Efficacy: having the desired influence or outcome (from Neistadt and Crepeau, Eds. *Willard & Spackman's Occupational Therapy*, 9th edition, 1998)

Entry-level practice: refer to www.aota.org/members/area2/docs/sectionb.pdf

Evidence-based Practice: “conscientious, explicit and judicious use of current best evidence in making decisions about the care of individual patients. The practice of evidence-based [health care] means integrating individual clinical expertise with the best available external clinical evidence from systematic research”. (Sackett and colleagues, Evidence-based medicine: How to practice and teach EBM, 1997, p.2) (from the Mary Law article “Evidence-Based Practice: What Can It Mean for ME?”—found online at www.aota.org)

Occupation: Groups of activities and tasks of everyday life, named, organized and given value and meaning by individuals and a culture; occupation is everything people do to occupy themselves, including looking after themselves (self-care), enjoying life (leisure), and contributing to the social and economic fabric of their communities (productivity); the domain of concern and the therapeutic medium of occupational therapy. (Townsend, editor, 1997, *Enabling Occupation: An Occupational Therapy Perspective*, p.181)

Occupational Performance: The result of a dynamic, interwoven relationship between persons, environment and occupation over a person's lifespan; the ability to choose, organize, and satisfactorily perform meaningful occupations that are culturally defined and age appropriate for looking after oneself, enjoying life, and contributing to the social and economic fabric of a community. (Townsend, editor, 1997, *Enabling Occupation: An Occupational Therapy Perspective*, p.181)

Occupational Profile: a profile that describes the client's occupational history, patterns of daily living, interests, values and needs. (Occupational therapy practice framework: Domain and process. *American Journal of Occupational Therapy, 56*, 606–639.) (5)

Spiritual: (a context)—the fundamental orientation of a person's life; that which inspires and motivates that individual. (Occupational therapy practice framework: Domain and process. *American Journal of Occupational Therapy, 56*, 606–639.) (5)

Theory: “an organized way of thinking about given phenomena. In occupational therapy the phenomenon of concern is occupational endeavor. Theory attempts to (1) define and explain the relationships between concepts or ideas related to the phenomenon of interest, (2) explain how these relationships can predict behavior or events, and (3) suggest ways that the phenomenon can be changed or controlled. Occupational therapy theory is concerned with four major concepts related to occupational endeavor: person, environment, health, and occupation.” (Neistadt and Crepeau, Eds. *Willard & Spackman's Occupational Therapy*, 9th edition, 1998, p.521)

Student Evaluation of the Fieldwork Experience (SEFWE)

Instructions to the Student:

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

Fieldwork Site _____ Site Code _____

Address

Placement Dates: from _____ to _____

Order of Placement: [] First [] Second

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

Public transportation in the area:

Please write your permanent (not school) e-mail address here if you don't mind future students contacting you to ask you about your experience at this site:

We have mutually shared and clarified this Student Evaluation of the Fieldwork Experience report.

Student's Signature

FW Educator's Signature

Student's Name *(Please Print)*

FW Educator's Name and credentials *(Please Print)*

FW Educator's years of experience _____

ORIENTATION

1. Was a formal orientation provided? Yes _____ No _____
2. Indicate your view of the orientation by *checking* "Satisfactory" (S) or "Needs Improvement" (I) regarding the three factors of adequacy, organization, and timeliness.

TOPIC	Adequate		Organized		Timely		NA
	S	I	S	I	S	I	
1. Site-specific fieldwork objectives							
2. Student supervision process							
3. Requirements/assignments for students							
4. Student schedule (daily/weekly/monthly)							
5. Staff introductions							
6. Overview of physical facilities							
7. Agency/Department mission							
8. Overview of organizational structure							
9. Services provided by the agency							
10. Agency/Department policies and procedures							
11. Role of other team members							
12. Documentation procedures							
13. Safety and emergency procedures							
14. Confidentiality/HIPAA							
15. OSHA—Standard precautions							
16. Community resources for service recipients							
17. Department model of practice							
18. Role of occupational therapy services							
19. Methods for evaluating OT services							
20. Other							

Comments or suggestions regarding your orientation to this fieldwork placement:

CASELOAD

List approximate number of each age category in your caseload.

Age	Number
0–3 years old	
3–5 years old	
6–12 years old	
13–21 years old	
22–65 years old	
> 65 years old	

List approximate number of each primary condition/problem/diagnosis in your caseload

Condition/Problem	Number

OCCUPATIONAL THERAPY PROCESS

Indicate the approximate number of screenings/evaluations you did; also indicate their value to your learning experience by *circling* the appropriate number with #1 being least valuable and #5 being the most valuable.

	REQUIRED		HOW MANY	EDUCATIONAL VALUE				
	Yes	No		1	2	3	4	5
1. Client/patient screening				1	2	3	4	5
2. Client/patient evaluations <i>(Use specific names of evaluations)</i>								
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
3. Written treatment/care plans				1	2	3	4	5
4. Discharge summary				1	2	3	4	5

List major therapeutic interventions frequently used and indicate whether it was provided in group, individually, Co-Treatment, or consultation. List other professionals involved.

Therapeutic Interventions	Individual	Group	Co-Tx	Consultation
Occupation-based activity, i.e., play, shopping, ADL, IADL, work, school activities, etc. (within client's own context with his or her goals)				
1.				
2.				
3.				
4.				
Purposeful activity (therapeutic context leading to occupation)				
1.				
2.				
3.				
4.				
Preparatory methods, i.e., sensory, PAMs, splinting, exercise, etc. (preparation for occupation-based activity)	Individual	Group	Co-Tx	Consultation
1.				
2.				
3.				
4.				

THEORY—FRAMES OF REFERENCE—MODELS OF PRACTICE

Indicate frequency of theory/frames of reference used

	Never	Rarely	Occasionally	Frequently
Model of Human Occupation				
Occupational Adaptation				
Ecology of Human Performance				
Person–Environment–Occupation Model				
Biomechanical Frame of Reference				
Rehabilitation Frame of Reference				
Neurodevelopmental Theory				
Sensory Integration				
Behaviorism				
Cognitive Theory				
Cognitive Disability Frame of Reference				
Motor Learning Frame of Reference				
Other (list)				

SUPERVISION

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

- one supervisor : one student
- one supervisor : group of students
- two supervisors : one student
- one supervisor : two students
- distant supervision (primarily off-site)
- three or more supervisors : one student (count person as supervisor if supervision occurred at least weekly)

List fieldwork educators who participated in your learning experience.

Name	Credentials	Frequency	Individual	Group
1.				
2.				
3.				
4.				
5.				

Assignments

Please describe any site specific assignments:

Comment on the value it added to your learning experience:

ACADEMIC PREPARATION

Rate the relevance and adequacy of your academic coursework relative to the needs of **THIS** fieldwork placement, *circling* the appropriate number.

MILLIGAN COLLEGE COURSES

Please rate how each course prepared you for THIS FIELDWORK PLACEMENT.
Write N/A if course WAS NOT RELATED to this fieldwork placement.

COURSE	PREPARATION					
	MINIMAL				EXCELLENT	
OT 501: Diagnostic Considerations for OT	0	1	2	3	4	5
OT 510: Christ and Calling in Health Care	0	1	2	3	4	5
OT 531: Musculoskeletal Anatomy	0	1	2	3	4	5
OT 560: Foundations of OT	0	1	2	3	4	5
OT 580: Research and Design Methods in OT I	0	1	2	3	4	5
OT 605: Lifespan Development I	0	1	2	3	4	5
OT 532: Functional Neuroanatomy	0	1	2	3	4	5
OT 535 Kinesiology-Human Movement	0	1	2	3	4	5
OT 610: Play/Leisure	0	1	2	3	4	5
OT 632: OT in Pediatrics I	0	1	2	3	4	5
OT 680: Research and Design Methods in OT II	0	1	2	3	4	5
OT 780 A: Directed Research/Thesis Prep A	0	1	2	3	4	5
OT 780 B: Directed Research/Thesis Prep B	0	1	2	3	4	5
OT 780 C: Directed Research/Thesis Prep C	0	1	2	3	4	5
OT 615: Work Programs in OT	0	1	2	3	4	5
OT 631: Psychosocial Theory & Practice	0	1	2	3	4	5
OT 643: Orthopedic Dysfunction Theory & Practice	0	1	2	3	4	5
OT 750: Specialization Elective	0	1	2	3	4	5
OT 620: Activities of Daily Living	0	1	2	3	4	5
OT 644: Neurological Dysfunction Theory & Practice	0	1	2	3	4	5
OT 651: Group Process	0	1	2	3	4	5
OT 652: OT in Geriatrics	0	1	2	3	4	5
OT 685: Research Data Analysis	0	1	2	3	4	5
OT 710: OT Leading and Managing OT	0	1	2	3	4	5
OT 740: Professional Development	0	1	2	3	4	5
OT 691 A Pediatric Fieldwork	0	1	2	3	4	5
OT 691 B Pshychosocial Fieldwork	0	1	2	3	4	5
OT 691 C Adult Phys/Dys Fieldwork	0	1	2	3	4	5

What were the strongest aspects of your academic program relevant to preparing you for **THIS** Level II Fieldwork Experience?

Indicate your top 5

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

What changes would you recommend in your academic program relative to the needs of **THIS** Level II fieldwork Experience?

SUMMARY

	1 = Strongly disagree 2 = Disagree 3 = No Opinion 4 = Agree 5 = Strongly agree				
	1	2	3	4	5
Expectations of fieldwork experience were clearly defined					
Expectations were challenging but not overwhelming					
Experiences supported student's professional development					
Experiences matched student's expectations					

What particular qualities or personal performance skills do you feel that a student should have to function successfully on this fieldwork placement?

What advice do you have for future students who wish to prepare for this placement?

- Study the following evaluations:

- Study the following intervention methods:

- Read up on the following in advance:

Please feel free to add any further comments, descriptions, or information concerning your fieldwork at this site.

FIELDWORK EDUCATOR

Indicate the number that seems descriptive of each fieldwork educator. Please make a copy of this page for each individual.

NAME: _____

FIELDWORK EDUCATOR YEARS OF EXPERIENCE: _____

1 = Strongly Disagree				
2 = Disagree				
3 = No opinion				
4 = Agree				
5 = Strongly agree				
1	2	3	4	5

Provided ongoing positive feedback in a timely manner					
Provided ongoing constructive feedback in a timely manner					
Reviewed written work in a timely manner					
Made specific suggestions to student to improve performance					
Provided clear performance expectations					
Sequenced learning experiences to grade progression					
Used a variety of instructional strategies					
Taught knowledge and skills to facilitate learning and challenge student					
Identified resources to promote student development					
Presented clear explanations					
Facilitated student's clinical reasoning					
Used a variety of supervisory approaches to facilitate student performance					
Elicited and responded to student feedback and concerns					
Adjusted responsibilities to facilitate student's growth					
Supervision changed as fieldwork progressed					
Provided a positive role model of professional behavior in practice					
Modeled and encouraged occupation-based practice					
Modeled and encouraged client-centered practice					
Modeled and encouraged evidence-based practice					

Frequency of meetings/types of meetings with supervisor (value/frequency):

Forms



Initial Health Screening for Incoming Students

To be completed by Wellmont WellWorks

Name _____
Last First Middle

Date of Birth: _____ Last 4 digits of Social Security # _____

10 panel drug screening:

This test screens for amphetamines, barbiturates, benzodiazepines, cannabinoids, cocaine, methadone, methaqualone, opiates, phencyclidine and propoxyphene.

Results: POSITIVE NEGATIVE

*****Results for Positive Drug Tests need to be sent with completed form*****

Proof of Immunity Positive IgG Antibody Titers required:

Rubella/Rubeola IgG Antibody Titer	Results:	POSITIVE	NEGATIVE
Mumps IgG Antibody Titer	Results:	POSITIVE	NEGATIVE
Varicella IgG Antibody Titer	Results:	POSITIVE	NEGATIVE
Hepatitis B IgG Antibody Titer	Results:	POSITIVE	NEGATIVE

Tetanus / Diphtheria / Pertussis (Tdap):

Date of Last Tdap booster: _____ (*Documentation required for verification purposes*)

If documented proof is not available or the previous booster was before 01-01-2008, please verify a booster was given.

Administered: _____ MONTH / DAY / YEAR

MD Signature/Practitioner

Date



**PERSONAL DATA SHEET
Level I Fieldwork**

General Information

Date _____

Name _____ Milligan e-mail address _____

Current Address _____

Cell phone _____ Alternative e-mail address _____

Hometown or City where you have lived the longest: _____

Emergency Contact:

Name _____ Primary Phone _____

Relationship _____ Alternative Phone _____

Education Information:

How many semesters of your Masters level OT course work have you completed? _____

Please list current classes or completed classes that are directly related to this SPECIFIC Fieldwork:

Previous Level I Fieldworks:

Pediatric: _____

Psychosocial: _____

Foreign languages read: _____ Spoken: _____

Special skills and interests:

Relevant Work/Clinical/ Volunteer experience related to this SPECIFIC fieldwork : _____

Describe your learning style for Clinical skills (e.g. structure, demonstration, mediated trial & error):

Personality Self-Assessment

*Please identify (mark on the line) where you would typically fall on the spectrum between the two descriptors. Be specific and honest.

Extroverted-----Introverted

Focused on the Outcome-----Focused on the Details

Makes Decisions Quickly-----Needs Time to Deliberate

Motivated by the Person-----Motivated by the Task

Avoids Confrontation -----Confrontation is Unavoidable

Optimist ----- Realist

Other:

Describe any additional special considerations you may feel you require:

**Please note this does not replace the process utilized to approve reasonable accommodations due t*

Rights and Responsibility of Student form signed and in Milligan College student file.

Student's signature : _____

Date: _____

Fieldwork Information Consent Level 1 and Level 2

I, _____, give my consent to allow the Occupational Therapy Department of Milligan College to release, either in writing or verbally, any information regarding my performance as a student at the college or my basic medical information that I turn into the college, (i.e.: health records, shots, physical exam, etc.). I also give my consent to allow the fieldwork placement sites (Levels I & II) to release, either in writing or verbally, any information regarding my performance as a student while on my clinical rotations. I understand that no information may be released without my signed consent. This consent form is valid from the date below until withdrawal of this consent is received in writing from the person whose signature is indicated below.

Student's Signature / Date

Fieldwork Coordinator's Signature/ Date



PERSONAL DATA SHEET
Level II Fieldwork

General Information

Date: _____

Name _____ Milligan e-mail address _____

Current Address _____

Cell phone _____ Alternative e-mail address _____

Hometown or City where you have lived the longest: _____

Emergency Contact:

Name _____ Primary Phone _____

Relationship _____ Alternative Phone _____

Personal Profile

Strengths: _____

Areas for Potential Growth:

Special skills or interests: _____

Describe your learning style for Clinical skills (e.g. structure, demonstration, mediated trial & error):

Describe your preferred style of Supervision: _____

Personality Self-Assessment

*Please identify (mark on the line) where you would typically fall on the spectrum between the two descriptors. Be specific and Honest.

Extroverted-----Introverted

Focused on the Outcome-----Focused on the Details

Makes Decisions Quickly-----Needs Time to Deliberate

Motivated by the Person-----Motivated by the Task

Avoids Confrontation -----Confrontation is Unavoidable

Optimist ----- Realist

Other:

Describe any ADA accommodations required:

Rights and Responsibility of Student form signed and in Milligan College student file.

Student's signature_____

Date: _____

Milligan College
Graduate Program in Occupational Therapy
Student Blood borne Pathogens Exposure Form

I understand that if I have an exposure incident that it would be best for me to follow the same procedure that employees do as documented in the Federal Register Vol. 56, No. 235 Blood borne Pathogens Rules and Regulations. An exposure incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials. This would involve the following:

at time of exposure, complete documentation as required at clinical site of exposure (this includes route of exposure, how happened, where happened, etc.)

- identification and documentation of the exposure source, if possible; whenever possible; and with consent of the individual, the source should be tested to determine HIV and HBV status unless it is already known (this will be determined by each clinical area's guidelines)
- determine personal Hepatitis B status from medical records (should be on health record in health clinic) to take to your healthcare provider
- after consent is given, your blood needs to be tested for HBV and HIV as soon as is feasible through your healthcare provider
- your healthcare provider will then assess the need for any post-exposure treatment, and you should follow up as requested

I understand that my insurance may or may not cover these expenses, but it is for my benefit to follow through with these recommended procedures.

I have read and understand the above:

Signature _____

Date _____

Print Name _____

Witness _____

Date _____

Milligan College
Graduate Program in Occupational Therapy
OT Student Performance Essentials and Critical Demands

The following requirements are included in classroom activities:

- 50lbs is the heaviest weight lifted while sitting or standing in one place
- 25lbs is the heaviest weight carried while moving/ traveling up to 50 feet
- 25lbs is the heaviest force exerted to push/pull objects up to 50 feet

Throughout the academic program the student must be able to:

<u>Activity</u>	<u>Frequency</u>
Sit	F
Stand/walk	O
Lift less than 10lbs	F
Lift 10-25lbs	O
Lift 25-50lbs	O
Lift over 50lbs	N
Rotate/twist	O
Bend/stoop	O
Squat	O
Balance	C
Reach above shoulder level	O
Kneel	O
Push/Pull	O
Use hand repetitively	C
Use simple grasping	C
Use firm grip	O
Use manual dexterity	F
Use finger dexterity	F
Use senses to evaluate	C
Transition from different heights	O

**Frequency Key: N= not at all (0%); O = occasionally (up to 33% of day);
 F = frequently (33-66% of day); C = continuously (>66% of day)**

I have reviewed the above performance essentials and have found _____ to be able to perform the stated job duties as outlined in the Performance and Critical Demands without restrictions.

I have reviewed the above performance essentials and have found _____ to be able to perform those duties with the following restrictions:

Date: _____

Physician Signature _____



First Year Students

December Health Screen Tuberculosis Skin Test From
Two Step TB Test

First Test

Student's Name _____

Date Administered: _____

Site: Right Left Lot# _____ Expiration Date _____

Signature (administered by): _____

Date Read: _____

Results: Negative Positive

Induration (please note in mm) _____

Read by: RN MD Signature: _____

Second Test

Date Administered: _____

(7 days after initial test)

Site: Right Left Lot# _____ Expiration Date _____

Signature (Administered by): _____

Date Read: _____

Results: Negative Positive

Induration (please note in mm) _____

Read by: RN MD Signature: _____

If positive, date and result of last chest X-ray: _____

****In order for this form to be valid, all areas must be completed****



Second Year Students

December Health Screen Tuberculosis Skin Test Form

TB Skin Test

Student's Name _____

Date Administered: _____

Site: Right Left Lot# _____ Expiration Date _____

Signature (administered by): _____

Date Read: _____

Results: Negative Positive

Induration (please note in mm) _____

Read by: RN MD Signature: _____

If positive, date and result of last chest X-ray: _____

****In order for this form to be valid, all sections must be completed****

Milligan College
Graduate Program in Occupational Therapy
Rights and Responsibilities of Student

- A. The student will follow administrative policies of the facility and report to the designated individual of the facility upon arrival.
- B. The student will provide own transportation to and from the facility and as necessary for reasonable special assignment by the facility. The student will be responsible for locating and paying for housing during the clinical experience unless the facility offers to provide assistance.
- C. The student shall provide proof of health insurance to the college and be accountable for payment of personal medical expenses as a result of illness or injury during the course of clinical education.
- D. The student shall complete the following college health requirements prior to the month of January of each year (the student has a copy of this form in their OT handbook for documentation purposes).
- E. The student will complete other health information forms or requirements as indicated by the facility.
- F. The student will complete OSHA-regulated Blood borne Pathogen Exposure, Hazardous Materials Training, and Infection Control annually as presented in the curriculum and will complete and maintain current certification for CPR (CPR for the Professional Rescuer) and First Aid.
- G. The student shall notify the facility and the college of any health status that poses an identifiable risk to patients or of any health status that limits her or his ability to provide care.
- H. The student shall conduct herself/himself in a professional manner as outlined by the Code of Ethics of the AOTA.
- I. The student will receive timely feedback regarding her/his clinical performance.
- J. The student will agree to maintain confidentiality of patient information in any form and at any time, as well as confidentiality of student records and performance.
- K. The student shall send the clinical supervisor a letter confirming placement dates and copies of her/his personal data form and student health record at the appointed time prior to her/his assignment as stated in the student manual. The student will also provide copies for the student's file in the college's occupational therapy office.
- L. The student will have a working email account/address for the time at Milligan College (year round - including summers)

Student Signature

Date

Milligan College
Graduate Program in Occupational Therapy
Application to Request a New Fieldwork Contract
(per policy ~ only one new contract request per student)

Student Name _____ Date _____

Reason for requesting new contract

Information about the specific requested facility

Name of facility _____

Rehab contact person (if known) _____

Address _____

Email address of person(s) who are responsible for contracts and student placement

Main phone number and rehab phone number.

Type of facility (i.e.; pediatrics, psychosocial, or physical dysfunction)

Are you interested in a particular area of the facility such as inpatient, outpatient, acute care, rehab, etc.?

I understand that this application and/or acceptance of this application in no way guarantees a fieldwork placement at this facility.

Student signature _____

**Milligan College
Graduate Program in Occupational Therapy
Photo Release Form**

I _____ give the Milligan College Occupational Therapy Program and those acting under its permission, or upon its authority, the right and permission to reproduce and use photographic reproductions or likenesses of me (or the person identified below) for the purpose of education relating to the profession of Occupational Therapy.

I have read the foregoing and fully understand the contents thereof. This agreement fully represents all terms and considerations, and no other statements or promises have been made to me. I hereby release and discharge the Milligan College Occupational Therapy Program from any and all claims and demands arising out of or in connection with the use of photographs or video, including any and all claims for libel.

Person Photographed (print) _____

Age(if minor) _____

Signature of Parent of Guardian (if minor) _____

Home Address _____

Date _____

**Milligan College
Occupational Therapy Department
PO Box 130
Milligan College, TN37682**

Citizen's Right to Privacy Act

In accordance with the Citizen's Right to Privacy Act, it is now necessary for us to have a signed consent in order to release any information for clinical fieldwork site placement or in the form of a recommendation for future employment. This applies to both practicing therapists who are changing jobs and to students who are seeking jobs after completing their fieldwork experiences. Please read the following:

I, _____, give my consent to allow the Occupational Therapy Department of Milligan College to release, either in writing or verbally, any information regarding my performance as a student at the college, results of my criminal history background check or drug screen, or my basic medical information that I turn into the college, (i.e.: health records, shots, physical exam, etc.). I also give my consent to allow the fieldwork placement sites (Level I & II) to release, either in writing or verbally, any information regarding my performance as a student while on my clinical fieldwork. I understand that no information may be released without my signed consent. This consent form is valid from the date below until withdrawal of this consent is received in writing from the person whose signature is indicated below.

Signature

Date

Witness Signature & Date

Milligan College

Graduate Program in Occupational Therapy

Statement of Student Responsibility for Learning

Professional education to become an occupational therapist differs from traditional undergraduate and/or graduate education in some aspects. Students in the graduate program in occupational therapy are responsible for learning service delivery procedures and techniques that, when applied incorrectly, may jeopardize a client's emotional and/or physical health. Because of the moral, ethical, and legal responsibility inherent in competently serving the consumers of occupational therapy services, completing the professional program requires considerable effort on the part of the student. Investing a significant amount of time for independent educational activities and application of knowledge to occupational therapy practice is required without exception. Off-campus educational experiences in a variety of settings are mandatory components of specific occupational therapy courses and of the program in general. The faculty will assist the student as appropriate and when possible.

The purpose of this document is to inform the occupational therapy student of his/her specific responsibilities necessary for successful completion of the curriculum. I agree that I have the responsibility for:

1. Attending regularly and on time classroom sessions, small group meetings, and clinical experiences.
2. Coming to class prepared by completing readings and other assignments on time.
3. Investing an appropriate amount of time outside of the classroom to allow for maximum learning, e.g., reading textbooks and other materials carefully, noting important ideas and rephrasing concepts in my own words; working through clinical case studies; and using supplemental readings and resources to augment textbooks and information received in class.
4. Conducting myself in a professional manner when involved in faculty and/or student interactions and during clinical experiences. (See Section V: Policies & Procedures, and Technical/Professional Standards for Admission and Retention)
5. Listening in class and avoiding distracting other students from their learning.
6. Participating actively in class discussions, experiential learning activities, group projects, class presentations, and clinical experiences.
7. Keeping an open mind to varying perspectives, and respecting the views of others.
8. Consulting other students, faculty, tutors, and other resources when needing extra help.
9. Devising strategies to become updated if falling behind in course work.
10. Using the time provided during laboratory sessions wisely in order to adequately practice clinical techniques under supervision.
11. Integrating course material within the clinical setting which may require reviewing information previously studied, obtaining and studying more in-depth information, and informing clinical supervisors and/or faculty of the need for assistance.
12. Initiating student-faculty conferences as indicated by examination scores, or clinical ratings.
13. Using course examinations as a means of preparation for fieldwork placement and the NBCOT examination.
14. Agreeing that the various exam formats exist for the development and evaluation of my knowledge and skill base.
15. Understanding that failure to implement the above learning strategies may adversely affect my progression in the program.

Prior to signing this document, I was given the opportunity to ask any questions, and receive answers to my questions.

Student

Signature _____ Date _____

This document will be placed in the student's file.

Milligan College
Graduate Program in Occupational Therapy
Assumption of Risk and Release

IN CONSIDERATION of being permitted to participate in field and clinical experience offered at Milligan College, I, the undersigned in full recognition and appreciation of the dangers and hazards inherent in participating in such activity and in the circumstances to which I may be exposed during my participation in the activity, do hereby agree to assume all the risks and responsibilities surrounding and pertaining to my participation in the activity; and

FURTHER, I DO FOR MYSELF, my personal representative(s), heirs, and assigns, hereby agree to defend, hold harmless, and indemnify, release, and forever discharge Milligan College, the Affiliation site, and all its officers, agents, and employees, from and against any and all claims, demands, and actions, or causes of action, on account of damage to personal property, personal injury, or death which may result from my participation in said activity.

I certify that I have not been charged or convicted of a felony or misdemeanor, I have not previously been denied certification or licensure as a therapist or healthcare professional, nor have I engaged in any activities which would disqualify me from certification or licensure as an occupational therapist or healthcare professional.

IN WITNESS WHEREOF, I have caused this Assumption of Risk and Release to be executed on this the _____ day of _____, _____.

(Signature of Milligan College Teacher
or Healthcare Professional Candidate)

Print Name

I have verified the above person's signature with a picture ID on the _____ day of _____ (month) in the year of _____.

Notary's Signature and Date of Expiration

Notary's Seal